



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 here ↓	Enter Sum of B4 and C4 ↓
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3	Has this farm had its qualified exemption withdrawn by FDA?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:	<input type="text"/>	Title:	<input type="text"/>
Farm Name:	<input type="text"/>		
Address:	<input type="text"/>		
Signature:	<input type="text"/>	Date:	<input type="text"/>