SQF Food Safety Audit Edition 9

Tree Top, Inc. Wenatchee Plant - 101499

Summary

Audit Decision
Certified

Decision Date
January 24, 2025

Recertification Date
December 13, 2025

Expiration Date
February 26, 2026

Issue Date
January 24, 2025

Certificate Number
9910

Audit Type
Unannounced

On-Site Audit Dates
November 20, 2024 - November 21, 2024

ICT Dates
-

Audit Rating

Excellent

Facility and Scope

Tree Top, Inc. Wenatchee Plant - 101499

3981 US-97 ALT
Wenatchee, WA 98801-9626 United States

Products
(14) Low Moisture Apples (19) Apple Powder

Food Sector Categories
14. Fruit, Vegetable, and Nut Processing, and Fruit Juices
19. Food Ingredient Manufacturing

Scope of Certification
The receival of raw materials, storage, manufacturing, filling, packing and distribution of

Certification Body and Audit Team

Mérieux NutriSciences Certification LLC

401 N Michigan Ave
Suite 1400
Chicago, IL 60611 United States

CB#: 40757
Accreditation Body: JASANZ
Accreditation Number: Z3720906AB

Lead Auditor: Mark Weighner (C-366159)
Technical Reviewer: Sandra Luttrell (C-371630)

Hours Spent on Site: 17
Hours of ICT Activities:

Hours Spent Writing Report: 8

fruit products and ingredients.

Section Responses

Audit Statement - Audit

SQF Practitioner Name - Name the designated SQF Practitioner

Response: Kim Beausoleil

SQF Practitioner Email - Email of the designated SQF Practitioner

Response: Kim.Beausoleil@treetop.com

Opening Meeting - People Present at the Opening Meeting (Please list names and roles in the following format Name: Role separated by commas)

Response: Bill Harvey: Plant Manager, Kim Beausoleil: QA Manager, Mindi House: HR Manager, Brynne Wilcox: Warehouse Manager, Jeremy Michel: Maintenance Manager, Tim Cahalan: Manufacturing Manager, Mark Weighner: SQF Auditor

Facility Description - Auditor Description of Facility (Please provide facility description include # of employees, size, production schedule, general layout, and any additional pertinent details

Response: Tree Top Wenatchee was an apple processing facility located in an 80,000 square foot building. They manufactured low-moisture apple products (dehydrated slices, powder) under 4 separate Food Safety Plans - CCPs included drying temperature/time and metal detection. The site included 61,100 square feet of processing and 15,500 square feet of storage. The building was built in 1976 with additions and improvements made in subsequent years. The facility operates 5-7 days a week, 24 hours a day. There are 3 shifts at the facility: 7 am to 3 pm, 3 pm to 11 pm, and 11 pm to 7 am. There were around 80 full-time employees at the facility. The facility's process involves washing, inspecting, sizing, coring and peeling, inspecting, cutting, optical sorting, drying, sifting, metal detection, inspecting, sealing, labeling, case metal detection, palletizing, and storing. The facility’s structure was stand-up concrete walls with a flat root. Inner walls were RFP panels or steel panels over sheetrock - the interior ceiling was open truss that had utilities attached for cleaning purposes. Concrete floors were in good condition and floors/drains were sloped to prevent pooling. Epoxy floor finish was observed in several areas of the plant. The process was 2 main lines/rooms and two packaging rooms with access to 6 drying ovens - the site was only able to run one process at a time. Products manufactured at this facility are distributed in several countries including U.S., Canada, Mexico, Australia, Europe, Thailand, and South America.

Closing Meeting - People Present at the Closing Meeting (Please list names and roles in the following format Name: Role separated by commas)

Response: Bill Harvey: Plant Manager, Kim Beausoleil: QA Manager, Mindi House: HR Manager, Brynne Wilcox: Warehouse Manager, Jeremy Michel: Maintenance Manager, Tim Cahalan: Manufacturing Manager, Mark Weighner: SQF Auditor

Auditor Recommendation - Auditor Recommendation

Response: Recertification at the E level upon completion of approved CAPA.

2.1.1 - Management Responsibility (Mandatory)

2.1.1.1 - Senior site management shall prepare and implement a policy statement that outlines at a minimum the

commitment of all site management to: i. Supply safe food; ii. Establish and maintain a food safety culture within the site; iii. Establish and continually improve the site's food safety management system; and iv. Comply with customer and regulatory requirements to supply safe food. The policy statement shall be: v. Signed by the senior site manager and displayed in prominent positions; and vi. Effectively communicated to all site personnel in the language(s) understood by all site personnel

Response: Compliant

2.1.1.2 - Senior site management shall lead and support a food safety culture within the site that ensures at a minimum: i. The establishment, documentation, and communication to all relevant staff of food safety objectives and performance measures; ii. Adequate resources are available to meet food safety objectives; iii. Food safety practices and all applicable requirements of the SQF System are adopted and maintained; iv. Employees are informed and held accountable for their food safety and regulatory responsibilities; v. Employees are positively encouraged and required to notify management about actual or potential food safety issues; and vi. Employees are empowered to act to resolve food safety issues within their scope of work.

Response: Compliant

2.1.1.3 - The reporting structure shall identify and describe site personnel with specific responsibilities for tasks within the food safety management system and identify a backup for the absence of key personnel. Job descriptions for the key personnel shall be documented. Site management shall ensure departments and operations are appropriately staffed and organizationally aligned to meet food safety objectives.

Response: Compliant

2.1.1.4 - Senior site management shall designate a primary and substitute SQF practitioner for each site with responsibility and authority to: i. Oversee the development, implementation, review, and maintenance of the SQF System; ii. Take appropriate action to ensure the integrity of the SQF System; and iii. Communicate to relevant personnel all information essential to ensure the effective implementation and maintenance of the SQF System.

Response: Compliant

2.1.1.5 - The primary and substitute SQF practitioner shall: i. Be employed by the site; ii. Hold a position of responsibility related to the management of the site's SQF System; iii. Have completed a HACCP training course; iv. Be competent to implement and maintain HACCP based food safety plans; and v. Have an understanding of the SQF Food Safety Code: Food Manufacturing and the requirements to implement and maintain an SQF System relevant to the site's scope of certification

Response: Compliant

2.1.1.6 - Senior site management shall ensure the training needs of the site are resourced, implemented, and meet the requirements outlined in system elements 2.9 and that site personnel meet the required competencies to carry out those functions affecting the legality and safety of food products.

Response: Compliant

2.1.1.7 - Senior site management shall ensure the integrity and continued operation of the food safety system in the event of organizational or personnel changes within the company or associated facilities.

Response: Compliant

2.1.1.8 - Senior site management shall designate defined blackout periods that prevent unannounced re-certification audits from occurring out of season or when the site is not operating for legitimate business reasons. The list of blackout dates and their justification shall be submitted to the certification body a minimum of

one (1) month before the sixty (60) day re-certification window for the agreed-upon unannounced audit.

Response: Compliant

Summary -

Response: The signed policy (May 2024) was posted at the employee communication board in the breakroom. The policy was signed by corporate senior management and the plant manager - during the audit, employees showed an understanding of SQF and their food safety responsibilities. The policy was posted in English and Spanish. The policy referenced the commitment to meeting customer specifications and regulatory requirements, providing safe, high-quality products, food safety culture, monitoring and reviewing quality and food safety objectives and goals as well as continuous improvement. The statement also describes ensuring resources were available. Food safety culture was discussions were included in management meetings and was reviewed in the annual SQF Review (Nov 2024). The Culture program was based on employee training, monthly employee feedback, monitoring employee habits with a daily GMP inspection, monitoring / investigating complaints, and detailed tracking of KPI/Food Safety Objectives that were tracked monthly and summarized annually. The Organizational Chart had recently shifted reporting structure for the QA Manager from the Plant Manager to corporate QA, with a dotted line to the Plant Manager. The Plant Manager had manufacturing, HR, warehouse, and plant accounting reporting directly to him. Maintenance reported t the manufacturing manager and sanitation was part of production (full cleaning at the end of the week). The QA Manager was designated as the primary practitioner; the warehouse manager and the QA Supervisor were designated as the back-ups - primary food safety responsibilities/roles and back-up responsibilities for the management team were listed in the quality manual. The SQF Practitioner were full time employees and had HACCP and PCQI Training Certificates on file. Each of these were full time management positions - the entire food safety team had been trained on PCQI and SQF Implementation though a third-party training organization. Training needs were the responsibility of the Plant Manager and QA Manager - majority of training was completed by the HR Manager (who was on the Food Safety Team) using Alchemy. The organizational chart provided evidence of food safety responsibility redundancy that ensured organizational changes did not impact the integrity of the food safety programs. Several members of the management team have been promoted from within over the past few years. Management was aware of the requirement for blackout dates to be non-production days. Blackout dates were provided for the week of Thanksgiving and Christmas - these dates were excluded to minimal production planned and limited employees available during these week.

2.1.2 - Management Review (Mandatory)

2.1.2.1 - The SQF System shall be reviewed by senior site management at least annually and include: i. Changes to food safety management system documentation (policies, procedures, specifications, food safety plan); ii. Food safety culture performance; iii. Food safety objectives and performance measures; iv. Corrective and preventative actions and trends in findings from internal and external audits, customer complaints, and verification and validation activities; v. Hazard and risk management system; and vi. Follow-up action items from previous management reviews. Records of all management reviews and updates shall be maintained.

Response: Compliant

2.1.2.2 - The SQF practitioner(s) shall update senior site management on at least a monthly basis on matters impacting the implementation and maintenance of the SQF System. The updates and management responses shall be documented.

Response: Compliant

Summary -

Response: The site had a meeting structure that included daily (HR - new employees), QA (product issues), department re-caps (maintenance, warehouse, production/yields). Food safety meetings were held monthly (reviewed May and Oct 2024) and included CAPA, Net Weight Verification study, review of previous action item (crisp action log), FS complaints and complaint targets, employee training completion, employee communication slides in breakroom, FS Plan Review, Previous Month's Review minutes. An annual review was conducted 11/8/2024 and was presented in a format that included charts and summaries - topics specifically included complaints, targets, CAPA, any audit NC throughout the year, food safety plan summary (changes), and CCP deviations from previous year, food safety culture performance, completed objectives (SQF Audit Score, HNC Goal (Holds) <5% (last year 7.08%), total complaints (<1%). From the corporate audit: Corporate Quality meets monthly with cross functional participation of corporate and site departments to review and discuss various topics. The Structured Communication Monthly meeting from 8/13/2024 was reviewed and covered applicable food safety topics. The site's management participate and also have access to the meetings in Intelex.

2.1.3 - Complaint Management (Mandatory)

2.1.3.1 - The methods and responsibility for handling, investigating, and resolving food safety complaints from commercial customers, consumers, and authorities, arising from products manufactured or handled on-site or co-manufactured, shall be documented and implemented.

Response: Compliant

2.1.3.2 - Adverse trends of customer complaint data shall be investigated and analyzed and the root cause established by personnel knowledgeable about the incidents.

Response: Compliant

2.1.3.3 - Corrective and preventative action shall be implemented based on the seriousness of the incident and the root cause analysis as outlined in 2.5.3. Records of customer complaints, their investigation, and resolution shall be maintained.

Response: Compliant

Summary -

Response: The site managed complaint data as a separate category than Holds. A total of 14 complaints had been registered the past year and had been categorized for sticker FM, non-stick FM, color, taste, torn bag, pest. Each complaint was fully investigated to the extent possible based on the information that was able to be provided. The CAPA form used was in a software (Intelex) program used by QA. The CAPAs reviewed on complaints included corrective action (re-training) and any additional control measures that were put in place (i.e. a new control to ensure sanitizer spray bottles were tracked and returned was implemented based on a recent FM complaint). The annual review minutes included a summary of each complaint and control measures implemented. From the corporate audit: The Customer Complaint Management Policy 00-POL-01.0010 dated 3/5/2024 describes the complaint management system. Corporate QA was responsible for receiving complaints, entering them into the Intelex system and communicating complaints to the sites. Based on the complaint, corporate QA will determine the response the customer. The Consumer Complaint Management Policy 00-POL-01.22 dated 8/13/2024 describes how consumer complaints are managed. Consumer complaints are assigned a severity level. These complaints were also entered into Intelex. The Customer Complaint Procedure 00-PRO-01.0002 dated 3/7/2024 and Consumer Complaint Procedure

00-PRO-01.42 dated 8/2/2024 described the complaint workflow depending on the type of complaint. Corporate QA was responsible for ensuring the program was used and properly managed. Trending and corrective actions related to complaints is done at the corporate level using a Structured Communication Monthly meeting and the CAPA system. The sites are responsible for investigating complaints when requested by corporate including but not limited to food safety issues and when there are 3 or more consumer complaints from the same lot number. The site enters the investigation into Intelex, but is not responsible for customer communications or closing the complaint.

2.2.1 - Food Safety Management (Mandatory)

2.2.1.1 - The methods and procedures the site uses to meet the requirements of the SQF Food Safety Code: Food Manufacturing shall be maintained in electronic and/or hard copy documentation. They will be made available to relevant staff and include i. A summary of the organization's food safety policies and the methods it will apply to meet the requirements of this standard; ii. The food safety policy statement and organization chart; iii. The processes and products included in the scope of certification; iv. Food safety regulations that apply to the manufacturing site and the country(ies) of sale (if known); v. Raw material, ingredient, packaging, and finished product specifications; vi. Food safety procedures, prerequisite programs, food safety plans; vii. Process controls that impact product safety; and viii. Other documentation necessary to support the development, implementation, maintenance, and control of the SQF System.

Response: Compliant

2.2.1.2 - Food safety plans, Good Manufacturing Practices, and all relevant aspects of the SQF System shall be reviewed, updated, and communicated as needed when any changes implemented have an impact on the site's ability to deliver safe food. All changes to food safety plans, Good Manufacturing Practices, and other aspects of the SQF System shall be validated or justified prior to their implementation. The reasons for the change shall be documented.

Response: Compliant

Summary -

Response: From the corporate audit: The Food Safety Plan 00-POL-02.0028 dated 8/14/2024 includes a summary of the policy statement and the food safety management system. Corporate QA was responsible for creating and maintaining policies related to food safety, supplier management and conducting internal audits. A food safety manual was available electronically in Intelex including a policy statement and organizational chart. The quality system at the site was shown to be current and fully implemented during the audit.

2.2.2 Document Control (Mandatory)

2.2.2.1 - The methods and responsibility for maintaining document control and ensuring staff have access to current requirements and instructions shall be documented and implemented. Current SQF System documents and amendments to documents shall be maintained.

Response: Compliant

Summary -

Response: From the corporate audit: The Document Control Policy 00-POL-01.0023 dated 11/29/2023 describes the document control program. The facility uses an Intelex database for managing document approval and reviews. Each document is assigned to the document owner. Access to documents is provided

and staff can request that updates be made to a document. Document change requests flow through the document owner and the process is managed in Intelex. Intelex was considered the register of documents and would include site specific documents. Intelex also archives previous versions of documents. During the audit, the document registers were current, revisions and reasons for revisions were listed - no issues identified.

2.2.3 - Records (Mandatory)

2.2.3.1 - The methods, frequency, and responsibility for verifying, maintaining, and retaining records shall be documented and implemented.

Response: Compliant

2.2.3.2 - All records shall be legible and confirmed by those undertaking monitoring activities that demonstrate inspections, analyses, and other essential activities that have been completed.

Response: Compliant

2.2.3.3 - Records shall be readily accessible, retrievable, and securely stored to prevent unauthorized access, loss, damage, and deterioration. Retention periods shall be in accordance with customer, legal, and regulatory requirements, at minimum the product shelf-life or established by the site if no shelf-life exists.

Response: Compliant

Summary -

Response: Record dates chosen for review were Nov 4-6, 2024, Jul 24-26, 2024, May 14-16, 2024. Types of records reviewed during the audit included the Weekly Production Schedule, Control Point Verification of Findings, Magnet Inspections, Process Variance, Product Grade Sheet, Dryer Charts (HACCP), Dryer Setting Log, Pallet Completion Log, and Foreign Material Inspection Forms (signed investigations by maintenance). QA records were maintained in an electronic database - the QA tech had to log in to enter information and QA Manager had to log in as part of verification (history log for each day provided evidence of verification). QA records included metal detector checks and hourly product sampling. Records were observed to be free of scribble-outs or white-out and were properly verified. From the corporate audit: The Control of Records Policy 00-POL-01.0026 dated 11/8/2023 describes records management. The policy included the requirement for records to be legible, properly completed and stored. The policy also included a record retention schedule identifying the retention requirements based on the type of record maintained. Records were required to be maintained for at least the shelf life of the product. In general food safety records were required to be maintained for six years according to the schedule.

2.3.1 - Specification, Formulation, and Realization

2.3.1.1 - The methods and responsibility for designing and developing new product formulations and converting product concepts to commercial realization shall be documented and implemented.

Response: Compliant

2.3.1.2 - New product formulations, manufacturing processes, and the fulfillment of product requirements shall be established, validated, and verified by site trials and product testing as required to ensure product safety. Product formulations shall be developed by authorized persons to ensure that they meet the intended use. Where necessary, shelf life trials shall be conducted to validate and verify a new product's: i. Pre-consumer handling and storage requirements, including the establishment of "use by," "best before dates," or equivalent terminology; ii. Microbiological criteria, where applicable; and iii. Consumer preparation, where applicable, and storage and

handling requirements.

Response: Compliant

2.3.1.3 - A food safety plan shall be validated and verified by the site food safety team for each new product and its associated process through conversion to commercial production and distribution or where a change to ingredients, process, or packaging occurs that may impact food safety.

Response: Compliant

2.3.1.4 - Product formulations and manufacturing processes for products included in the scope of certification shall be reviewed when there are changes in materials, ingredients, or equipment.

Response: Compliant

2.3.1.5 - The process flows for all new and existing manufacturing processes shall be designed to ensure that product is manufactured according to approved product formulations and to prevent cross-contamination.

Response: Compliant

2.3.1.6 - Records of product design, formulations, label compliance, process flows, shelf life trials, and approvals for all new and existing products shall be maintained.

