

AUDIT REQUIREMENTS

FSSC 22000 MANAGEMENT SYSTEM

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1. IMPORTANT INFORMATION

The Management Systems certificates are valid for a maximum of three years (unless there is a relevant instruction modifying the validity of the certificate for a particular Standard). The certification and the validity of the certificate for this period have as prerequisite the successful completion of the certification audit as well as the 2 annual surveillance audits (one per year), their timing set out below. If the Organization wishes to renew its certificate and for the next 3 years, then a re-certification audit must be conducted before of the ending of the certificate's validity period, and the Organization shall follow again the same planning of the annual surveillance audits as mentioned above.

The Board of Stakeholders (BoS) Decision list is an FSSC document which contains decisions applicable to FSSC 22000 Scheme. The decisions overrule or provide further clarification on existing Scheme rules and the present Certification Regulation and have to be implemented and applied within the defined transition period. The decision list is dynamic and can be adjusted by the BoS when deemed necessary.

All the Organizations certified according to the requirements of the Scheme will be charged with an annual fee from Q-CERT. Q-CERT will ensure that this fee is collected from the certified organization and will pay it to the Scheme.

The Administration of the Scheme decides on an annual basis on the amount of the fee to be paid by the certified Organization.

The maximum certificate validity period is 3 years from the date of initial certification decision, with subsequent 3 year cycles.

2. INFORMATION ON THE AUDIT PROCEDURE & CERTIFICATE ISSUANCE

2.1 GENERAL REQUIREMENTS

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- There should be (for initial audit) record files of at least three months.
- The management system designed and implemented by the Organization must cover:
 - ✓ The requirements of the standard ISO 22000:2018
 - ✓ The additional requirements of the FSSC 22000 Scheme as they are documented in paragraph 2.5 of Part 2: Requirements for Organizations to be Audited, AND
 - ✓ The relevant Technical Standard to the activity/ies under certification as defined on the table of Paragraph 3 of Part 1: Scheme Overview and stated on Table I of this document.
- Where required by the standard there are must be documented procedures.
- Have a full circle of internal audits performed for all the requirements of the standard.
- There is a record proving the implementation of the main requirements of the MS.
- Conduct and document at least one Management Review which includes an assessment of the continuing suitability, efficiency, effectiveness, and points of improvement of the MS.
- There is objective evidence that the MS's objective goals are monitored and measured. There is evidence

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that the MS is constantly improving.

 Where one or more test or measurement samples are required, the organization will use risk assessment techniques to define sampling for verification or validation purposes of the MS. Validation and / or verification records of the MS, where appropriate and feasible, will be required during the audit.

2.2 Scope of Certification

Certification according to FSSC 22000 Scheme is possible for the categories of food companies that are stated in Table I of this regulation.

<u>Note</u>: The Table I includes the overview of FSSC (sub)categories. Please contact Q-CERT for specific categories competency.

2.3 AUDIT PROCESS – ON SITE OPTION

2.3.1 Initial Evaluation (Certification Audit – the Organization does not have another valid FSMS certificate)

The audit of the initial evaluation is conducted in two Stages.

The objective of Stage I is to gather the necessary information in order to schedule Stage II. The perception and understanding of the MS and all programs, the policy of the objective goals and especially the level of preparedness for the audit.

The interval between Stage I and Stage II audits shall not be longer than 6 months. The Stage I shall be repeated if a longer interval is needed.

The initial certification audit (Stage I and Stage II) cannot be performed unannounced.

STAGE I

Stage I will be conducted on-site the organization's premises.

The results of the audit during Stage I will be documented and forwarded to the organization, including areas needed attention and may be stated as Non-Conformities during Stage II. An audit report shall be communicated to the organization, containing the necessary data as specified in Annex-2-CB-Audit-report-requirements-FSSC-22000-Version-5.1

Parts of the MS audited during Stage I and considered as fully implemented, effective and in compliance with the requirements, may not be audited during Stage II. The audit report on Stage II shall include findings that prove the compliance during Stage I of the audit.

STAGE II

The Stage II audit is performed on-site the organization's premises in order to evaluate the implementation and

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effectiveness of the organization's MS.

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Each part of the MS that was fully audited during Stage I, can be excluded from Stage II audit. The audit report of Stage II shall include findings that support the compliance during Stage I.

The audit team will collect objective evidence that the MS complies with the standard and the certification requirements.

The audit team will audit adequate number of examples from the organization's activities relevant to the MS in order to make correct decision about the implementation and effectiveness of the MS.

