

8-CEQAP Inspection Sheet

California Egg Quality Assurance Program Shell Egg Producer Inspection

Company _____ Inspection Date _____
 Premises _____ Phone _____
 Address _____ Fax _____
 City, State, Zip _____ Cell _____
 Contact _____

Core Component	Compliant Y/N	Documents Y/N
1. Approved Flock/ Premises CEQAP Plan on file.	_____	_____
2. Certified CEQAP Supervisor: Last stated training date: _____ Training up to date.	_____	_____
3. Documentation of chicks originating from hatcheries participating in NPIP "US Salmonella enteritidis monitored program". NPIP form 9-3 or equivalent.	_____	_____
4. Documentation of decontamination of trucks and coops delivering chicks or pullets. C D Certificate from carrier.	_____	_____
5. Documentation that feed is supplied by mills that follow accepted feed industry good manufacturing practices and the RECOMMENDED SALMONELLA CONTROL FOR PROCESSORS OF LIVESTOCK AND POULTRY FEEDS 1988, by the AFIA.	_____	_____
6. Documentation that animal protein ingredients originate from rendering plants Participating in the APPI SALMONELLA REDUCTION EDUCATION PROGRAM.	_____	_____
7. Documentation that medications, pesticides and feed additive use is compliant with label directions. Use records.	_____	_____
8. Flock health records and laboratory reports on file. Records.	_____	_____
9. Documentation and visual inspection of rodent monitoring and control techniques. Records	_____	_____
10. Documentation of poultry buildings C&D between flocks. Records.	_____	_____
11. Documentation of personnel biosecurity training dates and participants. Records.	_____	_____
12. Documentation of environmental swabbing. Records.	_____	_____
13. Documentation of vaccination program for Salmonella enteritidis.	_____	_____

Comments/Recommendations:

Assessment: (Compliant/Needs Review)

Inspecting VMO _____ Next Inspection Date _____