Response: Compliant

Summary -

Response: The site had recently approved a new 1 oz Snack Pack dried apple in a retail-type package designated for food service. The approved file was provided for the audit and included HACCP approval, label approval, corporate QA sign-off, and sign-off from logistics. Specifications had been uploaded to the ERP system and records from the first production runs were provided. From the corporate audit: The Product Formulation and Realization Policy 00-POL-13.0000 dated 5/31/2022 (reviewed 6/18/2024 with no changes) describes the product development process. The corporate Product Development department manages the process. Responsibilities were defined with corporate departments generally responsible for the process. The corporate Quality Team was responsible for suppliers, identifying any food safety risks including allergens and assessing GMO status and quality. Corporate QA was also responsible for product testing including nutritional testing if needed, regulatory compliance for label development, Kosher approvals if applicable, establishing process authority letters and FDA low acid filings if applicable, and other responsibilities. Corporate R&D was responsible for formulation shelf life determination, process requirements, managing test runs if applicable, sensory testing and other responsibilities as described in the policy. Additional corporate responsibilities were outlined in the policy. The Management of Change Policy 00-POL-01.0037 dated 2/1/2024 describes how the company manages changes including changes to product, formulation, equipment or other changes. The change management process was managed in Intelex. A change process for a new smoothie blend product was reviewed during the desk audit. The Intelex stages included a review of raw materials, a process authority review, and other stages managed at the corporate level. The plant responsibilities are also captured in Intelex including a HACCP review and sanitation. There was also a process authority team at the corporate level. The Process Authority and Thermal Process Evaluation Program 00-POL-02.42 dated 4/19/2023 describes corporate responsibilities for filed processes. The manufacturing Work Order process was in place that required finished product specifications and ingredient specifications to be approved before work orders can be implemented.

2.3.2 - Specifications (Raw Material, Packaging, Finished Product, and Services)

2.3.2.1 - The methods and responsibility for developing, managing, and approving raw material, finished product,

and packaging specifications shall be documented.

Response: Compliant

2.3.2.2 - Specifications for all raw materials and packaging, including, but not limited to, ingredients, additives, hazardous chemicals, processing aids, and packaging that impact finished product safety shall be documented and kept current.

Response: Compliant

2.3.2.3 - All raw materials, packaging, and ingredients, including those received from other sites under the same corporate ownership, shall comply with specifications and with the relevant legislation in the country of manufacture and country(ies) of destination if known.

Response: Compliant

2.3.2.4 - Raw materials, packaging, and ingredients shall be validated to ensure product safety is not compromised and the material is fit for its intended purpose.

Response: Compliant

2.3.2.5 - Site management shall require approved raw materials suppliers to notify the site of changes in product composition that could have an impact on product formulation (e.g., protein content, moisture, amino acid profiles, contaminant levels, allergens, and/or other parameters that may vary by crop or by season).

Response: Compliant

2.3.2.6 - Verification of packaging shall include a certification of all packaging that comes into direct contact with food meets either regulatory acceptance or approval criteria. Documentation shall either be in the form of a declaration of continued guarantee of compliance, a certificate of conformance, or a certificate from the applicable regulatory agency. In the absence of a certificate of conformance, certificate of analysis, or letter of guarantee, analyses to confirm the absence of potential chemical migration from the packaging to the food contents shall be conducted and records maintained.

Response: Compliant

2.3.2.7 - Finished product labels shall be accurate, comply with the relevant legislation, and be approved by qualified company personnel.

Response: Compliant

2.3.2.8 - Description of services for contract service providers that have an impact on product safety shall be documented, current, include a full description of the services to be provided, and detail relevant training requirements of all contract personnel.

Response: Compliant

2.3.2.9 - Finished product specifications shall be documented, current, approved by the site and its customer, accessible to relevant staff, and shall include, where applicable: i. Microbiological, chemical, and physical limits; ii. Composition to meet label claims; iii. Labeling and packaging requirements; and iv. Storage conditions.

Response: Compliant

2.3.2.10 - Specifications for raw materials and packaging, chemicals, processing aids, contract services, and finished products shall be reviewed as changes occur that impact product safety. Records of reviews shall be maintained. A list of all the above specifications shall be maintained and kept current.

Response: Compliant

Summary -

Response: Reviewed the most recent new product (low moisture apple in a 1 oz retail-type pack). The specification addressed microbiological limits, nutritional statement, lot coding, label design, Requested / reviewed specifications on apples and on the cinnamon of the product chosen for trace. The apple specification was based on USDA sizing and was further graded for compliance as part of receiving (demonstrated during the audit). The site's specification on cinnamon was also requested - this included micro, ingredients, COA requirements, nutritional. The site had a separate letter of guarantee on lead associated with cinnamon and has started submitting samples of cinnamon for testing. The site kept specifications in a corporate-wide ERP system, which allowed access to specifications for any ingredient that was required to fulfill a production work order or for any finished product. Finished product specifications included checks on whether or not the product required a COA, and if a COA was required, what checks needed to be included - this process was demonstrated during the audit against random product requests. Incoming apples were required to be from approved suppliers as part of the Coop that managed the operations. Apples were under USDA regulations and organic suppliers were required to provide evidence of compliance each year. Ingredients were required to be provided by GFSI facilities. Letters of Guarantee were required from suppliers that ensured the supplier would notify the site of any changes. Food contact packaging included a Certificate of Compliance (FDA) and required the packaging supplier was third-party audited. Finished product labels were primarily for further manufacturing and included basic information (product #, lot #, ingredients, net weights, site of manufacture, IP (organic, kosher) status. A single retail-type package that was packaged for food service included relevant legislation and was approved by corporate QA. Service provider contracts were provided for pest control, vending, and the chemical provider - details of service specification and supplier approval were under QA responsibility and were current. From the corporate audit: The Finished Product Specification Policy 00-POL-02.0047 dated 1/30/2024 describes the finished product specification program. Developing finished product specifications was a corporate responsibility. Finished product specifications were maintained in the TreeNet database. Specifications included a product description, ingredient statement, analytical and microbiological requirements, process parameters, packaging requirements, shelf life and other product information. Specifications in TreeNet were reviewed for Peach Puree Concentrate item number 303021. The plant has access to finished product specifications in TreeNet. Label development and approval was a corporate responsibility. The Developing and Handling Label Artwork Changes policy 00-POL-02.0014 dated 2/6/2024 describes the label approval and change process including the review of artwork. An Apple Cranberry Juice label approval was reviewed during the desk audit. A Label Checklist Review 11/30/2023 describes the corporate process for approving labels. The Incoming Label Inspection Policy 00-POL-05.0011 dated 5/28/201 describes the plant’s responsibilities for receiving labels and introducing them to the line. The site is responsible for verifying the correct label and implementing label control in the process. The Raw Material Control and Supplier Monitoring policy 00-POL-01.0031 dated 4/13/2020 describes the requirements for monitoring suppliers. Raw material specifications were maintained in Intelex under the supplier documents. The specifications could be either the vendor specification or a Tree Top developed specification. Tree Top developed specifications identify attributes requiring a COA, if any. The Specification Management Procedure 00-PRO-01.12 describes the process for managing specifications. The Supplier, Co-Pack, Co-Man, Evaluation and Approval Program 00-POL-02.0052 dated 6/26/2024 describes the approval of suppliers and contract manufacturers. Supplier information and documents were maintained in Intelex including but not limited to third party audits, allergen information, and letters of guarantee. Supplier contact information was also in Intelex. The sites have access to Intelex. An SQF certificate was available for JCB Flavors expiring 1/6/2024. Packaging suppliers were also managed in the system. A Menshen Packaging

Letter of Guarantee Declaration of Compliance and BRCGS Packaging certificate expiring 9/21/2024 were reviewed. Risk assessments for suppliers were also kept in Intelex. A scoring system was used to determine the risk level. High risk ingredients do not necessarily require additional requirements at receiving or at the plant level although the plant does have access to the assessment. The Raw Material, Packaging, and Ingredient Sampling, Inspection, and Analysis Policy 00-POL-12.0-20 dated 4/10/2023 further describes testing and COA review requirements for materials received. An emergency use process was available and would require prior approval or conditional approval by corporate. The sites cannot use unapproved suppliers without them first being at least conditionally approved by corporate. The site cannot conditionally approved suppliers. The Contract Service Providers Policy 00-POL-02.0056 dated 7/18/2024 describes how contract service providers are managed. The Contract Service Providers Manual was available for contractors. Each site was responsible for managing contract service providers at their facility and maintaining a list of contract service providers. Intelex identifies the approved status of the raw material. Corporate was responsible for working with suppliers to manage any changes in the materials supplied using the management of change process. Raw materials received from other plants under the same corporate ownership have testing results available electronically that can be reviewed by the receiving plant. All sites under the same corporate ownership were SQF certified.

2.3.3 - Contract Manufacturers

2.3.3.1 - The methods and responsibility for ensuring all agreements with contract manufacturers relating to food safety, customer product requirements, their realization, and delivery shall be documented and implemented.

Response: N/A

Evidence: • Contract manufacturers were not used.

2.3.3.2 - The site shall establish a method to determine the food safety risk level of contract manufactured product and shall document the risk. The site shall ensure that: i. Products and processes of co-manufacturers that are considered high-risk have undergone an audit by the site or third-party agency to confirm compliance with the SQF Food Safety Code: Food Manufacturing and regulatory and customer requirements; ii. Products and processes of co-manufacturers that are considered low-risk meet the requirements of the SQF Food Safety Code: Food Manufacturing, or other GFSI benchmarked certification programs, and regulatory and customer requirements; and iii. Changes to contractual agreements are approved by both parties and communicated to relevant personnel.

Response: N/A

Evidence: • Contract manufacturers were not used.

2.3.3.3 - Contractual agreements with third party storage and distribution businesses shall include requirements relating to customer product requirements and compliance with clause 2.3.3.2 of the SQF Food Safety Code: Food Manufacturing. Contractual agreements shall be approved by both parties and communicated to relevantpersonnel. The site shall verify compliance with the SQF Code and ensure that customer and regulatory requirements are being met at all times.

Response: N/A

Evidence: • Contract manufacturers were not used.

2.3.3.4 - Records of audits, contracts, and changes to contractual agreements and their approvals shall be maintained.

Response: N/A

Evidence: • Contract manufacturers were not used.

Summary -

Response: Contract manufacturers were not used.

2.3.4 - Approved Supplier Program (Mandatory)

2.3.4.1 - The responsibility and procedure for selecting, evaluating, approving, and monitoring an approved supplier shall be documented and implemented. A current record of approved suppliers, receiving inspections, and supplier audits shall be maintained. Code Amendment #2 Approved supplier registers shall include supplier contact details. All approved and emergency suppliers shall be registered.

Response: Compliant

2.3.4.2 - The approved supplier program shall be based on the past performance of a supplier and the risk level of the raw materials, ingredients, processing aids, packaging, and services supplied, and shall contain at a minimum: i. Agreed specifications (refer to 2.3.2); ii. Reference to the level of risk applied to raw materials, ingredients, packaging, and services from the approved supplier; iii. A summary of the food safety controls implemented by the approved supplier; iv. Methods for granting approved supplier status; v. Methods and frequency of monitoring approved suppliers; vi. Details of the certificates of conformance, if required; and vii. Methods and frequency of reviewing approved supplier performance and status.

Response: Compliant

2.3.4.3 - Verification of raw materials shall include certificates of conformance, certificates of analysis, or sampling, and testing. The verification frequency shall be identified by the site.

Response: Compliant

2.3.4.4 - The receipt of raw materials, ingredients, processing aids, and packaging from nonapproved suppliers shall be acceptable only in an emergency situation and provided a receiving inspection or analysis is conducted and recorded before use.

Response: Compliant

2.3.4.5 - Raw materials, ingredients, and packaging received from other sites under the same corporate ownership shall be subject to the same specification requirements (refer to 2.3.2), approved supplier requirements, and receiving inspections as all other material providers.

Response: Compliant

2.3.4.6 - Supplier audits shall be based on risk (as determined in 2.3.4.2) and shall be conducted by individuals knowledgeable of applicable regulatory and food safety requirements and trained in auditing techniques.

Response: Compliant

Summary -

Response: Requested and reviewed the approved supplier status of the organic apples received on 11/20/2024 (observed process during the audit). The approved status was included in the corporate CRM software - the specific farm that the apples come from was on the current approval list and included organic status. As an ingredient, sodium sulfate was chosen to verify compliance as an approved supplier - this file included the product specification. Approved supplier was managed by corporate purchasing using the corporate CRM software that the site QA had access to. Each supplier had a file that included specifications,

Letters of Guarantee, evidence of HACCP and third-party audits. Any issues with suppliers would be tracked as part of the complaint program embedded in the same software, giving corporate purchasing access to past performance issues. Packaging required a Certificate of Compliance, ingredients required a COA, and apples required evidence of approved supplier status and identification of the source of the apples (fields/farms). Based on risk, supplier audits were not required.

2.4.1 - Food Legislation (Mandatory)

2.4.1.1 - The site shall ensure that at the time of delivery to customers finished products shall comply with food safety legislation applicable in the country of manufacture and sale. This includes compliance with legislative requirements applicable to maximum residue limits, food safety, packaging, product description, net weights, nutritional, allergen, and additive labeling, labeling of identity preserved foods, any other criteria listed under food legislation, and to relevant established industry codes of practice.

Response: Compliant

2.4.1.2 - The methods and responsibility for ensuring the site is kept informed of changes to relevant legislation, scientific and technical developments, emerging food safety issues, and relevant industry codes of practice shall be documented and implemented.

Response: Compliant

2.4.1.3 - SQFI and the certification body shall be notified in writing within twenty-four (24) hours as a result of a regulatory warning or event. Notification to SQFI shall be by email to foodsafetycrisis@sqfi.com.

Response: Compliant

Summary -

Response: From the corporate audit: The Food Legislation policy 00-POL-02.0030 dated 9/13/2021 describes how the company ensures compliance with regulatory requirements. Corporate Quality was responsible for keeping the sites updated on changes to legislation, scientific developments, emerging food safety issues and other items. Corporate Quality was also responsible for notifying SQFI and the certification body of a regulatory warning or event within 24 hours. The QA Manager was responsible for ensuring the site was informed of legislative responsibility gathered from corporate and was informed of reporting any issues to the CB and SQFI. The site's registration with the FDA Bioterrorism was current through Dec 2026, no recalls or warnings had occurred.

2.4.2 - Good Production Practices (Mandatory)

2.4.2.1 - The site shall ensure the applicable Good Manufacturing Practices described in Module 11 of this Food Safety Code are applied or exempted according to a written risk analysis outlining the justification for exemption or evidence of the effectiveness of alternative control measures that ensure food safety is not compromised.

Response: Compliant

2.4.2.2 - The Good Manufacturing Practices applicable to the scope of certification outlining how food safety is controlled and assured shall be documented and implemented.

Response: Compliant

Summary -

Response: From the corporate audit: Corporate has developed and maintains the Good Manufacturing

Practices Program 00-POL-02.0046 dated 3/4/2024 describing the general GMP expectations to be implemented. The policy addresses multiple GMP requirements related to personnel and the facility. There were no exemptions at any of the plants. The GMP requirements of Module 11 that applied to the site's audit were observed fully documented and implemented. Employees were knowledgeable of these responsibilities and observed consistently implementing them.

2.4.3 - Food Safety Plan (Mandatory)

2.4.3.1 - A food safety plan shall be prepared in accordance with the twelve steps identified in the Codex Alimentarius Commission HACCP guidelines. The food safety plan shall be effectively implemented and maintained and shall outline how the site controls and assures food safety of the products or product groups included in the scope of the SQF certification and their associated processes. More than one HACCP food safety plan may be required to cover all products included in the scope of certification.

Response: Compliant

2.4.3.2 - The food safety plan or plans shall be developed and maintained by a multidisciplinary team that includes the SQF practitioner and those site personnel with technical, production, and engineering knowledge of the relevant raw materials, packaging, processing aids, products, and associated processes. Where the relevant expertise is not available on-site, advice may be obtained from other sources to assist the food safety team.

Response: Compliant

2.4.3.3 - The scope of each food safety plan shall be developed and documented including the start and endpoints of the processes under consideration and all relevant inputs and outputs.

Response: Compliant

2.4.3.4 - Product descriptions shall be developed and documented for all products included in the scope of the food safety plans. The descriptions shall reference the finished product specifications (refer to 2.3.2.9) plus any additional information relevant to product safety, such as pH, water activity, composition, and/or storage conditions.

Response: Compliant

2.4.3.5 - The intended use of each product shall be determined and documented by the food safety team. This shall include target consumer groups, the potential for consumption by vulnerable groups of the population, requirements for further processing if applicable, and potential alternative uses of the product.

Response: Compliant

2.4.3.6 - The food safety team shall develop and document a flow diagram covering the scope of each food safety plan The flow diagram shall include every step in the process, all raw materials, packaging, service inputs (e.g., water, steam, gasses as applicable), scheduled process delays, and all process outputs including waste and rework. Each flow diagram shall be confirmed by the food safety team to cover all stages and hours of operation.

Response: Compliant

2.4.3.7 - The food safety team shall identify and document all food safety hazards that can reasonably be expected to occur at each step in the processes, including raw materials and other inputs.

Response: Compliant

2.4.3.8 - The food safety team shall conduct a hazard analysis for every identified hazard to determine which

hazards are significant, i.e., their elimination or reduction to an acceptable level is necessary to control food safety. The methodology for determining hazard significance shall be documented and used consistently to assess all potential hazards.

Response: Compliant

2.4.3.9 - The food safety team shall determine and document the control measures that must be applied to all significant hazards. More than one control measure may be required to control an identified hazard, and more than one significant hazard may be controlled by a specific control measure.

Response: Compliant

2.4.3.10 - Based on the results of the hazard analysis (refer to 2.4.3.8), the food safety team shall identify the steps in the process where control must be applied to eliminate a significant hazard or reduce it to an acceptable level (i.e., a critical control point or CCP). In instances where a significant hazard has been identified at a step in the process, but no control measure exists, the food safety team shall modify the process to include an appropriate control measure.

Response: Compliant

2.4.3.11 - For each identified CCP, the food safety team shall identify and document the limits that separate safe from unsafe product (critical limits). The food safety team shall validate all of the critical limits to ensure the level of control of the identified food safety hazard(s) and that all critical limits and control measures individually or in combination effectively provide the level of control required (refer to 2.5.2.1).

Response: Compliant

2.4.3.12 - The food safety team shall develop and document procedures to monitor CCPs to ensure they remain within the established limits (refer to 2.4.3.11). Monitoring procedures shall identify the personnel assigned to conduct monitoring, the sampling and test methods, and the test frequency.

Response: Compliant

2.4.3.13 - The food safety team shall develop and document deviation procedures that identify the disposition of affected product when monitoring indicates a loss of control at a CCP. The procedures shall also prescribe actions to correct the process step to prevent recurrence of the safety failure.

Response: Compliant

2.4.3.14 - The documented and approved food safety plan(s) shall be implemented in full. The effective implementation shall be monitored by the food safety team, and a full review of the documented and implemented plans shall be conducted at least annually, or when changes to the process, equipment, inputs, or other changes affecting product safety occur.