The audit team will address a sufficient number of personnel, including operation staff and executives, to ensure that the system is implemented and understood throughout the organization.

During the audit, representative samples of the production processes will be inspected for all types of products included in the scope of certification.

The audit team will analyze the information from both audit stages, to determine the range of compliance with the certification requirements and will decide upon the proposition that will to be submitted to the responsible person for certification. The audit team may propose opportunities for improvement to the organization without making specific proposals.

2.3.2 Initial Evaluation [Certification Audit – the Organization has a certified FSMS (ISO 22000, BRC etc.)*]

When the certification audit is for the transition to another certified Management System recognized by the Scheme (FSSC 22000) like ISO 22000, DATCH HACCP, or another GFSI recognized scheme (BRC, IFS etc.), there is no need to conduct a two stage certification audit (Stage I and Stage II) as described above.

The audit will be conducted in one stage, during which all of the Scheme's requirements will be inspected.

The audit time corresponds to two-thirds (2/3) of the certification time with a minimum of one day plus the extra time as specified in Part 3 Clauses 4.3.1 and 4.3.6

*<u>Note</u>: If the transition is also about transferring from another Certification Body, in case of ISO 22000 the additional requirements defined in IAF MD 2 Transfer_of_Certification_Pub2 apply.

2.3.3 Surveillance Audit

Surveillance audits are conducted according to the requirements of Stage I & Stage II in one audit and are documented on an audit program which is forwarded to the organization before the audit takes place.

When carried out, all the requirements of the Scheme are checked by sampling.

Surveillance audits should be carried out one each calendar year with the limitation that the first surveillance audit following initial certification shall not be more than twelve (12) months from the certification decision date.

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2.3.3.1 Unannounced Audit

At least one of the two annual surveillance audits shall be unannounced.

The certified organization can voluntarily choose to replace all surveillance audits by unannounced annual surveillance audits.

The Organization can agree in advance with Q-CERT for specific dates within the year during which it may not accept an unannounced audit.

Refusal of the Organization to accept the announced audit results in immediate suspension of the certificate's validity. If the unannounced audit is not conducted within 6 months from the refusal, then Q-CERT shall withdraw the certificate.

Q-CERT sets the date of the unannounced audit typically between 8-12 months after the previous audit.

All Scheme requirements shall be assessed including production or service processes in operation. Where parts of the audit plan cannot be audited, an (announced) follow-up audit shall be scheduled within 4 weeks.

2.3.4 Re-Certification Audit

The re-certification audit is conducted according to the requirements of Stage I & Stage II and can be done in one stage. The re-certification audit will be conducted in two stages if there are large-scale changes in the Management System justifying that need.

If the audit reveals major deviations whose corrective actions will be completed after the Organization's certificate expires, then the certificate ceases to be valid. In this case and also in case where the re-certification audit does not take place within the required period of time (before expiration of the certificate) a period of six months is allowed within which the re-certification audit may be completed. Upon successful completion of the process, the certification body will issue the certificate with date of issue, the date of the certification decision and expiration date according to the previous certification cycle.

Note: Recertification audits may be conducted unannounced at the request of the certified organization.

2.3.5 Audit in case the Organization controls More than One Locations

In case the Organization controls more than one location, then additional to all that is mentioned in paragraphs 2.3.1 to 2.3.4 above, the following apply.

2.3.5.1 Head Office Functions

In all cases where functions pertinent to the certification are controlled by a Head Office (such as procurement, supplier approval, quality assurance etc.), the Scheme requires that those functions are audited, interviewing the personnel described in the food safety management system as having the (delegated) authority and responsibility for these functions.

The Head Office audit:

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Is documented

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- Is carried out separately for all functions that are not part of a site being assessed
- Is carried out prior to the site audit(s)
- Is announced unless the Head Office is part of the audited site. Then the rules of unannounced audits apply (see 2.3.3.1 above)

Every site belonging to the group shall have: Κάθε τοποθεσία που ανήκει στην ομάδα θα:

- A separate audit
- A separate audit report and certificate where the audited functions at the Head Office will be mentioned
- An audit within 12 months after the Head Office audit

The Head Office:

- Does not receive a separate certificate
- Is mentioned on the site certificate by use of appropriate wording according to the standard (part 3, requirements for the certification process, § 5.2.1)

2.3.5.2 Off-site Activities

Where one manufacturing or service process is split across more than one physical address, all locations may be covered in one audit provided that the different addresses are part of the same legal entity, under the same FSMS and that they are the sole receiver/customer of each other.

