



Application Form For FRPFA QA Certification & Membership

Name: _____

Name of Property: _____

Trading Name: _____

Address of Property: _____

ABN: _____ PIC: _____

Phone: _____ Email: _____

Brand/Tattoo No.: _____

Declaration by Applicant

I, _____ of _____

- give surety that all pigs leaving this property meet the requirements of the Free Range Pork Farmers Association Quality Assurance Program and that;
 - All records required to monitor food safety risks on my farm are current and maintained
 - Procedures are in place to trace all medications and chemicals used on my farm and that all WHP/ESI are observed
 - Procedures are in place to minimize any potential chemical contamination of pigs by grazed pasture, feed or grain.
 - Records are maintained for all chemicals used on my farm and records for the contamination status of pigs is current
- I have read and agree to abide by the FRPFA Standard and Quality Assurance program
- I will make available my Farm Management Plan to an Assessor or Auditor during any farm inspections

Signature: _____ Date: _____

Payment: FRPFA membership is \$150 per year. The member will be responsible for payment of all costs associated with farm inspections.

Please find enclosed a cheque/money order for \$150 made out FRPFA

Mail to: FRPFA 717 Rob Roy Rd Inverell NSW 2360 Ph: 0267232889