Response: Compliant

2.4.3.15 - Procedures shall be in place to verify that critical control points are effectively monitored and appropriate corrective actions are applied. Implemented food safety plans shall be verified as part of SQF System verification (refer to 2.5).

Response: Compliant

2.4.3.16 - Critical control point monitoring, corrective action, and verification records shall be maintained and appropriately used.

Response: Compliant

2.4.3.17 - Where food safety regulations in the country of production and destination (if known) prescribe a food safety control methodology other than the Codex Alimentarius Commission HACCP guidelines, the food safety team shall implement food safety plans that meet both Codex and food regulatory requirements.

Response: Compliant

Summary -

Response: The site manufactured low moisture apple pieces and ground apple powder (Low Moisture Single Pass and Puff, Low Moisture Single Pass Granules, Low Moisture Rescreen Granulation, and Tanker HACCP). The process steps included receiving and storing apples, fluming, sorting, cleaning, coring, slicing, drying, packaging, and shipping. The Tanker HACCP was used for cores and apple crumb collection and shipment to a sister plant for further processing each of the other plans were for finished product. The Food Safety Team included the Plant Manager, QA Manager, Warehouse Manager, QA Supervisor, and Manufacturing Manager - each Food Safety team member was required to be FDA Preventive Control certified. The QA Manager, Warehouse Manager, and Plant Manager also had separate HACCP Training. The plans were reviewed and signed off on 7/8/2024 (Single Pass) and 7/24/2024 (Granulation). The food safety plan logbook included references to validation studies including a patulin concentration study (1/5/2024) and an Enterococcus facium inactivation study on the dryer (12/13/2019). Each of the risk assessments of the 4 product types included Product Description, Method of Storage, Distribution, Intended Use / Consumer, and Packaging included at the top of the form. Moistures were running around 1.5-3% with water activity around 0.3 and shelf life was 4 years or customer-specified (these details were captured in product specifications). Intended use of the products was for further processing in the bakery, cereal, and snack food industry; ultimately intended for general public. Products did not contain allergens; some products contained sulfites that were called out to vulnerable groups. Verification of the process flow diagram was included as part of the annual review. The site manufactured the same product for two-three days in a row and did not vary between hours of operation or stages between shifts. The annual review was signed by the plant manager and QA Manager as evidence of flow diagram approval. Hazards considered in the Risk Assessment included environmental pathogens (E coli, Salmonella, Listeria, Staph aureus, B Cereus), Chemicals (Sulfites, Pesticides, lubricants, paint), and Physical (Rocks, Wood, Plastic, Metal, Metal Cans, Glass). Methodology for determining hazards was based on listing Likelihood and Severity to determine Risk - risks > 8 required a 6-question tree to determine if the control at any step was a CCP, preventive control, or operational control. CCPs, PCs, and OCs were summarized on forms that identified the Hazard, Parameters/Critical Limits, Monitoring Steps, Corrective Actions, Verification, and Record Keeping. Critical Limits of metal detection were 1.5 mm Fe, 1.5 mm Non-Fe, and 2.0 mm SS. Critical limits for pathogens were oven temperatures >160F for 6 secs (normal process dryer temperatures >180F). Critical limits of Sulfites was proper label declaration for those products containing this ingredient. Critical limits for sanitation on RTE pieces was <10 ru on ATP swabs and negative results on EMP samples in packaging rooms. Monitoring of pre-drying steps was under the responsibility of operations and monitoring post drying/packaging was under the responsibility of QA - SOPs were provided for each process check. Corrective actions were required to be documented by QA for any process deviations requiring corrective action - reviewed foreign material findings during the audit that had been investigated and closed out, as required. No CCP deviations had been recorded. The food safety plan was documented within the requirements of FDA Preventive Controls and met the Codex requirements of the SQF Code.

2.4.4 - Product Sampling, Inspection, and Analysis

2.4.4.1 - The methods, responsibility, and criteria for sampling, inspecting, and/or analyzing raw materials, work-in-progress, and finished product shall be documented and implemented. The methods applied shall ensure

that inspections and analyses are completed at regular intervals as required and to agreed specifications and legal requirements. Sampling and testing shall be representative of the process batch and ensure that process controls are maintained to meet specification and formulation.

Response: Compliant

2.4.4.2 - Product analyses shall be conducted to nationally recognized methods or company requirements, or alternative methods that are validated as equivalent to the nationally recognized methods. Where internal laboratories are used to conduct input, environmental, or product analyses, sampling and testing methods shall be in accordance with the applicable requirements of ISO/IEC 17025, including annual proficiency testing for staff conducting analyses. External laboratories shall be accredited to ISO/IEC 17025, or an equivalent international standard, and included on the site's contract service specifications list (refer to 2.3.2.11).

Response: Compliant

2.4.4.3 - On-site laboratories conducting chemical and microbiological analyses that may pose a risk to product safety shall be located separate from any food processing or handling activity and designed to limit access only to authorized personnel. Signage shall be displayed identifying the laboratory area as a restricted area, accessible only by authorized personnel.

Response: Compliant

2.4.4.4 - Provisions shall be made to isolate and contain all hazardous laboratory waste held on the premises and manage it separately from food waste. Laboratory waste outlets shall at a minimum be downstream of drains that service food processing and handling areas.

Response: Compliant

2.4.4.5 - Retention samples, if required by customers or regulations, shall be stored according to the typical storage conditions for the product and maintained for the stated shelf-life of the product.

Response: Compliant

2.4.4.6 - Records of all inspections and analyses shall be maintained.

Response: Compliant

Summary -

Response: From the corporate audit: A corporate laboratory was used for testing. An ISO/IEC 17025:2017 accreditation certificate was available for the internal laboratory Ceres Analytical accreditation number 93407 expiring 10/31/2025 certificate number L23-497. During the audit, the QA Tech conducting the series of hourly product testing demonstrated her checks. Tests included moisture (process and final packaging), fines (ro-tap), color, defects, and sulfites (seldom). Micro testing for pathogens was completed for finished products based on customer requirements - testing was completed at a corporate 17025 Laboratory. COAs were based on finished product testing results and were made available for each finished product." QA Techs were tested for proficiency through a program with corporate - proficiency tests were required annually and addressed moisture, color, and pH testing - records were provided from corporate for each of the lab techs being tested. An on-site non-micro lab was located away for processing areas by the warehouse supervisor office - this room was used for sample preparation and analytical testing. The lab had a restricted access sign. Waste was able to be removed from the lab without going through open product areas of processing/packaging. The drains in the lab were separated from process drains. Retention samples were collected and stored by QA. Testing/sampling records were maintained by QA.

2.4.5 - Non-conforming Materials and Product

2.4.5.1 - The responsibility and methods outlining how to handle non-conforming product, raw material, ingredient, work-in-progress, or packaging, which is detected during receipt, storage, processing, handling, or delivery, shall be documented and implemented. The methods applied shall ensure i. Non-conforming product is quarantined, identified, handled, and/or disposed of in a manner that minimizes the risk of inadvertent use, improper use, or risk to the integrity of finished product; and ii. All relevant personnel are aware of the organization's quarantine and release requirements applicable to product placed under quarantine status.

Response: Compliant

2.4.5.2 - Quarantine records and records of the handling, corrective action, or disposal of nonconforming materials or product shall be maintained.

Response: Compliant

Summary -

Response: From the corporate audit: The Hold For Nonconforming Product policy 00-POL-02.0002 dated 6/5/2023 describes the controls for non-conforming items. The policy includes the identification and isolation of non-conforming materials as well as requirements for investigating causes. The isolation includes the product identified on hold in the M3 system. Hold categories and hold reasons were established. Q01 holds were for food safety. The Plant QA/Technical Services Manager or Plant Manager could release food safety related holds. The policy also includes disposition options and definitions including release, rework and disposal. Reviewed the electronic Hold Log and compared it to products observed on Hold during the inspection of the warehouse - the Holds on the floor matched to log. Also noted the Hold Log identified the lot number of each pallet and the reason the products were on Hold - this was used by QA to reassign Held products to be re-inspected and/or to be allowed as rework.

2.4.6 - Product Rework

2.4.6.1 - The responsibility and methods outlining how ingredients, packaging, or products are reworked shall be documented and implemented. The methods applied shall ensure: i. Reworking operations are overseen by qualified personnel; ii. Reworked product is clearly identified and traceable; iii. Reworked product is processed in accordance with the site's food safety plan; iv. Each batch of reworked product is inspected or analyzed as required before release; v. Inspections and analyses conform to the requirements outlined in element 2.4.4.1; vi. Release of reworked product conforms to element 2.4.7; and vii. Reworked product does not affect the safety or integrity of the finished product. Records of all reworking operations shall be maintained.

Response: Compliant

Summary -

Response: Rework was allowed and tracked on production logs. Rework was managed by the QA Manager - any product out of quality specification (stems, stickers, moisture) was re-assigned back to specific production lots. Rework used was listed on production records and transferred electronically to the ERP system. Any rework created was given its own H lot number and was able to be tracked to the production lot number it was used in. Rework records were demonstrated as part of the vertical audit - rework was tracked thought he process to ensure accountability.

2.4.7 - Product Release (Mandatory)

2.4.7.1 - The responsibility and methods for releasing products shall be documented and implemented. The methods applied shall ensure the product is released by authorized personnel, and only after all inspections and analyses are successfully completed and documented to verify legislative and other established food safety controls have been met. Records of all product releases shall be maintained.

Response: Compliant

2.4.7.2 - Product release shall include a procedure to confirm that product labels comply with the food legislation that applies in the country of manufacture and the country(ies) of use or sale if known (refer to 2.4.1.1). If product is packaged and distributed in bulk or unlabeled, product information shall be made available to inform customers and/or consumers of the requirements for its safe use.

Response: Compliant

2.4.7.3 - In the event that the site uses positive release based on product pathogen or chemical testing, a procedure shall be in place to ensure that product is not released until acceptable results have been received. In the event that off-site or contract warehouses are used, these requirements shall be effectively communicated and verified as being followed.

Response: Compliant

Summary -

Response: Release was positive and tracked by QA using the software program supported by corporate. The system automated corporate lab testing results - other items that were tracked prior to release included cleaning/pre-op inspections, CCP checks (MD). QA would change the shipping status of the products before it was allowed to be shipped to customers (product was allowed to be shipped to the off-site warehouse pending results of release criteria). From the corporate audit: The Positive Product Release Control Policy 00-POL-02.0003 dated 7/2/2024 describes the general requirements for product release. After production, the product will be in a testing status in the system and not available for shipping. After product testing is completed with passing results the product will be released in M3. Product is placed on hold in the system if not meeting requirements. Quality Management was responsible for reviewing quality and food safety records within 7 days and releasing the product. The Incoming Label Inspection Policy describes verification of the label being used.

2.4.8 - Environmental Monitoring

2.4.8.1 - A risk-based environmental monitoring program shall be in place for all food manufacturing processes and immediate surrounding areas, which impact manufacturing processes. The responsibility and methods for the environmental monitoring program shall be documented and implemented.

Response: Compliant

2.4.8.2 - An environmental sampling and testing schedule shall be prepared. It shall at a minimum: i. Detail the applicable pathogens or indicator organisms to test for in that industry; ii. List the number of samples to be taken and the frequency of sampling; iii. Outline the locations in which samples are to be taken and the rotation of locations as needed; and iv. Describe the methods to handle elevated or undesirable results.

Response: Compliant

2.4.8.3 - Environmental testing results shall be monitored, tracked, and trended, and preventative actions (refer to 2.5.3.1) shall be implemented where unsatisfactory results or trends are observed.

Response: Compliant

Summary -

Response: From the corporate audit: The Environmental Monitoring Program00-POL-02.0045 dated 6/28/2024 describes the EMP program. No Salmonella or Listeria testing was to be performed in zone 1 locations. In general, each site determines the target organisms specific to the site based on risk. The number of samples was based on the size of the facility. 40% of samples taken from zone 2, 40% from zone 3 and at least one sample monthly from a zone 4 location. The policy also included corrective action requirements including vector swabbing. Three consecutive negatives were required to return to the regular sampling plan. Special and adverse situations were also addressed in the policy. QA managed the site's EMP program - twice per month, environmental swabs were sampled and tested - approximately 9 samples (or more) were tested for Salmonella and Listeria sp. CAPA included re-cleaning, re-testing, and vectoring. Reviewed an example of a Listeria sp. suspect reported on 9/13/2024. The testing and corrective actions had been completed and tracked all the way through close-out (3 subsequent negative) on 11/1/2024. A site map was used to track any environmental positives that had occurred the past 4 years -the map was used for ongoing sampling locations and frequency of testing.

2.5.1 - Validation and Effectiveness (Mandatory)

2.5.1.1 - The methods, responsibility, and criteria for ensuring the effectiveness of all applicable elements of the SQF Program shall be documented and implemented. The methods applied shall validate that: i. Good Manufacturing Practices are confirmed to ensure they achieve the required results; ii. Critical food safety limits are reviewed annually and re-validated or justified by regulatory standards when changes occur; and iii. Changes to the processes or procedures are assessed to ensure the controls are still effective. Records of all validation activities shall be maintained.

Response: Compliant

Summary -

Response: From the corporate audit: The Validation Verification and Effectiveness policy 00-POL-01.0034 dated 7/26/2024 describes the validation and verification program. The SQF Practitioner was responsible for validation activities at the plant level. Corporate participates in the validation activities for ensuring critical limits are effective, Monthly validation assessments were completed for each of the GMPs/prerequisite programs as an extension of the internal audit program. The template for validation included the sections of both SQF Module 2 and SQF Module 11 - criteria addressed reviewing complaints associated with each GMP and reviewing for Holds/Deviations that were a result of the failure for each of the programs. Reviewed completed validations for August and October 2024 - each had been signed off by the QA Manager with no open issues.

2.5.2 - Verification Activities (Mandatory)

2.5.2.1 - The methods, responsibility, and criteria for verifying monitoring of Good Manufacturing Practices, critical control points, and other food safety controls, and the legality of certified products shall be documented and implemented. The methods applied shall ensure that personnel with responsibility for verifying monitoring activities authorize each verified record.

Response: Compliant

2.5.2.2 - A verification schedule outlining the verification activities, their frequency of completion, and the person responsible for each activity shall be prepared and implemented. Records of verification of activities shall be

maintained.

Response: Compliant

Summary -

Response: From the corporate audit: The Validation Verification and Effectiveness policy 00-POL-01.0034 dated 7/26/2024 describes the validation and verification program. The SQF Practitioner was responsible for validation activities at the plant level. Corporate participates in the validation activities for ensuring critical limits are effective. A Verification and Validation Schedule was provided that was associated with food safety and processing records and identified What, Who, and Frequency for each of the required Module 11 requirements. QA had primary responsibility of processing and packaging checks from the oven forward and operations had primary responsibility from receiving and prior to the apple pieces being dried. During the audit, production, packaging, sanitation, and packaging records were reviewed and the forms requiring verification were shown being signed off within the 7-day window allowed.

2.5.3 - Corrective and Preventative Action (Mandatory)

2.5.3.1 - The responsibility and methods outlining how corrective and preventative actions are determined, implemented, and verified, including the identification of the root cause and resolution of non-compliance of critical food safety limits and deviations from food safety requirements, shall be documented and implemented. Deviations from food safety requirements may include customer complaints, nonconformances raised at internal or external audits and inspections, non-conforming product and equipment, withdrawals and recalls, as appropriate.

Response: Compliant

2.5.3.2 - Records of all investigation, root cause analysis, and resolution of non-conformities, their corrections, and the implementation of preventative actions shall be maintained.

Response: Compliant

Summary -

Response: From the corporate audit: The Corrective and Preventive Action Program 00-POL-01.0028 dated 11/14/2023 describes the CAPA process. The policy defines when the CAPA process is required to be completed (Risk Priority Number RPN >100 based on severity, occurrence and detection) or other factors. A complete corrective action is not required when the Risk Priority Number (RPN) is less than 100. CAPAs were reviewed and approved by corporate in Intelex. The Corrective and Preventive Action Procedure 00-PRO-01.0009 dated 11/16/2023 provides detailed instructions for completing the CAPA process. The 5 why process was the default methodology for conducting a root cause analysis although other methods could be used. CAPAs were required for repeat complaints and identified process deviations - the corporate program tracked each CAPA was assigned to the team leader and identified the CAPA Team members. The Process required the correction to be documented and approved independently of the Preventive Action. The CAPA log demonstrated that they system was being appropriately used - reviewed an Open CAPA for a recent complaint and several closed/approved CAPA that was demonstrated by the QA Manager during the audit.

2.5.4 - Internal Audits and Inspections (Mandatory)

2.5.4.1 - The methods and responsibility for scheduling and conducting internal audits to verify the effectiveness of the SQF System shall be documented and implemented. Internal audits shall be conducted in full and at least

annually. The methods applied shall ensure: i. All applicable requirements of the SQF Food Safety Code: Food Manufacturing are audited per the SQF audit checklist or a similar tool; ii. Objective evidence is recorded to verify compliance and/or non-compliance; iii. Corrective and preventative actions of deficiencies identified during the internal audits are undertaken; and iv. Audit results are communicated to relevant management personnel and staff responsible for implementing and verifying corrective and preventative actions.

Response: Minor

Evidence: • The Process Inspections for July had two of the four process areas blank, which did not provide evidence the inspections had occurred. The same month had an observation on a dripping valve in the puff room that did not have evidence of completion recorded and during the audit, this valve was still observed dripping.

Root Cause: Inadequate audit/inspection/monitoring and inadequate resources. The first 2 weeks of July were nonproduction weeks for a planned outage and a crisis management outage due to extreme heat. We encourage conducting food safety inspections during operations. The outage pushed food safety inspections to the second half of the July. The end of July started 6 weeks of planned downtime for maintenance work which included a drain replacement and floor work. The drain and floor replacement required water be shut off at the point of entry. The nozzle was initially thought to be the root cause of the drip and was replaced; however, this did not resolve the leak. Water was off in August; however, the drip should have been noted after downtime and corrected. A shortage of resources resulted in incomplete assignments in July, co-management of the FSA program, and failure to ensure assignments were completed and closed out.

Corrective Action: The program manager set up Outlook reminders for managers and supervisors the first 2 weeks of each month. The program manager is reporting on FSA progress and completion in operations review meetings. Additionally, the program manager will review all nonconformities the third week of each month in our daily operations review meeting or a scheduled food safety meeting and ensure corrective actions are completed and verified. This will ensure completion and closeout of nonconforming findings. Managers and supervisors will be held accountable to completing assignments and correcting nonconforming items under their scope of responsibility.