Storage facilities at another location shall also be included in the same audit provided they meet the requirements mentioned above.

The scope statement shall show the audited locations with activities per location (on the certificate or as an Annex to the certificate).

The audit report shall include all relevant requirements at all locations and allow audit findings to be identified as site specific.

The off-site activities are audited and in case of an unannounced audit.

2.4 AUDIT PROCESS – REMOTE OPTION

2.4.1 ICT AUDIT APPROACH OPTION

The ICT audit approach consists of 2 main steps:

1) Remote audit consisting of a document review and interviews with key personnel using ICT.

2) On-site audit focusing on the implementation and verification of the FSMS (including HACCP), PRPs, the physical inspection of the production process and any remaining requirements not covered during the remote audit.

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The remote and the on-site audit take place as close together as possible, but in all cases the maximum timeline for completion of the audit (remote + on-site) shall not exceed 30 calendar days.

As an exception and only in the case of serious events, the timeline for completion of the audit may be extended to a maximum of 90 calendar days, based on a clear and documented concession process and risk assessment by Q-CERT.

The ICT audit approach may be applied in the case of:

- Surveillance and recertification audits as part of the routine certification process and is additional to Part 3 of the Scheme. The full audit (remote +on-site) shall be completed within the calendar year.
 - ✓ Where the ICT audit approach is applied to the first surveillance audit following an initial certification, the process shall be planned to ensure that the full audit (remote + on-site) takes place before or not later than 12 months after the date of certification decision for the initial audit. Where the timelines as referenced above are exceeded, the full surveillance audit shall be conducted on-site and in line with the audit program or the certificate shall be suspended.
- Initial certification audits only the full Stage I audit maybe conducted off-site (with the use of ICT). The Stage II audit shall be conducted as a full on-site audit within 6 months of the Stage I or the Stage I shall be repeated. It is not permitted to use the ICT audit approach for the Stage II audit.

Management of nonconformities

- Where the audit (remote + on-site) is completed within 30 calendar days, one nonconformity report is completed and the timeline for nonconformity closure starts at the end of the on -site audit.
- In the case of a serious event and where the 30 calendar days for audit completion is exceeded, any nonconformities identified as part of the remote audit shall be recorded and a copy of the nonconformity report left with the certified organization at the end of the remote audit. The timeline for closure of these nonconformities start sat the end of the remote audit. The NC report produced following the on-site audit shall contain an overview of all the nonconformities raised, including the nonconformities raised at the remote audit to provide a consolidated record.
- The timeline for closure of NCs identified at the on-site audit starts at the end of the on-site audit.
- Where a critical nonconformity is identified at any time during the audit (remote or on-site), the certificate shall be suspended, and a full new on-site audit will be required to lift the suspension within 6 months.

Important Note:

Please note that Q-CERT for the whole auditing process with the use of ICT approach, follow the requirements of the Scheme as described in ANNEX 9: CB Requirements for the use of Information and Communication Technology (ICT).



2.5 CATEGORIZATION OF FINDINGS

2.5.1 Minor Nonconformity

A minor nonconformity shall be issued when the finding does not affect the capability of the Management System to achieve the intended results. **Special attention must be given to the timeframes described below.**

- 1. When a minor nonconformity is issued during an audit, the Organization must provide Q-CERT with objective evidence of an investigation into causative factors, exposed risks and the proposed corrective action plan (CAP).
- 2. Corrective action(s) (CA) shall be implemented by the Organization within the timeframe agreed with the auditor during the closing meeting.
- Q-CERT shall review the corrective action plan and the evidence of correction and approve it when acceptable. Q-CERT's approval shall be completed within 28 calendar days after the last day of the audit. Exceeding this timeframe shall result in a suspension of the certificate.
- 4. Effectiveness of implementation of the corrective action plan shall be reviewed, at the latest, at the next scheduled audit. Q-CERT shall review the corrective action plan and determine its effectiveness of implementation through recording auditor name and date of review on the CAP.
- 5. In the event of non-completion of the approved action plan at the next scheduled on-site audit, the auditor will raise a major nonconformity (on management responsibility and resource allocation).

