



## Cooperative Extension Service Extension Food Technology

Department of Extension Home Economics,  
College of Agricultural Consumer and Environmental Sciences  
P.O. Box 30003, MSC 3AE;  
**Ship To:** 940 College Ave, Gerald Thomas Hall Room 312 Las  
Cruces, NM 88003-8003  
Tel: 575-646-1179 Fax: 575-646-1889 Email: [naflores@nmsu.edu](mailto:naflores@nmsu.edu)

### APPLICATION FOR FSMA/HACCP REVIEW OF COMMERCIAL FOOD PRODUCT

**\*Please PRINT CLEARLY on this form. \*Print a copy for yourself. \*Email/Post mail to submit.**

#### 1. Company Information:

Company name \_\_\_\_\_ Contact person \_\_\_\_\_  
Phone ( ) \_\_\_\_\_ FAX ( ) \_\_\_\_\_ E-mail \_\_\_\_\_  
Physical address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Zip \_\_\_\_\_  
Information can be sent: via email \_\_\_\_\_ Date submitted \_\_\_\_\_ Date needed\* \_\_\_\_\_

\* Please allow 14-21 days (ASAP is not a date) after complete file is submitted.

#### 2. Confidentiality Agreement

We will hold materials that you provided us as confidential if they are noted as such. However, if a court requires us to furnish this information through a subpoena or a court order, we do so without liability to the regents of New Mexico State University Cooperative Extension Service or their employees, staff or faculty. This agreement shall not apply to any information which is (i) in the public domain, (ii) previously known to us or (iii) furnished to the signatory by a third party having the bona fide right to do so.

**I have read and understand this letter and accept this confidentiality agreement.**

Authorized company representative (print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Accepted By: NMSU Cooperative Extension Service- Food Technology**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Nancy C. Flores, Ph.D.; NMSU Extension Food Technology Specialist

- Attach a copy of flow chart of processing steps and inputs, including all ingredients and packaging, Hazard Analysis and CCP plan
- Attach copy of HACCP and ALLERGEN REVIEW and associated monitoring forms
- Attach copy of protocol USED FOR HACCP PLAN
- Payment made out to NMSU Extension Food Technology (checks, mail orders; no credit cards)

#### COMPLETED FORMS and PAYMENT SUBMIT by UPS, FedEx or US Post mail sent to:

- Nancy C. Flores, Ph.D.; Extension Food Technology Specialist  
New Mexico State University Gerald Thomas Hall Rm 312  
940 College Ave. Las Cruces, NM 88003  
PH: 575-646-1179 FAX: 575-646-1889; [naflores@nmsu.edu](mailto:naflores@nmsu.edu)

Date NMSU EFT received \_\_\_\_\_ Date NMSU EFT Completed \_\_\_\_\_ EFT SERVICE COMPLETED \_\_\_\_\_





COMPANY NAME: \_\_\_\_\_ Date: \_\_\_\_\_

*(Optional sheet for any additional information)*