Verification Of Closeout: Correction was demonstrated during the audit in addressing shutting the water supply off to the leaking valve. Preventive action included placing the requirements for completing the inspection on manager's Outlook Calendar and having the Program Manager be responsible for monthly completion reports to site management.

Completion Date: December 12, 2024 **Closeout Date:** December 16, 2024

2.5.4.2 - Staff conducting internal audits shall be trained and competent in internal audit procedures. Where practical, staff conducting internal audits shall be independent of the function being audited.

Response: Compliant

2.5.4.3 - Regular inspections of the site and equipment shall be planned and carried out to verify Good Manufacturing Practices and facility and equipment maintenance are compliant to the SQF Food Safety Code: Food Manufacturing. The site shall: i. Take corrections or corrective and preventative action; and ii. Maintain records of inspections and any corrective actions taken.

Response: Compliant

2.5.4.4 - Records of internal audits and inspections and any corrective and preventative actions taken as a result of internal audits shall be recorded as per 2.5.3.Changes implemented from internal audits that have an impact on the site's ability to deliver safe food shall require a review of applicable aspects of the SQF System (refer to 2.3.1.3).

Response: Compliant

Summary -

Response: The Internal Audit was completed by corporate QA on May 13-24 , 2024 using the SQF Checklist. The audit report included evidence of compliance and non-compliance and was shown to have fully completed Module 2 and the sections of Module 11 that were not audited as part of monthly site inspections. CAPA from the site's IA were uploaded to the site's CRM, which required evidence of root cause and preventive measures per 2.5.3. CAPA from the corporate IA were submitted back on the excel form that corporate management used to report the NC. Management had been trained on SQF Implementation that included Internal Audit training - training certificates were filed in the quality manual. The inspection program included both process inspections and facility/outside inspections. These were recorded on forms that used a checklist to ensure that each area was inspected and that any issues identified were repaired. Inspection reports were requested/reviewed for May, July, and October 2024. Records of audits and inspections were provided upon request. Minor 2.4.5.1: The Process Inspections for July had two of the four process areas blank, which did not provide evidence the inspections had occurred. The same month had an observation on a dripping valve in the puff room that did not have evidence of completion recorded and during the audit, this valve was still observed dripping.

2.6.1 - Product Identification (Mandatory)

2.6.1.1 - The methods and responsibility for identifying raw materials, ingredients, packaging, work-in-progress, process inputs, and finished products during all stages of production and storage shall be documented and implemented to ensure: i. Raw materials, ingredients, packaging, work-in-progress, process inputs, and finished products are clearly identified during all stages of receipt, production, storage, and dispatch; and ii. Finished product is labeled to the customer specification and/or regulatory requirements.

Response: Compliant

2.6.1.2 - Product start-up, product changeover, and packaging changeover (including label changes) procedures shall be documented and implemented to ensure that the correct product is in the correct package and with the correct label and that the changeover is inspected and approved by an authorized person. Procedures shall be implemented to ensure that label use is reconciled, and any inconsistencies investigated and resolved. Product changeover and label reconciliation records shall be maintained.

Response: Compliant

Summary -

Response: From the corporate audit: The Retail Product Coding policy 00-POL-05.0004 dated 4/8/2024 describes how products are coded for identification. A Best By MM/DD/YY format was used as well as a Julian date format defined in the policy. The policy also defines the plant codes for each site. The Product Identification, Trace, Withdrawal and Recall Policy 00-POL-02.041 dated 8/30/2021 describes the methods and responsibilities for these programs. The company uses the vendor lot to trace the raw materials through the facility. A license plate label will be placed on the pallet when received at some plants and used for traceability. Specific methods used to trace the raw materials to production can vary depending on the site. During the audit, ingredients and finished products were labeled as required by the site's procedures. Change-over records showed evidence of line cleaning/inspection, magnet checks and sifter checks to be conducted, and a checklist to be completed (each product's paperwork was its own file). Paperwork for each production run of each product reviewed included the appropriate lot identification. Materials were used by FIFO.

2.6.2 - Product Trace (Mandatory)

2.6.2.1 - The responsibility and methods used to trace product shall be documented and implemented to ensure: i. Finished product is traceable at least one step forward to the customer and at least one step back from the process to the manufacturing supplier; ii. The receipt dates of raw materials, ingredients, food contact packaging and materials, and other inputs are recorded (refer to 2.8.1.8 for traceback of allergen containing food products.); iii. Traceability is maintained where product is reworked (refer to 2.4.6); and iv. The effectiveness of the product trace system is reviewed at least annually, as part of the product recall and withdrawal review (refer to 2.6.3.2). Records of raw and packaging material receipt and use and finished product dispatch and destination shall be maintained.

Response: Compliant

Summary -

Response: From the corporate audit: The Product Identification, Trace, Withdrawal and Recall Policy 00-POL-02.041 dated 8/30/2021 describes the methods and responsibilities for these programs including tracing product. Mock recalls were required to be conducted at least annually to test the traceability and recall program. The requirement was 100% of the product in 4 hours with a goal of 2 hours with consideration for yield loss, waste and shrinkage. A raw material trace was considered effective if 98-102% of the material was traced after yield losses. Lot changes were made at midnight (if running the same product) or at change-over. Many production work orders ran several days - each 24-hour window was a new lot code. The incoming apples were aligned with the production/packaging to ensure the full trace was accounted for. Trace conducted during the audit was for product 200183. Production date was 7/25/2024. Management provided electronic evidence of how much product was manufactured, shipped, and remaining in inventory. The accounting was listed as 100% effective. The site provided records from their last Trace / Mock Recall on product lot code xxx5498. At the time of the trace, the Mock Report showed they had shipped 360 units of 2160 manufactured. The site was able to demonstrate the remaining shipping (1800 units on two additional shipping dates) to account for 100% shipping against manufacturing.

2.6.3 - Product Withdrawal and Recall (Mandatory)

2.6.3.1 - The responsibility and methods used to withdraw or recall product shall be documented and implemented. The procedure shall: i. Identify those responsible for initiating, managing, and investigating a product withdrawal or recall; ii. Describe the management procedures to be implemented, including sources of legal, regulatory, and expert advice, and essential traceability information; iii. Outline a communication plan to inform site personnel, customers, consumers, authorities, and other essential bodies in a timely manner appropriate about the nature of the incident; and iv. Ensure that SQFI, the certification body, and the appropriate regulatory authority are listed as essential organizations and notified in instances of a food safety incident of a public nature or product recall for any reason.

Response: Compliant

2.6.3.2 - The product withdrawal and recall system shall be reviewed, tested, and verified as effective at least annually. Testing shall include incoming materials (minimum traceability one step back) and finished product (minimum traceability one step forward). Testing shall be carried out on products from different shifts and for materials (including bulk materials) that are used across a range of products and/or products that are shipped to a wide range of customers.

Response: Compliant

2.6.3.3 - Records shall be maintained of withdrawal and recall tests, root cause investigations into actual withdrawals and recalls, and corrective and preventative actions applied.

Response: Compliant

2.6.3.4 - SQFI and the certification body shall be notified in writing within twenty-four (24) hours upon identification of a food safety event that requires public notification. SQFI shall be notified at foodsafetycrisis@sqfi.com.

Response: Compliant

Summary -

Response: From the corporate audit: The Product Identification, Trace, Withdrawal and Recall Policy 00-POL-02.041 dated 8/30/2021 describes the methods and responsibilities for recalling product. The Product Withdrawal and Recall Procedure 00-PRO-02.0004 dated 2/3/2022 describes the recall process and identifies a team and responsibilities including corporate and plant level responsibilities. A recall decision tree diagram was also included in the procedure. A Recall Team was established with corporate and plant positions. Recall team responsibilities were documented. A Product Withdrawal and Recall Checklist form 00-FRM-02.0034 dated 12/28/2022 was available to use to ensure each step of the recall process is followed. The checklist is also used for mock recalls. A Product Withdrawal and Recall Contact List 00-FRM-02.0033 dated 1/22/2024 was available. The list included internal and external contacts including SQFI and the certification body. The company reported to have not had any actual recalls. On 11/1/2024, a mock event of a customer complaint (Salmonella) was requested. The goal of the trace was 100% accounting within 4 hours. The trace 1 hour 47 minutes and was able to go to units produced (2048 units), the amount shipped was 360 units, the amount in inventory was 1680 units, and the amount on Hold (for rework) was 120 units against a total of 2160 manufactured. The Mock recall documentation included records to support the summary sheet. Mock Recalls were conducted with each trace exercise conducted. The site's Recall Program included a statement to notify the CB and SQFI in the event of a recall. Records of mocks were maintained. The site has not had a recall in the past.

2.6.4 - Crisis Management Planning

2.6.4.1 - A crisis management plan based on the understanding of known potential dangers (e.g., flood, drought, fire, tsunami, or other severe weather events, warfare or civil unrest, computer outage, pandemic, loss of electricity or refrigeration, ammonia leak, labor strike) that can impact the site's ability to deliver safe food shall be documented by senior management, outlining the methods and responsibility the site shall implement to cope with such a business crisis. The crisis management plan shall include at a minimum: i. A senior manager responsible for decision making, oversight, and initiating actions arising from a crisis management incident; ii. The nomination and training of a crisis management team; iii. The controls implemented to ensure any responses do not compromise product safety; iv. The measures to isolate and identify product affected by a response to a crisis; v. The measures taken to verify the acceptability of food prior to release; vi. The preparation and maintenance of a current crisis alert contact list, including supply chain customers; vii. Sources of legal and expert advice; and viii. The responsibility for internal communications and communicating with authorities, external organizations, and media.

Response: Compliant

2.6.4.2 - The crisis management plan shall be reviewed, tested, and verified at least annually with gaps and appropriate corrective actions documented. Records of reviews of the crisis management plan shall be maintained.

Response: Compliant

Summary -

Response: From the corporate audit: The Crisis Management Guide 00-CMM-02.1 dated 3/20/2024 provides guidance for a crisis situation including referencing other policies that could be used to help manage a crisis

situation. The plan covered labor issues, bomb threats work place accidents and other crisis related to people. A separate Business Continuity Plan dated 6/1/2021 was in place describing how the company manages weather events and other crisis situations and includes a crisis team. The plan included a corporate team and local crisis leaders. The Crisis Communications Policy 00-POL-11.10 dated 11/5/2021 describes responsibilities for communications during a crisis including media and customers. A Preparis Emergency Notification System was established for communication during a crisis. The system was also used for crisis training. A Mock Crisis was conducted against extreme heat on 7/8/24-7/12/2024 - the test started on 7/8 at 9:30 am with the intent of setting a guide for when air temperatures became too hot to manufacture. The test addressed the site's ability to shift scheduling, alternate storage, and back-up processing ability. The test had been reviewed and signed by senior management.

2.7.1 - Food Defense Plan (Mandatory)

2.7.1.1 - A food defense threat assessment shall be conducted to identify potential threats that can be caused by a deliberate act of sabotage or terrorist-like incident.

Response: Compliant

2.7.1.2 - A food defense plan shall be documented, implemented, and maintained based on the threat assessment (refer to 2.7.1.1). The food defense plan shall meet legislative requirements as applicable and shall include at a minimum: i. The methods, responsibility, and criteria for preventing food adulteration caused by a deliberate act of sabotage or terrorist-like incident; ii. The name of the senior site management person responsible for food defense; iii. The methods implemented to ensure only authorized personnel have access to production equipment and vehicles, manufacturing, and storage areas through designated access points; iv. The methods implemented to protect sensitive processing points from intentional adulteration; v. The measures taken to ensure the secure receipt and storage of raw materials, ingredients, packaging, equipment, and hazardous chemicals to protect them from deliberate acts of sabotage or terrorist-like incidents; vi. The measures implemented to ensure raw materials, ingredients, packaging (including labels), work-in-progress, process inputs, and finished products are held under secure storage and transportation conditions; and vii. The methods implemented to record and control access to the premises by site personnel, contractors, and visitors.

Response: Compliant

2.7.1.3 - Instruction shall be provided to all relevant staff on the effective implementation of the food defense plan (refer to 2.9.2.1).

Response: Compliant

2.7.1.4 - The food defense threat assessment and prevention plan shall be reviewed and tested at least annually or when the threat level, as defined in the threat assessment, changes. Records of reviews and tests of the food defense plan shall be maintained.

Response: Compliant

Summary -

Response: From the corporate audit: The Food Defense Policy 00-POL-02.0044 dated 1/10/2024 describes the food defense program. The policy sets guidelines for visitors and contractors and established responsibilities. Corporate sets up systems for employee key card access. Registration with FDA is managed at the corporate level. FDA registration records were maintained in Intelex with the registration number redacted. The Quality Compliance Summary document describes that all sites are registered bi-annually. The registration documents and numbers are considered confidential and are not shared. The Food Defense Procedure (7/26/2024)

identified roles and responsibilities that included the Plant Manager, HR Manager, QA Manager, Warehouse Manager, Maintenance Manager, and Manufacturing Manager. The focus of the plan was to identify/secure sensitive areas, secure access doors, maintain a Visitor and Temporary policy, conduct new hire employee background checks, conduct random drug screenings, monitor the process with strategically-placed security cameras, detailed inspections of apples at receipt, seals on inbound ingredients and outbound shipments, and maintain an emergency contact list. The Food Defense Team members provided certification on Food Defense Awareness (FSPCA) and Food Defense Coordinator. A Food Security Vulnerability Assessment had been reviewed/updated 5/24/2024. A risk rating was provided to each area and process to identify weakness - this vulnerability assessment was based on FDA Food Security Guidance documents that provided ratings of Ideal, Fair, and Weakness. The Defense Plan was fully reviewed 3/18/24-3/19/2024 by the Food Defense Coordinator. The Plan was tested on 6/14/2024 by a new corporate employee challenging access to the different areas of the facility. The entire test was summarized and a single weakness that had been identified had been fully corrected, including additional supervisor training for visitor log-in.

2.7.2 - Food Fraud (Mandatory)

2.7.2.1 - The methods, responsibility, and criteria for identifying the site's vulnerability to food fraud, including susceptibility to raw material or ingredient substitution, finished product mislabeling, dilution, or counterfeiting, shall be documented, implemented, and maintained.

Response: Compliant

2.7.2.2 - A food fraud mitigation plan shall be developed and implemented that specifies the methods by which the identified food fraud vulnerabilities shall be controlled, including identified food safety vulnerabilities of ingredients and materials.

Response: Compliant

2.7.2.3 - Instruction shall be provided to all relevant staff on the effective implementation of the food fraud mitigation plan (refer to 2.9.2.1).

Response: Compliant

2.7.2.4 - The food fraud vulnerability assessment and mitigation plan shall be reviewed and verified at least annually with gaps and corrective actions documented. Records of reviews shall be maintained.

Response: Compliant

Summary -

Response: From the corporate audit: The company has documented a Control of Food Fraud Policy 00-POL-02.0040 dated 5/25/2021 describing the methods and responsibilities for preventing food fraud. Corporate was responsible for the program. A food fraud report was uploaded by corporate into Intelex quarterly. A Decernis website was used for running food fraud reports. Each plant is responsible for reviewing the reports and conducting a vulnerability assessment to determine the food fraud risks for the plant and mitigation steps, if any. Plant employees were responsible for inspecting materials upon receipt and reporting unusual findings. The most recent food fraud report was completed 8/5/2024. The Food Fraud Assessment (VACCP) for the Wenatchee facility (11/10/2024) was supported by corporate. The risk assessment included severity and frequency to determine risk. The file was an excel spreadsheet with each ingredient being assessed on a different sheet. Criteria for fraud were listed as dilution, substitution, concealment, mislabeling, unapproved enhancements, counterfeiting, and grey market - justification was provided for each category based on site history and industry publications. Corporate maintained a subscription to Decrernis for current

information. Food Fraud was included in new hire and annual refresher training for each employee. No Food Fraud incidents had been reported that directly impacted the site.

2.8.1 - Allergen Management (Mandatory)

2.8.1.1 - The responsibility and methods used to control allergens and to prevent sources of allergens from contaminating product shall be documented and implemented. The allergen management program shall include: i. A risk analysis of those raw materials, ingredients, and processing aids, including food grade lubricants, that contain food allergens; ii. An assessment of workplace-related food allergens that may originate from locker rooms, vending machines, lunchrooms, and visitors; iii. A list of allergens that is applicable in the country of manufacture and the country(ies) of destination, if known; iv. A list of allergens that is accessible to relevant staff; v. The control of hazards associated with allergens and incorporated into the food safety plan; and vi. Management plans for control of the identified allergens.

Response: Compliant

2.8.1.2 - Instructions shall be provided to all relevant staff involved in the receipt or handling of raw materials, work-in-progress, rework, or finished product on how to identify, handle, store, and segregate raw materials and products containing allergens.

Response: Compliant

2.8.1.3 - Provisions shall be made to clearly identify and segregate foods that contain allergens. Segregation procedures shall be implemented and continually monitored.

Response: Compliant

2.8.1.4 - Where allergenic material may be intentionally or unintentionally present cleaning and sanitation of product contact surfaces between line changeovers shall be effective, appropriate to the risk and legal requirements, and sufficient to remove all potential target allergens from product contact surfaces, including aerosols as appropriate, to prevent cross-contact. Separate handling and production equipment shall be provided, where satisfactory line hygiene and clean-up or segregation are not possible.

Response: Compliant

2.8.1.5 - Based on risk assessment, procedures for validation and verification of the effectiveness of the cleaning and sanitation of areas and equipment in which allergens are used shall be documented and effectively implemented.

Response: Compliant

2.8.1.6 - Where allergenic material may be present, product changeover procedures shall be documented and implemented to eliminate the risk of cross-contact.

Response: Compliant

2.8.1.7 - The product identification system (refer to 2.6.1.1) shall make provision for clear identification and labeling, in accordance with the regulatory requirements of those products produced on production lines and equipment on which foods containing allergens are manufactured.

Response: Compliant

2.8.1.8 - The product trace system (refer to 2.6.2) shall take into consideration the conditions under which allergen-containing foods are manufactured and ensure full traceback of all ingredients and processing aids used.

Response: Compliant

2.8.1.9 - The site shall document and implement methods to control the accuracy of finished product labels (or consumer information where applicable) and assure work-in progress and finished product are true to label with regard to allergens. Measures may include label approvals at receipt, label reconciliations during production, destruction of obsolete labels, verification of labels on finished product as appropriate, and product change over procedures.

Response: Compliant

2.8.1.10 - Re-working of product (refer to 2.4.6) containing food allergens shall be conducted under conditions that ensure product safety and integrity are maintained. Re-worked product containing allergens shall be clearly identified and traceable.

