

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|--|-------------------------------------|-------------------|
| 1. DATE 09/20/2005 | 2. RECORD NO. 0013-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | (b)(6), (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 416.2(d) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | SSOP | OTHER Oper. San. Env. Mois | |
| 8. ISP CODE 06D01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS FACILITY - Product Based | | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | | |

While verifying operational sanitation procedures on the loading dock I observed water dripping from a cooling unit. The cooling unit was located above the carcass rail. There were not any carcasses under the cooling unit at the time but the carcass loading buggy was being driven under the unit. I tagged the area with US reject tag # B37819173 and informed [REDACTED] loading dock supervisor, of the dripping water. The establishment stopped loading carcasses and placed plastic under the cooling unit. Establishment management and maintenance personnel thought that condensation was occurring because the unit was defrosting at the time. The maintenance supervisor said he would change the defrosting cycle so that the unit will defrost when there isn't any activity in the area. He also said that he had just resealed a joint in the drain pipe and would check it to make sure it was properly sealed. In addition to hanging plastic, other immediate action taken included restoring sanitary conditions by wiping water off all affected surfaces. After the further planned actions were given I removed the regulatory control action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
 [REDACTED]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.55 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
 [Signature]

15. DATE
 10/21/05

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
 [REDACTED]

17. DATE
 11/14/05

00001

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US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|---------------------------------|---|-------------------|
| 1. DATE 11/02/2005 | 2. RECORD NO. 0014-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | (b)(6), (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] Q A Super. | |
| 6. RELEVANT REGULATION(S) 317.2 (c) & 317.2(h) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | SSOP | OTHER None | |
| 8. ISP CODE 04B03 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS PRODUCT - Misbranding | |

10. DESCRIPTION OF NONCOMPLIANCE

On 11/02/2005 observation of boxed offal products in the establishment's freezer indicated that the labeling regulatory requirements involving net weight were not being met. The labels on the boxed product do not contain a net weight. At 0710 CSI [REDACTED] retained all head meat, cheek meat, oxlips, tongues, hearts and tails, that have been produced and boxed since the opening of the establishment, with US retain tag numbers B39831370 and B3983171. 9 CFR 317.1(a) states that when, in an official establishment, any inspected and passed product is placed in any receptacle or covering constituting an immediate container, there shall be affixed to such container a label as described in 317.2. 9 CFR 317.2(c) goes on to state that labels of all products shall show the following information on the principal display panel in accordance with the requirements of this part or if applicable, part 319 of this subchapter: (4) An accurate statement of the net quantity of contents, as prescribed in paragraph (h) of this section.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

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12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[Signature]

15. DATE

11/3/05

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

17. DATE

11/3/05

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A0000420_4-000004

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250, and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

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|--|--|---|-------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input type="checkbox"/> Food Safety <input checked="" type="checkbox"/> Other Consumer Protection | |
| 1. DATE 11/15/2005 | 2. RECORD NO. 0017-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | (b)(6), (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED Gary Ruse | |
| 6. RELEVANT REGULATION(S) 313.1(b), 313.50(a) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER N/A |
| 8. ISP CODE 04C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS PRODUCT - Protocol | | |

10. DESCRIPTION OF NONCOMPLIANCE

At approximately 0625 on 11/15/2005 while performing ante mortem inspection I observed a Category I humane handling non-compliance. The noncompliance occurred when approximately 10 animals were being moved out of their pen (Pens C3 & C4) into the drive alley during ante mortem inspection. As the animals were exiting and reentering their pens approximately 8-10 animals slipped on a sheet of ice in the drive alley. Of the animals that slipped two or three slipped to the point that they fell to their belly or front knees. A regulatory control action was taken on the drive alley by applying U.S. Reject tag # B39831356, preventing its use until it was brought into compliance. Further examination of the alley revealed an ice covering in several other spots which had occurred as a result of pooled rain water and cattle urine from the previous night in combination with the on-set of cold weather. The establishment did not meet the regulatory requirements of 9 CFR 313.1(b) in that they did not maintain their drive alley in a condition that provided good footing for the animals as they were being moved from their pen.

Immediate corrective actions taken by the plant were to salt and gravel the surface of the drive alley to improve footing to an acceptable level. Further planned actions given by the [redacted] and Gary Ruse were to salt the drive alleys on days when icy conditions exist. They also stated that when weather permits the establishment will resurface the pens and drive alleys and groove the surface so as to provide adequate footing during inclement weather conditions. After all regulatory

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Redacted Signature]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.33 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[Signature: Gary E. Ruse]

15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Redacted Signature]

17. DATE

11/12/05

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A0000420_14-000014

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|--|--------------------------------------|--------------|
| 1. DATE 11/15/2005 | 2. RECORD NO. 0017-2005-9114 | 3. ESTABLISHMENT NO. 32111. M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED Gary Ruse (b)(6), (b)(7)(c) | | |
| 6. RELEVANT REGULATION(S) 313.1(b), 313.50(a) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER N/A |
| 8. ISP CODE 04C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS PRODUCT - Protocol | | |

10. DESCRIPTION OF NONCOMPLIANCE

requirements were met I removed the regulatory control action affecting the drive alley.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Redacted Signature]

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

DISTRIBUTION: Original & 1 Copy to Establishment, 1 Copy to Inspector
Page 2 of 2

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A0000420_15-000015

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---------------------------------|---|------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 11/10/2005 | 2. RECORD NO. 0016-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 417, 310.18 | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP |
| | | Slaughter HACCP | |
| 8. ISP CODE 03J01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE

As a response to multiple dressing defects observed by inspection at the rail inspection area during the week of November 7th, 2005, I elected to perform an unscheduled 03J01 zero-tolerance verification procedure on November 10, 2005. Prior to performing the procedure I used a random number generator to select the two carcasses needed for the zero-tolerance verification task. Carcass numbers [redacted] and [redacted] were selected. At approximately 0740, while examining carcass # [redacted], I observed a 2 mm x 10 mm yellow, fibrous piece of plant-like material on the outside wall of the abdomen. I identified the contamination as ingesta using the criteria in FSIS Directive 6420.2. I notified the slaughter floor supervisor, [redacted] of the non-compliance. The contamination was removed by plant personnel in accordance with 9 CFR 310.18. Immediate corrective actions given by the plant were to retain all carcasses back to the last acceptable audit for rework and to retrain their new trimmers. [redacted] also stated that he would supervise the trimmers more closely for the remainder of the shift. Examination of carcass # [redacted], head meat and cheek meat did not reveal any zero-tolerance defects.

Continued failure to meet regulatory requirements for zero-tolerance may result in the need to take further regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Redacted signature]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|---|----------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT Gary Ruse | 15. DATE |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [Redacted signature] | 17. DATE 11/14/05 |

00011

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

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|--|---|---|-------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 11/15/2005 | 2. RECORD NO. 0018-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] Operations Mgr. (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.15 | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP SSOP | OTHER |
| 8. ISP CODE 01C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) At approximately 0900hrs, while observing the slaughter dressing procedures during an in-plant review, I observed the gutter drop the pluck (exposed heart and lung) onto the floor directly contaminating the heart muscle. The heart is harvested as edible product. The gutter picked the contaminated pluck from the floor and placed the contaminated lung and heart onto the product contact surface of the [REDACTED] inspection stand. The gutter notified the [REDACTED] that the pluck was contaminated from falling onto the floor. The [REDACTED] performed the ritual inspection and moved the pluck to the [REDACTED] truck (gut buggy) for USDA inspection. The USDA on-line inspector was not notified that the pluck was contaminated from falling on the floor. The [REDACTED] then cleaned and sanitized the product contact surface of the [REDACTED] pluck inspection stand. After the USDA inspector properly performed all the post-mortem inspection procedures on the pluck, a company employee removed the heart from the pluck and placed the contaminated heart with another heart on the heart processing stand for packaging as edible product. Company management had failed to properly identify the contaminated heart which was diverted to processing as edible product, contaminating the product contact surface of the heart processing stand. A regulatory control action was taken by rejecting the heart processing area with US Reject Tag #B39831392. The operations manager, [REDACTED], was notified of the failure to meet the regulatory requirements of 9 CFR 416.15. Both hearts in the heart processing stand were condemned as contaminated and diverted to inedible. The product contact surface of the heart processing stand was cleaned and sanitized. [REDACTED] verbally provided the

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

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12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|---|----------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT [REDACTED SIGNATURE] | 15. DATE 11/28/05 |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED SIGNATURE] | 17. DATE 12/28/05 |

00018

A0000420_18-00018

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE
 Food Safety Other Consumer Protection

1. DATE: 11/16/2005 2. RECORD NO.: 0019-2005-9114 3. ESTABLISHMENT NO.: 32111 M / 1

4. TO (Name and Title): Gary Ruse, Plant Manager 5. PERSONNEL NOTIFIED: (b)(6), (b)(7)(c)

6. RELEVANT REGULATION(S): 417.2(c)(4)

7. SECTION/PAGE OF EST. PROCEDURE PLAN: Slaughter HACCP

8. ISP CODE: 03J01 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: HACCP - Monitoring

10. DESCRIPTION OF NONCOMPLIANCE
 On November 15, 2005 during an on-site visit by district management personnel, a review of the establishment's slaughter HACCP plan was conducted. Upon review of critical control point (CCP) monitoring procedures and associated records a noncompliance involving monitoring frequency was observed. The establishment's slaughter HACCP plan, which was last signed on 11/10/2005, has a CCP (b)(4) The monitoring procedure for this CCP states that (b)(4) A review of the establishment's slaughter HACCP records indicate that the establishment has not been monitoring its (b)(4) at the frequency stated in its current HACCP plan, but has been performing its audits at a frequency of (b)(4) The establishment is not in compliance with 9 CFR 417.2(c)(4) in that it is not performing the Final Quality Audit monitoring procedure at the frequency specified in its HACCP plan.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
 (b)(4)

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of the CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):
 13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT: Gary Ruse 15. DATE: 11/28/05
 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE: (b)(4) 17. DATE: 12/28/05

00022

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

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|--|---------------------------------|---|------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 11/17/2005 | 2. RECORD NO. 0020-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 417.2 | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP |
| | | OTHER | |
| | | HACCP-RNG | |
| 8. ISP CODE 03C01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | |

(b)(4) 10. DESCRIPTION OF NONCOMPLIANCE
At approximately 1120, while performing a scheduled 03C01 monitoring verification procedure of the establishment's critical control point (CCP) for [REDACTED] on oxlips I observed contamination on the fourth oxlip examined. The contamination was yellow, fibrous and had a plant-like texture and measured approximately 1 mm wide by 15 mm long. I identified the contamination as a piece of ingesta (hay). The contamination met the definition of ingesta found in FSIS Directive 6420.2. I tagged product back to the last acceptable audit with U.S. Retain tag # B39831348. I showed Quality Assurance Manager, [REDACTED] the non-compliance. I asked him what he intended to do to meet regulatory requirements. He informed me that he would discard all affected oxlips back to the last acceptable audit. I also asked him for a preventative measure. He informed me that he did not have one. I informed [REDACTED] that he would not be allowed to harvest oxlips until a preventative measure was given.

A similar noncompliance record (NR #011-2005-9114) involving [REDACTED] on oxlips was issued on 9/19/2005. The establishment's preventative measures given were that they would retrain the head washers and head meat harvesters. These preventative measures were either ineffective or were not properly implemented. Continued failure to meet regulatory requirements may result in the need for further regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]

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12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

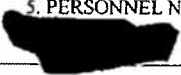
This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.


| | |
|---|----------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT | 15. DATE |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED] | 17. DATE 11/23/05 |


00025

A0000420_25-000025

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|--|---------------------------------|---|--|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 11/21/2005 | 2. RECORD NO. 0021-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED  (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.2(f) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | | SSOP | |
| | | OTHER N/A | |
| 8. ISP CODE 06D01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS FACILITY - Structural | |

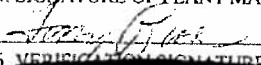

10. DESCRIPTION OF NONCOMPLIANCE
As part of a scheduled 06D01 procedure I elected to perform a review of the establishment's sewage disposal system. During a conversation with the maintenance manager, , I was enlightened to the fact that when the establishment constructed the new USDA inspection office and its attached restroom, the restroom's sewage pipe was connected to the drainage lines for the kill floor and tripe room. Since this does not meet regulatory requirements for sewage disposal I took a regulatory control action by rejecting the restroom with US Reject tag # B3781918. 9 CFR 416.2(f) states that sewage must be disposed into a sewage system separate from all other drainage lines or disposed of through other means sufficient to prevent backup of sewage into areas where product is processed, handled, or stored.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
 *JRM*
You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

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| 14. SIGNATURE OF PLANT MANAGEMENT  | 15. DATE 11/30/05 |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE  | 17. DATE 12/28/05 |

00028

A0000420_28-000028

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|--|-------------------------------------|-------|
| 1. DATE 11/29/2005 | 2. RECORD NO. 0022-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6), (b)(7)(c) | | |
| 6. RELEVANT REGULATION(S) 417 | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| HACCP RNG | | | |
| 8. ISP CODE 03C01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE

At 10:20, 28 Nov, 2005, [REDACTED] observed ingesta in the ox lips. She notified me and I performed an unscheduled zero tolerance audit of the ox lips and observed a straw approximately one centimeter in length. The contamination met the definition of ingesta, defined in FSIS Directive 6420.2. [REDACTED] notified Q. A. Manager [REDACTED] and he confirmed that the contamination in the product was ingesta. The product was retained with retain tag # 819161. [REDACTED] instructed the trimmer to dispose of the product into inedible rendering. This was accomplished. The ox lips container was then washed and sanitized. Preventive measures given by [REDACTED] to [REDACTED] were closer monitoring of the product by the harvesting worker and, if grossly contaminated, place the product in inedible. Also emphasize the worker more thorough wash the products

Similar noncompliance records (NR#011-2005-9114, dated 9/19/2005; and NR#0020/2005/9114, dated 11/17/2005) Similar preventive measures were given, that they would retrain head washers and meat head harvesters. Continued failure to meet regulatory requirements may result in the need of further regulatory or administrative action.

11. SIGNATURE OF INSPECTOR [REDACTED]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT [REDACTED]

15. DATE
11/30/05

16. VERIFICATION BY [REDACTED] REGION PROGRAM EMPLOYEE

17. DATE
11-30-06

00031

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|--|---|-------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 12/05/2005 | 2. RECORD NO. 0023-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | (b)(6), (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 417 | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP p 624 | SSOP | OTHER |
| 8. ISP CODE 03C01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE

At about 1535, 5 December, 2005, [REDACTED] requested I perform an unscheduled inspection of head meat and tongues. She felt there was a problem with contamination. I inspected the product and found the following: ingesta from the size of specks up to straw 3/8 inch in length on two pieces of oxlips; ingesta and hair on one tongue; and ingesta consisting of specks and a straw 3/8 inch in length on one piece of tongue meat. [REDACTED] was notified and concurred with USDA findings. The oxlips, tongue, and tongue meat was tagged with retain tags B37819164, B37819165, and B37819167 respectively. The above findings met the definition of ingesta as defined in directive 6420.2. Corrective measures performed by the establishment were: the above product was discarded, items in contact with the discarded product and contact surfaces were washed and sanitized, product on racks in the cooler was reinspected and trimmed as necessary. Preventive measures proposed by [REDACTED] were: Replace the shower head on the head wash station with a more effective one. Retrain workers on the head wash and trim stations.

Similar noncompliance records (0011-2005-9114, 09/19-05; 0012-2005-9114, 09-20-05; 0020-2005-9114, 11/17-05; 0022-2005-9114, 11-29-05) have previously been recorded. Continued failure to meet regulatory requirements may result in the need for further regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE] *Sam*
You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

15. DATE
2/14/06

17. DATE
02/14/06

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---------------------------------|---|--|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 12/05/2005 | 2. RECORD NO. 0023-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / I | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 417 | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | | SSOP | |
| p 624 | | OTHER | |
| 8. ISP CODE 03C01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | |

(b)(6), (b)(7)(c)

10. DESCRIPTION OF NONCOMPLIANCE
At about 1535, 5 December, 2005, [REDACTED] requested I perform an unscheduled inspection of head meat and tongues. She felt there was a problem with contamination. I inspected the product and found the following: ingesta from the size of specks up to straw 3/8 inch in length on two pieces of oxlips; ingesta and hair on one tongue; and ingesta consisting of specks and a straw 3/8 inch in length on one piece of tongue meat. [REDACTED] was notified and concurred with USDA findings. The oxlips, tongue, and tongue meat was tagged with retain tags B37819164, B37819165, and B37819167 respectively. The above findings met the definition of ingesta as defined in directive 6420.2. Corrective measures performed by the establishment were: the above product was discarded. items in contact with the discarded product and contact surfaces were washed and sanitized; product on racks in the cooler was reinspected and trimmed as necessary. Preventive measures proposed by [REDACTED] were: Replace the shower head on the head wash station with a more effective one. Retrain workers on the head wash and trim stations.

Similar noncompliance records (0011-2005-9114, 09/19-05; 0012-2005-9114, 09-20-05; 0020-2005-9114, 11/17-05; 0022-2005-9114, 11-29-05) have previously been recorded. Continued failure to meet regulatory requirements may result in the need for further regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):
And Denatured. Contact Surfaces were cleaned & Sanitized. The days off product was Discarded

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):
The Spray Head was Replaced & Extended Further over the wash area to be more Effective. The Check's are now Being opened up more to better rinse foreign matter from that area

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
[Signature]

15. DATE
12/6/05

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]

17. DATE
06/15/06

00036

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE: 12/06/2005 2. RECORD NO.: 0024-2005-9114 3. ESTABLISHMENT NO.: 32111 M / 1

4. TO (Name and Title): Gary Ruse, Plant Manager 5. PERSONNEL NOTIFIED: [REDACTED] (b)(6), (b)(7)(c)

6. RELEVANT REGULATION(S): 416.12(b); 416.4 (a); 416.13; 416.15

7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP SSOP OTHER: PP. 619-620

8. ISP CODE: 01C01 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: SSOP - Monitoring

10. DESCRIPTION OF NONCOMPLIANCE:

(b)(4) On 12-06-2005 I checked several sterilizers on the kill floor and found the sterilizer at the gutting station to be 148 degrees. The establishment's Operational SSOP's state that [REDACTED] " [REDACTED] ". Regulatory control action was taken by placing Retained Tag B37819166 on the carcass positioned to be gutted at 0831. [REDACTED] was notified. [REDACTED] corrective action was to open the steam valve more to allow more steam appropriately heat the sterilizer to [REDACTED] [REDACTED] was notified and his proposed preventive measure is the sterilizers will be set at [REDACTED] before operation begins and then secure the controls so no one can change to a lower setting.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT


15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

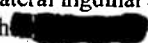
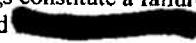

17. DATE

00037

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | | |
|--|---------------------------------|---|------|-------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | | |
| 1. DATE 12/07/2005 | 2. RECORD NO. 0025-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED  | | |
| 6. RELEVANT REGULATION(S) 417.4(a), 310.18(a) | | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP | OTHER |
| | | pp. 623 & 119 | | |
| 8. ISP CODE 03J02 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE

On 7 Dec, 05 I performed a scheduled zero fecal tolerance inspection. I randomly selected a time (10:45) to inspect two carcasses to complete the task. The two carcasses selected were carcass numbers 431 and 432. On inspecting carcass 432, I found, in an area about 3 inches by 2 inches, a brown fibrous material about 1/4 inch by 3/8 inch and small specks of fibrous material consistent with the appearance of fecal material, and 4 small hairs. This area was located in the lateral inguinal area. These findings constitute a failure of a zero tolerance test in accordance with FSIS Directive 6420.2. Both  (USDA Inspector) and  (Slaughter Floor Supervisor) verified my findings as fecal material and hair. I notified  (Q.A.) of the 03J02 failure. We reviewed his Q.A. zero tolerance records and found the last inspection was completed on carcass #412. Corrective action will be the carcasses between 412 and 432 will be inspected for contamination and trimmed. Preventive measures will be to retrain the skinning and legging workers. A similar Noncompliance Record (0010-2005-9114, dated 09/14/05; 0016-2005-9114, dated 11/10/05) have previously been recorded. Continued failure to meet regulatory requirements may result in further regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE


You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

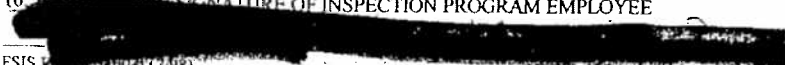
13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT


15. DATE

12/12/05

16. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE


17. DATE

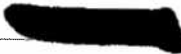
02/03/05

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.