2.5.2 Major Nonconformity

A major nonconformity shall be issued when the finding affects the capability of the Management System to achieve the intended results. **Special attention must be given to the timeframes described below.**

- 1. When a major nonconformity is issued during an audit, the Organization must provide Q-CERT with objective evidence of an investigation into causative factors, exposed risks and evidence of effective implementation.
- 2. Corrective action shall be implemented by the Organization and shall submit objective evidence of implementation to Q-CERT within the timeframe agreed with the auditor during the closing meeting.
- 3. Q-CERT shall review the corrective action plan and related objective evidence of implementation, challenge it if necessary and determine its effectiveness and approve the CAP and CA through recording his/her name and date of review on the CAP within **28 calendar days from the last day of the audit**.
- 4. Q-CERT shall conduct a follow-up audit to verify the implementation of the CA to close the major nonconformity. In cases where documentary evidence is sufficient to close out the major nonconformity, Q-CERT may decide to perform a desk review.
- 5. The completion of corrective actions might take more time depending on the potential severity of the major nonconformity and the amount of work necessary to eliminate the causative factors. In such cases the CAP shall include any temporary measures or controls necessary to mitigate the risk until the permanent

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corrective action is implemented. A follow-up audit shall be conducted to verify the permanent corrective action and to close the major nonconformity.

6. In the event of non-completion of the approved corrective action shall result in a suspension of the certificate.

2.5.3 Critical Nonconformity

A critical nonconformity is issued when a direct food safety impact without appropriate action by the Organization is observed during the audit or when legality and/or certification integrity are at stake. **Special attention must be given to the timeframes described below.**

- 1. When a critical nonconformity is issued at a certified organization the certificate shall immediately suspended within 3 working days of being issued, for a maximum period of six (6) months.
- 2. When a critical nonconformity is issued during an audit, the Organization must provide Q-CERT with objective evidence of an investigation into causative factors, exposed risks and the proposed CAP. This shall be provided to Q-CERT within 14 calendar days after the audit.
- 3. A follow-up audit shall be conducted by Q-CERT between six (6) weeks to six (6) months after the regular audit to verify the effective implementation of the corrective actions. This audit:
 - a. shall be a full on-site audit
 - b. shall have a minimum on-site duration of one day
 - c. if successful, then the certificate and the current audit cycle will be restored and the next audit shall take place as originally planned
 - d. shall be documented and the report shall be uploaded on FSSC Portal
- 4. Q-CERT shall withdraw the certificate when the critical nonconformity is not effectively solved within the six(6) month timeframe.
- 5. In case of a certification audit, the full certification audit shall be repeated.

IMPORTANT NOTE: The Scheme does not allow "Opportunities for Improvement"

2.6 SCHEME APPLICATION UP-DATE (FSSC 22000 PORTAL)

Q-CERT, for all audit types, shall enter and keep up to date in the FSSC Portal the required data and documentation, at the latest 28 calendar days after the certification decision with a maximum of 4 months after the last day of the audit, including all audit details (audit records):

- The audit report (F-3031 Audit Report FSSC Food, in English).
- The Program and the Audit Plan (F-3115 & Annex of the audit report in English).
- The non-conformity report (F-3001, in the recorded language)

2.7 CERTIFICATION DECISION & CERTIFICATE ISSUANCE

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Q-CERT:

- 1. Will take the certification decision and issue the certificate:
 - a. within 28 calendar days from the last day of the audit if no nonconformities were issued or
 - b. within 28 calendar days from the closure of the issued nonconformities
- 2. Within 28 calendar days from the date of certification decision and until 2 months from the last day of the audit will upload the certificate on the Scheme's database (FSSC PORTAL) from where the FSSC Register of Certified Organizations is informed and update its own list of certified Organizations.

3. OBLIGATIONS OF Q-CERT & THE CERTIFIED ORGANIZATION

3.1 Q-CERT'S OBLIGATIONS

QMSCERT commits that access to audit data, and in particular to the Audit Report, will only be permitted to authorized personnel as well as to the Accreditation Body's (ESYD) Authorities and the Scheme's as necessary. In any other case as well as for the disclosure of the results of the audit outside the above entities will be carried out only with the consent of the customer.

If a legal process is launched involving the safety, legality or revocation of a product of a client certified by Q-CERT, Q-CERT will activate the Complaint Management process OP-2080. If the information comes from the authorities, the internet or other source, the Complaint Management process OP-2080 is activated after the information is verified and the client is informed at the same time. Depending on the outcome of the whole process (communication and investigation) the Suspension - Revocation Procedure OP-2030 may be activated.