Response: Compliant

2.8.1.11 - Sites that do not handle allergenic materials or produce allergenic products shall document, implement and maintain an allergen management program addressing at a minimum the mitigation of introduced or unintended allergens through supplier, contract manufacturer, site personnel, and visitor activities.

Response: Compliant

Summary -

Response: From the corporate audit: The Allergen Control Policy 00-POL-02.0006 dated 8/19/2024 describes the allergen control requirements. The policy describes general controls and references allergen programs for the sites. Each site would have a site-specific allergen control program. At the time of the desk audit, two plants had products with allergens. Corporate maintains the overall expectations for allergen controls. Corporate assesses ingredients for allergens and the plant can obtain ingredient allergen information in Intelex. The Woodburn and Selah plants were the only plants with controlled allergens at the time of the desk audit. The Allergen Control Program (03-FSM-02.0031) included a statement that the facility did not handle any US regulated allergens; however, since they used sulfites on a limited number of products and exported to Canada, the facility chose to manage sulfites as an allergen. Responsibilities for allergen control were listed and included the SQF Practitioner responsibility to conduct Allergen Awareness training, the Warehouse Manager's responsibility for assuring sodium sulfite was received and stored in compliance with the program (labeled/separated), and the Operations Manager's responsibility for ensuring sulfite-containing products were run last in the production cycle prior to weekly clean-up. Employee and visitor GMPs were trained annually. Employee risk assessment did not allow snacks with loose nuts in the break room. Rework of product is only “like into like". Production scheduling was used to ensure sulfites and organic products were not cross-contaminated. Following the processing of a sulfite product, the weekly full wet sanitation was to remove cross-contamination risks. Pre-op Inspections had questions on sulfite that showed the sulfite applicator lines had been disconnected, that there was no visible presence, and that the process water had been checked for sulfites. Additionally, finished product checks were also made for sulfite based on customer requirements.

2.9.1 - Training Requirements

2.9.1.1 - The responsibility for establishing and implementing the training needs of the organization’s personnel to ensure they have the required competencies to carry out those functions affecting products, legality, and safety shall be defined and documented (refer to 2.1.1.6).

Response: Compliant

2.9.1.2 - Appropriate training shall be provided for personnel carrying out the tasks essential to the effective implementation of the SQF System and the maintenance of food safety and regulatory requirements.

Response: Compliant

Summary -

Response: From the corporate audit: All sites use Alchemy for training. Corporate determines the training modules to be completed. The Employee Education and Training Program 00-POL-01.0038 dated 6/28/2024 describes the training program and responsibilities. There can be some specific topics covered outside of Alchemy or have training modules added into Alchemy. The site used Alchemy for the most of the food safety training - they used the August shutdown to refresh training for the entire group. The implementation of the training program was under the responsibility of the HR Manager. The QA Manager and QA Supervisor conducted the Food Safety training and the Operations Manager and department supervisors conducted process training. New Hires were required to be signed off on each of the re-fresher training requirements during orientation - this included a combination of human safety and food safety criteria. Alchemy was used to track completion of each assigned event that identified the result of the knowledge exam to determine if each employee was competent to each section.

2.9.2 - Training Program (Mandatory)

2.9.2.1 - A training program shall be documented and implemented that at a minimum outlines the necessary competencies for specific duties and the training methods to be applied to personnel carrying out tasks associated with: i. Implementing HACCP for staff involved in developing and maintaining food safety plans; ii. Monitoring and corrective action procedures for all staff engaged in monitoring critical control points (CCPs); iii. Personal hygiene for all staff involved in the handling of food products and food contact surfaces; iv. Good Manufacturing Practices and work instructions for all staff engaged in food handling, food processing, and equipment; v. Sampling and test methods for all staff involved in sampling and testing of raw materials, packaging, work-in-progress, and finished products; vi. Environmental monitoring for relevant staff; vii. Allergen management, food defense, and food fraud for all relevant staff; and viii. Tasks identified as critical to meeting the effective implementation and maintenance of the SQF code. The training program shall include provisions for identifying and implementing the refresher training needs of the organization.

Response: Compliant

2.9.2.2 - Training materials, the delivery of training, and procedures on all tasks critical to meeting regulatory compliance and the maintenance of food safety shall be provided in language(s) understood by staff.

Response: Compliant

2.9.2.3 - Training records shall be maintained and include: i. Participant name; ii. Skills description; iii. Description of the training provided; iv. Date training completed; v. Trainer or training provider; and vi. Verification that the trainee is competent to complete the required tasks.

Response: Compliant

Summary -

Response: The August training was tracked on an excel spreadsheet by HR - much of the Annual Alchemy records showed completion on 8/21/2024 and 8/22/2024. Site specific training courses in Food Defense Food Fraud, Allergen Awareness / Identity Preserved, GMP, and Food Safety - these programs were uploaded into the Alchemy System (including site-specific questions) and provided at the same time. QA maintained a

Qualification Checklist for each employee in each department - as an example, QA techs were checked against metal detection checks, label checks, and pre-op inspections for their packaging responsibilities. As an example, a recent employee that was signed off as a QA tech (Nov 2024) also had records on file that she had earlier been signed off as a Dryer Operator (Sept-Oct 2024). Sign off sheet checklists were 5-6 page documents. New hire training records were tracked in Alchemy - day 1 for employees were spent going through Alchemy Videos, Quizzes, and HR Orientation - typical Day 1 was 6-8 hours. Training was supported both in Spanish and English. The Alchemy system captured the trainees name, date, training description, and score for the completed training.

11.1.1 - Premises Location and Approval

11.1.1.1 - The site shall assess local activities and the site environment to identify any risks that may have an adverse impact on product safety and implement controls for any identified risks. The assessment shall be reviewed in response to any changes in the local environment or activities. The construction and ongoing operation of the premises on the site shall be approved by the relevant authority.

Response: Compliant

Summary -

Response: The facility was located in an industrial area of Wenatchee, WA surrounded by a rail line and other industrial businesses. There were no operations located next to the company that interfered with the production of safe food. Monthly inspection included the outside as its own area to help ensure the site maintained a suitable external environment. There was a Food Processing Plant License from Washington State posted at the employee communication board; the site was registered with the FDA under the bio-terrorism regulation.

11.1.2 - Building Materials

11.1.2.1 - Floors shall be constructed of smooth, dense, impact-resistant material that can be effectively graded, drained, impervious to liquid, and easily cleaned. Floors shall be sloped to floor drains at gradients suitable to allow the effective removal of all overflow or wastewater under normal working conditions. Where floor drainage is not available, plumbed options to handle overflow or wastewater shall be in place.

Response: Compliant

11.1.2.2 - Drains shall be constructed and located so they can be easily cleaned and not present a hazard.

Response: Compliant

11.1.2.3 - Waste trap system shall be located away from any food handling areas or entrances to the premises.

Response: Compliant

11.1.2.4 - Walls, partitions, ceilings, and doors shall be of durable construction. Internal surfaces shall have an even and regular surface and be impervious with a light-colored finish and shall be kept clean (refer to 11.2.5). Wall-to-wall and wall-to-floor junctions shall be designed to be easily cleaned and sealed to prevent the accumulation of food debris.

Response: Compliant

11.1.2.5 - Ducting, conduit, and pipes that convey ingredients, products, or services, such as steam or water, shall be designed and constructed to prevent the contamination of food, ingredients, and food contact surfaces and

allow ease of cleaning. A risk analysis shall be conducted to ensure food contamination risks are mitigated.

Response: Compliant

11.1.2.6 - Pipes carrying sanitary waste or wastewater that are located directly over product lines or storage areas shall be designed and constructed to prevent the contamination of food, materials, ingredients, and food contact surfaces and shall allow ease of cleaning. A risk analysis shall be conducted to ensure food contamination risks are mitigated.

Response: Compliant

11.1.2.7 - Doors, hatches, and windows and their frames in food processing, handling, or storage areas shall be of a material and construction that meets the same functional requirements as for internal walls and partitions. Doors and hatches shall be of solid construction, and windows shall be made of shatterproof glass or similar material.

Response: Compliant

11.1.2.8 - Product shall be processed and handled in areas that are fitted with a ceiling or other acceptable structure that is constructed and maintained to prevent the contamination of products. Drop ceilings, where present, shall be constructed to enable monitoring for pest activity, facilitate cleaning, and provide access to utilities.

Response: Compliant

11.1.2.9 - Stairs, catwalks, and platforms in food processing and handling areas shall be designed and constructed so they do not present a product-contamination risk and with no open grates directly above exposed food product surfaces. They shall be kept clean (refer to 11.2.5).

Response: Compliant

Summary -

Response: Concrete floors (with epoxy coating in wet-process areas) were observed properly constructed and maintained. Stainless steel drains were in place in the process areas. Floors contained adequate slope to prevent water pooling. During the walkthrough inspection, drainage appeared adequate and did not present a hazard. Wastewater was collected, separated, and pumped into a lagoon. Solids were removed for composting and land application. Walls, ceilings, and doors were properly designed for food manufacturing (FRP, ISP, or stainless steel covered) and maintained for cleaning and maintenance. Floors to wall to ceiling junctions were properly constructed and designed to allow for proper cleaning. Ducting and overheads were installed so as to allow for appropriate cleaning. Doors and windows were designed and maintained as not to pose a food safety hazard to processes or products. Stairs and platforms in processing areas were properly constructed and maintained so as not to pose a food safety risk - no items or open processing areas were observed below these areas. Platforms and steps were designed with kick-plates to keep debris from falling over the edge.

11.1.3 - Lightings and Light Fittings

11.1.3.1 - Lighting in food processing and handling areas and at inspection stations shall be of appropriate intensity to enable the staff to carry out their tasks efficiently and effectively and shall comply with local light-intensity regulations or industry standards.

Response: Compliant

11.1.3.2 - Light fixtures in processing areas, inspection stations, ingredient and packaging storage areas, and all areas where the product is exposed shall be shatterproof, manufactured with a shatterproof covering or fitted with

protective covers, and recessed into or fitted flush with the ceiling. Where fixtures cannot be recessed, structures must be protected from accidental breakage, manufactured from cleanable materials, and addressed in the cleaning and sanitation program.

Response: Compliant

11.1.3.3 - Light fixtures in the warehouse or other areas where product is covered or otherwise protected shall be designed to prevent breakage and product contamination.

Response: Compliant

Summary -

Response: Lighting throughout the facility had been updated to new shatterproof LED fixtures throughout the production and storage rooms. Light intensity was appropriate for the processing/storage/cleaning activities being conducted. The warehouse lighting was the same design and were properly protected.

11.1.4 - Inspection/ Quality Control Area

11.1.4.1 - If online inspection is required, a suitable area close to the processing line shall be provided for the inspection of product (refer to 2.4.4). The inspection/quality control area shall be provided with facilities that are suitable for examination and testing of the type of product being handled/processed. The inspection area shall: i. Have easy access to handwashing facilities; ii. Have appropriate waste handling and removal; and iii. Be kept clean to prevent product contamination.

Response: N/A

Evidence: • Online inspection was not required.

Summary -

Response: Online inspection was not required.

11.1.5 - Dust, Insect, and Pest Proofing

11.1.5.1 - All external windows, ventilation openings, doors, and other openings shall be effectively sealed when closed, and proofed against dust, vermin, and other pests. External personnel access doors shall be effectively insect-proofed and fitted with a self-closing device and proper seals to protect against entry of dust, vermin, and other pests.

Response: Compliant

11.1.5.2 - External doors, including overhead dock doors in food handling areas used for product, pedestrian, or truck access, shall be designed and maintained to prevent pest ingress by at least one or a combination of the following methods: i. A self-closing device; ii. An effective air curtain; iii. A pest-proof screen; iv. A pest-proof annex; and v. Adequate sealing around trucks in docking areas.

Response: Compliant

11.1.5.3 - Electric insect control devices, pheromone, or other traps and baits shall be located and operated so they do not present a contamination risk to the product, packaging, containers, or processing equipment. Poison rodenticide bait shall not be used inside ingredients or product storage areas or processing areas where ingredients, packaging, and products are handled, processed, or exposed.

Response: Compliant

Summary -

Response: Windows were properly sealed; personnel doors were self-closing and properly sealed when shut. Overhead exterior doors were designed and installed to prevent unwanted pest or dust entry. High speed roll-up doors were used in loading and unloading areas and were further protected with an overhead roof. Air curtains and ILTs (Mar-Oct) were positioned at each door. ILTs were positioned away from any product storage or processing areas.

11.1.6 - Ventilation

11.1.6.1 - Adequate ventilation shall be provided in enclosed processing and food handling areas. Where appropriate, positive air-pressure systems shall be installed to prevent airborne contamination.

Response: Compliant

Evidence: • The facility was ventilated and designed to provide appropriate amounts of screened air to the drying ovens - this also allowed slightly positive air pressure to the packaging room that prevented air and dust from being collecting in this area. Packaging areas were climate controlled. Ovens were properly ventilated to prevent steam or condensation build-up. No issues were observed with improper ventilation. Dust collectors were used on packaging lines - the dust was removed to an outside collection bin that was emptied/cleaned weekly. Extractors over ovens were adequate to prevent condensation or exhaust build-up. Openings on the outs side of the building were screened to prevent pest infestation and were clean and in good condition.

11.1.6.2 - All ventilation equipment and devices in product storage and handling areas shall be adequately cleaned as per 11.2.5 to prevent unsanitary conditions.

Response: Compliant

11.1.6.3 - Extractor fans and canopies shall be provided in areas where open cooking operations are carried out or a large amount of steam is generated. Capture velocities shall be sufficient to prevent condensation build-up and to evacuate all heat, fumes, and other aerosols to the exterior via an exhaust hood positioned over the cooker(s).

Response: Compliant

11.1.6.4 - Fans and exhaust vents shall be insect-proofed and located so they do not pose a contamination risk and shall be kept clean.

Response: Compliant

Summary -

Response: The facility was ventilated and designed to provide appropriate amounts of screened air to the drying ovens - this also allowed slightly positive air pressure to the packaging room that prevented air and dust from being collecting in this area. Packaging areas were climate controlled. Ovens were properly ventilated to prevent steam or condensation build-up. No issues were observed with improper ventilation. Dust collectors were used on packaging lines - the dust was removed to an outside collection bin that was emptied/cleaned weekly. Extractors over ovens were adequate to prevent condensation or exhaust build-up. Openings on the outs side of the building were screened to prevent pest infestation and were clean and in good condition.

11.1.7 - Equipment and Utensils

11.1.7.1 - Specifications for equipment and utensils and procedures for purchasing equipment shall be documented and implemented.

Response: Compliant

11.1.7.2 - Equipment and utensils shall be designed, constructed, installed, operated, and maintained to meet any applicable regulatory requirements and to not pose a contamination threat to products.

Response: Compliant

11.1.7.3 - Equipment storage rooms shall be designed and constructed to allow for the hygienic and efficient storage of equipment and containers. Where possible, food contact equipment shall be segregated from non-food contact equipment.

Response: Compliant

11.1.7.4 - Product contact surfaces and those surfaces not in direct contact with food in food handling areas, raw material storage, packaging storage, and cold storage areas shall be constructed of materials that will not contribute to a food safety risk.

Response: Compliant

11.1.7.5 - Benches, tables, conveyors, mixers, mincers, graders, and other mechanical processing equipment shall be hygienically designed and located for appropriate cleaning. Equipment surfaces shall be smooth, impervious, and free from cracks or crevices.

Response: Compliant

11.1.7.6 - Product containers, tubs, and bins used for edible and inedible material shall be constructed of materials that are non-toxic, smooth, impervious, and readily cleaned as per 11.2.5.1. Bins used for inedible material shall be clearly identified.

Response: Compliant

11.1.7.7 - All equipment and utensils shall be cleaned after use (refer to 11.2.5.1) or at a set and validated frequency to control contamination and be stored in a clean and serviceable condition to prevent microbiological or cross-contact allergen contamination.

Response: Compliant

11.1.7.8 - Vehicles used in food contact, handling, or processing zones or cold storage rooms shall be designed and operated so as not to present a food safety hazard.

Response: Compliant

11.1.7.9 - Non-conforming equipment shall be identified, tagged, and/or segregated for repair or disposed of in a manner that minimizes the risk of inadvertent use, improper use, or risk to the integrity of finished product. Records of the handling, corrective action, and/or disposal of non-conforming equipment shall be maintained.

Response: Compliant

Summary -

Response: Equipment was designed and installed for commercial apple processing (flexible conveyors, stainless steel tanks, stainless coring- dewatering- peeling- slicing systems, stainless dryer beds, and UHMW bucket elevators. The storage areas were clean and in good condition - equipment was kept covered while stored and recleaned prior to processing. Product contact surfaces were appropriate and did not pose an

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observed threat to food safety. Benches, tables, utensils, and cutters were hygienically designed and stored clean and in good condition. Tubs being used for storage were lined. Color codes were used to separate food grade materials and waste materials. The site did daily surface clean and took the lines down every 5-14 days for a full clean, Sulfites (considered an allergen) were ran at the end of each production cycle. Apples were shelf stable through processing and drying and not at a high risk of microbiological growth or cross-contamination. Fork trucks used in the process were high efficiency LP and did not present an observed risk of contamination. Maintenance was responsible for locking out equipment that was considered not safe or a risk to processing - work orders were required to be documented for any non-scheduled equipment repair.

11.1.8 - Grounds and Roadways

11.1.8.1 - A suitable external environment shall be established, and the effectiveness of the measures shall be monitored and periodically reviewed. The premises, its surrounding areas, storage facilities, machinery, and equipment shall be kept free of waste or accumulated debris, and vegetation shall be controlled so as not to attract pests and vermin or present a food safety hazard to the sanitary operation of the site.

Response: Compliant

11.1.8.2 - Paths, roadways, and loading and unloading areas shall be maintained so as not to present a hazard to the food safety operations of the premises. They shall be adequately drained to prevent the pooling of water. Drains shall be separate from the site drainage system and regularly cleared of debris.

Response: Compliant

11.1.8.3 - Paths from amenities leading to site entrances shall be effectively sealed.

Response: Compliant

Summary -

Response: The exterior of the facility was surrounded by a rail line in the front and provided a paved parking lot for receiving and unloading apple crates. These areas were included in the monthly inspection and observed clean and in good condition during the audit. The outside areas were sloped away from the buildings to prevent ponding of water. The employees' parking area was rock surfaced; sidewalks leading to the entrance were paved.

11.2.1 - Repairs and Maintenance

11.2.1.1 - The methods and responsibility for the maintenance and repair of plant, equipment, and buildings shall be documented, planned, and implemented in a manner that minimizes the risk of product, packaging, or equipment contamination.