US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

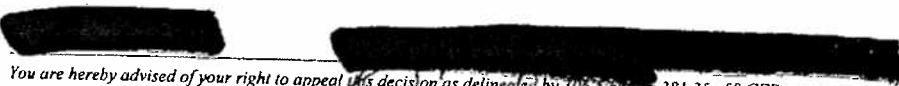
Food Safety Other Consumer Protection

| | | |
|---|--|---|
| 1. DATE 12/13/2005 | 2. RECORD NO. 0026-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED  (b)(6), (b)(7)(e) |
| 6. RELEVANT REGULATION(S) 416.15(b)(3) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN HACCP SSOP OTHER pg 1 | | |
| 8. ISP CODE 01C01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Corrective Action | |

10. DESCRIPTION OF NONCOMPLIANCE

On 12/13/05, I performed a scheduled 01C01 (recordkeeping) procedure on operational sanitation records generated from the previous day's production. While reviewing the records from the cooler and loading dock areas I observed that the supervisor, , had recorded that a carcass had been "cut and trimmed" after it had fallen to the floor of the cooler. The establishment failed to take all appropriate corrective actions required by 9 CFR 416.15 in that they did not provide procedures to prevent the recurrence of direct product contamination.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

 *JUM*

You are hereby advised of your right to appeal this decision as delineated by 308.3 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

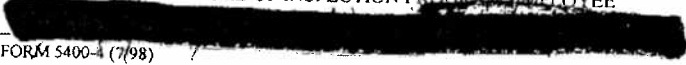
14. SIGNATURE OF PLANT MANAGEMENT

Gary Ruse

15. DATE

1/31/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE



17. DATE

01/31/06

FSIS FORM 5400-4 (7/98)

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

DISTRIBUTION: Original & 1 Copy to Establishment, 1 Copy to Inspector
Page 1 of 1

00041

A0000420_41-000041

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE: 12/13/2005
 2. RECORD NO.: 0027-2005-9114
 3. ESTABLISHMENT NO.: 32111 M / 1
 4. TO (Name and Title): Gary Ruse, Plant Manager
 5. PERSONNEL NOTIFIED: [REDACTED] (b)(6), (b)(7)(c)
 6. RELEVANT REGULATION(S): 416.13(b)
 7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP | SSOP | OTHER
 page 2
 8. ISP CODE: 01C02
 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: SSOP - Monitoring

10. DESCRIPTION OF NONCOMPLIANCE

While discussing the establishment's Sanitation Standard Operating Procedures (SSOP) with the establishment's Quality Control Manager, [REDACTED] a noncompliance involving the use of chemical sanitizers was revealed. The establishment's SSOP for the use of sanitizing chemicals states: [REDACTED]

(b)(4) [REDACTED] When asked about the type and concentration of sanitizer used to sanitize equipment [REDACTED] stated that the establishment was using [REDACTED] at a concentration of [REDACTED] (this was confirmed by observing the plant's SSOP records for 12/13/05). [REDACTED] was being used as a chemical sanitizing agent at those work stations that did not have [REDACTED] available to them. Those stations included the [REDACTED]. The supplier's directions state that for meat and poultry processing plants the sanitizer is to be used as follows: [REDACTED]

[REDACTED] The establishment failed to follow their SSOP that addresses the mixing of chemicals. They also [REDACTED]

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED] *Sam*

You are hereby advised of your right to appeal this decision as delineated by 306.5 and 387.33 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

Gary Ruse

15. DATE

1-31-06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE


[REDACTED]

17. DATE


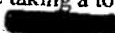






01-31-06

00043

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

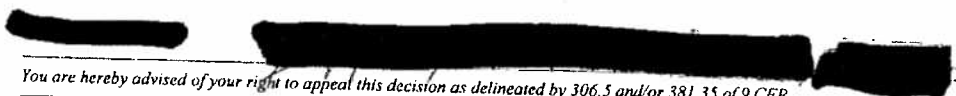
| | | | |
|--|---------------------------------|---|-------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 12/14/2005 | 2. RECORD NO. 0028-2005-9114 | 3. ESTABLISHMENT NO. 32111 M/1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED  (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 417.2(c)(4) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| | HACCP | SSOP | OTHER |
| HACCP Plan | | | |
| 8. ISP CODE 03J01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | | |

(b)(4)

On 12/14/2005 at approximately 1440 while taking a tour of the plant's carcass cooler, as part of a Comprehensive Food Safety Assessment, EIAO  and CSI  observed a zero-tolerance noncompliance on a lamb carcass. The carcass was identified by carcass tag # . The contamination observed was green in color, fibrous in nature and contained plant material. It was located on the inside of the right fore shank and covered an area approximately 1" X 2" in size. Contamination was shown to  who agreed with the findings. The carcass was tagged with US Retain tag # B37819186. Upon reviewing their HACCP slaughter records for 12/13/2005, the plant determined that all lamb carcasses between numbers  and  would be reworked and reinspected for zero-tolerance defects. Contamination was trimmed from the carcass by Slaughter Foreman, , in accordance with 9 CFR 310.18, it was reinspected by Inspector  and the regulatory control action was removed.

A similar noncompliance (NR # 0025-2005-9114) involving the establishment's beef slaughtering process occurred on 12/07/2005. The preventative measures of retraining employee was either not implemented or it was not effective. This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE



You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

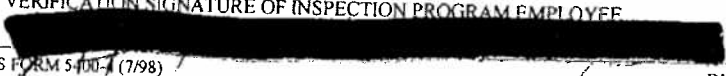
13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

15. DATE


16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE



17. DATE
03/03/06


00045

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|--|---|-------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 12/14/2005 | 2. RECORD NO. 0029-2005-9114 | 3. ESTABLISHMENT NO. 32111 M/1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED  (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.15(a) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| Pre-op San/ 1 | | | |
| 8. ISP CODE 01B01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Corrective Action | | |

10. DESCRIPTION OF NONCOMPLIANCE
On 12/14/2005 I performed a scheduled recordkeeping (01B01) procedure of preoperational sanitation records for 12/12/2005 and 12/13/2005. Upon reviewing the Sanitation Management Preoperational Sanitation records for the slaughter floor I observed that there were several product contact surfaces that did not pass inspection because of fat residue from the previous day's production. The records stated that the areas were recleaned and sanitized, but the records did not state the measures that the establishment would take to prevent recurrence of contamination. The establishment has failed to meet all of the regulatory requirements of 416.15.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

 *John*
You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

Notified sanitation manager about the deviation, the contact surfaces were RIEP.

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

had a meeting with sanitation manager and A.A manager, which the Sanitation manager was told that he had to start filling out preventative measures everyday when a deviation occurs.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
Gary Ruse

15. DATE
1/31/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE


17. DATE
01/31/06

00051

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|---------------------------------|---|--|
| 1. DATE 12/14/2005 | 2. RECORD NO. 0030-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / I | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.13(b) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | | SSOP Oper. San./ 2 | |
| 8. ISP CODE 01C01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) On 12/14/2005 I performed a records review of the establishment's operational sanitation records for 12/12/2005 and 12/13/2005. During this records review I observed a noncompliance involving the establishment's SSOP monitoring procedure for its hot pots and abscess hoses on the slaughter floor. The establishment's SSOP states [REDACTED]. The establishment's operational sanitation records for the slaughter floor only have [REDACTED] for each monitoring check. The establishment either failed to monitor [REDACTED] or it failed to document the recording of [REDACTED] temperatures. The records also do not state [REDACTED] where the temperature was taken.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[REDACTED SIGNATURE]

15. DATE

1/31/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

17. DATE

3/1/31/06

00052

This request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|---|-------------------------------------|-------|
| 1. DATE 12/14/2005 | 2. RECORD NO. 0031-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 416.13(b) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| Oper. San./ 2 | | | |
| 8. ISP CODE 01C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE

While observing plant operations on the slaughter floor during a Comprehensive Food Safety Assessment (CFSA), EIAO [REDACTED] observed an insanitary condition at the head boning table. There was heavily beaded condensation on the pipes running along the wall above the head boning table. [REDACTED] observed several drops of water fall onto the product contact surface of the boning table. Because the head boning operation had been completed for the day there was not any product directly contacting the boning table at the time of the noncompliance. At approximately 1425, after being notified by [REDACTED] of the insanitary conditions, I tagged the buckets of product that were on the boning table at the time the insanitary condition was observed. US Retained/Rejected tag # B37819184 was applied to the area. The retained product included 1 partial bucket of oxlips, 1 partial bucket of head meat and 1 bucket of check meat. The head boning table was also rejected at this time using the same tag.

(b)(4)

The establishment has an SSOP for the monitoring of environmental moisture which states: [REDACTED]
[REDACTED] During a discussion that was held earlier in the CFSA [REDACTED] asked Q.C. Manager [REDACTED] for the reasoning behind the lack of the monitoring checks

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Signature]
You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

17. DATE

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

[Signature] 02/07/06
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Page 1 of 2

00054

A0000420_54-000054

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|--|---|-------------------------------------|
| 1. DATE 12/16/2005 | 2. RECORD NO. 0032-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 417.2(c)(4), 417.3(c) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP |
| | OTHER | |
| | SI. HACCP plan/ 1 | |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | |

(b)(6), (b)(7)(c)

10. DESCRIPTION OF NONCOMPLIANCE

While performing a records review of the establishment's Beef Slaughter HACCP Plan records for 12/15/05 I observed a corrective action and monitoring noncompliance involving CCP 2 [REDACTED]. The establishment's HACCP plan list [REDACTED] Their "[REDACTED]" record list the critical limit for the [REDACTED] as being between [REDACTED]. During the 0620 monitoring of the [REDACTED] [REDACTED] was recorded. The establishment either did not take or it did not record the corrective actions for this deviation from the critical limit. The establishment also did not follow the monitoring frequency stated on [REDACTED] for the following parameters [REDACTED]. (On 12/15/05 the establishment's slaughter floor operated between the hours of 0600 and 1230.) The plant also failed to monitor or record the results of the [REDACTED] their record indicates that this is to be [REDACTED] but on 12/15/05 there is not a monitoring entry on their record.

(b)(4)

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED]

You are hereby advised of your right to appeal this decision as determined by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

Gary Ruse

15. DATE

1-31-06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED]

17. DATE

01/31/06

00056

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE: 12/20/2005
 2. RECORD NO.: 0033-2005-9114
 3. ESTABLISHMENT NO.: 32111 M / 1
 4. TO (Name and Title): Gary Ruse, Plant Manager
 5. PERSONNEL NOTIFIED: [REDACTED] (b)(6), (b)(7)(c)
 6. RELEVANT REGULATION(S): 313.1
 7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP | SSOP | OTHER: Humane handling
 8. ISP CODE: 04C02
 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: PRODUCT - Protocol

10. DESCRIPTION OF NONCOMPLIANCE

While performing antemortem inspection on 12/20/2005 I observed a Category I humane handling noncompliance involving the establishment's drive alleys. The alley (north of the loading dock) that is used to move cattle to and from pen C1, C2, C3 and C4 was covered with a firm, smooth, 1 to 2 inch thick sheet of ice. The holding pen in front of the funnel also had a firm, 2 to 3 inch thick sheet of ice on its surface. The surfaces of the alley were too slick to allow cattle to be removed from the pens so I stopped antemortem inspection procedures and informed [REDACTED] the employee assigned to the yards, that I could not continue antemortem inspection at this time and that none of the livestock could be moved to the knocking area. At 0620, I took a regulatory control action by tagging the drive alley with US Reject tag # B37819178. 9 CFR 313.1(b) states that "Floors of livestock pens, ramps, and driveways shall be constructed and maintained so as to provide good footing for livestock. Slip resistant or waffled floor surfaces, cleated ramps and the use of sand, as appropriate, during winter months are examples of acceptable construction and maintenance". The establishment failed to meet these regulatory requirements in that they didn't provide a slip resistant surface for the movement of livestock. Immediate corrective actions taken by the establishment included salting the alleys and manually breaking the ice. Plant Manager, Gary Ruse informed me that the cause of the ice build-up was that high water pressure was causing a hose to leak at one of the water tanks. Further planned actions include applying a meter to the offending water tank to reduce water pressure. At approximately 0730, I observed that the condition of the drive

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

the protective shields reinforced and pressure reducing stations added to all automatic waterers.

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

Since repairs and add-ons, no recurrence of problem has happened.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[Handwritten Signature]

15. DATE

1/31/06

16. VERIFICATION BY INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

17. DATE

01/31/06

FSIS FORM 5400-4 (7/98)

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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 Page 1 of 2

A0000420_59-000059

00059

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE 2. RECORD NO. 3. ESTABLISHMENT NO.
12/20/2005 0034-2005-9114 32111 M/1

4. TO (Name and Title) 5. PERSONNEL NOTIFIED (b)(6), (b)(7)(c)
Gary Ruse, Plant Manager

6. RELEVANT REGULATION(S)
417.2(c)(4)

7. SECTION/PAGE OF EST. PROCEDURE PLAN HACCP SSOP OTHER
CCP I

8. ISP CODE 9. NONCOMPLIANCE CLASSIFICATION INDICATORS
03J02 HACCP - Monitoring

10. DESCRIPTION OF NONCOMPLIANCE
(b)(4)
During a reinspection of chilled lamb carcasses (prior to their transfer to the loading dock), I observed a zero-tolerance noncompliance on the right front leg of lamb carcass # [REDACTED]. The lamb was 1 of [REDACTED] lambs slaughtered on 12/19/2005. The contamination observed consisted of approximately 10-12 pieces of plant material spread over an area measuring approximately 2" X 4". The contamination met the definition of ingesta as defined in FSIS Directive 6420.2. It was brown in color, it had a fibrous texture and it was plant-like in appearance. I retained the lot of carcasses with US Retain tag # B37819177. (The establishment monitors its [REDACTED] on the slaughter floor after the [REDACTED] step. The noncompliance was observed after the chilling step and prior to the loading of carcasses. In reviewing the establishment's hazard analysis for lamb slaughter, it states that [REDACTED] (Q.A. Manager) and [REDACTED] (Boning Room Supervisor) were notified of the noncompliance. The establishment retained all lamb carcasses produced on 12/19/2005 for rework. Corrective actions given by [REDACTED] Operations Manager, were that the establishment would [REDACTED] that it will monitor during its [REDACTED]. The establishment will continue this for [REDACTED] then reevaluate its [REDACTED] at that time. The establishment also said they would have a meeting on Thursday of this week to retrain their slaughter floor employees on proper lamb dressing procedures.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.33 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT 15. DATE
Gary Ruse 1-31-06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE 17. DATE
[REDACTED] 01-31-06

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE: 12/23/2005
 2. RECORD NO.: 0037-2005-9114
 3. ESTABLISHMENT NO.: 32111 M/1
 4. TO (Name and Title): Gary Ruse, Plant Manager
 5. PERSONNEL NOTIFIED: [REDACTED] (b)(6), (b)(7)(c)
 6. RELEVANT REGULATION(S): 417.4(a)(2)(iii); 417.5(c)
 7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP / HACCP Plan / SSOP / OTHER
 8. ISP CODE: 03J02
 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: HACCP - Plant Verification
 10. DESCRIPTION OF NONCOMPLIANCE

On 12/23/2005 at approximately 1500, I performed a scheduled 03J02 procedure. Because there weren't any slaughter operations scheduled, I elected to perform a records review on a lot of beef carcasses from cattle that were slaughtered on 12/21/2005. As part of the records review, I also reviewed the establishment's shipping records, carcass weight records and observed carcasses in the cooler. Upon reviewing the above mentioned records I observed that the plant's daily records review verification had not been performed. There was not a verification date or signature on any of the HACCP records for 12/21/2005. I also could not find nor could the Quality Control Manager find a preshipment review record for 12/21/2005. A review of the plant's shipment records, scale records and coolers indicated that at least [REDACTED] carcasses produced on 12/21/2005 had been shipped to the establishment's sister plant in Postville, Iowa (for further processing) on 12/22/2005. When asked if these carcasses had been introduced into the plant at Postville, the Quality Assurance Manager said they probably were. The establishment's HACCP plan verification procedure states that they will [REDACTED]. The establishment has not met all the requirements of 9 CFR 417.4(a) in that they shipped carcasses prior to completing all verification procedures. They also failed to meet the regulatory requirements of 417.5(c) in that they did not sign the preshipment review.

(b)(4)

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your right to appeal this decision as determined under 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

Plant manager immediately verified the Pre-shipment review records, signed and dated them.

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

There has been a nightly check list to ensure that all paper work has been signed, and dated by Q.A. manager. also the checklist was made to ensure that all Haccp papers are turned in to the Q.A. office and the Plant manager.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[Handwritten Signature]

15. DATE

11/31/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Handwritten Signature]

17. DATE

01/31/06

FSIS FORM 5400-4 (1/98)

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

00069

The request for this information is Voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. (CFR 301 and 9CFR 381) FORM APPROVED OMB NO. 0583-0089 OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, D.C. 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503. If the OMB clearance number does not appear on this form, you are not obligated to complete it.

| | | | |
|--|--|--|--|
| U.S. DEPARTMENT OF AGRICULTURE FOOD SAFETY AND INSPECTION SERVICE | | TYPE OF NONCOMPLIANCE | |
| NONCOMPLIANCE RECORD | | <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |

| | | |
|--|---------------------------------|---|
| 1. DATE 07/19/05 | 2. RECORD NO. 0001-2005-9114 | 3. ESTABLISHMENT NO. 3211 M/1 |
| 4. TO (Name and Title) Gary Rose, Plant Manager | | 5. PERSONNEL NOTIFIED [Redacted], G. A. Morris |

6. RELEVANT REGULATION(S)
416.13

7. RELEVANT SECTION/PAGE OF ESTABLISHMENT PROCEDURE/PLAN → HACCP SOP Pre-operational Sanitation OTHER

8. ISP CODE
01B02 (b)(6), (b)(7)(e)

9. NONCOMPLIANCE CLASSIFICATION INDICATORS

| | | | | | |
|--------------------------------------|---|--|--|--|---|
| PLANT PROCESS | A. <input checked="" type="checkbox"/> SSOP | <input checked="" type="checkbox"/> Monitoring | <input type="checkbox"/> Corrective Action | <input type="checkbox"/> Recordkeeping | <input type="checkbox"/> Implementation |
| | B. <input type="checkbox"/> HACCP | <input type="checkbox"/> Monitoring | <input type="checkbox"/> Corrective Action | <input type="checkbox"/> Recordkeeping | <input type="checkbox"/> Plant Verification |
| C. <input type="checkbox"/> PRODUCT | <input type="checkbox"/> Economic | <input type="checkbox"/> Misbranding | <input type="checkbox"/> Protocol | | |
| D. <input type="checkbox"/> FACILITY | <input type="checkbox"/> Lighting | <input type="checkbox"/> Structural | <input type="checkbox"/> Outside Premises | <input type="checkbox"/> Product Based | |
| E. <input type="checkbox"/> E. COLI | <input type="checkbox"/> Other | | | | |

10. DESCRIPTION OF NONCOMPLIANCE: At approximately 0945 while performing pre-operational sanitation on the slaughter floor I found the following non-compliances: 1) On product contact surfaces: a) Hand rack had residual liquid from previous day's production. b) Air Knives had diffuse area of protein residue. c) The wash rack had a 1cm x 1cm piece of fat and protein residue build-up mid-way up the shaft. 2) Non-contact deficiencies were observed at: a) The hand control lever, used to release the covers, located

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[Redacted]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE: (Immediate action(s)):
[Redacted]

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):
[Redacted]

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
[Redacted]

15. DATE
7/21/2005

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[Redacted]

17. DATE
07/25/2005

FSIS FORM 5400-4 (9/97) replaces FSIS Form 5400-4 (9/97), which may be used until exhausted. DISTRIBUTION: Original & 1 copy - Establishment 1 copy - Inspector

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U.S. DEPARTMENT OF AGRICULTURE
FOOD SAFETY AND INSPECTION SERVICE

TYPE OF NONCOMPLIANCE

NONCOMPLIANCE RECORD
CONTINUATION SHEET

Food Safety Other Consumer Protection

| | | |
|--|--|---|
| 1. DATE 07/19/05 | 2. RECORD NO. 081-2005 | 3. ESTABLISHMENT NO. 32111 17/1 |
| 4. TO (Name and Title) Cory Rose, Plant Manager | | 5. PERSONNEL NOTIFIED [Redacted], Plant Manager |
| 6. RELEVANT REGULATION(S) 4/6.13 | | |
| 7. RELEVANT SECTION/PAGE OF ESTABLISHMENT PROCEDURE/PLAN → | HACCP | SOP ^{Pre-operational} Sanitation OTHER (b)(6), (b)(7)(c) |
| 8. ISP CODE 01B02 | 9. NONCOMPLIANCE INDICATOR Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE:

a) The final trim stand had a 2 cm in diameter piece of fat on its hand contact surface, b) There were 8-10 smears of dried blood residue on the under side surface of the retained head rack. Size of smear ranged from 1 cm x 1 cm to 2 cm x 2 cm. c) On the rail guide at the first and second legger areas there were 4 smears of blood that ranged in size up to 4 cm x 4 cm. d) There was a marble size piece of fat on the floor grating of the split saw stand. e) observation of employee clothing and equipment revealed that 2 employees had residual blood and fat on the hands of their knives. One of these individuals also had multiple small drops of dried blood on his scrubber. The floor was mopped with US detector log # B3723/111. All affected units were ^{PH} ~~PH~~ returned by establishment personnel. It was noted the affected areas and equipment. Preventative measures given by the establishment were that they would retrain their employees and use better lighting while cleaning and performing their pre operational sanitation. I received my regulatory control order at approximately 10:15

This document serves as written notification that failure to comply with regulatory requirements could result in additional regulatory action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

12. DATE

[Redacted Signature]

07/20/05

FSIS FORM 5400-4a (7/98)

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted.