Q-CERT will:

- Inform all involved (Certified Organizations, Inspectors, Personnel Management) within one month if the requirements of the Scheme are modified.
- Send the full audit report meeting the minimum requirements as set out by the Scheme, to the (certified) organization within 2 weeks of the certification decision for all audits conducted.

Q-CERT, in case of suspension or withdrawal of a certification, shall complete the following actions within 3 working days after the certification decision has been made:

- Change the status of the certified organization in the Portal and its own Register of certified organizations and shall take any other measures it deems appropriate
- Inform the organization in writing of the suspension or withdrawal decision
- Instruct the organization to take appropriate steps in order to inform its interested parties

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Q-CERT, in case of scope reduction, shall complete the following actions within 3 working days after the certification decision has been made:

- Change the scope of the certified organization in the FSSC 22000 database and its own Register of certified organizations and shall take any other measures it deems appropriate
- Inform the organization in writing of the scope change
- Instruct the organization to take appropriate steps in order to inform its interested parties

When requested by the certified organization, Q-CERT shall actively provide the Certified Organization access to the associated Organization Profile, Audit and Certification data registered in the CB Portal using the available functionality.

Q-CERT shall ensure that Certified Organization access is only granted to authorised individual(s).

3.2 OBLIGATIONS OF THE ORGANIZATION

In the event that due to significant changes affecting the ability of its Management System to meet the requirements of the Scheme, or in the event that legislative processes relating to the safety, legality or revocation of a product of a Q-CERT - certified client, the client is obliged to inform us within three working days by telephone or by fax or by e-mail at postaudit@qmscert.com.

Will inform its clients in case of modification of its certification status (suspension or withdrawal of the certificate or reinstatement of a suspended or withdrawn certificate).

Will inform its clients in case Q-CERT's audit result leads to modification of the scope of certification.

By signing the Contract, the Organization accepts the requirements of the Scheme regarding:

- Exchanging information on the Organization with the Scheme and with State Services (where necessary)
- Viewing information about its certification status on the Scheme's website.
- The presence of a Scheme's representative during the audit from Q-CERT.

3.3 MANAGEMENT OF SERIOUS EVENTS

In case the Organization is facing a Serious Event as described above (Obligations of the Organization), must complete and send back to Q-CERT the F-2531 form, in order to assess the situation and take the necessary measures.

In cases where the annual surveillance audit cannot take place within the calendar year as a result of a serious event, an exemption shall be requested from the Foundation or the certificate shall be suspended.

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All communication will be kept by Q-CERT as a controlled document.

Depending on the severity of the situation, Q-CERT may:

- 1. Ask for documentation to be sent to demonstrate that the Organization is able to meet the requirements of the Scheme.
- 2. Conduct an on-site audit to realize that the Organization is able to meet the requirements of the Scheme.
- 3. If it receives data from the Certified Organization (as in case 1 above) indicating that the Management System continues to be effective, extend the timeframe set out in the Scheme for performing the surveillance or recertification audit (by updating and obtaining approval from the Secretariat of the Scheme):
 - i. In case of 1st Surveillance Audit: the period shall not exceed the 6 months (i.e. 18 months in total since the date of initial certification).
 - ii. In case of 2nd Surveillance Audit: the above also apply and moreover if the certified organization is forced to discontinue completely its activities (shut down) for a certain period of time (which should not be longer than six (6) months) then the planned audit may be postponed until the Organization's activities are fully operational. The Certified Organization is obliged to inform Q-CERT about the time of commencement of its activities in order to plan and conduct the audit.
 - iii. For recertification audit / certificate's validity: extend the validity of the certificate for a period not exceeding 6 months. The recertification audit can be performed within these 6 months. Otherwise (i.e. if the audit is carried out outside the extension time given) a certification inspection must be conducted.

Note: The expiration date of the certificate will follow the initial certification cycle.

- 4. To suspend or withdraw the validity of the Organization's certificate if:
 - i. The actions designed and implemented by the Organization are not able to "restore" the management system's compliance with the requirements of the Scheme.
 - ii. Communication with the certified Organization is not possible.
 - iii. The time required to complete the actions exceeds the 6 months in the cases mentioned above.





4. FSSC LOGO USE

The Certified Organization shall use the FSSC 22000 logo only for marketing activities such as organization's printed matter, website and another promotional material.

In case of using the logo the Organization shall comply with the specifications defined by the Scheme in Part 2 of Standard's version 5.

The Certified Organization is not allowed to use the FSSC 22000 logo, any statement or make reference to its certified status on:

- 1. a product
- 2. its labelling
- 3. its packaging (primary, secondary or any other form)
- 4. in any other manner that implies FSSC 22000 approves a product, process or service.