Response: Compliant

11.2.1.2 - Routine maintenance of plant and equipment in any food processing, handling, or storage areas shall be performed according to a maintenance control schedule and recorded. The maintenance schedule shall be prepared to include buildings, equipment, and other areas of the premises critical to the maintenance of product safety.

Response: Compliant

11.2.1.3 - Failures of plant and equipment in any food processing, handling, or storage areas shall be documented and reviewed, and their repair(s) incorporated into the maintenance control schedule.

Response: Compliant

11.2.1.4 - Site supervisors shall be notified when maintenance or repairs are to be undertaken in any processing, handling, or storage areas.

Response: Compliant

11.2.1.5 - The maintenance supervisor and the site supervisor shall be informed if any repairs or maintenance activities pose a potential threat to product safety (e.g., pieces of electrical wire, damaged light fittings, and loose overhead fittings). When possible, maintenance is to be conducted outside operating times.

Response: Compliant

11.2.1.6 - Temporary repairs, where required, shall not pose a food safety risk and shall be included in routine inspections (refer to 2.5.4.3) and the cleaning program. There shall be a plan in place to address the completion of temporary repairs to ensure they do not become permanent solutions.

Response: Compliant

11.2.1.7 - Food contact equipment and equipment located over food contact equipment shall be lubricated with food-grade lubricant, and its use shall be controlled to minimize the contamination of the product.

Response: Compliant

11.2.1.8 - Paint used in a food handling or processing area shall be suitable for use, in good condition, and not be used on any product contact surfaces.

Response: Compliant

Summary -

Response: The Maintenance Manager had an electronic PM program that identified each piece of equipment and the preventive maintenance requirements and frequencies. The Manager pulled from the software any weekly/monthly/quarterly tasks that needed completion. Techs were responsible for completing their regular daily tasks and additional tasks from the communication board in the shop. Completed PMs and Unscheduled Work Orders were tracked on the Maintenance Report (this was an ongoing log of Maintenance activity). The Maintenance Report included a checklist for if a task required a Work Order and if the work required QA/Operations inspections after completion. Reviewed completed Maintenance Reports and verified completion of tasks that required inspections to the Maintenance Department Equipment Release Form that was managed and collected by QA. Inspections for the work orders completed 5/20/2024 and 10/8/2024. The program appeared fully implemented based on completed and verified records. When the equipment was damaged to the point the line had to be shut down, that part of the line or the whole line would be shut down for repair - temporary repairs were not allowed in product areas. When Equipment Inspection Forms were required, the form had to be signed off by operations and sanitation. Repairs in open product areas required a detailed inspection and sanitation - most repairs in product zone were scheduled at downtime so the line can go through full sanitation after repair. The Maintenance Manager had a responsibility for determining if inspections/cleanings were required based on the type of repair being performed. Temporary repairs could be allowed with a work order and with the approval of the Operations Manager or Maintenance Manger - temporary repairs were not common and were not observed during the audit. Food contact and non-contact lubricants were stored and maintained in labelled cabinets and on a maintenance lubrication cart. Paint was not used on product contact surfaces. Painted surfaces on the outsides of equipment were monitored by maintenance as part of PM inspections.

11.2.2 - Maintenance Staff and Contractors

11.2.2.1 - Maintenance staff and contractors shall comply with the site's personnel and process hygiene requirements (refer to 11.3).

Response: Compliant

11.2.2.2 - All maintenance and other engineering contractors required to work on-site shall be trained in the site's food safety and hygiene procedures or shall be escorted at all times until their work is completed.

Response: Compliant

11.2.2.3 - Maintenance staff and contractors shall remove all tools and debris from any maintenance activity once it has been completed, and inform the area supervisor and maintenance supervisor, so appropriate hygiene and sanitation can be conducted and a pre-operational inspection completed prior to the restarting of site operations.

Response: Compliant

Summary -

Response: Management used an electronic sign-In system that tracked visitors by email. The system required annual training for each of the contractors - the person responsible for the contractor was provided with an automated email when the contractor showed up and was responsible for escort. Maintenance techs and contractors were required to follow the same GMP restrictions as operators - repair work was track on the sites maintenance program that included a check that parts/tools were removed after completion. The Maintenance Manager had final responsibility for inspection after any work conducted by a contractor.

11.2.3 - Calibration

11.2.3.1 - The methods and responsibility for calibration and re-calibration of measuring, testing, and inspection equipment used for monitoring activities outlined in prerequisite programs, food safety plans, and other process controls, or to demonstrate compliance with customer specifications, shall be documented and implemented. Software used for such activities shall be validated as appropriate.

Response: Compliant

11.2.3.2 - Equipment shall be calibrated against national or international reference standards and methods or to an accuracy appropriate to its use. In cases where standards are not available, the site shall provide evidence to support the calibration reference method applied.

Response: Compliant

11.2.3.3 - Calibration shall be performed according to regulatory requirements and/or to the equipment manufacturers' recommended schedule.

Response: Compliant

11.2.3.4 - Procedures shall be documented and implemented to address the resolution of potentially affected products when measuring, testing, or inspection equipment is found to be out of calibration.

Response: Compliant

11.2.3.5 - Calibrated measuring, testing, and inspection equipment shall be protected from damage and unauthorized adjustment or use.

Response: Compliant

11.2.3.6 - A directory of measuring, testing, and inspection equipment that require calibration and records of the calibration tests shall be maintained.

Response: Compliant

Summary -

Response: Procedures for calibration were under the responsibility of the Maintenance Manager and the QA Manager. Scales were tested by third party annually (12/27/23) - the last scale calibration was completed by a third-party contractor and no deficiencies (As Found) had been identified. Metal Detectors were calibrated by manufacturing techs - each of the detectors was calibrated 6/7/24 and were within required standards. Metal detectors were new within the last 10 years and the new packaging line had installed an x-ray detector. Magnets were tested for pull strength annually and listed on an excel spreadsheet to compare year over year loss/gain. The procedure stated >15% reduction required either replacement or justification of why replacement was not needed. Reviewed the testing results from Oct 2024. The flow meters had been calibrated 5/29/2024. The thermometer dry-well used for verification had been calibrated 4/30/2024. The moisture analyzer had last been calibrated 7/11/2024. The calibration policy stated QA was responsible for product disposition if equipment were found to be out of calibration. The Calibration Directory was provided as a Logbook and identified each piece of equipment by serial number and location.

11.2.4 - Pest Prevention

11.2.4.1 - A documented pest prevention program shall be effectively implemented. It shall: i. Describe the methods and responsibility for the development, implementation, and maintenance of the pest prevention program; ii. Record pest sightings and trend the frequency of pest activity to target pesticide applications; iii. Outline the methods used to prevent pest problems; iv. Outline the pest elimination methods and the appropriate documentation for each inspection; v. Outline the frequency with which pest status is to be checked; vi. Include the identification, location, number, and type of applied pest control/monitoring devices on a site map; vii. List the chemicals used. The chemicals are required to be approved by the relevant authority and their Safety Data Sheets (SDS) made available; viii. Outline the methods used to make staff aware of the bait control program and the measures to take when they come into contact with a bait station; ix. Outline the requirements for staff awareness and training in the use of pest and vermin control chemicals and baits; and x. Measure the effectiveness of the program to verify the elimination of applicable pests and to identify trends.

Response: Compliant

11.2.4.2 - Pest contractors and/or internal pest controllers shall: i. Be licensed and approved by the local relevant authority; ii. Use only trained and qualified operators, who comply with regulatory requirements; iii. Use only approved chemicals; iv. Provide a pest prevention plan (refer to 2.3.2.8), which includes a site map, indicating the location of bait stations traps and other applicable pest control/monitoring devices; v. Report to a responsible authorized person on entering the premises and after the completion of inspections or treatments; vi. Provide regular inspections for pest activity with appropriate action taken if pests are present, and vii. Provide a written report of their findings and the inspections and treatments applied.

Response: Compliant

11.2.4.3 - Pest activity risks shall be analyzed and recorded. Inspections for pest activity shall be conducted on a regular basis by trained site personnel and the appropriate action taken if pests are present. Identified pest activity shall not present a risk of contamination to food products, raw materials, or packaging. Records of all pest control inspections and applications shall be maintained.

Response: Compliant

11.2.4.4 - Food products, raw materials, or packaging that are found to be contaminated by pest activity shall be effectively disposed of, and the source of pest infestation shall be investigated and resolved. Records shall be kept of the disposal, investigation, and resolution.

Response: Compliant

11.2.4.5 - Pesticides shall be clearly labeled and stored per 11.6.4 if kept on-site.

Response: N/A

Evidence: • Pesticides were not stored onsite.

11.2.4.6 - No animals shall be permitted on-site in food handling and storage areas.

Response: Compliant

Summary -

Response: Weekly Pest Control service included inside traps, light traps. Monthly service included outside rodent bait stations. The signed agreement was renewed 1/5/2024 and signed by QA. Documents included a business license (exp. 12/31/2024), applicator license (exp 12/31/2024), Certificate of Insurance (1/1/2025), and annual training certificate for the PCO tech. A device map was included that had last been reviewed/modified 6/6/2023. The service included 8 Insect Light Traps, 70 Inside rodent traps, and 51 outside bait stations. Service reports for May, July, and October were requested/reviewed. Each service report was signed by both the PCO and the site's QA Manager. The report included sections for Open Conditions and Conditions Resolved This Visit. The PCO portal provided a list of the Approved Chemicals the site allowed and SDS that were on file for each approved chemical. The PCO was required to meet with QA for each visit and review the visit with QA upon completion of an annual review/assessment was conducted 1/5/2024 with no changes recommended. The site had evidence of limited pest activity - pest concerns listed as part of the summary included exterior rodent, ants, flying insects, and interior rodents. No evidence of pest activity was observed during the inspection of the audit - the procedure stated any infested product or packaging would be destroyed. Animals were not permitted within the storage or processing rooms. Pesticides were not stored onsite.

11.2.5 - Cleaning and Sanitation

11.2.5.1 - The methods and responsibility for the effective cleaning of the food handling and processing equipment and environment and storage areas shall be documented and implemented. Consideration shall be given to: i. What is to be cleaned; ii. How it is to be cleaned; iii. When it is to be cleaned; iv. Who is responsible for the cleaning; v. Validation of the cleaning procedures for food contact surfaces (including CIP); vi. Methods used to confirm the correct concentrations of detergents and sanitizers; and vii. The responsibility and methods used to verify the effectiveness of the cleaning and sanitation program.

Response: Compliant

11.2.5.2 - Detergents and sanitizers shall be suitable for use in a food manufacturing environment, labeled according to regulatory requirements, and purchased in accordance with applicable legislation. The organization shall ensure: i. The site maintains a list of chemicals approved for use; ii. An inventory of all purchased and used chemicals is maintained; iii. Detergents and sanitizers are stored as outlined in element 11.6.4; iv. Safety Data Sheets (SDS) are provided for all detergents and sanitizers purchased; and v. Only trained staff handle sanitizers and detergents.

Response: Compliant

11.2.5.3 - Detergents and sanitizers that have been mixed for use shall be correctly mixed according to the manufacturers' instructions, stored in containers that are suitable for use, and clearly identified. Mix concentrations shall be verified and records maintained.

Response: Compliant

11.2.5.4 - Cleaning-in-place (CIP) systems, where used, shall not pose a chemical contamination risk to raw materials, ingredients, or product. CIP parameters critical to assuring effective cleaning shall be defined, monitored, and recorded (e.g., chemical and concentration used, contact time, and temperature). CIP equipment, including spray balls, shall be maintained, and any modifications to CIP equipment shall be validated. Personnel engaged in CIP activities shall be effectively trained.

Response: Compliant

11.2.5.5 - Cleaning equipment, tools, racks, and other items used in support of the cleaning and sanitizing program shall be clearly identified, stored, and maintained in a manner that prevents contamination of processing areas, product handling equipment, and storage areas as well as the tools themselves.

Response: Compliant

11.2.5.6 - Suitably equipped areas shall be designated for cleaning product containers, knives, cutting boards, and other utensils used by staff. The areas for these cleaning operations shall be controlled so they do not interfere with manufacturing operations, equipment, or product. Racks and containers for storing cleaned utensils shall be provided as required.

Response: Compliant

11.2.5.7 - Pre-operational inspections shall be conducted following cleaning and sanitation operations to ensure food processing areas, product contact surfaces, equipment, staff amenities, sanitary facilities, and other essential areas are clean before the start of production. Pre-operational inspections shall be conducted by qualified personnel.

Response: Compliant

11.2.5.8 - Staff amenities, sanitary facilities, and other essential areas shall be inspected by qualified personnel at a defined frequency to ensure the areas are clean.

Response: Compliant

11.2.5.9 - The responsibility and methods used to verify the effectiveness of the cleaning procedures shall be documented and implemented. A verification schedule shall be prepared. A record of pre-operational hygiene inspections, cleaning and sanitation activities, and verification activities shall be maintained.

Response: Compliant

Summary -

Response: The sanitation program was under the responsibility of a Sanitation Supervisor that worked under the site's Facility Manager. SSOPs, and Cleaning MCS were tracked and completed. The chemical provider provided oversight on chemical usage and procedures. Cleaning was verified through visual inspection and ATP testing. QA was responsible for final approval of the cleaning inspection and was responsible for ensuring records were in place. The chemical provider tracked chemical usage twice each month and provided reports. Sanitation was responsible for weekly and daily chemical titrations that were maintained in a Chemical Logbook that was kept in the chemical storage room. Chemical titration logs were completed daily for foot-bath concentration and finished product line sanitation. Each day Cleaning and Sanitation Activities was

used to document process line cleanings conducted throughout the day on each of the three main process lines. Chemicals each had current SDS and Tech Sheets that were available in logbooks that were kept in the chemical storage room. The chemical supplier was responsible for monitoring chemical usage and ensuring dispensers were calibrated monthly. SDS were provided in a Sanitation SDS Logbook that was available in the sanitation room. The modified CIP system (tanks) monitored caustic concentration, time and temperature of dwell, and pH of rinse water for process cleaning - cleaning solutions were not re-captured. Cleaning equipment was observed stored in the locked sanitation room when not being used. Sanitation rain suits were stored on a rack designed for this in the employee training/meeting room that was located next to the sanitation room. Racks were provided for safe and hygienic storage of parts and equipment. Pre-Op Inspections were completed by QA - detailed pre-op were completed Monday AM after a weekend shutdown/clean. Reviewed Pre-Op for the middle week of May, July, and Oct 2024. Records included the equipment that was inspected, supervisor on duty, final approval of the inspection releasing the line to production, a verification that no sodium sulfate was visible present, and verification the flume water was free of sodium sulfate (<10 ppm). Pre-op forms included results to the ATP, which was sed after the weekly clean - any ATP results above the stated limit required verification of re-clean and re-testing. Dry clean Inspections were similar to the weekly inspection, but did not use ATP monitoring. The change-over in packaging approval was demonstrated during the audit. The Sanitation Supervisor conducted a line audit at the end of the line cleaning in addition to the QA Pre-Op - Sanitation Audits were provided for review for the same weekly cleaning dates requested. Sanitation inspection reports were provided for review and included evidence of satisfactory cleaning or required documented re-cleaning activity. The staff amenities were included in a Weekly MCS that tracked daily cleaning/inspection of these areas, including emptying of waste containers. QA used micro validation for evidence of cleaning effectiveness - the swabs were completed 9/20/2024 and results for TPC, EB, Y/M were listed and shown to be below the detectable limits for TPC and EB and generally <10 for Yeast / Mold. The micro testing was completed via the corporate laboratory (17025) and communicated back to the site through their software reporting system. Records of testing were made available.

11.3.1 - Personnel Welfare

11.3.1.1 - Personnel who are known to be carriers of infectious diseases that present a health risk to others through the packing or storage processes shall not engage in the processing or packing of food or enter storage areas where food is exposed. Medical Amendment added: Code Amendment #1A medical screening procedure shall be in place for all employees, visitors and contractors who handle exposed product or food contact surfaces.

Response: Compliant

11.3.1.2 - The site shall have measures in place to prevent contact of materials, ingredients, food packaging, food, or food contact surfaces from any bodily fluids, open wounds, coughing, sneezing, spitting, or any other means. In the event of an injury that causes the spillage of bodily fluid, a properly trained staff member shall ensure that all affected areas, including handling and processing areas, have been adequately cleaned, and that all materials and products have been quarantined and/or disposed of.

Response: Compliant

11.3.1.3 - Personnel with exposed cuts, sores, or lesions shall not engage in handling or processing exposed products or handling primary (food contact) packaging or touching food contact surfaces. Minor cuts or abrasions on exposed parts of the body shall be covered with a colored, metal-detectable bandage or an alternative suitable waterproof and colored dressing.

Response: Compliant

Summary -

Response: Personnel with food borne illnesses were not allowed to handle products, processing equipment, or packaging materials per the site's GMPs (Doc No.: 00-POL-02.0046). Medical screening was included with the updated restrictions the site currently had to address Covid and general employee health - the program identified Hepatitis A, Shigella, Shiga toxin producing E. Coli, Salmonella Typhimurium and Noroviruses as potential food borne illnesses. Visitors and contractors were monitored for health conditions as part of sign-in. Minor cuts or abrasions on exposed parts of the hands were covered with a colored metal-detectable bandage and food handler gloves. Spill kits for wounds were located in the QA Lab. Eating, drinking, or chewing gum is allowed only in the break room. No smoking or chewing tobacco is permitted within the facility. Smoking areas are provided in designated areas.

11.3.2 - Hand Washing

11.3.2.1 - All personnel shall have clean hands, and hands shall be washed by all staff, contractors, and visitors: i. On entering food handling or processing areas; ii. After each visit to a toilet; iii. After using a handkerchief; iv. After smoking, eating, or drinking; and v. After handling wash down hoses, cleaning materials, dropped product, or contaminated material.

Response: Compliant

11.3.2.2 - Handwashing stations shall be provided adjacent to all personnel access points and in accessible locations throughout food handling and processing areas as required.

Response: Minor

Evidence: • A newer packaging room for the food service bags required booties to be placed on shoes as a requirement for entering - this room did not have access to a hand sink that was adjacent to the high care area.

Root Cause: Root cause: Inadequate capital planning and inadequate evaluation of change management. The capital did not include water piping to the dry area for handwashing.

Corrective Action: Corrective action: Required outer garments were reevaluated. Booties will not be required. Chlorine resistant sanitizer mats were implemented at the Crisp employee entrance. Personnel will wash their hands at the main entrance into production, step on shoe sanitizer mats as they enter production and as they enter the enclosed Crisp Bagging Line. An adjacent unutilized office area to the Crisp Bagging Line was equipped with a sink, hands-free faucet, paper towels, two soaps and a hand sanitizer. Proper handwash signage was installed. Supervision is responsible for ensuring handwash stations are cleaned and stocked pre-op and throughout production. Supervision conduct daily shift GMP and sanitation inspections to monitor for compliance. Inspections are documented. Employees are trained at new hire and annually on GMPs. Additionally, supervisors review weekly food safety topics with employees and QA posts food safety requirements on TVs in the employee hallway to foster good GMP habits and compliance. We have communicated concerns regarding inadequate funding of this capital project to the Tree Top Quality Compliance Team and it is under review.