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00067

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ATTACHMENT "A"

All equipment on kill floor re-cleaned, all employee equipment that was found in non compliance was re-cleaned and sanitized and presented back to FSIS for re-inspection and were released.

ATTACHMENT "B"

Retraining cleanup employees for in house sanitation. Instructed crew purchase flash lights to assist in pre-operational sanitation.

(b)(6)



7/26/2005

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE
 Food Safety Other Consumer Protection

1. DATE: 08/11/2005 2. RECORD NO.: 0002-2005-9114 3. ESTABLISHMENT NO.: 32111 M / 1

4. TO (Name and Title): Gary Ruse, Plant Manager 5. PERSONNEL NOTIFIED: [REDACTED] Q.A. Manager (b)(6), (b)(7)(c)

6. RELEVANT REGULATION(S): 416.4(b)

7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP SSOP OTHER: Pre-op San.

8. ISP CODE: 06D01 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: FACILITY - Product Based

10. DESCRIPTION OF NONCOMPLIANCE
 While performing pre-operational sanitation I observed the following noncompliances involving noncontact surfaces: 1) The tiled wall below the first and second legger's stand had areas of dried blood, hair and fat from the previous day's production on its surface. 2) The handle on the second hock cutter had dried blood and fecal material covering approximately 1/3 of its surface. 3) The handles on the rail switch pulls at the final trim rail and spinal cord removal area had fat and blood from the previous day's production on their hand contact surfaces. 4) The shield, between the split saw and the Rabbi's pluck table, had three pieces of fat from the previous day's production on its upper surface. 5) The drop chute located near the first hock cutter's stand had dried blood and fat on its inside surface. All affected units were recleaned by plant personnel.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
 [REDACTED]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):
 ALL THE ABOVE MENTIONED SURFACES & HANDLES WERE RECLEANED BY THE CLEAN-UP CREW

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):
 ARRANGEMENTS HAVE BEEN MADE FOR AN EMERGENCY CALL LIST FOR RESPONSIBLE INDIVIDUAL TO CALL IN TO WORK IN THE EVENT OF ILLNESS OF SANITATION SUPERVISOR

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT: [REDACTED] 15. DATE: 8/12/2005

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE: [REDACTED] 17. DATE: 8/12/2005

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The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

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|--|---|---|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection |
| 1. DATE 08/24/2005 | 2. RECORD NO. 0003-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6), (b)(7)(c) | |

6. RELEVANT REGULATION(S)
417.4, 417.5

7. SECTION/PAGE OF EST. PROCEDURE PLAN HACCP SSOP OTHER
Slaughter HACCP

8. ISP CODE 9. NONCOMPLIANCE CLASSIFICATION INDICATORS
03J01 HACCP - Plant Verification

10. DESCRIPTION OF NONCOMPLIANCE
On 08/23/05 while performing an 01C02 (operational sanitation) procedure at the carcass staging area and loading dock, I observed carcasses as they were being loaded onto a trailer. The slaughter dates on the carcasses ranged from 08/16/05 to 08/22/05. The carcasses were being shipped that night to [REDACTED] Iowa where they were to be processed. On 08/24/05 at approximately 1600 I reviewed the establishment's Slaughter HACCP plan and records to verify that they were meeting the recordkeeping and verification regulatory requirements for their slaughter process. A review of the establishment's Slaughter HACCP plan indicated that their ongoing verification activities for CCP 1 and CCP 2 required that [REDACTED]. Upon reviewing the establishment's HACCP records for carcasses produced on 08/22/05, I observed that the establishment's records were void of any indication that [REDACTED]. I asked [REDACTED] if anyone had performed the [REDACTED] generated on 08/22/05. He indicated that the [REDACTED]. The establishment failed to meet the regulatory requirements of 417.4 in that they did not [REDACTED] required by their HACCP plan. The plant also failed to meet the requirements of 417.5(c) in that prior to shipping product, the establishment failed to adequately review the records associated with the production of that product. Continued failure to meet the regulatory requirements of 9 CFR 417.4 and 417.5 may result in the need to take further

(b)(4)

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):
All records involved were immediately reviewed to ensure compliance with the HACCP plan.

13. PLANT MANAGEMENT RESPONSE (further planned action(s)): Due to turn over involving the QA manager, this task was not performed. New supervisor (QA) was brought in and other key personnel were trained to ensure that this task is performed as required.

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|---|----------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT [REDACTED] | 15. DATE 9/30/05 |
| 16. VERIFICATION BY INSPECTION PROGRAM EMPLOYEE [REDACTED] | 17. DATE 10/31/05 |

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A0000420_71-000071

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE

08/24/2005

2. RECORD NO.

0003-2005-9114

3. ESTABLISHMENT NO.

32111 M / I

4. TO (Name and Title)

Gary Ruse, Plant Manager

5. PERSONNEL NOTIFIED

(b)(6), (b)(7)(c)

6. RELEVANT REGULATION(S)

417.4, 417.5

7. SECTION/PAGE OF EST. PROCEDURE PLAN

HACCP

SSOP

OTHER

Slaughter HACCP

8. ISP CODE

03J01

9. NONCOMPLIANCE CLASSIFICATION INDICATORS

HACCP - Plant Verification

10. DESCRIPTION OF NONCOMPLIANCE

regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Redacted Signature]

FSIS FORM 5400-4 (7/98)

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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A0000420_72-000072

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

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| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 08/29/2005 | 2. RECORD NO. 0004-2005-9114 | 3. ESTABLISHMENT NO. 32111 M/1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.16(a) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | | SSOP | |
| Pre-op Sanitation | | | |
| 8. ISP CODE 01B01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Recordkeeping | |

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) On 08/29/2005 I reviewed the preoperational sanitation records for the week of 08/22/2005 to 08/26/2005. Review of the records indicated that the plant was not in compliance with 9 CFR 416.16(a) in that they did not have records that adequately documented the implementation and monitoring of their preoperational sanitation procedures. The following noncompliances were observed: 1) The [redacted] was not authenticated with a signature or initials for the dates of August 22 & 23, 2005. 2) The [redacted] was void of any indication that the shipping dock had been cleaned, sanitized or inspected prior to use on the date of August 26, 2005. 3) There was not any documentation of the implementation or monitoring of preoperational sanitation for the offal or packaging areas for the date of August 26, 2005. (Though the plant did not kill, the offal area of the kill floor was used on the 26th to process heads and tongues, and the packaging area was used to package head meat, tongues, cheek meat, hearts and tails.)

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Redacted signature]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

See attached

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

See attached

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[Redacted signature]

15. DATE
09/30/05

16. VERIFICATION BY INSPECTION PROGRAM EMPLOYEE

[Redacted signature]


17. DATE
10/31/05


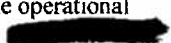
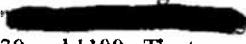


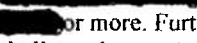
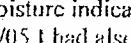
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Response to NR 0004-2005-9114

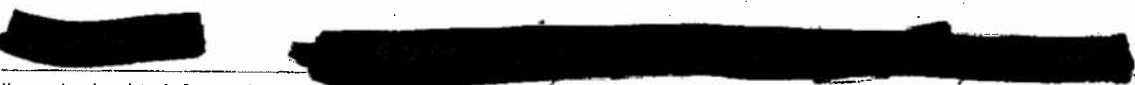
12. Immediate Response: 1) Immediately retrained all personnel involved with this paperwork of the need to authenticate with a signature. 2) Informed all involved personnel of the need to perform pre-op in any area where work will be performed. 3) See item #2.
13. Further Actions: 1, 2 and 3) All individuals involved in this function were retrained to the necessity of this being performed any time the department performs work in the area. Additionally, all forms must be completed correctly. Due to turnover, the function of the QA Manager was not performed. Key personnel have been trained in this area.

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|--|---------------------------------|---|--|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 08/29/2005 | 2. RECORD NO. 0005-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED  (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.13, 416.15; 416.16 | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN HACCP SSOP OTHER Oper. Sanitation | | | |
| 8. ISP CODE 01C01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Implementation | |

10. DESCRIPTION OF NONCOMPLIANCE
On 08/29/05 I reviewed the establishment's operational sanitation records for the week of 08/22/05 to 08/26/05 to verify that the establishment was meeting the regulatory requirements pertaining to operational sanitation. A review of the operational sanitation records for the week revealed noncompliances involving monitoring, corrective actions and recordkeeping. The establishment's operational SSOPs state  (b)(4) The operational sanitation records for August 22, 24 and 25, 2005 indicate the taking and recording of the temperature at only  required hot pots or hoses. On August 23, 2005 the  record indicated that the hot pot temperature at the hock cutter was taken every  between 0830 and 1100. The temperatures at the recorded times ranged from  degrees. There are no recorded corrective actions indicating that the hot pots were  nor were there any written preventative measures recorded to make sure the hot pot remained at  or more. Further review of the establishment's operational SSOP records for the monitoring of environmental moisture indicate that on August 23, 2005, condensation was observed in cooler # 1. (During the week of 08/22/05 to 08/26/05 I had also observed heavily beaded condensation in cooler # 1.) The establishment failed to record and/or implement all corrective actions required by 9 CFR 416.13. They either failed to institute or record the preventative measures taken to control or eliminate the condensation. The

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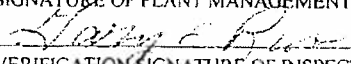
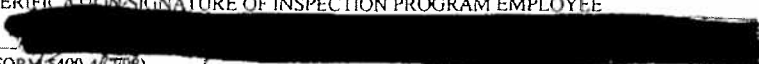
11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE


You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|--|----------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT  | 15. DATE 10/31/05 |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE  | 17. DATE 11/17/05 |

00074

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE

08/29/2005

2. RECORD NO.

0005-2005-9114

3. ESTABLISHMENT NO.

32111 M / 1

4. TO (Name and Title)

Gary Ruse, Plant Manager

5. PERSONNEL NOTIFIED

[REDACTED]

(b)(6), (b)(7)(c)

6. RELEVANT REGULATION(S)

416.13, 416.15; 416.16

7. SECTION/PAGE OF EST. PROCEDURE PLAN

HACCP

SSOP

OTHER

Oper. Sanitation

8. ISP CODE

01C01

9. NONCOMPLIANCE CLASSIFICATION INDICATORS

SSOP - Implementation

10. DESCRIPTION OF NONCOMPLIANCE

establishment was also unable to produce any records to indicate that they monitored environmental moisture in their coolers during operations on Monday August 22, 2005. On August 26, 2005 the establishment did not kill but they processed heads and tongues at the offal area of the kill floor. They also packaged offal product and loaded two loads of carcasses onto trailers. The establishment did not present any operational sanitation records for the 26th indicating that they either did not perform any operational sanitation procedures or they failed to record the procedures they did perform.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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Page 2 of 2

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A0000420_76-000076

Response to NR 0005-2005-9114

12. Immediate Response: All personnel involved in the performance of operational SSOP's were retrained in performing this audit to include the recording of CA's when performed.
13. Further Actions: A new kill floor supervisor was added and was made responsible for the performance of this audit. Additionally, a new QA person was added and will work in conjunction with the Kill floor Sup. To ensure that Operational SSOP's are performed correctly.

00076

A0000420_77-000077

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| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE | |
| | | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 09/05/2005 | 0007-2005-9114 | 32111 M / I | |
| 4. TO (Name and Title) | | 5. PERSONNEL NOTIFIED | |
| Gary Ruse, Plant Manager | | [REDACTED] (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) | | | |
| 417.2(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP |
| | | OTHER | |
| | | HACCP-RNG plan | |
| 8. ISP CODE | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | | |
| 03C01 | HACCP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE

At approximately 0930 I performed a zero-tolerance check of the establishment's oxlips and cheek meat to verify the effectiveness of their dressing procedures for the removal of contamination. The procedure was performed at the same location and following the same methodology that the establishment uses. I performed a zero-tolerance check on the cheek meat and did not detect any noncompliances. I then examined 10 pieces of oxlip after it had been placed in the edible tub. On the third piece examined I found two pieces of contamination that met the definition of ingesta as found in FSIS Directive 6420.2. The first piece measured approximately 2 mm x 30 mm and the second piece was approximately 2 mm x 20 mm in size. Both pieces were brown in color and had a fibrous, plant-like texture. Product was tagged with U.S. Retained Tag # B39831342 and plant management was notified of the noncompliance. The contamination was shown to [REDACTED] and [REDACTED]. The plant chose to condemn all oxlips produced from the beginning of the shift until the time the noncompliance was detected. Preventative measures given by [REDACTED] were that they were going to alter the method of flushing the mouth. I removed the retain tag and watched [REDACTED] dispose of the product at the inedible area.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

17. DATE

[REDACTED SIGNATURE]

09/06/05

00077

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US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE
 Food Safety Other Consumer Protection

1. DATE: 08/29/2005
 2. RECORD NO.: 0006-2005-9114
 3. ESTABLISHMENT NO.: 32111 M / 1

4. TO (Name and Title): Gary Ruse, Plant Manager
 5. PERSONNEL NOTIFIED: [REDACTED] (b)(6), (b)(7)(c)

6. RELEVANT REGULATION(S): 417.5(a)(3), 417.5(c)417.4,417.2

7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER
 Slaughter HACCP Plan

8. ISP CODE: 03J01
 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: HACCP - Recordkeeping

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) On August 29, 2005 I reviewed the establishment's Slaughter HACCP plan and then proceeded to review their slaughter HACCP records for the week of August 22-26, 2005. The records review revealed the following noncompliances: 1) The [REDACTED] record for zero tolerance monitoring for the date of August 24, 2005 was not initialed or signed. 2) The daily records review verification for variety meats was not performed for the zero-tolerance CCP for the dates of August 24 & 25, 2005. 3) The [REDACTED] records, used to record the monitoring of the concentration of the [REDACTED] that is applied to offal (variety meat) products, were not present for the dates of August 22-25, 2005. All products produced at this establishment are done so under the establishment's Slaughter HACCP plan. The preshipment review for the above mentioned days' production had been signed at the time I reviewed the establishment's records. According to 9 CFR 417.5(c) prior to shipping product, the establishment shall review the records associated with the production of that product, documented in accordance with this section, to ensure completeness, including the determination that all critical limits were met and, if appropriate, corrective actions were taken including the proper disposition of product. The establishment failed to adequately complete and review their HACCP records and thus they did not assure that all regulatory requirement for the product were met prior to signing their preshipment review.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
 [REDACTED]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):
 [REDACTED]

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):
 [REDACTED]

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
 15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
 17. DATE

00079

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| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE | |
| | | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 09/07/2005 | 0008-2005-9114 | 32111 M / 1 | |
| 4. TO (Name and Title) | | 5. PERSONNEL NOTIFIED | |
| Gary Ruse, Plant Manager | | [REDACTED] (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) | | | |
| 416.13, 416.4(b) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | SSOP | OTHER | |
| Preop San. | | | |
| 8. ISP CODE | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | |
| 01B02 | | SSOP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE

On 09/07/05 while performing preoperational sanitation procedures the following noncompliances were observed: At the entrance end of the [REDACTED] carcass wash, I observed a smear of fat on the underside of the carcass guide bar. The fat was white, greasy and measured approximately 20 cm x 3 cm. in area. At the exit end of the [REDACTED] carcass wash, the top side of the guide bar was contaminated with 4 to 5 spots of silicone caulk. The [REDACTED] carcass wash was tagged with U.S. Reject Tag # B39831366. At the carcass loading dock CSI [REDACTED] observed a scabbard and knife that had fat residue from the previous day's production. The residual fat was found on the inside of the scabbard and on both the blade and handle of the knife. The equipment was tagged with U.S. Reject Tag # B39831104. The carcass buggy had diffuse areas of fat residue from the previous day's production on the inside of the bucket. The carcass buggy was tagged with US Reject Tag # B39831107. The S hooks, which are used to suspend the carcass while in the transport trailer, had a black, oily residue on the product contact surface. Hooks were tagged with U.S. Reject Tag # B39831105. The carcass rail on the loading dock had an accumulation of fat and grease on its surfaces. The rail was tagged with U.S. Reject Tag # B39831103. All units were recleaned by the establishment. The preventative measures given by [REDACTED] the sanitation manager, were that the plant would [REDACTED]

(b)(4) [REDACTED] After all parts of 416.15 were met, FSIS personnel released regulatory control of the [REDACTED]

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED]

You are hereby advised of your right to be accompanied by a representative of your choice at any time under 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

[REDACTED]

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

[REDACTED]

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|---|----------|
| 14. SIGNATURE OF PLANT MANAGEMENT | 15. DATE |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE | 17. DATE |

08000

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE

09/07/2005

2. RECORD NO.

0008-2005-9114

3. ESTABLISHMENT NO.

32111 M / 1

4. TO (Name and Title)

Gary Ruse, Plant Manager

5. PERSONNEL NOTIFIED

6. RELEVANT REGULATION(S)

416.13, 416.4(b)

(b)(6), (b)(7)(c)

7. SECTION/PAGE OF EST. PROCEDURE PLAN

HACCP

SSOP

OTHER

Preop San.

8. ISP CODE

01B02

9. NONCOMPLIANCE CLASSIFICATION INDICATORS

SSOP - Monitoring

10. DESCRIPTION OF NONCOMPLIANCE

affected units.

