

Annual Review and Verification of Qualified Exemption

from FSMA Produce Safety Rule for Year:

Step 3: Enter Sales Data for Three Previous Years

	A	B	C
Year	Sales of Food to Qualified End-Users		Sales of Food to All Other Customers
1 Sales for Previous Year			
2 Sales Two Years Previous			
3 Sales Three Years Previous			
4 Average of the Last Three Years (Exclude years in which no food sales occurred.)			
		Enter inflation-adjusted \$500,000 below:	Enter Sum of B4 and C4 below:
5			

Step 4: Determination

1	In Step 3, is the amount in row 4, column B, greater than the amount in row 4, column C?	Yes	No
2	In Step 3, is the amount in row 5, column B, greater than the amount in row 5, column C?	Yes	No
3	Has this farm had its qualified exemption withdrawn by FDA?	Yes	No

- If the answer to either question 1 or 2 is “No”, this farm is NOT eligible for the qualified exemption.
- If the answer to question 3 is “Yes”, this farm is NOT eligible for the qualified exemption.
- If the answer to questions 1 and 2 is “Yes” and the answer to question 3 is “No”, this farm IS ELIGIBLE for the qualified exemption.

Step 5: Review and Sign

This form must be signed by the owner, operator, or agent responsible for this farm.

I have reviewed and verified this farm’s eligibility for the qualified exemption, and determined that it meets the requirements for the qualified exemption in calendar year:

Print Name:			
Title:			
Farm Name:			
Address:			
Signature:		Date:	