Verification Of Closeout: Correction was demonstrated by installation of the new sink. Preventive measure was demonstrated by the updated risk assessment on employee PPE requirements for the new line and new room.

Completion Date: December 12, 2024 **Closeout Date:** December 16, 2024

11.3.2.3 - Handwashing stations shall be constructed of stainless steel or similar non-corrosive material and at a minimum supplied with: i. A potable water supply at an appropriate temperature; ii. Liquid soap contained within a fixed dispenser; iii. Paper towels in a hands-free cleanable dispenser; and iv. A means of containing used paper towels.

Response: Compliant

11.3.2.4 - The following additional facilities shall be provided in high-risk areas: i. Hands-free operated taps; and ii. Hand sanitizers.

Response: Compliant

11.3.2.5 - Signage in appropriate languages instructing people to wash their hands before entering the food processing areas shall be provided in a prominent position in break rooms, at break room exits, toilet rooms, and in outside eating areas, as applicable.

Response: Compliant

11.3.2.6 - When gloves are used, personnel shall maintain the handwashing practices outlined above.

Response: Compliant

Summary -

Response: Employees, visitors, and contractors were required to wash hands on entering the facility at a three-person sink located at the primary access. Procedures required handwashing after using the toilet, after using a handkerchief, after smoking, eating or drinking, and after handling wash-down hoses, dropped product or contaminated material. Stainless steel hand wash sinks were located throughout the plant; sinks were properly supplied with warm hand-free water, hand-free liquid soap, hand dryers, and sanitizer. Handwash reminder signs were posted in each of the toilet rooms, at the exit to the lunchroom, at each hand wash sink, and at the entrance door to production. Hand washing was observed being followed by employees and visitors during the audit. Employees handling food or food contact were required to wear nylon or food handler disposable gloves; employees working in these positions were observed washing their hands prior to donning the required gloves. Minor 11.3.2.2: A newer packaging room for the food service bags required booties to be placed on shoes as a requirement for entering - this room did not have access to a hand sink that was adjacent to the high care area.

11.3.3 - Clothing and Personal Effects

11.3.3.1 - The site shall undertake a risk analysis to ensure that the clothing and hair policy protects materials, food, and food contact surfaces from unintentional microbiological or physical contamination.

Response: Compliant

11.3.3.2 - Clothing worn by staff engaged in handling food shall be maintained, stored, laundered, and worn so it does not present a contamination risk to products.

Response: Compliant

11.3.3.3 - Clothing, including shoes, shall be clean at the start of each shift and maintained in a serviceable condition.

Response: Compliant

11.3.3.4 - Excessively soiled uniforms shall be changed or replaced when they present a product contamination risk.

Response: Compliant

11.3.3.5 - Disposable gloves and aprons shall be changed after each break, upon re-entry into the processing area, and when damaged. Non-disposable aprons and gloves shall be cleaned and sanitized as required and when not in

use stored on racks provided in the processing area or in designated sealed containers in personnel lockers. They should not be placed or stored on packaging, ingredients, product, or equipment.

Response: Compliant

11.3.3.6 - Protective clothing shall be manufactured from material that will not pose a food safety threat and is easily cleaned. All protective clothing shall be cleaned after use, or at a frequency to control contamination, and stored in a clean and serviceable condition to prevent microbiological or cross-contact allergen contamination.

Response: Compliant

11.3.3.7 - Racks shall be provided for the temporary storage of protective clothing when staff leave the processing area and shall be provided nearby or adjacent to the personnel access doorways and handwashing facilities.

Response: Compliant

11.3.3.8 - Jewelry and other loose objects shall not be worn or taken into a food handling or processing operation or into any area where food is exposed. Wearing plain bands with no stones, prescribed medical alert bracelets, or jewelry accepted for religious or cultural reasons can be permitted, provided these items are properly covered and do not pose a food safety risk. All exceptions shall meet regulatory and customer requirements and shall be subject to a risk assessment and evidence of ongoing risk management.

Response: Compliant

Summary -

Response: The risk assessment for clothing and personal PPE was provided and stated clothing worn by staff engaged in handling food was to be maintained, stored, laundered and worn so as not to present a contamination risk. During the audit, clothing was observed in appropriate condition. Employees were observed wearing clean clothing and shoes at the start of each shift. PPE included high-vis vests and vinyl gloves for those working directly on any of the process lines. Disposable gloves are discarded when employees leave their workstation and replaced with new gloves when they re-enter production areas to work. The site used boot sanitizers at each entrance and at the hand sinks. Uniforms did not become excessively soiled as part of processing. Hangers were provided for protective clothing by the entrance to processing. The site did not allow jewelry or loose objects for any employees.

11.3.4 - Visitors

11.3.4.1 - All visitors shall be trained in the site's food safety and hygiene procedures before entering any food processing and handling areas or shall be escorted at all times in food processing, handling, and storage areas.

Response: Compliant

11.3.4.2 - All visitors, including management staff, shall be required to remove jewelry and other loose objects in accordance with the facilities Good Manufacturing Practices and 11.3.3.8. All visitors shall wear suitable clothing and footwear when entering any food processing and handling area.

Response: Compliant

11.3.4.3 - Visitors exhibiting visible signs of illness shall be prevented from entering areas in which food is handled and processed.

Response: Compliant

11.3.4.4 - Visitors shall enter and exit food handling areas through the proper staff entrance points and comply

with all handwashing and personnel practice requirements.

Response: Compliant

Summary -

Response: Per the company program, visitors are required to follow the same GMP rules as the staff. As part of sign-in, GMPs were provided for review that required an electronic signature to accept - this electronic system also addressed health conditions that the visitor might be experiencing. Visitors were required to remove jewelry and other loose objects, were escorted, and complied with handwashing requirements prior to entry. No issues were observed.

11.3.5 - Staff Amenities (change rooms, toilet, break rooms)

11.3.5.1 - Staff amenities shall have documented cleaning procedures, be supplied with appropriate lighting and ventilation, and shall be made available for use by all persons engaged in the handling and processing of product.

Response: Compliant

11.3.5.2 - Change rooms shall be provided to enable staff and visitors to change into and out of protective clothing as required. Change rooms shall be kept clean.

Response: Compliant

11.3.5.3 - High-risk change areas shall be provided for staff engaged in the processing of high-risk foods or processing operations in which clothing can be soiled.

Response: Compliant

11.3.5.4 - Provision shall be made for staff to store their street clothing and personal items separate from clean uniforms, food contact zones, food, and packaging storage areas.

Response: Compliant

11.3.5.5 - Where required, a sufficient number of showers shall be provided for use by staff.

Response: N/A

Evidence: • Showers were not required.

11.3.5.6 - Toilet rooms shall be: i. Designed and constructed so that they are accessible to staff and separate from any processing and food handling operations; ii. Accessed from the processing area via an airlock vented to the exterior or through an adjoining room; iii. Sufficient in number for the maximum number of staff; iv. Constructed so that they can be easily cleaned and maintained; v. Located inside or nearby areas for storing protective clothing, outer garments, and other items while using the facilities; and vi. Kept clean and tidy. Tools/equipment used for cleaning toilet rooms shall not be used to clean processing areas.

Response: Compliant

11.3.5.7 - Sanitary drainage shall not be connected to any other drains within the premises and shall be directed to a septic tank or a sewerage system in accordance with regulations.

Response: Compliant

11.3.5.8 - Handwashing basins shall be provided immediately outside or inside the toilet room and designed as outlined in 11.3.2.3.

Response: Compliant

11.3.5.9 - Separate break rooms shall be provided away from food contact/handling zones.Break rooms shall be: i. Ventilated and well lit; ii. Provided with adequate tables and seating to cater for the maximum number of staff at one sitting; iii. Equipped with a sink serviced with hot and cold potable water for washing utensils; iv. Equipped with refrigeration and heating facilities, enabling staff to store or heat food and to prepare non-alcoholic beverages if required; and v. Kept clean and free from waste materials and pests.

Response: Compliant

11.3.5.10 - Where outside eating areas are provided, they should be kept clean and free from waste materials and maintained in a manner that minimizes the potential for the introduction of contamination, including pests to the site.

Response: Compliant

Summary -

Response: Staff amenities included a staff break room, staff locker rooms, and staff prep room where final PPE was put on and pre-shift meetings were conducted. The amenity areas met SQF requirements and were included in sanitation cleaning schedules that were checked daily. Products were not high risk in that they were subject to microbiological growth - however, they were RTE and primary pathogen controls were in place to address disposable aprons, boots and hand contact risks (gloves). Staff amenities were supplied with appropriate lighting and ventilation and were made available for the use of all people engaged in the handling and processing of product. Personal lockers were provided for each employee in the break area - these were clean and in good condition. No issues were observed. Showers were not required. The toilet rooms were clean, in good condition, and did not open directly to processing or handling areas. Janitorial chemicals and cleaning tools were stored separately for processing cleaning supplies. Each of the toilet rooms were supplied with their own hand sinks that were maintained to meet SQF requirements (warm water, liquid soap, paper towels). Sanitary drainage was not connected to any processing drains. Sanitary drains were not located over any processing or storage areas. The break room was clean, well ventilated, well lit, and free of odors. Outside eating and smoking areas were provided - these were maintained by the janitorial staff.

11.4.1 - Staff Engaged in Food Handling and Processing Operations

11.4.1.1 - All personnel engaged in any food handling, preparation, or processing operations shall ensure that products and materials are handled and stored in such a way as to prevent damage or product contamination. They shall comply with the following processing practices: i. Personnel entry to processing areas shall be through the personnel access doors only; ii. All doors are to be kept closed. Doors shall not be open for extended periods when access is required for waste removal or receiving of product/ingredient/packaging; iii. Packaging, product, and ingredients shall be kept in appropriate containers as required and off the floor; v. Waste shall be contained in the bins identified for this purpose and removed from the processing area on a regular basis and not left to accumulate; and v. All wash down and compressed air hoses shall be stored on hose racks after use and not left on the floor.

Response: Compliant

11.4.1.2 - Personnel working in or visiting food handling or processing operations shall ensure that: i. Staff shall not eat or taste any product being processed in the food handling/contact zones, except as noted in element 11.4.1.4; ii. The wearing of false fingernails, false eyelashes, eyelash extensions, long nails, or fingernail polish is not permitted when handling exposed food; iii. Hair restraints and beard covers, where applicable, shall be used in areas where product is exposed. iv. Smoking, chewing, eating, or spitting is not permitted in areas where product

is produced, stored, or otherwise exposed. v. Drinking water is permissible only under conditions that prevent contamination or other food safety risks from occurring. Drinking water containers in production and storage areas shall be stored in clear, covered containers, and in designated areas away from raw materials, packaging, tools, or equipment storage.

Response: Compliant

11.4.1.3 - The flow of personnel in food processing and handling areas shall be managed such that the potential for contamination is minimized.

Response: Compliant

11.4.1.4 - In circumstances where it is necessary to undertake sensory evaluations in a food handling/contact zone, the site shall implement controls and procedures to ensure: i. Food safety is not compromised; ii. Sensory evaluations are conducted by authorized personnel only; iii. A high standard of personal hygiene is practiced by personnel conducting sensory evaluations; iv. Sensory evaluations are conducted in areas equipped for the purpose; and v. Equipment used for sensory evaluations is sanitized, maintained, and stored separately from processing equipment.

Response: N/A

Evidence: • Sensory evaluations were not undertaken in processing or packaging areas.

Summary -

Response: Staff working in food processing and handling areas were required to enter through designated entry points. Doors were self-closing and kept shut, materials and products were stored in crates or on pallets and were off the floor. Waste was removed daily by sanitation. Wash down hoses were observed stored on hose reels. Sensory evaluations were not undertaken in processing or packaging areas.

11.5.1 - Water Supply

11.5.1.1 - Adequate supplies of potable water drawn from a known clean source shall be provided for water used as an ingredient during processing operations and for cleaning the premises and equipment. The source of potable water shall be identified as well as on-site storage (if applicable) and reticulation within the facility.

Response: Compliant

11.5.1.2 - Contingency plans shall be in place for instances when the potable water supply is deemed to be contaminated or otherwise inappropriate for use.

Response: Compliant

11.5.1.3 - Supplies of hot and cold water shall be provided, as required, to enable the effective cleaning of the premises and equipment.

Response: Compliant

11.5.1.4 - The delivery of water within the premises shall ensure potable water is not contaminated. Testing of the backflow system, where possible, shall be conducted at least annually and records shall be maintained.

Response: Compliant

11.5.1.5 - The use of non-potable water shall be controlled such that: i. There is no cross-contamination between potable and non-potable water lines; ii. Non-potable water piping and outlets are clearly identified; and iii. Hoses, taps, and other similar sources of possible contamination are designed to prevent backflow or back-siphonage.

Response: N/A

Evidence: • Non-potable water was not used.

11.5.1.6 - Where water is stored on-site, storage facilities shall be adequately designed, constructed, and routinely cleaned to prevent contamination.

Response: N/A

Evidence: • Water was not stored.

Summary -

Response: Water was provided by the City of Wenatchee, WA - the 2023 Water Report was on file. Contingency on water was the use of sister plants as back-up. Hot water was provided in adequate supply for cleaning through a boiler system. Back flow preventers (9) were checked annually by a licensed third party plumber - the most recent backflow checks were conducted 6/13/24 and each were shown to have successively passed. Non-potable water was not used. Water was not stored.

11.5.2 - Water Treatment

11.5.2.1 - Water treatment methods, equipment, and materials, if required, shall be designed, installed, and operated to ensure water receives effective treatment. Water treatment equipment shall be monitored regularly to ensure it remains serviceable.

Response: Compliant

11.5.2.2 - Water used as an ingredient in processing or for cleaning and sanitizing equipment shall be tested and, if required, treated to maintain potability (refer to 11.5.2.1).

Response: Compliant

11.5.2.3 - Treated water shall be regularly monitored to ensure it meets the specified indicators. Water treatment chemicals usage shall be monitored to ensure chemical residues are within acceptable limits. Records of testing results shall be kept.

Response: Compliant

Summary -

Response: Boiler water was treated with an approved food facility chemical - the chemical treatments were monitored by a third-party chemical supplier and the boiler was maintained on a service agreement. The site's maintenance team was responsible for blowing down the boiler daily and records of this were maintained on a clipboard next to the boiler unit. Boiler treatment - Letter of Guarantee on file was provided on request during the audit.

11.5.3 - Water Quality

11.5.3.1 - Water shall comply with local, national, or internationally recognized potable water microbiological and quality standards, as required when used for: i. Washing, thawing, and treating food; ii. Handwashing; iii. Conveying food; iv. An ingredient or food processing aid; v. Cleaning food contact surfaces and equipment; vi. The manufacture of ice; orvii. The manufacture of steam that will come into contact with food or be used to heat water that will come into contact with food.

Response: Compliant

11.5.3.2 - Microbiological analysis of the water and ice supply shall be conducted to verify the cleanliness of the supply, the monitoring activities, and the effectiveness of the treatment measures implemented. Samples for analysis shall be taken at sources supplying water for the process or cleaning or from within the site. The frequency of analysis shall be risk-based and at a minimum annually.

Response: Compliant

11.5.3.3 - Water and ice shall be analyzed using reference standards and methods.

Response: Compliant

Summary -

Response: Potable water was provided for processing and cleaning requirements by the local municipality - water samples were collected and tested annually for total coliforms by the 17025 corporate lab - testing results from 11/12/2024 were documented and provided for review during the audit. Each of the 4 sample points had <1 cfu/ml reported.

11.5.4 - Ice Supply

11.5.4.1 - Ice provided for use during processing operations, as a processing aid, or an ingredient shall comply with 11.5.3.1.

Response: N/A

Evidence: • Ice was not used.

11.5.4.2 - Ice that is purchased shall be from an approved supplier and included in the site's food safety risk assessment. Ice shall be supplied in containers that are appropriate for use, cleanable if reused, and tested as appropriate.

Response: N/A

Evidence: • Ice was not used.

11.5.4.3 - Ice rooms and receptacles shall be constructed of materials as outlined in element 11.1.2 and designed to minimize contamination of the ice during storage, retrieval, and distribution.

Response: N/A

Evidence: • Ice was not used.

Summary -

Response: Ice was not used.

11.5.5 - Air and Other Gasses

11.5.5.1 - Compressed air or other gases (e.g., nitrogen or carbon dioxide) that contact food or food contact surfaces shall be clean and present no risk to food safety.

Response: Compliant

11.5.5.2 - Compressed air systems and systems used to store or dispense other gases that come into contact with food or food contact surfaces shall be maintained and regularly monitored for quality and applicable food safety hazards. The frequency of analysis shall be risk-based and at a minimum annually.

Response: Compliant

Summary -

Response: Air monitoring was conducted annually by the corporate 17025 laboratory - site microbiologist for APC, yeast, and mold. Records of air plate testing were provided from 10/21/2024 - results were within the prescribed limits. Compressed air (Nitrogen and CO2) was provided against a letter of guarantee and COAs at receipt.

11.6.1 - Receipt, Storage and Handling of Goods

11.6.1.1 - The site shall document and implement an effective storage plan that allows for the safe, hygienic receipt and storage of raw materials (i.e., frozen, chilled, and ambient), ingredients, packaging, equipment, and chemicals.

Response: Compliant

11.6.1.2 - Controls shall be in place to ensure all ingredients, raw materials, processing aids, and packaging are received and stored properly to prevent cross-contamination risks. Unprocessed raw materials shall be received and stored separately from processed raw materials to avoid cross-contamination risk.

Response: Compliant

11.6.1.3 - The responsibility and methods for ensuring effective stock rotation principles shall be documented and implemented.

Response: Compliant

11.6.1.4 - Procedures shall be in place to ensure that all ingredients, materials, work- in-progress, rework, and finished product are utilized within their designated shelf-life.

Response: Compliant

11.6.1.5 - Where raw materials, ingredients, packaging, equipment, and chemicals are held under temporary or overflow conditions that are not designed for the safe storage of goods, a risk analysis shall be undertaken to ensure there are no risks to the integrity of those goods, no potential for contamination or adverse effect on food safety.

Response: N/A

Evidence: • Temporary overflow storage was not used.