(b)(4)

A similar noncompliance, NR #0001-2005-9114 for written on 07/19/05. [REDACTED] was given as a preventative measure. On 09/05/05 the establishment's preoperational sanitation monitoring records indicated that the [REDACTED] carcass wash was not acceptable because of fat smears on the door of the cabinet. Preventative measures given at the time was to inform the employee to use acid and degreaser. These preventative measures have either not been properly implemented or have been ineffective. Continued failure to meet regulatory requirements could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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Page 2 of 2

00081


A0000420_82-000082

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

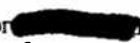


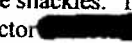


TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection


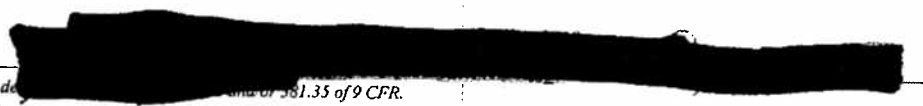
| | | |
|--|--|---|
| 1. DATE 09/13/2005 | 2. RECORD NO. 0009-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED  (b)(6), (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 313.2(f) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP |
| | | OTHER Humane Handling Proc |
| 8. ISP CODE 04C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS PRODUCT - Protocol | |

10. DESCRIPTION OF NONCOMPLIANCE

Noncompliance involving Category IX under the HAT system of evaluation of humane slaughter and handling.

While performing slaughter inspection, Inspector  noticed a disturbance on the slaughter floor in the bleeding area.  immediately went to the bleeding area where  observed a black heifer standing in the blood pit under the shackles. The heifer had been through the ritual slaughter process and the blood vessels in the neck had been severed. Inspector  immediately notified me of the situation and I went to the bleeding area to observe the animal. Upon arriving I observed that the animal had bleed out, was no longer conscious and was shackled and hoisted. There was an animal in the restrainer so I allowed  to complete his ritual slaughter of that animal. After the animal was released from the restrainer I applied a regulatory control action to the restrainer by tagging it with U.S. Reject Tag # B39831352 Slaughter was stopped at approximately 0830 and the carcasses remaining on the rail were allowed to be dressed. I spoke with several plant employees about the incident and they confirmed the information given to me by Inspector . They said the animal in question had been ritually slaughtered, released from the restrainer and after being shackled and partially hoisted, it fell to the floor of the bleeding area. The animal rose to its feet after it fell to the floor.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

You are hereby advised of your right to appeal this decision under 9 CFR 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

See attached

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

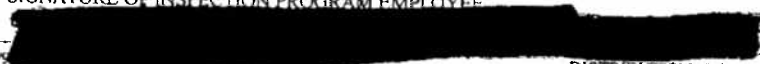
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14. SIGNATURE OF PLANT MANAGEMENT



15. DATE 9/13/05

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE



17. DATE 9/14/05

00082

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|--|-------------------------------------|-------------------------------|
| 1. DATE 09/13/2005 | 2. RECORD NO. 0009-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6), (b)(7)(c) | | |
| 6. RELEVANT REGULATION(S) 313.2(f) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER Humane Handling Proc |
| 8. ISP CODE 04C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS PRODUCT - Protocol | | |

10. DESCRIPTION OF NONCOMPLIANCE
The establishment failed to meet the regulatory requirements of 9 CFR 313.2(f) in that the animal was not effectively rendered insensible prior to being shackled and hoisted. This noncompliance falls under Category IX of the HAT system of monitoring humane handling and slaughter. When the ritual slaughter cut has been made and the animal has been released from the required ritual method of handling, the animal is to be insensible to pain (unconscious) and no additional processing steps may take place until the animal is insensible. This includes the shackling and hoisting of the animal.

Further planned actions given by the establishment to prevent recurrence of the noncompliance were: 1) The Quality Assurance Manager will remain at the restrainer for the remainder of the day to assure that plant personnel make necessary additional cuts, if needed, to facilitate a proper bleed out.
2) Plant personnel working in the area will be retrained and disciplined.
3) A stunning device will be made available to render the animal unconscious if ritual slaughter fails to render the animal insensible. Regulatory control action was relinquished at approximately 0850.

Continued failure to meet the regulatory requirements of the Humane Slaughter Act may lead to the enforcement actions described in 9 CFR 500.3(b).

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]

00083

A0000420_84-000084

12. Plant Management Response (Immediate action(s)): Plant personnel that failed to follow company policy regarding humane handling, box operator and shackler, were issued discipline in accordance with company policy. Plant personnel working in the box area were retrained on [REDACTED] of the company's [REDACTED] [REDACTED] which states "[REDACTED] [REDACTED] [REDACTED] Copies of this documentation are attached.
- (b)(4)
13. Plant Management Response (further planned action(s)): [REDACTED], Quality Assurance Manager remained at the box for the duration of the day to ensure that all animals released from the box correctly. While observing the ritual slaughter it was noted by [REDACTED] that many animals were not effectively bleeding out. The individuals working in this area were retrained to release the pressure used to hold the animal upright which appeared to allow the animal to bleed more freely. The box operator was re-shown how to check the eyes of the animal for insensibility and was retrained as to how to make additional cuts to facilitate bleeding if necessary. All facets of humane handling were observed and discussed with the individuals involved to ensure that the employees working in this area are confident of the company's requirements regarding humane handling. A [REDACTED] was made available to the personnel working in the box area and all were trained in the use of this device.

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE | |
|---|--|---|--|
| | | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 09/14/2005 | 0010-2005-9114 | 32111 M / 1 | |
| 4. TO (Name and Title) | | 5. PERSONNEL NOTIFIED | |
| Sholom Rubashki, Plant Manager | | [REDACTED] (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) | | | |
| 417.2 | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP |
| | | OTHER | |
| Slaughter HACCP | | | |
| 8. ISP CODE | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | | |
| 03J02 | HACCP - Monitoring | | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | | |
| <p>(b)(4) At approximately 1120, as part of a scheduled 03J02 procedure I verified the monitoring regulatory requirement by performing a zero-tolerance audit of two randomly selected carcasses at the final rail inspection station. On the trailing half of the second carcass, I observed contamination that met the definition of fecal material as described in FSIS Directive 6420.2. The fecal contamination was approximately 2 cm in diameter, was dark brown in color and was fibrous in texture. Slaughter superintendent, [REDACTED], was shown the noncompliance and he agreed with my findings. The contamination was removed in accordance with 9 CFR 318.10(a). [REDACTED] and Q.A. Manager, [REDACTED], gave the following corrective actions and preventative measures: 1) [REDACTED] 2) [REDACTED] 3) [REDACTED]. After finishing the carcass zero-tolerance audit I performed zero-tolerance audits on cheek meat and head meat and did not find any zero-tolerance defects.</p> | | | |
| 11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE | | | |
| [REDACTED] | | | |
| <p><i>You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.</i></p> | | | |
| 12. PLANT MANAGEMENT RESPONSE (Immediate action(s)): | | | |
| | | | |
| 13. PLANT MANAGEMENT RESPONSE (further planned action(s)): | | | |
| | | | |
| This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action. | | | |
| 14. SIGNATURE OF PLANT MANAGEMENT | | 15. DATE | |
| | | | |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE | | 17. DATE | |
| [REDACTED] | | 11/14/05 | |

000089

PRODUCT INVOLVED:

Carcass #42 on final trim station.

REASON:

The reason for the failure of the zero-tolerance, and the contamination of carcass #42 was the lack of communication between the gutter station and the final trim station. The gutter station did not put the proper tag on the carcass in question to notify the trim station of the occurrence of the contamination.

CORRECTIVE ACTION:

After the contamination of the carcass was found the floor supervisor and the Q.A technician were notified. The floor supervisor then proceeded to trim the contaminated area of the carcass in question, while the Q.A. technician isolated the last acceptable carcass from a previous zero-tolerance inspection. The carcass's that were detained were carcass #'s 20 thru #42 so that the carcass's in question could be and were reinspected and were found to have no other contaminants of any kind therefore the carcass's were released back into commerce. The gutter at the time was then retrained and also was given a verbal warning about his actions towards the contamination that had occurred.

MEASURES:

There is a new method being put in place to identify contaminants on the carcass if such problems occur. The new method is [REDACTED]

(b)(4) [REDACTED] if in fact the carcass is contaminated by ingesta [REDACTED] [REDACTED] will also have [REDACTED]

[REDACTED] If in fact the carcass has a contamination of an abscess on it the color for the abscess will be [REDACTED]

[REDACTED] In addition to [REDACTED] which are in the process of being fabricated there will be [REDACTED] placed at several locations at the trim station to inform the trimmers [REDACTED] The gutter station will also have the [REDACTED] be able to refer to as to put the [REDACTED] on for the right contamination if a contamination does occur.

PRODUCT DISPOSITION:

The product in question was reinspected and found free of any contaminants so therefore were signed off and released back into commerce.

Q.A. Technician

(b)(6)

[REDACTED]

9-20-05

68000

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---------------------------------|---|-------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 09/19/2005 | 2. RECORD NO. 0011-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED | (b)(6), (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 417.2 | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP |
| | | OTHER HACCP-RNG Offal CCP | |
| 8. ISP CODE 03C01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) During slaughter operations on 09/19/05, on-line slaughter inspector [redacted] observed ingesta on the oxlips of head # [redacted] as it was being processed on the boning table. She then looked into the container of processed oxlips and observed ingesta among the product. She notified the plant of her findings at approximately 0925 and placed US retain tag # B39 819172 on the container of oxlips. As a result of Inspector [redacted] finding I performed an unscheduled zero-tolerance audit of the establishment's cheek meat and oxlips at approximately 1045. While examining the oxlips I found a firm, yellow piece of plant-like material that I identified as a partial kernel of corn. The contamination met the definition of ingesta as defined in FSIS Directive 6420.2. I showed my findings to Q.A. technician, [redacted]. I tagged the bucket of oxlips with US Retain tag # B37819172. [redacted] stated that he had performed an audit of oxlips at approximately 1030 and found it to be acceptable. [redacted] stated that the noncompliance was due to ineffective rinsing of the mouth as a result of employees not following protocol. Slaughter superintendent, [redacted], elected to discard the bucket of contaminated oxlips. I verified the disposal of the product into inedible rendering. The bucket containing the product was cleaned and sanitized. Preventative measures given by [redacted] and [redacted] were: 1) [redacted] and 2) [redacted]. [redacted] also stated that he would instruct the individual that harvests the product off the heads to observe for ingesta and discard any heads that have ingesta in the teeth

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[redacted signature]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|---|----------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT [redacted signature] | 15. DATE 10/31/05 |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [redacted signature] | 17. DATE 11/14/05 |

00090

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE

09/19/2005

2. RECORD NO.

0011-2005-9114

3. ESTABLISHMENT NO.

32111 M / 1

4. TO (Name and Title)

Gary Ruse, Plant Manager

5. PERSONNEL NOTIFIED

[REDACTED]

(b)(6), (b)(7)(c)

6. RELEVANT REGULATION(S)

417.2

7. SECTION/PAGE OF EST. PROCEDURE PLAN

HACCP

SSOP

OTHER

HACCP-RNG Offal CCP

8. ISP CODE

03C01

9. NONCOMPLIANCE CLASSIFICATION INDICATORS

HACCP - Monitoring

10. DESCRIPTION OF NONCOMPLIANCE

or lips. Regulatory control action was removed from the bucket and the harvesting of head meat resumed.

I similar noncompliance, NR # 00007-2005-9114, involving a zero-tolerance noncompliance of oxlips occurred on 09/05/05. Continued failure to comply with regulatory requirements could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

FSIS FORM 5400-4 (7/98)

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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16000


A0000420_92-000092

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.





US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection


| | | |
|--|---|-------------------------------------|
| 1. DATE 09/20/2005 | 2. RECORD NO. 0012-2005-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED  (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 417.2, 417.3 | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP |
| HACCP-slaughter & RNC | | |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | |

10. DESCRIPTION OF NONCOMPLIANCE

As a result of a zero-tolerance () noncompliance of oxlips on 09/19/05 I elected to verify the effectiveness of the establishment's corrective actions by performing a zero-tolerance audit of the products harvested from the head. During the performance of the zero-tolerance audits I found noncompliances of both the cheek and head meat. The contamination found in the head meat was yellow, firm and plant-like in appearance and was approximately 2 mm x 3 mm in size. I identified the contamination as a partial kernel of corn. The contamination found in the cheek meat was approximately 1 cm x .5 cm in size and had a yellowish brown color and a plant-like texture. I identified it as being the outer hull of a kernel of corn. Both pieces of contamination met the criteria for the description of ingesta as stated in FSIS Directive 6420.2. The contaminants were shown to Q.A. technician, . The head meat and cheek meat contained in both buckets was discarded into inedible rendering. I tagged the head meat that had been produced since the establishment's last acceptable audit with US retain tag # B37819171. There had not been any additional cheek meat produced since the establishment's last acceptable audit.  indicated that the cause of the noncompliance was inadequate observation for contamination by the head washer and variety meat harvesters. I continued the 03J01 procedure by performing a zero-tolerance audit on two carcasses at the USDA rail inspection station. On the leading half of the second carcass (Carcass # ) I observed a 3 mm x 8 mm piece of contamination on the cut surface of the diaphragm. The contamination met the definition of ingesta given in Directive 6420.2 in that it was

(b)(4)

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

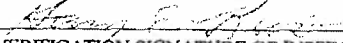



You are hereby advised of your right to appeal this action as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|--|----------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT  | 15. DATE 10/31/05 |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE  | 17. DATE 11/18/05 |

00093

A0000420_94-000094

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE 2. RECORD NO. 3. ESTABLISHMENT NO.
09/20/2005 0012-2005-9114 32111 M / 1

4. TO (Name and Title) 5. PERSONNEL NOTIFIED
Gary Ruse, Plant Manager [REDACTED] (b)(6), (b)(7)(e)

6. RELEVANT REGULATION(S)
417.2, 417.3

7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER
HACCP-slaughter & RN6

8. ISP CODE 9. NONCOMPLIANCE CLASSIFICATION INDICATORS
03J01 HACCP - Corrective Action

10. DESCRIPTION OF NONCOMPLIANCE (b)(4)
brownish green in color and had a plant-like texture. I identified the contamination as being a piece of hay. Slaughter superintendent, [REDACTED] was shown the contamination. A plant employee trimmed the contaminated area in accordance with 310.18. [REDACTED] retained all carcasses back to the last acceptable audit for rework (carcasses to [REDACTED]). [REDACTED] said that the cause of the contamination on the carcass was the gutter had cut the esophagus near its attachment to the rumen allowing ingest to spill onto the diaphragm. The gutter also neglected to follow the plant's program for identifying contaminated carcasses, thus the trimmers were not alerted to the possibility of contamination. Corrective actions given by [REDACTED] and [REDACTED] included the immediate retraining of those employees involved and a work unit meeting would be held after work to further train their employees. [REDACTED] also indicated that he would increase monitoring frequency for the remainder of the week to ensure that the CCPs for zero-tolerance were back in control.

A similar noncompliance on variety meats, NR # 0011-2005-9114, occurred on 09/19/05 and a similar noncompliance, NR # 0010-2005-9114, involving carcasses occurred on 09/14/05. Previous preventative measures of additional employee training appear to have been ineffective or have not been properly implemented. Continued failure to comply with regulatory requirements could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00094

A0000420_95-000095

Date-09-20-2005

(b)(6)

Identified ingesta within the harvested meat products of slaughtered cattle.

REASON:

The cause of the failure for the zero-tolerance was inadequate watching of the harvested head meat by the harvesters and by the head washing station. When the contamination was brought to Q.A. technician [REDACTED] attention he had responded by removing the product from the harvesting area and discarded the contaminated product promptly.

CORRECTIVE ACTION:

(b)(4) Q.A. technician [REDACTED] had stopped the harvesting of the head's and the head washing station to retrain the employee's that were involved with the contamination of the product in question. [REDACTED] then [REDACTED] of the meat harvested from the head of the cattle for [REDACTED]

MEASURES:

(b)(4) The measures put in place to help prevent an reoccurrence of contamination of the harvested meat is to [REDACTED]

PRODUCT DISPOSITION:

The contaminated product in question was discarded into the properly designated area which was observed by [REDACTED] the remainder product that was harvested and cooling in the cooler prior to the zero-tolerance inspection was held over for a second inspection which found no contaminant of any kind. Therefore the product was released to be packaged into the proper boxes and put into the freezer.

Q.A. Technician
[REDACTED]
9-20-2005

00095

A0000420_96-000096

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250, and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE: 11/07/2005
 2. RECORD NO.: 0015-2005-9114
 3. ESTABLISHMENT NO.: 32111 M / 1
 4. TO (Name and Title): Gary Ruse, Plant Manager
 5. PERSONNEL NOTIFIED: [REDACTED] (b)(6), (b)(7)(c)
 6. RELEVANT REGULATION(S): 310.22, 417 417.5 (b)(4)
 7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP, SSOP, SRM Program, OTHER
 8. ISP CODE: 03J01
 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: HACCP - Monitoring

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) While performing postmortem inspection procedures at the head inspection area of the slaughter floor I observed that a bovine head with the identification number [REDACTED] had all four sets of permanent incisors. I finished the inspection procedures then signaled plant personnel that I was done with the head. Because the head was contaminated, I condemned it to inedible. As the employee was removing the head from the inspection area I asked that he place it in the corner of the inedible room. Neither the head nor the carcass associated with it had been identified as being from that of a 30 month or older animal. I informed Inspector [REDACTED] to observe the carcass when it got to the final inspection rail to ensure that it had the spinal cord removed prior to it entering the cooler. After giving the establishment all possible opportunities to identify the mature carcass, I asked [REDACTED] to observe the head in the inedible room; he agreed that the head was from an animal over 30 months of age. I informed Q.A. manager [REDACTED] of my findings, prior to the carcass leaving the kill floor, so it could be properly identified and appropriate measures could be taken to assure the removal of SRMs.