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TABLE I

| Cluster | Cate | egory | Subca | | Examples of included activities | Normative Documents |
|-----------------------------|------|------------------------------------|-------|---|---|---|
| Farming | А | Farming of Animals | AI | Farming of Animals for Meat/ Milk/ Eggs/ Honey | Raising animals (other than fish and seafood) used for meat production, egg production, milk production or honey production. Growing, keeping, trapping and hunting (slaughtering at point of hunting) Associated farm packing and storage | ISO 22000:2018 ISO/TS 22002-3:2011 FSSC 22000 Additional Requirements |
| | | | | and Seafood | Raising fish and seafood used for meat production Growing, trapping and fishing (slaughtering at point of capture) Associated farm packing ^b and storage | ISO 22000:2018 ISO/TS 22002-3:2011 FSSC 22000 Additional Requirements |
| | | | CI | - | Production of animal products including fish and seafood, meat, eggs, dairy and fish products | ISO 22000:2018 ISO/TS 22002-1:2009 FSSC 22000 Additional Requirements. |
| | | | CII | perishable plant | Production of plant products including fruits and fresh juices, vegetables, grains, nuts, and pulses | ISO 22000:2018 ISO/TS 22002-1:2009 FSSC 22000 Additional Requirements. |
| | С | Food C Manufact uring | CIII | numai and | Production of mixed animal and plant products including pizza, lasagna, sandwich, dumpling, ready- to-eat meals | ISO 22000:2018 ISO/TS 22002-1:2009 FSSC 22000 Additional Requirements. |
| Food and feed processing | | | CIV | Processing of ambient stable | Production of food products from any source that are stored and sold at ambient temperature, including canned foods, biscuits, snacks, oil, drinking water, beverages, pasta, flour, sugar, food-grade salt | ISO 22000:2018 ISO/TS 22002-1:2009 FSSC 22000 Additional Requirements. |
| | | Animal D Feed Productio n | 1 11 | Animal Feed | Production of feed from a single or mixed food source, intended for food-producing animals | ISO 22000:2018 ISO/TS 22002-6:2016 FSSC 22000 Additional Requirements |
| | D | | DII a | | Production of feed from a single or mixed food source, intended for non-food producing animals | ISO 22000:2018 ISO/TS 22002-1:2009 FSSC 22000 Additional Requirements. |
| | | | DII b | pet toods other | Production of feed from a single or mixed food source, intended for non-food producing animals | ISO 22000:2018 ISO/TS 22002-6:2016 FSSC 22000 Additional Requirements. |
| Catering | E | Catering | | | Preparation, storage and, where appropriate, delivery of food for consumption, at the place of preparation or at a satellite unit | ISO 22000:2018 ISO/TS 22002-2:2013 FSSC 22000 Additional Requirements. |



AUDIT REQUIREMENTS OF FSSC 22000 MANAGEMENT SYSTEM



| Cluster | Category | | Subcategory | | Examples of included activities | Normative Documents |
|-------------------------------------|----------|--|-------------|---|--|---|
| Retail, transport and storage | F | Distributio n | 1 1 1 | | | ISO 22000:2018 BSI/PAS 221:2013 FSSC 22000 Additional Requirements. |
| | G | Provision of Transport | GI S P | Transport and Storage Services for Perisbable Food | Storage facilities and distribution vehicles for the storage and transport of perishable food and feed Associated packaging | ISO 22000:2018 NEN/NTA 8059:2016 FSSC 22000 Additional Requirements. |
| | | and Storage Services GI | GII | Iransport and Storage Services for Ambient Stable | Storage facilities and distribution vehicles for the storage and transport of ambient stable food and feed | ISO 22000:2018 NEN/NTA 8059:2016 FSSC 22000 Additional Requirements. |
| | | | | Food and Feed | Associated packaging | · |
| | Ι | Production of Food Packaging and Packaging Material | | | Production of food packaging material | ISO 22000:2018 ISO/TS 22002-4:2013 FSSC 22000 Additional Requirements. |
| Biochemical | к | Production of (Bio) Chemicals | | | Production of food and feed additives, vitamins, minerals, bio-cultures, flavourings, enzymes and processing aids | ISO 22000:2018 ISO/TS 22002-1:2009 FSSC 22000 Additional Requirements. |
| | | | | | Pesticides, drugs, fertilizers, cleaning agents | |