11.6.1.6 - Records shall be available to verify the effectiveness of alternate or temporary control measures for the storage of raw materials, ingredients, packaging, equipment, chemicals, or finished products.

Response: N/A

Evidence: • Temporary overflow storage was not used.

Summary -

Response: Ingredients were stored in a separate area of the warehouse - packaging was stored on pallet racks next to the packaging area. Finished products were stored and shipped daily to a third-party warehouse used by Tree Top corporate with a site-owned truck/trailer. The shelf life of apples was allowed to be extended by conditions controlled by suppliers prior to receiving at the site - no modified atmosphere storage was conducted at the site. Long term storage was not utilized. Temporary overflow storage was not used.

11.6.2 - Cold Storage, Freezing and Chilling of Foods

11.6.2.1 - The site shall provide confirmation of the effective operational performance of freezing, chilling, and cold storage facilities. Chillers, blast freezers, and cold storage rooms shall be designed and constructed to allow for the hygienic and efficient refrigeration of food and be easily accessible for inspection and cleaning.

Response: N/A

Evidence: • Cold storage was not used.

11.6.2.2 - Sufficient refrigeration capacity shall be available to chill, freeze, store chilled, or store frozen the maximum anticipated throughput of product with allowance for periodic cleaning of refrigerated areas.

Response: N/A

Evidence: • Cold storage was not used.

11.6.2.3 - The site shall have a written procedure for monitoring temperatures, including the frequency of checks, and corrective actions, if the temperature is out of specification. Freezing, chilling, and cold storage rooms shall be fitted with temperature monitoring equipment that is located to monitor the warmest part of the room and be fitted with a temperature measurement device that is easily readable and accessible. Records shall be kept of frozen, cold, and chilled storage room temperatures.

Response: N/A

Evidence: • Cold storage was not used.

11.6.2.4 - Discharge from defrost and condensate lines shall be controlled and discharged into the drainage system.

Response: N/A

Evidence: • Cold storage was not used.

Summary -

Response: Cold storage was not used.

11.6.3 - Storage of Dry Ingredients, Packaging, and Shelf Stable Packaged Goods

11.6.3.1 - Rooms used for the storage of product ingredients, packaging, and other dry goods shall be located away from wet areas and constructed to protect the product from contamination and deterioration and prevent packaging from becoming a harborage for pests or vermin.

Response: Compliant

11.6.3.2 - Racks provided for the storage of packaging shall be constructed of impervious materials and designed to enable cleaning and inspection of the floors and behind the racks. Storage areas shall be cleaned at a pre-determined frequency.

Response: Compliant

Summary -

Response: The room for storage of ingredients and the racks for storing packaging were clean and in good condition. Materials were not stored net to wet clean or wet processing areas. Storage of materials was either on pallets or in crates and were kept off the floor.

11.6.4 - Storage of Hazardous Chemicals and Toxic Substances

11.6.4.1 - Hazardous chemicals and toxic substances with the potential for food contamination shall be: i. Clearly labeled, identifying and matching the contents of their containers; ii. Included in a current register of all hazardous chemicals and toxic substances that are stored on-site; and iii. Supplemented with current Safety Data Sheets (SDS) made available to all staff.

Response: Compliant

11.6.4.2 - Storage of hazardous chemicals and toxic substances shall be: i. Located in an area with appropriate signage indicating that the area is for hazardous storage; ii. Controlled, lockable, and accessible only by personnel trained in the storage and use of chemicals; iii. Adequately ventilated;iv. Stored where intended and not comingled (e.g., food versus non-food grade);v. Designed such that pesticides, rodenticides, fumigants, and insecticides are stored separately from sanitizers and detergents; and vi. Stored in a manner that prevents a hazard to finished product or product contact surfaces. Processing utensils and packaging shall not be stored in areas used to store hazardous chemicals and toxic substances.

Response: Compliant

11.6.4.3 - Hazardous chemicals and toxic substances shall be correctly labeled and: i. Used only according to manufacturers' instructions; ii. Controlled to prevent contamination or a hazard to raw and packaging material, work-in-progress, finished product, or product contact surfaces; iii. Returned to the appropriate storage areas after use; and iv. Be compliant with national and local legislation.

Response: Compliant

11.6.4.4 - Daily supplies of chemicals used for continuous sanitizing of water, as a processing aid, or for emergency cleaning of food processing equipment and surfaces in food contact zones may be stored within or in close proximity to a processing area, provided that access to the chemical storage facility is restricted to only authorized personnel.

Response: Compliant

11.6.4.5 - Personnel who handle hazardous chemicals and toxic substances, including pesticides and cleaning chemicals,: i. Shall be fully trained in the purpose of the hazardous chemicals and toxic substances, their storage, handling, and use; ii. Be provided first aid equipment and personnel protective equipment (PPE); and iii. Ensure compliance with the proper identification, storage, usage, disposal, and clean-up requirements.

Response: Compliant

11.6.4.6 - The site shall dispose of empty, obsolete, and unused chemicals, pesticides, toxic substances, and containers in accordance with requirements and ensure that primary containers are: i. Not reused; ii. Segregated and securely stored prior to collection; and iii. Disposed through an approved vendor.

Response: Compliant

11.6.4.7 - In the event of a hazardous spill, the site shall: i. Have spillage clean-up instructions to ensure that the spill is properly contained; and ii. Be equipped with PPE, spillage kits, and cleaning equipment.

Response: Compliant

Summary -

Response: Sanitation chemicals were stored in the locked sanitation room and were secure from employee access. Sanitation containers and dispensers were observed labeled. SDS for sanitation chemicals was maintained by the supplier and current. Maintenance stored food grade and nonfood grade lubricants in separate and labeled cabinets. SDS for the maintenance chemicals were filed in the planners office and

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reviewed against chemicals observed. Rodenticides or other pesticides were not stored onsite. Spray bottles of sanitizer were allowed in processing rooms - these were observed properly labeled and appropriately placed in designated areas. Operators were responsible for sanitation of the line and equipment - these employees were trained annually on chemical handling and dispensing, including titration methods. Chemical spill kits were observed in the sanitation room.

11.6.5 - Loading, Transport, and Unloading Practices

11.6.5.1 - The practices applied during loading, transport, and unloading of food shall be documented, implemented, and designed to maintain appropriate storage conditions and product integrity. Foods shall be loaded, transported, and unloaded under conditions suitable to prevent cross-contamination.

Response: Compliant

11.6.5.2 - Vehicles (e.g., trucks/vans/containers) used for transporting food within the site and from the site shall be inspected prior to loading to ensure they are clean, in good repair, suitable for the purpose, and free from odors or other conditions that may impact negatively on the product.

Response: Compliant

11.6.5.3 - Vehicles (e.g., trucks/vans/containers) shall be secured from tampering using seals or other agreed-upon and acceptable devices or systems.

Response: Compliant

11.6.5.4 - Loading and unloading docks shall be designed to protect the product during loading and unloading. Loading practices shall be designed to minimize unnecessary exposure of the product to conditions detrimental to maintaining product and package integrity during loading and transport.

Response: Compliant

11.6.5.5 - Refrigerated units shall maintain the product at the required temperature. The unit's temperature settings shall be set, checked, and recorded before loading, and the product temperature shall be recorded at regular intervals during loading, as applicable.

Response: N/A

Evidence: • Refrigerated units were not used or required.

11.6.5.6 - The refrigeration unit shall be operational at all times and checks completed of the unit's operation, the door seals, and the storage temperature at regular intervals during transit.

Response: N/A

Evidence: • Refrigerated units were not used or required.

11.6.5.7 - On arrival, prior to opening the doors, the food transport vehicle's refrigeration unit's storage temperature settings and operating temperature shall be checked and recorded. Unloading shall be completed efficiently, and product temperatures shall be recorded at the start of unloading and regular intervals during unloading.

Response: N/A

Evidence: • Refrigerated units were not used or required.

11.6.5.8 - Unloading practices shall be designed to minimize unnecessary exposure of the product to conditions detrimental to maintaining product and package integrity.

Response: Compliant

Summary -

Response: Finished products were shipped daily to a corporate warehouse using a site owned tractor/trailer. Products were stored ambient at the site and held refrigerated at the third-party warehouse to extend shelf life (4 years). The unloading ramp was covered from the high-speed door to the trailer - a risk assessment was in place that addressed the open dock area. The trailer was inspected weekly as it was dedicated for this site with only their products - the trailer was observed clean and in good condition during the audit. The trailer was locked - the locked condition was recorded on each shipping invoice. The risk assessment on the semi-open dock area addresses that each pallet was shrink wrapped with a plastic cover and acknowledge the site was located in an arid climate. The risk assessment included that the site could delay any shipment due to unfavorable conditions as they owned the dedicated transport that was used to move product out. Refrigerated units were not used or required. Unloading practices included receiving apple crates on open deck trailers as the materials were still considered an unprocessed raw commodity at this point.

11.7.1 - High-Risk Processes

11.7.1.1 - The processing of high-risk food shall be conducted under controlled conditions, such that sensitive areas, in which the high-risk food has undergone a “kill” step, a “food safety intervention” or is subject to post-process handling, are protected/segregated from other processes, raw materials, or staff who handle raw materials, to ensure cross-contamination is minimized.

Response: Compliant

11.7.1.2 - Ambient air in high-risk areas shall be tested at least annually to confirm that it does not pose a risk to food safety.

Response: Compliant

11.7.1.3 - Areas in which high-risk processes are conducted shall only be serviced by staff dedicated to that function.

Response: Compliant

11.7.1.4 - Staff engaged in high-risk areas shall change into clean clothing and footwear or temporary protective outerwear when entering high-risk areas. Staff access points shall be located, designed, and equipped to enable staff to change into the distinctive protective clothing and practice a high standard of personal hygiene to prevent product contamination.

Response: Compliant

11.7.1.5 - Product transfer points shall be located and designed, so they do not compromise high-risk segregation and minimize the risk of cross-contamination.

Response: Compliant

Summary -

Response: The site considered the packaging room as a high care area as the apples went through a validated kill step (160F) and had a low risk of environmental contamination, but not microbial growth. The assessment further stated the dried apple products were low moisture (2-3%), and closed packaging lines limited microbial risks of cross-contamination. Environmental risks were floors and drains - these were monitored with a PEM Program for Salmonella and Listeria Sp. Air was sampled/tested annually. Employees handling product were

required to wear aprons and gloves to prevent contamination. Footwear was sanitized by foot-baths at the entrance to packaging areas, at the employee entrance, between receiving and processing, and at hand sinks.

11.7.2 - Thawing of Food

11.7.2.1 - Thawing of food shall be undertaken in equipment and rooms appropriate for the purpose. Equipment for water thawing shall be continuous flow to ensure the water exchange rate and temperature do not contribute to product deterioration or contamination. Water overflow shall be directed into the floor drainage system and not onto the floor or shall be appropriately plumbed.

Response: N/A

Evidence: • Thawing was not undertaken.

11.7.2.2 - Air thawing facilities shall be designed to thaw food under controlled conditions at a rate and temperature that does not contribute to product deterioration or contamination.

Response: N/A

Evidence: • Thawing was not undertaken.

11.7.2.3 - Provision is to be made for the containment and regular disposal of used cartons and packaging from thawed product so that there is no risk to the product.

Response: N/A

Evidence: • Thawing was not undertaken.

Summary -

Response: Thawing was not undertaken.

11.7.3 - Control of Foreign Matter Contamination

11.7.3.1 - The responsibility and methods used to prevent foreign matter contamination of the product shall be documented, implemented, and communicated to all staff. Inspections shall be performed (refer to 2.5.4.3) to ensure plant and equipment remain in good condition and equipment has not become detached or deteriorated and is free from potential contaminants.

Response: Compliant

11.7.3.2 - Containers, equipment, and other utensils made of glass, porcelain, ceramics, laboratory glassware, or other similar materials shall not be permitted in food processing /contact zones (except where the product is contained in packaging made from these materials, or measurement instruments with glass dial covers are used, or MIG thermometers are required under regulation). Where glass objects or similar material are required in food handling/contact zones, they shall be listed in a glass inventory, including details of their location and condition.

Response: Compliant

11.7.3.3 - Regular inspections of food handling/contact zones shall be conducted (refer to 2.5.4.3) to ensure they are free of glass or other like material and to establish changes to the condition of the objects listed in the glass inventory.

Response: Compliant

11.7.3.4 - Glass instrument dial covers on processing equipment and MIG thermometers shall be inspected at the

start of each shift to confirm they have not been damaged.

Response: Compliant

11.7.3.5 - In circumstances where glass or similar material breakage occurs, the affected area shall be isolated, cleaned, thoroughly inspected (including cleaning equipment and footwear), and cleared by a suitably responsible person prior to the start of operations.

Response: Compliant

11.7.3.6 - Wooden pallets and other wooden utensils used in food processing and handling areas shall be dedicated for that purpose, clean, and maintained in good order. Their condition shall be subject to regular inspection.

Response: Compliant

11.7.3.7 - Loose metal objects on equipment, equipment covers, and overhead structures shall be removed or tightly fixed so as not to present a hazard.

Response: Compliant

11.7.3.8 - Knives and cutting instruments used in processing and packaging operations shall be controlled, kept clean, and well maintained. Snap-off blades shall not be used in manufacturing or storage areas.

Response: Compliant

11.7.3.9 - Gaskets, rubber impellers, and other equipment made of materials that can wear or deteriorate over time shall be inspected on a regular frequency (refer to 2.5.4.3).

Response: Compliant

Summary -

Response: Packaging lines included magnets and metal detectors that were checked hourly by QA techs. Process measures that minimized foreign material contamination included fluming, optical sorting, and sifters. Metal detector and magnet checks were demonstrated during the audit. The glass audit was listed and inspected annually - the last inspection was completed in Aug 2024 - observations and corrections were noted on the inspection report. True glass was not installed within product zones. Glass dial covers and MIG thermometers were not used in the process zone. Knives were assigned to specific operators or areas, as required - control of each knife was to etch the initials of the person it was assigned to on the handle - dull blades were only allowed to be replaced by the area supervisor. Knives were observed clean and in good condition. Snap-off blades were not allowed. The site addressed the gasket and wearable equipment policy by updating replacement frequencies into each units PM - as an example, verified that gaskets were updated to the Re-Screen PM and shown it was up to date.

11.7.4 - Detection of Foreign Objects

11.7.4.1 - The responsibility, methods, and frequency for monitoring, maintaining, calibrating, and using screens, sieves, filters, or other technologies to remove or detect foreign matter shall be documented and implemented.

Response: Compliant

11.7.4.2 - Where detection and/or removal systems are used, the site shall establish limits for detection, based on a risk assessment of the product and its packaging, and identify the location(s) of the detector(s) in the process.

Response: Compliant

11.7.4.3 - Metal detectors or other physical contaminant detection technologies shall be routinely monitored, validated, and verified for operational effectiveness. The equipment shall be designed to isolate defective product and indicate when it is rejected.

Response: Compliant

11.7.4.4 - Records shall be maintained of the inspection of foreign object detection devices, of any products rejected or removed by them, and of corrective and preventative actions resulting from the inspections.

Response: Compliant

11.7.4.5 - In all cases of foreign matter contamination, the affected batch or item shall be isolated, inspected, reworked, or disposed of. Records shall be maintained of the disposition.

Response: Compliant

Summary -

Response: QA was responsible for metal detector, magnet checks - any findings from these checks were required to be inspected and signed off by maintenance. Metal detector limits were 1.5 mm Fe, 1.5 mm non-Fe, and 2.0 mm SS. Metal detectors diverted the process to collection bins for inspection. Metal detectors were checked at the start of each shift, hourly, and the end of the shift by QA. Any findings were captured for investigation by both QA and maintenance. Any check failure required product being held to the last good check. Records of metal detector checks (CCP) were maintained and verified by the QA Supervisor in an electronic database that required log in to access. QA was responsible for product disposition of any potentially impacted foreign material issues. Records of disposition were maintained on the Hold Log.

11.8.1 - Waste Disposal

11.8.1.1 - The responsibility and methods used to collect and handle dry, wet, and liquid waste and how to store it prior to removal from the premises shall be documented and implemented.

Response: Compliant

11.8.1.2 - Waste shall be removed on a regular basis and not allowed to build up in food handling or processing areas. Designated waste accumulation areas shall be maintained in a clean and tidy condition until external waste collection is undertaken.

Response: Compliant

11.8.1.3 - Waste and overflow water from tubs, tanks, and other equipment shall be discharged directly to the floor drainage system or by an alternative method that meets local regulatory requirements.

Response: Compliant

11.8.1.4 - Trolleys, vehicle waste disposal equipment, collection bins, and storage areas shall be maintained in a serviceable condition, cleaned, and sanitized regularly to prevent the attraction of pests and other vermin.

Response: Compliant

11.8.1.5 - Adequate provision shall be made for the disposal of all solid processing waste, including trimmings, inedible material, and used packaging.

Response: Compliant

11.8.1.6 - Where applicable, a documented procedure shall be in place for the controlled disposal of trademarked

materials waste considered high-risk for handling or other reasons. Where a contracted disposal service is used, the disposal process shall be reviewed regularly to confirm compliance.

Response: N/A

Evidence: • Trademarked materials or labels were not used or applied.

11.8.1.7 - Inedible waste designated for animal feed shall be stored and handled so that it will not cause a risk to the animal or further processing. If denaturant is used to identify inedible waste, it shall be demonstrated that it does not pose a risk to animal health.

Response: N/A

Evidence: • Waste was not collected for animal feed.

11.8.1.8 - Waste held on-site prior to disposal shall be stored in a separate storage facility that is suitably insect proofed and located where it does not present any hazards.

Response: N/A

Evidence: • Waste was not held onsite.

11.8.1.9 - Adequate provision shall be made for the disposal of all liquid waste from processing and food handling areas. Liquid waste shall either be removed from the processing environment continuously or held in a designated storage area in lidded containers prior to disposal where it does not present any hazards.

Response: Compliant

11.8.1.10 - Reviews of the effectiveness of waste management shall form part of regular site inspections (refer to 2.5.4.3), and the results of these inspections shall be included in the relevant inspection reports.

Response: Compliant

Summary -

Response: Process waste was collected and dewatered in the waste system - liquid waste went to a lagoon and dry waste was collected/shipped for compost. Plastic was compacted and removed as bales. Cardboard was removed to a large recycling compactor. Garbage was removed to a covered dumpster - areas around waste and recycling collecting were observed clean and in good condition. Waste containers were maintained daily by the sanitation workers. Waste removal from the site was included in daily cleaning schedules. Waste collection areas were included in monthly inspections by management. Trademarked materials or labels were not used or applied. Waste was not collected for animal feed. Waste was not held onsite. Liquid waste was appropriately removed without becoming a pest issue.