The establishment's flow chart for its slaughter process has the dentition step for age identification just prior to the USDA head inspection. Plant personnel responsible for age identification failed to properly determine the age of the animal in question and thus did not appropriately identify the associated carcass.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE] JLM

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

Gary Ruse

15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

17. DATE

11/18/05

00008

A0000420_8-000008

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE
12/20/2005

2. RECORD NO.
0035-2005-9114

3. ESTABLISHMENT NO.
32111 M/1 (b)(6), (b)(7)(c)

4. TO (Name and Title)
Gary Ruse, Plant Manager

5. PERSONNEL NOTIFIED
[REDACTED] (b)(6), (b)(7)(c)

6. RELEVANT REGULATION(S)
310.22; 417.5(a)(1)

7. SECTION/PAGE OF EST. PROCEDURE PLAN

| | | |
|----------|------|-------|
| HACCP | SSOP | OTHER |
| LPBK1/10 | | |

8. ISP CODE
03J01

9. NONCOMPLIANCE CLASSIFICATION INDICATORS
HACCP - Recordkeeping

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) During beef slaughter operations on the afternoon of 12/20/05, I was called to the slaughter floor to observe the humane stunning of two animals that were inadvertently caught in the restrainer and could not be removed or ritually (Kosher) slaughtered. Both animals were humanely stunned with a captive bolt stunner, then dressed according to the plant's procedures for Kosher slaughtered beef. According to Inspector [REDACTED] and the plant's slaughter floor personnel, the heads from these two animals were harvested and the product was saved. The plant's prerequisite program for Specified Risk Materials (SRMs) which is contained within the "[REDACTED] SOP states that [REDACTED]. The establishment did not follow their prerequisite program for SRMs. Q.A. Manager, [REDACTED] tagged all head meat products so the establishment could evaluate the significance of the program deviation.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED]

17. DATE

02/03/06

FSIS FORM 5400-4 (7/98)

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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Page 1 of 1

A0000420_64-000064

00064

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
**FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD**

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE
 12/21/2005

2. RECORD NO.
 0036-2005-9114

3. ESTABLISHMENT NO.
 32111 M / 1

(b)(6), (b)(7)(c)

4. TO (Name and Title)

Gary Ruse, Plant Manager

5. PERSONNEL NOTIFIED

6. RELEVANT REGULATION(S)

310.22; 417.5(a)(1)

7. SECTION/PAGE OF EST. PROCEDURE PLAN

HACCP

SSOP

OTHER

8. ISP CODE

03J01

9. NONCOMPLIANCE CLASSIFICATION INDICATORS

HACCP - Recordkeeping

10. DESCRIPTION OF NONCOMPLIANCE

While performing a review of the establishment's records for its Specified Risk Material (SRM) program, I observed that the establishment has failed to adequately develop and incorporate written procedures into its SRM program that address the documentation of movement of beef carcasses (that contain SRMs) from this establishment to other processing establishments. The establishment does not have a written plan that describes: 1) how they notify the receiving establishment of shipment of carcasses that contain SRMs, 2) what documentation will accompany these shipments 3) how it maintains records that identify the official establishments that receive carcasses that contain SRMs and 4) how the receiving establishment notifies this establishment that it received the carcasses. Also, the establishment's SRM program doesn't state how it is going to maintain control of carcasses during shipment, i.e. under company seals, under USDA seals or accompanied by FSIS form 7350-1. This establishment has failed to meet the regulatory requirement of 310.22 (specifically those issues addressed in FSIS notice 68-05) which require that establishments develop, implement and maintain written procedures for the removal, segregation and disposition of SRMs and that they incorporate these procedures into their food safety system.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

15. DATE

1-30-06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

17. DATE

1-30-06

FSIS FORM 5400-4 (7/98)
 Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

DISTRIBUTION: Original & 1 Copy to Establishment

A0000420_65-000065

00065

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE 2. RECORD NO. 3. ESTABLISHMENT NO.
01/02/2006 0001-2006-9114 32111 M / 1

4. TO (Name and Title) 5. PERSONNEL NOTIFIED
Gary Ruse, Plant Manager [Redacted] (b)(6), (b)(7)(c)

6. RELEVANT REGULATION(S)
416.2(d)

7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER
SSOP pg 2

8. ISP CODE 9. NONCOMPLIANCE CLASSIFICATION INDICATORS
06D01 FACILITY - Product Based

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4)

While performing a Sanitation Performance Standards verification procedure, (06D01) I observed condensation dripping onto the offal department floor. The condensation was coming from the overhead pipes located near the west wall of the offal processing area of the slaughter floor. I took a regulatory control action by tagging the area with US Reject tag # B37819193. I informed QC Manager, [Redacted] of the noncompliance. Immediate corrective actions taken by the plant were to wrap the pipes in plastic. After speaking with maintenance personnel [Redacted] informed me that the "air curtain" in the [Redacted] cabinet had not been engaged resulting in an accumulation of moisture in the area. The "air curtain" was started which alleviated the build-up of moisture in the area. The establishment failed to meet the regulatory requirements of 416.2(d) in that the ventilation system was not adequate to prevent the formation of dripping condensation. The establishment also failed to follow their SSOP for environmental moisture.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Redacted Signature]

You are hereby advised of your right to appeal this decision as delineated by 306.3 and/or 387.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[Handwritten Signature]

15. DATE

[Handwritten Date]

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Redacted Signature]

17. DATE

[Handwritten Date]

96000

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|--|---|-------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 01/03/2006 | 2. RECORD NO. 0002-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 417.2(c)(4) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | Lamb HACCP | | |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) As part of a scheduled 03J01 procedure I elected to verify the monitoring regulatory requirements of the establishment's Lamb Slaughtering HACCP plan. After selecting CCP-2 [REDACTED] I decided to perform the review and observation component of the procedure. At approximately 1440 on 01/03/06, I went to the [REDACTED] cabinet to observe the application of [REDACTED] to the surface of carcasses. At this time I observed that the cabinet was not functioning and [REDACTED] was not being applied to the carcasses. I took [REDACTED], slaughter foreman, to the cabinet so he could verify my findings. I informed [REDACTED] that the cabinet needed to be functioning before any of other carcasses went through it. I then preceded to take a regulatory control action by retaining all carcasses produced since the beginning of the shift. I applied US Retain tag # B37819200 to the bay containing the carcasses. I immediately informed plant management of the noncompliance. After the plant started the [REDACTED] cabinet, I observed several carcasses as they passed through the cabinet to verify that it was functioning properly. The second nozzle on the south side of the cabinet was not emitting any spray. I informed [REDACTED] that the nozzle was not functioning and that the cabinet was not to be used until it was functioning properly. At 1448, I informed Inspector [REDACTED] that operations were to stop and that she was to leave the kill floor. At 1450, I took a regulatory control action on the establishment's [REDACTED] cabinet by placing US Reject tag # B37819182 on the entry to the cabinet. The establishment's HACCP plan does not list a frequency for monitoring the application of the [REDACTED] to the carcass surface, but

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED]

You are hereby advised of your right to appeal this decision to the Department of Agriculture by 30 days after 01:55 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|---|----------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT [Signature] | 15. DATE 1-30-06 |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED] | 17. DATE 01-30-06 |

0008

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|--|--|-------------------------------------|
| 1. DATE 01/03/2006 | 2. RECORD NO. 0002-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 417.2(c)(4) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP Lamb HACCP | SSOP OTHER |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) their HACCP monitoring records indicate that [REDACTED]. The last recorded time that the [REDACTED] was observed being applied to carcasses was at 1000. A carcass number was not recorded at this time. By checking their zero tolerance monitoring records it could be determined with reasonable certainty that all carcasses before [REDACTED] had been through the cabinet prior to 1000. The establishment determined at all lamb carcasses between [REDACTED] and [REDACTED] would be ran back through the [REDACTED] cabinet for an application of peroxyacetic acid. [REDACTED] stated that the cause of the deviation was a failure of maintenance personnel to start the cabinet after making repairs during lunch break. To prevent this from happening again a lock will be placed on the control panel and only [REDACTED] and the Maintenance Supervisor, [REDACTED], will have a key. To prevent the nozzles from plugging the establishment will clean the nozzles every two weeks. Documentation of the cleaning of these nozzles will be with the applicable daily records. To assure that the CCP is back under control the establishment will monitor the application of [REDACTED] spray to the carcasses [REDACTED] for the next [REDACTED] then reevaluate the monitoring frequency at that point. At approximately 1550 I released regulatory control over the [REDACTED] cabinet and operations were allowed to resume. The establishment has not met the regulatory requirement's of 417.2(c)(4). The establishment's HACCP plan does not state a frequency for monitoring the observation of the application of [REDACTED] to the surface of carcasses. The current frequency of monitoring by the establishment is not sufficient to assure that [REDACTED] is being applied to every carcass.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)


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66000


A0000420_100-000100

January 3 2006

(b)(4)

The following is a list of lamb numbers of the carcasses that were re-sprayed with


(b)(6)

DATE: 1/4/06


00102

A0000420_103-000103

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | |
|--|---|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection |
|--|---|

| | | |
|-----------------------|---------------------------------|-------------------------------------|
| 1. DATE 01/04/2006 | 2. RECORD NO. 0003-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 |
|-----------------------|---------------------------------|-------------------------------------|

| | |
|--|---|
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6), (b)(7)(c) |
|--|---|

6. RELEVANT REGULATION(S)
416.13(b); 416.15(a)

| | | | |
|--|-------|------------|-------|
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | | Op. San./1 | |

| | |
|----------------------|---|
| 8. ISP CODE 01C01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Implementation |
|----------------------|---|

10. DESCRIPTION OF NONCOMPLIANCE

While performing a scheduled 01C01 procedure on the establishment's operational SSOP records (BK2) for the dates of January 2 and 3, 2006, I observed the following noncompliances: 1) Sanitation wash down procedures on the kill floor were not documented for either day. Neither the monitoring or the corrective actions taken were recorded for the multiple incidences of contamination that occurred in the gutting area of the slaughter floor. The establishment's operational SSOPs state that "[REDACTED]". 2) On 01/03/06 all four cooler operational SSOP audit records failed to document the type of sanitizing chemical that was being used, only the strength was listed [REDACTED] ppm. 3) On 01/03/06 the establishment did not document that it changed the plastic wrap in the loading dock area. The plant's BK2 records state "none noted" for the entry associated with the SSOP concerning the [REDACTED]. (The establishment did load beef carcasses on the 01/03/06.) 4) On both January 2nd and 3rd, the establishment recorded "no" when it records asked if "[REDACTED]". The establishment's operational SSOP states that "[REDACTED]". The establishment either failed to take or record the corrective actions needed to meet all parts of 9 CFR 416.15. 5) On 01/03/06 at 1435, the establishment's BK2 record indicates that lamb carcass [REDACTED] fell to the floor and that it was trimmed by knife. The establishment did not say how it restored sanitary conditions or how it was going to prevent a

(b)(4)

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]

You are hereby advised of your right to appeal this decision to the Department of Agriculture, Office of Information and Regulatory Affairs, Office of Management and Budget.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):
[REDACTED]

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):
had a managers meeting to ensure all SSOP's are filled out properly and that all deviations need to be documented at the time that the deviation occurs.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|-----------------------------------|----------|
| 14. SIGNATURE OF PLANT MANAGEMENT | 15. DATE |
|-----------------------------------|----------|

| | |
|---|----------------------|
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED] | 17. DATE 01-03-06 |
|---|----------------------|

00105

A0000420_106-000106

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|--|---|-------------------------------------|
| 1. DATE 01/04/2006 | 2. RECORD NO. 0003-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.13(b); 416.15(a) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP Op. San./1 |
| 8. ISP CODE 01C01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Implementation | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | |

(b)(4) recurrence of the SSOP failure. 6) On 01/03/06 the establishment failed to take all required corrective actions in response to documented failures of operational SSOPs and [REDACTED]. All four records for the [REDACTED] (SSOP [REDACTED]) indicate that monitoring was done, with a result of "pipes in drip room". No corrective actions were recorded. All four records also indicate that the use of water and overspray were monitored, with a result of "prewash water pressure turned down". Neither product disposition or measures to prevent recurrence were given.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

DISTRIBUTION: Original & 1 Copy to Establishment, 1 Copy to Inspector
Page 2 of 2

00106

A0000420_107-000107

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|--|---|---|
| 1. DATE 01/05/2006 | 2. RECORD NO. 0004-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED (b)(6), (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 310.22(d)(4); 417.5(a)(1) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | |
| | HACCP LPBK1 | SSOP |
| | | OTHER |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Recordkeeping | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | |

During the week of January 1, 2006, while reviewing the establishment's records on the segregation and disposal of Specified Risk Materials (SRMs) I observed that on the dates on 10/31/05, 12/01/05, 12/05/05, 12/06/05 and 12/07/05 the establishment failed to document the segregation and disposal of SRMs from cattle slaughtered on those days. The establishment failed to meet the regulatory requirements of 310.22(d)(4) which requires that establishments that slaughter and establishments that process the carcasses or parts of cattle maintain daily records sufficient to document the implementation and monitoring of the procedures for the removal, segregation and disposition of SRMs. The establishment has also failed to meet the requirements of 417.5(a)(1) which requires that establishments maintain records on prerequisite programs that are used as supporting documentation for decisions made in the hazard analysis.

A similar noncompliance (NR # 0036-2005-9114) was issued on 12/21/2005. This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Redacted Signature]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[Signature]

15. DATE

1/31/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Redacted Signature]

17. DATE

01/31/06

00112

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|---|---|-------|
| 1. DATE 01/17/2006 | 2. RECORD NO. 0007-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 417.5(a)(2) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| LPBK1 & LPLK1 | | | |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Recordkeeping | | |

10. DESCRIPTION OF NONCOMPLIANCE

During the performance a scheduled 03J01 procedure I reviewed the establishment's records to verify that recordkeeping regulatory requirements for the establishment's beef and lamb slaughter HACCP plans were being met. The establishment has a prerequisite program [REDACTED] & [REDACTED], for both their beef and lamb slaughtering processes, that they use as support for decisions made (b)(4) in their hazard analysis. The above named prerequisite programs have a stated monitoring frequency [REDACTED]. A review of the establishment's records for [REDACTED] and [REDACTED] and [REDACTED] and [REDACTED], indicate that the establishment only monitored and recorded the performance of these procedures during [REDACTED] (both beef and lamb) and [REDACTED] (lamb only). USDA daily disposition records indicate that both lambs and cattle were slaughtered during the above mentioned [REDACTED] thus [REDACTED] and [REDACTED] monitoring records should have been generated during that time period. The establishment failed to monitor and/or record the results of their beef slaughtering and dressing procedures SOP for the [REDACTED] and they failed to monitor or record the results of lamb slaughter and dressing procedures SOP for [REDACTED] and [REDACTED]. 9 CFR 417.5(a)(2) states that the establishment shall maintain the following records documenting the establishment's HACCP plan. The written HACCP plan, including the decisionmaking documents associated with the selection and development of CCP's and critical limits, and

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your right to appeal this decision as provided by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[REDACTED SIGNATURE]

15. DATE
1/30/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

17. DATE
1/31/06

00114

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|--|--|----------------------|
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. |
| 01/17/2006 | 0007-2006-9114 | 32111 M / 1 |
| 4. TO (Name and Title) | 5. PERSONNEL NOTIFIED | |
| Gary Ruse, Plant Manager | [REDACTED] (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) | | |
| 417.5(a)(2) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP |
| | OTHER | |
| | LPBK1 & LPLK1 | |
| 8. ISP CODE | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | |
| (b)(4) 03J01 | HACCP - Recordkeeping | |

10. DESCRIPTION OF NONCOMPLIANCE

documents supporting both the monitoring and verification procedures selected and the frequency of those procedures. By failing to monitor or document their [REDACTED] and [REDACTED] SOP procedures the establishment has not provided the supporting documentation (records) needed to support the decisions made in their hazard analysis.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]


FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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Page 2 of 2

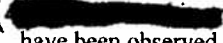
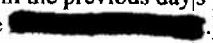
60115


A0000420_116-000116

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250, and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | | |
|--|----------------|---|------|-------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | | |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | | |
| 01/16/2006 | 0006-2006-9114 | 32111 M / 1 | | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED  | | |
| 6. RELEVANT REGULATION(S) 416.13(c) | | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP | OTHER |
| | | Preop San. | | |
| 8. ISP CODE 01B02 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) While performing a scheduled preoperational sanitation procedure on 01/16/2006, I found the following deficiencies: A) On product contact surfaces: 1) The horizontal support bars of the tongue rack contained three spots of dried blood from the previous day's production. Contamination ranged in size from .5 cm to 2 cm in diameter. A regulatory control action was taken by applying US Reject tag # B37819199 to the tongue rack. 2) The product contact surface of the cooler door, located near the  contained diffuse pieces of residual fat from the previous day's production. (Both lamb and beef carcasses have been observed contacting this door after they've exited the .) B) On non-contact surfaces: 1) The frame of the cooler door, located at the junction of the cooler and transfer hall way, was contaminated with blood and fat from the previous day's production. The contamination was located on the lower two feet of both sides of the door frame. 2) Two white trash receptacles located on the kill floor contained residual trash and organic debris. 3) A grey, plastic inedible gondola, which had a crack in its bottom surface, was placed on the kill floor prior to the start of operations. The receptacle was not water tight and if used would have allowed the leakage of inedible material. The gondola was tagged with US Reject tag # B37818154. Equipment and structures were cleaned, sanitized and reinspected. I reexamined these areas and found them to be acceptable. Preventative measures offered by the plant included: 1) the use of a mirror to examine the under side of the horizontal bars of the tongue rack, and 2) the product contact surface of the cooler door will be cleaned and sanitized prior to the start of

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE


You are hereby advised of your right to appeal this decision as determined by 508.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):


This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

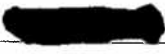
17. DATE

 02 / 07 / 06

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Page 1 of 2

A0000420_118-000118

00117

| | | | |
|---|---|---|-------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD CONTINUATION SHEET | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 01/16/2006 | 2. RECORD NO. 0006-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED  (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.13(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| Preop San. | | | |
| 8. ISP CODE 01B02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE
operations.

A similar noncompliance (NR # 0005-2006-9114) involving the tongue rack was written on 01/09/2006. Preventative measures given included the retention of the tongue rack by the Q.A. department every morning until they had a chance to inspect it. This preventative measure was either ineffective or was not properly implemented. This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE


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00118

0719 hrs

1-16-06

Preventative/Corrective Action Report for [REDACTED]

Blood on Tongue Rack Rails (Tapped by [REDACTED])

(b)(6), (b)(7)(c)

The lower rails had blood on the
Bottom Side.

(b)(4)

Actions: Due to the difficulty in being
able to see blood on the lower rails,
and as general scrubbing does not seem
to remove all of the blood [REDACTED]
[REDACTED] to ensure
the rails are clean.

00119

A0000420_120-000120

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0563-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---|---|-------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 01/09/2006 | 2. RECORD NO. 0005-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 416.13(a) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| Pre-op San. | | | |
| 8. ISP CODE 01B01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | | |

(b)(6), (b)(7)(c)

10. DESCRIPTION OF NONCOMPLIANCE
At approximately [REDACTED] while performing a scheduled 01B01 procedure of the establishment's Quality Assurance Preoperational Sanitation Reports records, I reviewed the record for the date 01/09/2006. A review of the record indicated that all areas were found to be acceptable when examined by Q.A. Manager, [REDACTED]. To confirm the accuracy of the establishment's recorded finding, I examined several pieces of equipment. I observed noncompliances on the product contact surfaces of the tongue rack, head-hanging tree and heart rack. On the tongue rack there was residual blood from the previous day's (01/05/06) production on the underside of the rack's horizontal bars. There were approximately 25 spots of blood that ranged in size from 1 cm to 4 cm in diameter. The heart rack had two globules of fat near one of the hooks. The head-hanging tree had smears of fat, approximately 10 cm long and 4 cm wide, on the vertical bar and one hook was smeared with a thin layer of fat. The equipment was rejected with U.S. Reject tag # B37819183. Because operations in the area had not began there was not any affected product. After the establishment restored sanitary conditions to the equipment, I reinspectd it and found it to be acceptable. The measures given by the establishment to prevent recurrence were: 1) [REDACTED] (The establishment stated that the cause of the noncompliance involving the tongue rack originated from tongues being left on the

(b)(4)

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|---|----------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT Gary Ruse | 15. DATE 1/31/06 |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED] | 17. DATE 01/31/06 |


00122

A0000420_123-000123

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

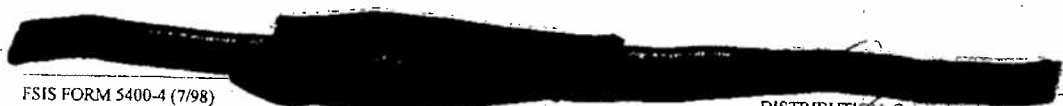
Food Safety Other Consumer Protection

| | | |
|--|---|-------------------------------------|
| 1. DATE 01/09/2006 | 2. RECORD NO. 0005-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED  (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.13(a) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP Pre-op San. |
| 8. ISP CODE 01B01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE

rack over the weekend. Tongues had not been removed from the rack and packaged until after the plant did preoperational sanitation.) After the establishment met all parts of 9 CFR 416.15, I removed the regulatory control action. The establishment failed to meet the regulatory requirements of 416.13(a) in that their preoperational sanitation monitoring procedures were not sufficient to detect contaminated product contact surfaces. Also, the establishment's records did not reflect the actual conditions found in the offal chilling and packaging area of the plant.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE



FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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Page 2 of 2

00123

A0000420_124-000124

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---------------------------------|---|--|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 01/18/2006 | 2. RECORD NO. 0008-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.13(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN HACCP SSOP OTHER Oper. SSOPs | | | |
| 8. ISP CODE 01C01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE

While reviewing the establishment's HACCP and SSOP records for the week of January 15, 2006, I observed that the monitoring form used to record SSOP monitoring results had changed from the previous week. As a consequence of this change I reviewed the establishment's operational SSOP plan. When I compared the SSOP plan with their associated records I observed that on 01/15/06, 01/16/06 and 01/17/06 the establishment had not monitored and/or recorded the results of all procedures listed in their operational SSOP plan. The establishment had not monitored and/or recorded results for the following procedures: 1) [REDACTED]

2) [REDACTED] (b) [REDACTED] (3) [REDACTED] (4) [REDACTED] (b)(4) (b) [REDACTED]

