

Audit details			
Audited location			
Additional location details, e.g. coordinator, identification number etc.			
Name of the respondent (contact)			
Program audit			
Additional program audit			
Stock check			
Special audit			
Parallel audit			
Date of audit (from)		Date of audit (until)	
Start of audit (hh:mm)		End of audit (hh:mm)	
Audit duration (hh:mm)			
Combined audit (norm/standard/program)		-	
Certification body			
Last name, first name of auditor			
General K.O.	Remark general K.O.		
Comments			
Preliminary audit result		Number of corrective	actions

Place, date

Signature/s auditor/s

I hereby confirm the data concerning the company and the audit. I have received a copy of the audit report and the action plan.

Place, date

Signature responsible person



Company de	Company details - Peking duck production						
Name of compa	ny						
Street and hous	e number						
Postal code, town and country							
Telephone/fax r	umber						
Email address							
Address of sty/c from mailing add							
Location numbe	r (VVVO no.)						
Registered prod	uction scope no.						
Identification nu	ımber						
Name of person	responsible						
Name of coordir	nator						
Scope - Peki	ng duck producti	on					
Produc	ction scope	Kg live weight					
2016	Peking duck						

3016	production						
Period audited		from	DD.MM.YYY		ΥY	until	DD.MM.YYYY
Quantity report: Random check of the report correct?		Yes		Remark	quantity report:		
			No				



Additional contact persons and details on the availability

Contact person location						
Contact person location						
Telephone (best reachable)						
Additional telephone number						
Remark (availability)						

Deputy contact person location						
Deputy contact person location						
Telephone						
Mobile						
Remark (availability)						

Additional information about the location							
Remark location							



Company	//			Da	te:	
No.	Criterion/ Requirement	A	С	ко	E	Comments
	his requirement the evidence or me equirement must be documented, r					evaluation of compliance with the animal of the assessment.
f criteria	are rated C, measures must be init	iated.	These	are to	be re	corded in the corrective action report.
1	Requirements peking duck produ	ction				
1.1	Basic criteria for livestock produc	tion, h	ygiene	e, anim	al hea	lth
1.1.1	Monitoring and care of livestock* (KM)					
1.1.2	General farming requirements* (KM)					
1.1.3	Handling sick and injured animals* (KM)					
1.1.4	Shed climate, temperature, noise pollution, ventilation* (KM)					
1.1.5	Lighting* (KM)					
1.1.6	Alarm system* (KM)					
1.1.7	Feed supply* (KM)					
1.1.8	Hygiene of feeding facilities* (KM)					
1.1.9	Feed storage* (KM)					
1.1.10	Water supply* (KM)					
1.1.11	Hygiene of dringking facilities* (KM)					
1.1.12	Buildings and equipment* (KM)					



No.	Criterion/ Requirement	A	С	КО	E	Comments
1.1.13	Hygiene on the farm* (KM)					
1.1.14	Handling litter, dung and feed leftovers* (KM)					
1.1.15	Carcass storage and pick-up* (KM)					
1.1.16	Pest monitoring and control (KM)					
1.1.17	Cleaning and disinfection measures* (KM)					
1.2	Antibiotics monitoring*					
1.3	Documentation of diagnostic data from the slaughter*					
1.4	Daylight*					
1.5	Shed floors*					
1.6	Organic manipulable material*					
1.7	Additional troughs*					
1.8	Breeding line*					
1.9	Interventions on the animal*					
1.10	Shed climate check*					
1.11	Drinking water check*					



Location:	
-----------	--

Date: _____

I hereby confirm that the following corrective actions were agreed upon between me and the auditor.

Place, date	ce, date Signature/s of auditor/s		Signature of person responsible		
Nr.	Evaluation	Nonconformity	Corrective actions	Deadline	