The establishment has failed to meet the regulatory requirements of 416.13(c) in that they failed to monitor the implementation of the procedures in their operational SSOP's.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

You are hereby advised of your rights under 301.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

17. DATE

00125

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE

01/18/2006

2. RECORD NO.

0008-2006-9114

3. ESTABLISHMENT NO.

32111 M / 1

4. TO (Name and Title)

Gary Ruse, Plant Manager

5. PERSONNEL NOTIFIED

(b)(6), (b)(7)(c)

6. RELEVANT REGULATION(S)

416.13(c)

7. SECTION/PAGE OF EST. PROCEDURE PLAN

HACCP

SSOP

OTHER

Oper. SSOPs

8. ISP CODE

01C01

9. NONCOMPLIANCE CLASSIFICATION INDICATORS

SSOP - Monitoring

10. DESCRIPTION OF NONCOMPLIANCE

A similar noncompliance (NR # 0030-2005-9114) was issued on 12/14/2005. Corrective actions taken were either ineffective or were not properly implemented. This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

FSIS FORM 5400-4 (7/98)

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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Page 2 of 2

00126

A0000420_127-000127

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE: 01/19/2006 2. RECORD NO.: 0009-2006-9114 3. ESTABLISHMENT NO.: 32111 M / 1

4. TO (Name and Title): Gary Ruse, Plant Manager 5. PERSONNEL NOTIFIED: (b)(6), (b)(7)(c)

6. RELEVANT REGULATION(S): 417.2(c)(4); 417.2(c)(7); 417.5(c)

7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP SSOP OTHER
 SL. HACCP/CCP 3

8. ISP CODE: 03J02 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: HACCP - Monitoring

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) While completely a scheduled 03J02 procedure of the establishment's Beef Slaughter HACCP plan and Lamb Slaughter HACCP plan, I observed a monitoring noncompliance involving both HACCP plans. Both of the establishment's slaughter plans have a critical control point (CCP) at the [redacted]. The critical limit (CL) for this CCP is: [redacted]. Both plans state that [redacted]. I reviewed the establishment's HACCP records dated January 17, 2006 at approximately 1000 on January 19, 2006. This was approximately 48 hours after the end of beef slaughter and 40 hours after the end of lamb slaughter (for the slaughter date of January 17, 2006). Since the HACCP records for the carcass chilling CCP were not present, I asked [redacted] to produce them so I could verify that all regulatory requirements for all CCPs were met. After consulting with the establishment's management team, [redacted] informed me that establishment personnel had failed to monitor [redacted] for those carcasses produced on the slaughter date of January 17, 2006. I informed plant management that I would be taking a regulatory control action on carcasses from the slaughter date of 01/17/06 and that they were not to ship those carcasses. The Kosher fronts from beef carcasses [redacted] and all lamb carcasses from January 17, 2006 had already been shipped. I took a regulatory control action by applying a US Retain tag # B37819198 to the remaining carcasses. The establishment failed to meet the regulatory requirements of 9 CFR 417.2(c)(4) in that they did not

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[redacted signature]

You are hereby advised of your right [redacted] as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT: [redacted signature]

15. DATE: 7/11/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE: [redacted signature]

17. DATE: 07/11/06

00128

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE

01/19/2006

2. RECORD NO.

0009-2006-9114

3. ESTABLISHMENT NO.

32111 M / 1

4. TO (Name and Title)

Gary Ruse, Plant Manager

5. PERSONNEL NOTIFIED

[REDACTED]

(b)(6), (b)(7)(c)

6. RELEVANT REGULATION(S)

417.2(c)(4); 417.2(c)(7); 417.5(c)

7. SECTION/PAGE OF EST. PROCEDURE PLAN

HACCP

SSOP

OTHER

SL. HACCP/CCP 3

8. ISP CODE

03J02

9. NONCOMPLIANCE CLASSIFICATION INDICATORS

HACCP - Monitoring

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) monitor their [REDACTED] at the frequency stated in their beef and lamb slaughter HACCP plans. The establishment record's review verification procedure failed to detect that the critical limit for the [REDACTED] had not been met, thus the establishment failed to meet the regulatory requirements of 417.2(c)(7) The preshipment review, which was signed and dated on 01/18/06, failed to ensure that all critical limits were met thus the establishment has not met the regulatory requirements of 417.5(c).

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)
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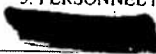
00129

A0000420_130-000130

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|--|----------------------|-------|
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 01/19/2006 | 0010-2006-9114 | 32111 M / I | |
| 4. TO (Name and Title) | 5. PERSONNEL NOTIFIED | | |
| Gary Ruse, Plant Manager |  (b)(6), (b)(7)(c) | | |
| 6. RELEVANT REGULATION(S) | | | |
| 417.2(c)(4); 417.2(c)(7); 417.5(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | HACCP RNG CCP 3 | | |
| 8. ISP CODE | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | | |
| 03C02 | HACCP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE
regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

FSIS FORM 5400-4 (7/98)
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00137

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250, and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|---|--|--|
| 1. DATE 01/24/2006 | 2. RECORD NO. 0011-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED (b)(6), (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 417.4(a)(2)(i); 417.4(a)(2)(iii); 417.5(c) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP |
| | OTHER | |
| | HACCP CCP Verif. | |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Plant Verification | |

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) At approximately [redacted] while performing a HACCP recordkeeping verification procedure I observed a noncompliance of the establishment's verification procedures for both their Beef Slaughter and Raw Not Ground HACCP plans. A review of the establishment's HACCP records for the slaughter date of 01/23/06 indicated that the establishment had signed and dated the daily records review verification at 0650 on 01/24/06. The preshipment review was signed at the time that I looked at their records but there was not any indication as to the time that it had been signed and dated. I asked Gary Ruse, the plant's manager, when he had signed the preshipment review. He stated that he signed it at 0650. The [redacted] record (dated 01/23/06) presented with preshipment review contained the carcass temperatures for animals slaughtered on 01/23/06 and 01/19/06. The carcass temperatures for cattle slaughtered on 01/23/06 had been taken at 1130 on 01/23/06 and ranged from [redacted] degrees F. Carcass temperatures from cattle slaughtered on 01/19/06 were taken at the same time and ranged from [redacted] degrees F. The HACCP records also contained the temperatures of three boxes of variety meat produced on 01/23/06. Those temperatures were taken at 1520 on 01/23/06 and ranged from [redacted] degrees F. At the time the establishment signed their daily records review verification and preshipment review, the [redacted] critical limit (CL) for both the variety meats and carcasses produced on 01/23/06, had not been met. Upon further review of the establishment's [redacted] records it was observed that the establishment did not perform its [redacted] monitoring procedure, for carcasses or variety meats produced

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Redacted signature]

You are hereby advised of your right to appeal this decision as provided by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[Redacted signature]

15. DATE

1-30-06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Redacted signature]

17. DATE

01-30-06

FSIS FORM 5400-4 (9/97), which may be used until exhausted (7/98)

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00140

A0000420_141-000141

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE
01/24/2006

2. RECORD NO.
0011-2006-9114

3. ESTABLISHMENT NO.
32111 M / 1

4. TO (Name and Title)

Gary Ruse, Plant Manager

5. PERSONNEL NOTIFIED

[REDACTED]

(b)(6), (b)(7)(c)

6. RELEVANT REGULATION(S)

417.4(a)(2)(i); 417.4(a)(2)(iii); 417.5(c)

7. SECTION/PAGE OF EST. PROCEDURE PLAN

HACCP

SSOP

OTHER

HACCP CCP Verif.

8. ISP CODE

03J01

9. NONCOMPLIANCE CLASSIFICATION INDICATORS

HACCP - Plant Verification

10. DESCRIPTION OF NONCOMPLIANCE

on 01/23/06, until 01/24/06 at 0945 and 1300 respectfully. The establishment also failed to calibrate their digital and dial thermometers by the methodology stated in their thermometer calibration procedure. The establishment failed to correctly perform the ongoing verification activities listed in their Beef Slaughter and Raw Not Ground Variety Meats HACCP plans and thus has not met the regulatory requirements of 417.4(a)(2)(i) and (iii). The establishment also failed to ensure that all critical limits were met prior to signing their preshipment review as required by 417.5(c).

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

DISTRIBUTION: Original & 1 Copy to Establishment, 1 Copy to Inspector
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00141

A0000420_142-000142

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | | |
|---|--|-------------------------------------|-------------------|-------|
| 1. DATE 01/19/2006 | 2. RECORD NO. 0010-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | (b)(6), (b)(7)(c) | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | | |
| 6. RELEVANT REGULATION(S) 417.2(c)(4); 417.2(c)(7); 417.5(c) | | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP | OTHER |
| | | HACCP RNG CCP 3 | | |
| 8. ISP CODE 03C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | | | |

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) While performing a review of the establishment's Raw Not Ground (RNG) Variety Meats HACCP records for the dates of January 16 & 17, 2006, I observed that the establishment had not monitored [REDACTED] at the frequency stated in their HACCP plan. The RNG plan states that [REDACTED]. A review of the RNG HACCP records showed that the record review verification procedures and pre-shipment reviews had been signed on January 17 and 18, 2006. The establishment's records did not contain entries for the monitoring of the [REDACTED] for either day. All variety meats product produced on the above mentioned days with the exception of Kosher tongues were retained with US Retain tag # B37819205. Kosher tongues have been shipped to the establishment's sister plant in Postville, Iowa. The establishment did not meet the requirements of 417.2(c)(4) in that they did not monitor [REDACTED] at the frequency stated in their RNG HACCP plan. The establishment failed to meet the regulatory requirements of 417.2(c)(7) in that the records review verification procedure was not effective in identifying the missed monitoring procedures. The establishment also failed to comply with 417.5(c) in that the preshipment review failed to ensure that all critical limits for all CCPs had been met prior to shipping product (signing the preshipment review).

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your right to a hearing as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[REDACTED SIGNATURE] Amy Ruse

15. DATE

7/11/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

17. DATE

07/11/06

00136

A0000420_137-000137

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250. and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|---|-------------------------------------|-------------------|
| 1. DATE 01/27/2006 | 2. RECORD NO. 0012-2006-9114 | 3. ESTABLISHMENT NO. 32111 M/1 | (b)(6), (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 416.13(b); 416.2(d) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| Oper. San./Env. Mois | | | |
| 8. ISP CODE 01C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | | |

(b)(4)

10. DESCRIPTION OF NONCOMPLIANCE

At approximately 0630 on 01/27/06, while performing a 06D01 procedure to verify the adequacy of the establishment's ventilation system in controlling condensation, CSI [REDACTED] observed a noncompliance that was resulting in direct contamination of product. While in the west cooler CSI [REDACTED] observed condensation dripping from an insulated, overhead pipe onto the left front shank of carcass # [REDACTED]. CSI [REDACTED] took a regulatory control action by tagging the contaminated carcass with US Retain tag # B37819201. He informed the maintenance supervisor, [REDACTED] of the noncompliance. At approximately 0715, I went to the west cooler to gather information for this noncompliance record and I observed condensation dripping onto carcass # [REDACTED]. The condensation was hitting the brisket area of the left half of the carcass and the front shank of the right half of the carcass. This carcass was located approximately three feet from carcass # [REDACTED] and was on the adjacent rail. The condensation was dripping from the seam of the insulation wrap of the overhead pipe. Carcass tag # [REDACTED] was tagged with US Retain tag # B37819210. The establishment has an SSOP for environmental moisture that states that [REDACTED] throughout the establishment and wiped down as needed. The establishment's SSOP for environmental moisture has failed to prevent the direct contamination of product. The establishment has also failed to meet the regulatory requirements of 416.2(d) in that their ventilation system is not adequate to control the build-up of condensation and its subsequent adulteration of product.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

You are hereby advised of [REDACTED] under 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

17. DATE
05/20/06

00114

A0000420_145-000145

| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD CONTINUATION SHEET | | TYPE OF NONCOMPLIANCE | |
|---|----------------|---|--|
| | | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 01/27/2006 | 0012-2006-9114 | 32111 M / 1 | |
| 4. TO (Name and Title) | | 5. PERSONNEL NOTIFIED | |
| Gary Ruse, Plant Manager | | [REDACTED] (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) | | | |
| 416.13(b); 416.2(d) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| | HACCP | SSOP | OTHER |
| Oper. San./Env. Mois | | | |
| 8. ISP CODE | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | |
| 01C02 | | SSOP - Monitoring | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | | |

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00145

A0000420_146-000146

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---------------------------------|---|-------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 02/08/2006 | 2. RECORD NO. 0013-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | (b)(6), (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 416.15(b) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN HACCP SSOP OTHER Pre-op. San. | | | |
| 8. ISP CODE 01B02 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Corrective Action | |

10. DESCRIPTION OF NONCOMPLIANCE

On February 8, 2006, while performing a preoperational sanitation records review on records generated for February 7, 2006 I observed a corrective actions noncompliance. The establishment's Quality Assurance Preoperational Sanitation Report indicated that the following areas on the kill floor did not pass preoperational sanitation inspection: 1) Rump/Flank Stand, 2) Hide Puller, 3) Hot Carcass Scale, 4) Chad Carcass Wash, 5) Chad Cabinet Wash and 6) Heart Hanging Rack (These areas were marked on the sheet as being "rejected"). The record was on to indicate that these areas were recleaned, resanitized, reinspected and found to be acceptable. I asked [REDACTED] for their written preventative measures. He did not know where they were but said he would contact [REDACTED], the QA Manager. At approximately 1745, [REDACTED] informed me that the establishment did not have any preventative measures for the preoperational sanitation deficiencies because the Sanitation Supervisor had been sick. SSOP records are to be completed and available for FSIS review at the beginning of the corresponding shift on the following day. The establishment did not meet all the regulatory requirement's of 9 CFR 416.15(b) in that they did not provide measures that will prevent the recurrence of direct contamination of product contact surfaces.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your rights as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

17. DATE

FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00147

A0000420_148.000148

MEMO

(b)(6), (b)(7)(c)

Information for answer to NR dated 2/16/06

1. Lambs were out of water in Pens # C1 & C2 for approximately 2 hours.
2. Yardman [REDACTED] found the problem at a few minutes prior to 6 AM when he came to work. He was in the process of moving the lambs to another pen and he notified [REDACTED] of the problem.
3. Corrective actions taken were (a) move the livst. To another pen as quickly as possible. (b) Maintenance Sup. [REDACTED] and asst. [REDACTED] have corrected the problem by replacing the plastic float with a new brass float. (c) Place a hose in the heated pump room and have a supply of water barrels available in case this problem occurs again. (d) While the weather is cold and there is a chance of freezing, we will check the pens more often throughout the day and especially the night.

00150

A0000420_151-000151

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|--|---|--|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input type="checkbox"/> Food Safety <input checked="" type="checkbox"/> Other Consumer Protection | |
| 1. DATE 02/16/2006 | 2. RECORD NO. 0014-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 313.2 | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN HACCP SSOP OTHER Humane Handling SOP | | | |
| 8. ISP CODE 04C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS PRODUCT - Protocol | | |

10. DESCRIPTION OF NONCOMPLIANCE

At approximately 0600 on 02/16/2006 I observed a Category III humane handling noncompliance. While performing antemortem inspection duties I examined the water tanks to verify that water was available to livestock at all times. Pens # C1 and C2, which share an automated water tank, did not contain any water. There were approximately [REDACTED] lambs per pen. I took a regulatory control action by tagging pens C1 and C2 with US Reject Tag # B37819219 and B37819220. The lambs were immediately moved to a different pen and water was provided to them in portable water tanks. The establishment failed to meet the regulatory requirements of 9 CFR 313.2(e) which states that animals shall have access to water in all holding pens.

(b)(4)

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

15. DATE

17. DATE

3/6/06


Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)



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00151

A0000420_152-000152

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250 and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---------------------------------|---|--------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 02/17/2006 | 2. RECORD NO. 0015-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED  (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.13(a) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP PreOp San. |
| 8. ISP CODE 01B02 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | | |

On 02/17/06 at approximately  while performing preoperational sanitation on the establishment's processing floor I observed the following deficiencies: 1) The band saw had a white, greasy, fat-like substance on the blade guides that are located in the lower housing compartment. In the upper housing compartment there was a white, fat-like residue on several noncontact areas. The band saw was rejected with US Reject tag # B37819204. 2) On the cutting boards of the south boning table there were multiple, black, metal-like specs of contamination that were approximately 1 mm in diameter. 3) At the distal end of the south boning table there was black grease on the belt sprocket and on the under side of the belt. The south boning table was tagged with US Reject tag # B37819208. 4) The conveyor, that dumps lamb fronts into the soaking vat, had a protein build-up on the underside of its framework. A regulatory control action was taken by tagging the conveyor with US Reject tag # B37819209. The establishment recleaned, reinspected and resanitized these areas and presented them for reinspection. Upon reinspection USDA personnel found all areas to be acceptable. Preventative measures given by  were to retrain the cleaning crew. After all regulatory requirements were met, regulatory control action of the area was relinquished by removing the US Reject tags.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE


You are hereby advised of your rights as provided by 306.3 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

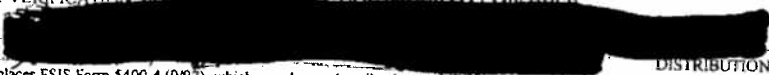
14. SIGNATURE OF PLANT MANAGEMENT

15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

17. DATE

FSIS
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

 3/6/06
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00154

A0000420-155-000155

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|---|---|-------|
| 1. DATE 02/17/2006 | 2. RECORD NO. 0015-2006-9114 | 3. ESTABLISHMENT NO. 32111 M/I | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.13(a) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP PreOp San. | OTHER |
| 8. ISP CODE 01B02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE
regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00155

A0000420-156-000156

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|--|---|-------------------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 05/17/2006 | 2. RECORD NO. 0016-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / I | (b)(6), (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 416.4(b) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP |
| | | | OTHER Pre-op. Sanitation P |
| 8. ISP CODE 06D01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS FACILITY - Product Based | | |

10. DESCRIPTION OF NONCOMPLIANCE
While performing an unscheduled preoperational sanitation inspection procedure (01B02) of the establishment's processing floor, I observed the following noncompliance involving noncontact surfaces: 1) Several of the support structures of the boning table were contaminated with residual fat from the last day's production. The fat particles were approximately 5 mm x 20 mm in size. 2) The floor in the packaging room was littered with pieces of plastic, paper, wood and metal. Residual water from clean-up covered approximately 1/4 of the packaging room floor. 3) Cleaning equipment including scrub buckets, barrels and a high pressure sprayer were present in the packaging room. 4) A plastic pallet divider that was contaminated with meat scraps, blood, and fat was also present in the packaging room. A regulatory control action was taken by placing US Rejected Tag # B37819235 near the entrance to the area. Establishment management was notified of the noncompliance at approximately 0710. The establishment recleaned, resanitized and reinspected the affected areas. After reinspecting the area and finding it acceptable I removed the regulatory control action.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (immediate action(s)): *The Supporting structures of the boning Table was Recleaned & Sanitized. The Floor of the packaging area was recleaned and Residual moisture pushed to the drain. all nonessential Packaging materials & Cleaning equipment was removed from the area*

13. PLANT MANAGEMENT RESPONSE (further planned action(s)): *Sanitation Supervisor [REDACTED] was instructed to Ensure all areas were Clean and non-essential material & equipment Removed prior to QA Pre-Op*

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
[Signature]

15. DATE
7/17/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]

17. DATE
07/19/06

00160

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|---------------------------------|---|-------------------|
| 1. DATE 05/17/2006 | 2. RECORD NO. 0017-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | (b)(6), (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 417.3(a)(1); 417.3(a)(2); 417.3(a)(3); 417.3(a)(4) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN HACCP SSOP OTHER HACCP-RNG/pg. 1 | | | |
| 8. ISP CODE 03C01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | |

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) On 05/17/2006, as part of a scheduled 03C01 procedure, I chose to verify the recordkeeping requirements for the establishment's HACCP plan for beef variety meats. The preshipment review for product produced on 05/15/2006 had been signed and dated by the plant's manager, Gary Ruse, so I looked at the establishment's HACCP records for that date. Upon reviewing the monitoring form for [REDACTED], I observed that the establishment had monitored the [REDACTED] and found it to [REDACTED]. The establishment's critical limit (CL) for this critical control point (CCP) has a range of [REDACTED] for [REDACTED] concentration. The establishment's monitoring records indicated that the establishment responded to this CL deviation by readjusting the mixing solution. Upon further review of the establishment's records additional corrective actions could not be found. I spoke with both [REDACTED] and [REDACTED] Q.A. personnel, and inquired as to the location of the corrective actions sheet. Both individuals informed me that the corrective actions required by 9 CFR 417.3 had not been performed and thus there was not a corrective action record. Because the establishment's boxing and labeling procedures are performed at the end of the shift and variety meat products produced during the day are commingled, it was not possible to ascertain which variety meat products were produced during the time (0920-1024) that the critical control point was not within the established critical limit. All offal products produced on 05/15/2006 were retained with US Retain Tag # B37819225. This included [REDACTED] of heart meat [REDACTED] of beef tongues.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your right [REDACTED] 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[REDACTED SIGNATURE]

15. DATE

8-3-06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

17. DATE

05/17/06

FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00161

A0000420_162-000162

| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD CONTINUATION SHEET | | TYPE OF NONCOMPLIANCE | |
|---|----------------|---|--|
| | | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 05/17/2006 | 0017-2006-9114 | 32111 M / 1 | |
| 4. TO (Name and Title) | | 5. PERSONNEL NOTIFIED | |
| Gary Ruse, Plant Manager | | [REDACTED] (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) | | | |
| 417.3(a)(1); 417.3(a)(2); 417.3(a)(3); 417.3(a)(4) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| | HACCP | SSOP | OTHER |
| HACCP-RNG/pg. 1 | | | |
| 8. ISP CODE | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | |
| 03C01 | | HACCP - Corrective Action | |

10. DESCRIPTION OF NONCOMPLIANCE

[REDACTED] of beef oxtails, [REDACTED] of beef oxlips, [REDACTED] of beef cheek meat and [REDACTED] of beef head meat. The establishment failed to meet the regulatory requirements of 9 CFR 417.3(a) which states that when a deviation from a critical limit occurs the establishment will take actions to ensure: (1) The cause of the deviation is identified and eliminated; (2) The CCP will be under control after the corrective action is taken; (3) Measures to prevent recurrence are established; and (4) No product that is injurious to health or otherwise adulterated as a result of the deviation enters commerce. Further review of the establishment's HACCP monitoring records for [REDACTED] for the dates of 05/15/06 and 05/16/06 indicated that there were no other deviations from the critical limit.

The documents serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)

Replaces FSIS Form 5400-4 (9/97)

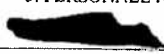
Do not use until exhausted (7/98)

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00162

A0000420_163-000163

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

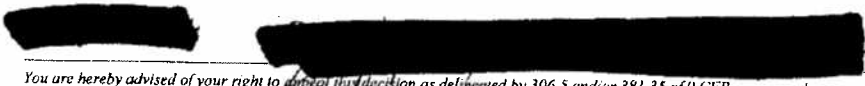
| | | | |
|--|---------------------------------|---|--|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 05/19/2006 | 2. RECORD NO. 0018-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED  (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.4(b) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | | SSOP | |
| | | OTHER Pre-Op San.-General | |
| 8. ISP CODE 06D01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS FACILITY - Product Based | |

10. DESCRIPTION OF NONCOMPLIANCE

On 05/19/2006 while performing a scheduled preoperational sanitation procedure (01B02) on the establishment's processing floor Consumer Safety Inspector (CSI)  and I observed the following noncompliances that involved noncontact surfaces: (1) The trolley guide on the carcass drop auger had rust on its inside surface that covered approximately 50 % its surface. (Tagged with US Reject tag # B37819233) (2) The blade wheels (2) on the band saw had diffusely scattered rust on there surface. (Tagged with US Reject tag # B37819237) (3) The inside compartment of the shrink tunnel had residual dust that covered the floor, chain belt and shields. (Tagged with US Reject tag # B37819238) (4) The channel iron support structures for the bone belt had diffusely scattered residual welding sediment along its entire horizontal surface. Plant management was notified of the noncompliances at approximately 0730. The establishment recleaned, resanitized and reinspected the affected areas. After being notified that all areas of the processing floor were ready for reinspection, I reinspected those areas and found them to be acceptable. I removed the regulatory control actions at this time.

A similar noncompliance record, NR #0016-2006-9114, was issued on 05/17/2006. The establishment's further planned actions were not effective in preventing recurrence. This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

 *Sum*

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):


This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

17. DATE

 *Sum*

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00165

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|--|-------------------------------------|-------|
| 1. DATE 05/18/2006 | 2. RECORD NO. 0019-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] and [REDACTED] (b)(6), (b)(7)(c) | | |
| 6. RELEVANT REGULATION(S) 417.5(a)(3); 417.5(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| HACCP RNG-VM | | | |
| 8. ISP CODE 03C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Recordkeeping | | |

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4)

On 05/18/2006, while performing the recordkeeping component of an unscheduled 03C02 that had been initiated in response to a 03C01 noncompliance, I observed that the establishment's Raw Not-Ground (RNG) HACCP records for Variety Meats did not contain any entries for the monitoring of their hand sprayer. The establishment has a Critical Control Point (CCP) for [REDACTED]. This CCP states that [REDACTED]. The critical limit for the [REDACTED] is [REDACTED]. On the dates of 05/15/06, 05/16/06 and 05/17/06 the establishment's HACCP records did not have any monitoring entries showing that the [REDACTED] had been monitored. I informed both [REDACTED] and [REDACTED] of the deficiency. They stated that they had monitored the [REDACTED] on the above mentioned days and had found it to be functional but had failed to record these results. The establishment failed to meet the regulatory requirements of 9 CFR 417.5(a)(3) in that they did not have records documenting the monitoring of all components of [REDACTED] for their [REDACTED] HACCP plan. They also failed to meet the regulatory requirements of 417.5(c) in that prior to shipping product the establishment failed to adequately review all records associated with the production of the product to ensure that all CCPs/CLs had been met and recorded.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED]
You are hereby advised of your rights as provided by 306.3 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

15. DATE

8-3-06

17. DATE

08/04/06

FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)
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A0000420_167-000167

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE

05/18/2006

2. RECORD NO.

0019-2006-9114

3. ESTABLISHMENT NO.

32111 M / 1

4. TO (Name and Title)

Gary Ruse, Plant Manager

5. PERSONNEL NOTIFIED

[REDACTED] and [REDACTED]

(b)(6), (b)(7)(c)

6. RELEVANT REGULATION(S)

417.5(a)(3); 417.5(c)

7. SECTION/PAGE OF EST. PROCEDURE PLAN

HACCP

SSOP

OTHER

HACCP RNG-VM

8. ISP CODE

03C02

9. NONCOMPLIANCE CLASSIFICATION INDICATORS

HACCP - Recordkeeping

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) Immediate corrective actions given by the establishment were to review their HACCP RNG Variety Meats records to ensure that all regulatory requirements had been met. Further planned actions included obtaining and using the correct monitoring form for CCP [REDACTED]

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

FSIS FORM 5400-4 (7/98)

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00167

A0000420_168-000168

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|--|---|-------------------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 05/23/2006 | 2. RECORD NO. 0020-2006-9114 | 3. ESTABLISHMENT NO. 32111 M / 1 (b)(6), (b)(7)(c) | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] and [REDACTED] | |
| 6. RELEVANT REGULATION(S) 310.25(a) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER Generic E. coli prog |
| 8. ISP CODE 05A02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS E. COLI - Other / None | | |

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) On 05/23/2006 I performed a scheduled 05A02 procedure to verify that the establishment was meeting the regulatory requirements of 9 CFR 310.25 that pertain to the sampling of beef carcass for the presence of Generic E. coli. During the week of 05/14/06 to 05/20/06 the establishment slaughtered [REDACTED] head of cattle. As of 10:00 a.m. on 05/23/2006 the establishment had not sampled any of these cattle for the presence of Generic E. coli. The Generic E. coli testing program presented to me by the establishment states that 1 carcass will be sampled for each [REDACTED] of cattle slaughtered. 9 CFR 310.25(a)(2)(iii) states that slaughter establishments as defined in paragraph(a)(2)(v) of this section, must take samples at a frequency proportional to the volume of production at the following rates: (A) Cattle, sheep, goats, horses, mules and other equines: [REDACTED] carcasses, but, a minimum of one sample each week of operation. The establishment did not meet this regulatory requirement.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your right to review this document under 381.25 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)): *A sample was taken for generic E-Coli on 5-23-06 for kill date of 5-22-06. [REDACTED] and [REDACTED] reviewed 9CFR.25 To be more familiar with the testing Requirements*

13. PLANT MANAGEMENT RESPONSE (further planned action(s)): *In order to become more familiar with the testing procedure a daily sample has been taken since 5-23-06 for each days kill. A review of the Generic E-Coli Test Results indicate that total coliform per cm² is less than .5*

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[REDACTED SIGNATURE]

15. DATE

7/12/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

17. DATE

07/19/06

00169

| REQUIREMENT | YES (✓) |
|--|------------|
| <p>2. SAMPLE ANALYSIS <i>(paragraph (a) (1) (ii) and (a) (3))</i></p> <p>a. The laboratory analyzing the samples is not using an AOAC Official Method or another method that meets the criteria in paragraph (a) (3).</p> | |
| <p>3. RECORDS OF TEST RESULTS <i>(paragraphs (a) (1) (iii) and (a) (4))</i></p> <p>a. The establishment's process control chart or table does not show at least the most recent 13 <i>E. coli</i> test results.</p> <p>b. The establishment's process control chart or table does not express <i>E. coli</i> test results in terms of: <i>(as applicable)</i></p> <p>cfu/cm² of surface area sponged or excised by type of livestock slaughtered, or cfu/ml of rinse fluid by type of poultry slaughtered.</p> <p>c. The establishment is not retaining records of test results for 12 months.</p> | |
| <p>4. Table 1 does not include applicable m/M criteria, and the establishment is not using a statistical process control technique <i>(charting or plotting the results over time)</i> to determine what variation in test results is within normal limits.</p> | |
| <p>5. Table 1 includes applicable m/M criteria, and the establishment is not determining whether it is operating within these criteria. <i>(An establishment is not operating within these criteria when the most recent test result exceeds M or when the number of samples out of the most recent 13 samples testing positive at levels above m is more than 3.)</i></p> | |

00171

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|---|--|--------------------------------------|
| 1. DATE 06/01/2006 | 2. RECORD NO. 0021-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 417.2(c)(4); 417.5(a)(3) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP |
| | OTHER | |
| | SL. HACCP Plan CCP 3 | |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) On 06/01/06 I verified the recordkeeping regulatory requirements of the establishment's beef slaughter HACCP plan by reviewing the plant's HACCP records that had been generated during the time period from 05/15/06 to 05/30/06. The preshipment review and record review verification had been signed for each day's records. A review of the establishment's carcass chilling log for the slaughter date of 05/26/2006 indicated that the establishment had not performed the monitoring procedure for their (b)(4) (CCP) as stated in their HACCP plan. The establishment's HACCP plan for CCP (b)(4) has a critical limit (CL) that states (b)(4). By examining the establishment's records for 05/26/06 it was determined that slaughter operations were completed by 1630. The establishment's records indicate that the monitoring procedure for carcass chilling was not performed until 0810 on 05/28/06 which is (b)(4), (b)(4) beyond the time that the last carcass entered the cooler and thus (b)(4) hours, (b)(4) minutes beyond the latest possible time for monitoring. Further review of the establishment's Slaughter HACCP records for the dates between 05/15/06 and 05/30/06 (12 slaughter days) indicated that for CCP (b)(4) the establishment did not have any entries indicating that they had monitored the nozzles of their (b)(4) to ensure that they were functioning properly. The monitoring procedure for this critical control point (CCP) of their slaughter HACCP plan) states that the establishment will monitor the spray pattern of the acid spray cabinet nozzles once

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

You are hereby advised of your right to apply for a hearing under 381.55 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)): A Review of CCP3 Since opening on 5/15/06 Indicate the Product would have been (b)(4) less at (b)(4) Hrs. A review of the Document used for recording CCP3 didn't have an area for Recording The function of the Nozzles, but they were being monitored.

13. PLANT MANAGEMENT RESPONSE (further planned action(s)): A Daily Check of all Required forms will insure it is being filled out The day after Slaughter. CCP3 A New form is now being used that shows the monitoring of all Spray nozzles CCP3

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|---|----------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT <i>[Signature]</i> | 15. DATE 7/20/06 |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE <i>[Signature]</i> | 17. DATE 07/20/06 |

FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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A0000420_173-000173

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|---|--|--------------------------------------|
| 1. DATE 06/01/2006 | 2. RECORD NO. 0021-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 417.2(c)(4); 417.5(a)(3) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP |
| | SL. HACCP Plan CCP 3 | |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | |

(b)(6), (b)(7)(c)

10. DESCRIPTION OF NONCOMPLIANCE

per hour during slaughter operations. The monitoring of the spray nozzles verifies that they are functioning properly thus ensuring that [REDACTED] is being properly applied to the carcasses. Without records it is not possible to ascertain if the establishment failed to perform their monitoring procedure or if they performed the procedure but just neglected to record the results. (During the review and observation component of several 03J01 procedures that I had performed over the last three weeks I had observed the establishment's Q.A. person [REDACTED] monitor the spray nozzles of the cabinet.)

(b)(4)

The establishment failed to meet the regulatory requirement's of 9 CFR 417.2(c)(4) in that they failed to follow their monitoring procedure for CCP [REDACTED] which requires the establishment to monitor the carcass temperature within [REDACTED] hours of slaughter. The establishment failed to meet the regulatory requirements of 9 CFR 417.5(a)(3) in that they failed to record all monitoring results for CCP [REDACTED] as evident by the lack of entries for the monitoring of the nozzles of the [REDACTED]. This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

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00173

A0000420_174-000174

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250 and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE: 06/01/2006
2. RECORD NO.: 0022-2006-9114
3. ESTABLISHMENT NO.: 04653G M / 1
4. TO (Name and Title): Gary Ruse, Plant Manager
5. PERSONNEL NOTIFIED: (b)(6), (b)(7)(c)
6. RELEVANT REGULATION(S): 417.4(a)(2)(ii); 417.5(c)
7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP | SSOP | OTHER
RNG HACCP plans
8. ISP CODE: 03C02
9. NONCOMPLIANCE CLASSIFICATION INDICATORS: HACCP - Plant Verification

(b)(4)

10. DESCRIPTION OF NONCOMPLIANCE
On 06/01/06, as part of a scheduled 03C02 procedure, I performed a review of the establishment's Raw Not Ground (RNG) HACCP plans' records to verify that the establishment was meeting all HACCP regulatory requirements. I reviewed the establishment HACCP plans including their monitoring and verification procedures prior to reviewing the records. The establishment has (b)(4) (CCP) in their (b)(4) and (b)(4) for their (b)(4). Verification activities include (b)(4). During a review of the establishment's (b)(4) for the weeks ending on 05/19/06, 05/26/06 and 06/02/06 I observed the following noncompliances: 1) For the week ending on 05/19/06 the establishment failed to perform the (b)(4) and (b)(4) on their beef variety meats for (b)(4). 2) For the week ending on 05/26/06 the establishment failed to perform the direct observation of monitoring verification procedures on their beef variety meats for (b)(4) both the (b)(4) and (b)(4) and CCP (b)(4). The plant failed to perform their (b)(4) during the week. The establishment also failed to perform the (b)(4) for their (b)(4).

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
(b)(4)

You are hereby advised of your right to appeal this determination by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)): The G.A. (b)(4) and The form being used was reviewed & found to be lacking the necessary verification requirements.

13. PLANT MANAGEMENT RESPONSE (further planned action(s)): A New form was designed to meet all of the weekly verification requirements. A (b)(4) was developed and required all (b)(4).

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT: Gary Ruse
15. DATE: 7/20/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE: (b)(4)
17. DATE: 07/20/06

00174

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|--|--------------------------------------|-------|
| 1. DATE 06/01/2006 | 2. RECORD NO. 0022-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6), (b)(7)(c) | | |
| 6. RELEVANT REGULATION(S) 417.4(a)(2)(ii); 417.5(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| RNG HACCP plans | | | |
| 8. ISP CODE 03C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Plant Verification | | |

10. DESCRIPTION OF NONCOMPLIANCE

(b)(4) during this week of production. 3) During the week ending on 06/02/06 the establishment failed to perform the [REDACTED] on their beef variety meats for [REDACTED] and for [REDACTED]. Because slaughter operations for the week had ended on 05/30/06, it was not possible for the establishment to perform these verification activities during the remainder of the week.

The establishment failed to meet the regulatory requirements of 9 CFR 417.4(a)(2)(ii) in that they did not perform their ongoing weekly direct observation of monitoring activities as stated in their [REDACTED] and their [REDACTED]. The establishment also failed meet the regulatory requirements of 417.5(c) in that prior to shipping product the establishment failed to adequately review their records to ensure that all verification activities had been performed. This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

DISTRIBUTION: Original & 1 Copy to Establishment, 1 Copy to Inspector
Page 2 of 2

00175

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250, and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE 2. RECORD NO. 3. ESTABLISHMENT NO.
06/02/2006 0023-2006-9114 04653G M / 1

4. TO (Name and Title) 5. PERSONNEL NOTIFIED (b)(6), (b)(7)(c)
Gary Ruse, Plant Manager

6. RELEVANT REGULATION(S)
417.4(a)(2)(ii); 417.5(c)

7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER
Slaughter HACCP plan

8. ISP CODE 9. NONCOMPLIANCE CLASSIFICATION INDICATORS
03J01 HACCP - Plant Verification

10. DESCRIPTION OF NONCOMPLIANCE
On 06/02/2006 during a scheduled 03J01 procedure, I chose to perform a review of the establishment's slaughter HACCP records. Prior to reviewing the establishment's HACCP records, I reviewed their [redacted] including their monitoring and verification procedures. The establishment has [redacted] in their plan. Verification activities for these CCPs include [redacted]. During the review of the establishment's [redacted] for the weeks ending on 05/19/06, 05/26/06, and 06/02/06 I observed the following noncompliances: 1) For the week ending on 05/19/06 the establishment failed to perform the [redacted] and [redacted]; 2) For the week ending on 05/26/06 the establishment failed to perform the direct observation of monitoring verification procedures on their beef carcasses for [redacted]. The establishment also failed to perform their [redacted]. 3) For the week ending on 06/02/06 the establishment failed to perform the [redacted].

(b)(4)

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[redacted]
You are hereby advised of your right to appeal this decision as determined by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT 15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE 17. DATE
[redacted] 07/18/06

FSIS Replace FSIS Form 5400-1 (9/97), which may be used until exhausted (7/98) DISTRIBUTION: Original & 1 Copy to Establishment, 1 Copy to Inspector Page 1 of 2

00177

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|--|--------------------------------------|-------|
| 1. DATE 06/02/2006 | 2. RECORD NO. 0023-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6), (b)(7)(c) | | |
| 6. RELEVANT REGULATION(S) 417.4(a)(2)(ii); 417.5(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| Slaughter HACCP plan | | | |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Plant Verification | | |

10. DESCRIPTION OF NONCOMPLIANCE

[REDACTED] 3. Because slaughter operations for the week ended a [REDACTED] on 05/30/06, it was not possible for the establishment to perform these verification activities after this record was initially reviewed.

(b)(4)

The establishment failed to meet the regulatory requirements of 9 CFR 417.4(a)(2)(ii) in that they did not perform their ongoing weekly direct observation of monitoring verification activities as stated in their [REDACTED]. The establishment also failed to meet the regulatory requirements of 417.5(c) in that prior to shipping product the establishment failed to adequately review their records to ensure that all verification activities had been performed. This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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Page 2 of 2

00178

A0000420_179-000179

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|--|---|--|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 06/02/2006 | 2. RECORD NO. 0024-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 417.2(c)(4); 417.4(a)(2)(iii); 417.5(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN HACCP SSOP OTHER RNG VM HACCP | | | |
| 8. ISP CODE 03C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE
 On 06/02/06, I performed an unscheduled 03C02 procedure to verify that the establishment had met all regulatory requirements for product produced under its [REDACTED] HACCP plan. During a review of the establishment's [REDACTED] records from the last five days of production, May 25th, 26th, 28th, 29th and 30th, 2006, I observed the following noncompliances: 1) The establishment's [REDACTED] record for product produced from animals slaughtered 05/25/06 did not contain an entry for [REDACTED]. The record had been signed by [REDACTED] Q. A. manager, on 05/26/06. The records review verification was signed on 05/28/06 by plant manager, Gary Ruse. 2) The establishment's [REDACTED] record for product produced from animals slaughtered on 05/26/06 indicated that the establishment failed to monitor its product according to the procedures specified in their HACCP plan. The establishment's records indicate that they did not monitor the temperature of their variety meats until 1630 on 05/28/06 which would have been at least [REDACTED] hours after offal products were processed and placed in the freezer. The critical limit for CCP [REDACTED] for variety meats states that [REDACTED] the establishment thus failed to monitor the temperature of their variety meats within the stated time frame. The establishment failed to meet all parts of 417.4(a)(2)(iii) in that they did not adequately perform their records review verification procedure as evident by their failure to detect the above deficiencies. The establishment also failed to meet the regulatory

(b)(4)

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
 [REDACTED]
 You are hereby advised of your right to appeal this [REDACTED] 81.33 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):
 [REDACTED]

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):
 [REDACTED]

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
 [REDACTED]

15. DATE
 6/13/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
 [REDACTED]

17. DATE
 06/15/06

00180

FS Replaces FSIS Form 3400-1 (9/97), which may be used until exhausted (7/98)

| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD CONTINUATION SHEET | | TYPE OF NONCOMPLIANCE | |
|---|----------------|---|--|
| | | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 06/02/2006 | 0024-2006-9114 | 04653G M / 1 | |
| 4. TO (Name and Title) | | 5. PERSONNEL NOTIFIED | |
| Gary Ruse, Plant Manager | | [REDACTED] (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) | | | |
| 417.2(c)(4); 417.4(a)(2)(iii); 417.5(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| | HACCP | SSOP | OTHER |
| RNG VM HACCP | | | |
| 8. ISP CODE | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | |
| 03C02 | | HACCP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE

requirements of 417.5(c) in that prior to shipping product they failed to adequately review their HACCP records to ensure that all critical limits were met and appropriate corrective actions were taken. A regulatory control action was taken on offal product produced on 05/25/05 and 05/26/06 by tagging it with US Retain tag # B37819229.

A similar Noncompliance record (NR # 0010-2006-9114) involving a failure to monitor the temperature of offal products was issued on 01/19/2006.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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Page 2 of 2

18100

A0000420_182-000182

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing this collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250, and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---------------------------------|---|--|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 05/26/2006 | 2. RECORD NO. 0025-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / I | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.13(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | | SSOP | |
| Pre-op. San. Gen. | | | |
| 8. ISP CODE 01B02 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE

On 05/26/2006 while performing a scheduled preoperational sanitation inspection procedure (01B02) on the establishment's processing floor, coolers and slaughter floor, I observed the following noncompliances: 1) The edible barrels, that are used for holding trim product from the boning table, were contaminated with residual blood, fat and grease from the previous day's production. Two blood streaks measuring approximately 1/2" X 3" were found on the inside (product contact surface) of one barrel. Another barrel had residual fat and a black greasy substance on its rim (product contact surface). Barrels were tagged with US Reject Tag # B37819243. 2) The wall/ceiling support pole at the east end of the processing floor was contaminated with specks of fat and blood from the previous day's production. The specks ranged in size from that of a pin head up to the size of a BB and were diffusely scattered over the galvanized steel surface of the pole. Carcasses that are railed to the loading dock have been seen contacting this pole as they are moved to the load-out area. The door frame, that separates the processing floor from the loading dock, was also contaminated with residual fat and blood from the previous day's production. A regulatory control action was taken by tagging the pole with US Reject Tag # B37819250. 3) On the slaughter floor, I observed that the pluck/liver trays of two of the gut buggies were contaminated with dead flies and fat. A regulatory control action was taken by tagging the gut buggies with US Reject Tag # B37819250. 4) The support leg and toe guard at the east end of the final inspection rail (slaughter floor) was contaminated with a 3" X 2" smear of protein and dried blood from the previous day's

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Redacted Signature]

You are hereby advised of your rights under 5605 and of 561.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

QA and unavailable. Sanitation Supervisor [Redacted] Re-cleaned & Sanitized all Areas

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

The QA Preoperational Sanitation Check will be conducted in a systematic and thorough manner and will be accompanied by a member of the Cleanup Crew.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[Redacted Signature]

15. DATE

7/20/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Redacted Signature]

17. DATE

07/20/06

FSIS
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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Page 1 of 2

00183

A0000420_184-000184

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|--|---|--------------------------------------|
| 1. DATE 05/26/2006 | 2. RECORD NO. 0025-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.13(c) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP |
| Pre-op. San. Gen. | | |
| 8. ISP CODE 01B02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | |

(b)(4)

10. DESCRIPTION OF NONCOMPLIANCE
 production. A regulatory control action was taken by tagging the area with US Reject Tag # B37819249. 5) The doors between the [REDACTED] and the cooler were contaminated with three pieces of fat from the previous day's production. Quality Assurance Manager, [REDACTED] who accompanied me during preoperational sanitation, was shown the noncompliances. After all areas were recleaned, resanitized, reinspected and released by the establishment, I reinspected the affected areas and found them to be acceptable. Preventative measures given by [REDACTED] included: 1) Retraining the cleaning crew, and 2) implementation of better communication between plant management and the sanitation manager on plant management's operating intentions. After regulatory requirements were met I removed the regulatory control actions on the rejected areas.

This document serves as written notification that your failure to comply with regulatory requirement's could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)
 Replaces FSIS Form 5400-4 (9/97), which may be used until 12/31/00.

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00184

This request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|--|---|--------------------------------------|
| 1. DATE 05/28/2006 | 2. RECORD NO. 0026-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.13(c) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP Pre-op. San. Gen. |
| 8. ISP CODE 01B02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE

On 05/28/06, while performing an unscheduled preoperational sanitation inspection procedure (01B02) on the establishment's slaughter floor, I observed the following noncompliances: 1) The exterior surface of the entrance doors of the carcass wash cabinet were contaminated with residual fat from the previous day's production. The fat smears covered approximately 20 % of the upper doors and fat was also present under the door flaps. Smears ranged in size from 3" X 8" to 3" X 15". Carcasses rub against these doors as they enter the carcass wash. A regulatory control action was taken by applying US Reject Tag # B37819255 to the carcass wash cabinet. 2) The bottom surface of the carcass guide bar of the carcass wash cabinet was contaminated with a 1/2" X 1" piece of fat from the previous day's production. 3) The framework of two of the gut buggies (noncontact surfaces) were contaminated with dried blood from the previous day's production. There were 4-5 blood smears, ranging in size from 1/2" X 1" to 1" X 2", on each of the gut buggies. A regulatory control action was taken by applying US Reject Tag #B37819251 to the gut buggies. Quality Assurance Manager, [redacted] was informed of the noncompliances. After the establishment recleaned, resanitized, reinspected and released the affected areas, I verified that sanitary conditions had been restored. Preventative measures offered by the establishment included increasing the size of the cleaning crew and retraining their new hires. At approximately 0805, I removed the regulatory control action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

You are hereby advised of your right to appeal this decision as defined in section 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s))

QA [redacted] Had was informed that Sanitation Recleaned & Sanitized the Carcass Wash Cabinet. The gut buggies were recleaned & Sanitized

13. PLANT MANAGEMENT RESPONSE (further planned action(s))

[redacted] the Sanitation ^{to} instructions Supervisor Retrained his crew on proper cleaning procedure for the Carcass wash & Gut Buggies

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[redacted] Gary Ruse

15. DATE

7/12/06

16. VERIFICATION SIGNATURE OF INSPECTOR

[redacted]

17. DATE

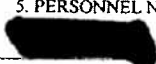
07/13/06

FSIS FOI
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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Page 1 of 2

00185

A0000420_186-000186

| | | | |
|---|---------------------------------|---|--|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD CONTINUATION SHEET | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 05/28/2006 | 2. RECORD NO. 0026-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED  (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.13(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN HACCP SSOP OTHER Pre-op. San. Gen. | | | |
| 8. ISP CODE 01B02 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE
A similar noncompliance record involving preoperational sanitation, NR # 0025-2006-9114, was issued on 05/26/2006. The preventative measures given in response to NR # 0025-2006-9114 were to retrain the cleaning crew and improve communications between management personnel. These preventative measures were either not properly implemented or were ineffective in preventing the recurrence of the noncompliance.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE


00186

This request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing this collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|--|---|--------------------------------------|
| 1. DATE 05/28/2006 | 2. RECORD NO. 0027-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / I |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6), (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.13(c); 416.2(d) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP Oper. San. Gen. |
| 8. ISP CODE 01C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE

On 05/28/2006 at approximately 1435, while verifying operational sanitation on the establishment's slaughter floor, I observed water dripping off the carcass chain as it was traversing through the trim rail inspection area. Further examination of the carcass chain revealed heavily beaded water droplets around the bolts that function to hold the individual links together. Water droplets were also observed on the chain "dogs". A regulatory control action was taken by tagging the carcass release handle with US Reject Tag # B37819247. At approximately 1445 Inspector [REDACTED] observed water droplets falling into a tub of head meat that was sitting on the offal processing table. The offal processing table is located adjacent to the slaughter floor. Observation of the pipes located above the offal processing table revealed heavily beaded condensation and dripping water. A regulatory control action was taken by tagging the offal processing table with US Reject Tag # B37819246. Plant Manager, Gary Ruse, directed plant employees to discard the tub of head meat into an inedible container. I verified the disposition of this product into an inedible gondola. After the establishment took corrective actions to restore sanitary conditions to all affected areas, I checked those areas to verify that sanitary conditions had been restored. Preventative measures given by [REDACTED] included the addition of fans to the kill floor to improve air circulation and the installation of a partially enclosed chain blow-off system at the area where the carcass chain reenters the slaughter floor. At approximately 1540, I removed the regulatory control actions and operations resumed.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your right to appeal this decision under 9 CFR 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)): *The Excessive Condensation was wiped down from the Chain, and the area in the Offal Room was wiped down and the Table moved to keep condensation out of the meat tubs*

(b)(4) 13. PLANT MANAGEMENT RESPONSE (further planned action(s)): *[REDACTED] was installed in the Offal Room + the Condensation is checked daily & wiped down prior to production. [REDACTED] were installed on the Chain to control moisture. The Chain is being modified to [REDACTED]*


This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|---|----------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT <i>[Signature]</i> | 15. DATE 7/10/06 |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED] | 17. DATE 07/11/06 |

FSIS
 Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00187

| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD CONTINUATION SHEET | | TYPE OF NONCOMPLIANCE | |
|---|--|--|--|
| 1. DATE | 2. RECORD NO. | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 05/28/2006 | 0027-2006-9114 | 3. ESTABLISHMENT NO. | |
| 4. TO (Name and Title) | | 04653G M / 1 | |
| Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED | |
| 6. RELEVANT REGULATION(S) | |  | |
| 416.13(c); 416.2(d) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | | Oper. San. Gen. | |
| 8. ISP CODE | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | | |
| 01C02 | SSOP - Monitoring | | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | | |

(b)(6)
(b)(7)(c)

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE



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00188

A0000420 189-000189

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250, and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|-------------------------------------|---|--------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 06/08/2006 | 2. RECORD NO. 0028-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / I | (b)(6) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] | | |
| 6. RELEVANT REGULATION(S) 416.13(b); 416.13(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | | SSOP Op. San.-Gen. | |
| 8. ISP CODE 01C02 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE
On 06/08/06, I performed a scheduled operational sanitation recordkeeping procedure (01C01), on the establishment's records that had generated for the dates of 06/05/06-06/07/06. On 06/05/06 the establishment did not conduct slaughter or processing operations but they did load carcasses for shipment to their sister plant. In reviewing the establishment's records for 06/05/06, I observed that there were not any operational sanitation records present. I asked [REDACTED] Processing Floor Foreman, if he had monitored operational sanitation during loading operations on 06/05/06. He informed me that he had not. The establishment failed to meet the regulatory requirements of 416.13(c) in that they did not monitor the implementation of the procedures listed in operational sanitation SOP's. Also, without records it is not possible to ascertain if the establishment met the regulatory requirement's of 416.13(b) which states that "Each official establishment shall conduct all other procedures in the Sanitation SOP's at the frequencies specified"

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]

You are hereby advised of your right to appeal [REDACTED] 9 CFR

12. PLANT MANAGEMENT RESPONSE (Immediate action(s))
[REDACTED] was informed that he would observe the procedure for any part of the production process not just being that a monitoring report form would be turned into The QA office for each morning and Afternoon Shift.

13. PLANT MANAGEMENT RESPONSE (further planned action(s))
[REDACTED] has been turning in all of his documentation since 6-5-06 other management personnel were also notified of this requirement. There have been no further problems.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
[Signature]

15. DATE
7/17/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]

17. DATE
07/19/06

00189

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|---|---------------------------------|---|--|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD. | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 06/09/2006 | 2. RECORD NO. 0029-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / I | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6) [REDACTED] (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 417.2(c)(4) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN HACCP SSOP OTHER (b)(4) SL. HACCP plan | | | |
| 8. ISP CODE 03J01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE
On 06/09/06, I performed a scheduled 03J01 procedure to verify that the establishment was meeting HACCP regulatory requirements for their beef slaughtering process. I chose to verify the monitoring regulatory requirements for the establishment's critical control point (CCP) for [REDACTED] (CCP # [REDACTED]) has critical limits [REDACTED] and 2) [REDACTED]. The monitoring frequency of each component is [REDACTED]. At approximately 0858, I performed the review and observation component on CCP # [REDACTED] to determine if the nozzles in the acid spray cabinet were functioning properly. The [REDACTED] carcass (# [REDACTED]) from the day's slaughter production was observed traversing the acid spray cabinet. The spray nozzles failed to emit any spray. I immediately took a regulatory control action on the acid spray cabinet by tagging it with US Reject Tag # B37819101. I also took a regulatory control action on the affected carcass by tagging it with US Retain Tag # B37819106. I informed Slaughter Foreman, [REDACTED] and Q. A. Manager [REDACTED] of the noncompliance.

Maintenance personnel stated that the cause of the deviation was the lose of a pin on the arm of the trip switch. They replaced the pin and informed me that they would apply a lock nut to prevent it from falling out again. To prevent recurrence of the noncompliance, [REDACTED] stated that the establishment would verify that the trip switch was working properly by sending

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]
You are hereby advised of your rights under 9 CFR [REDACTED]

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
Jay Ruse LLC 15. DATE
7/21/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED] 17. DATE
07/21/06

00130

| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD CONTINUATION SHEET | | TYPE OF NONCOMPLIANCE | |
|---|----------------|---|--|
| | | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 06/09/2006 | 0029-2006-9114 | 04653G M / 1 | |
| 4. TO (Name and Title) | | 5. PERSONNEL NOTIFIED | |
| Gary Ruse, Plant Manager | | [REDACTED] | |
| 6. RELEVANT REGULATION(S) | | | |
| 417.2(c)(4) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | | SSOP | |
| SL. HACCP plan | | OTHER | |
| 8. ISP CODE | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | |
| 03J01 | | HACCP - Monitoring | |

(b)(6)
(b)(7)(c)

(b)(4)

10. DESCRIPTION OF NONCOMPLIANCE

several trolleys through the cabinet prior to the start of operations (instead of tripping the switch manually). After all repairs were made to the spray cabinet, I removed the regulatory control action on the cabinet and the establishment resumed operations.

I observed carcass # [REDACTED] as it passed through the acid spray cabinet; the switch and nozzles were operating correctly. As a means to assure that the CCP was back under control, [REDACTED] stated that he would monitor the nozzles while several additional carcasses passed through the acid spray cabinet. At approximately 0930 I observed [REDACTED] use a hand sprayer to apply [REDACTED] acid to carcass # [REDACTED]. I removed the regulatory action on the carcass after all regulatory requirements were met.

A similar noncompliance involving the monitoring of the acid spray cabinet nozzles was issued on 06/01/06. NR # 0021-2006-9114 was written because the establishment either failed to monitor the spray nozzles or failed to record the results of their monitoring procedure. This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)
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16100
00191

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| | | | |
|--|---------------------------------|---|---------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 06/15/2006 | 2. RECORD NO. 0030-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED | (b)(6) (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 416.15(b) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER (b)(4) |
| 8. ISP CODE 01B02 | | | |
| 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Corrective Action | | | |

10. DESCRIPTION OF NONCOMPLIANCE

While performing a scheduled preoperational sanitation inspection (01B02) procedure on the establishment's coolers, processing floor and slaughter floor, Consumer Safety Inspector (CSI) [redacted] found the following noncompliances on the establishment's slaughter floor: 1) Two of the gut buggies had residual fat from the previous day's production. The establishment also failed to adequately rinse their gut buggies as evident by residual soap deposits. A regulatory control action was taken on the gut buggies by tagging them with US Reject Tag numbers B37819261 and B37819262. 2) The head rack had residual fat from the previous day's production on its product contact surface. A regulatory control action was taken on the head rack by tagging it with US Reject Tag # B37809269. 3) The blade of the split saw had rust on its surface. A regulatory control action was taken on the split saw by tagging it with US Reject Tag # B37819268. 4) The hide puller had rust and fecal material on the drum and sinks. A regulatory control action was taken on the hide puller by tagging it with US Reject Tag # B37819270. The establishment recleaned, resanitized and reinspected the affected areas. [redacted] reinspected the noncompliant areas and found them to be acceptable. Preventative measures given by Q. A. Manager, [redacted] to [redacted] were [redacted]. [redacted] released the regulatory control actions after receiving these preventative measures.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[redacted signature]

You are hereby advised of your right to [redacted] 301.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

The gut buggies were Recleaned & Sanitized. The Head Rack was recleaned & Sanitized. The blade of the splitting saw was destroyed and replaced with a new one. The Hide puller drum was recleaned. To remove rust & Reoiled with pacber oil and the sinks were recleaned & Sanitized.

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

on the evening of thursday June 15 2006 [redacted] Conducted a training session with the cleaning crew on the proper cleaning procedures for all equipment on the kill floor. The sanitation supervisor was instructed on proper sanitation Pre-Op procedures.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[redacted signature]

15. DATE

7/13/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[redacted signature]

17. DATE

6/13/06

FSIS

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00193

A0000420_194.000194

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|--|--|--------------------------------------|
| 1. DATE 06/15/2006 | 2. RECORD NO. 0030-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / I |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] |
| 6. RELEVANT REGULATION(S) 416.15(b) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP Pre-op. San.-Gen. |
| 8. ISP CODE 01B02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Corrective Action | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | |

(b)(6)
(b)(7)(c)

A similar noncompliance involving preoperational sanitation on the slaughter floor was issued on 05/28/2006. The establishment failed to adequately remove fat and other residue from equipment. The establishment's preventative measure of retraining their cleaning crew was not effective in preventing the recurrence of the noncompliance. The establishment has thus failed to meet the corrective actions regulatory requirements of 9 CFR 416.15(b) which states that "Corrective actions include procedures to ensure appropriate disposition of product(s) that may be contaminated, restore sanitary conditions, and prevent the recurrence of direct contamination or adulteration of product(s), including appropriate reevaluation and modification of the Sanitation SOP's and the procedures specified therein or appropriate improvements in the execution of the Sanitation SOP's or the procedures specified therein".

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

FSIS FORM 5400-4 (7/98)
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00194

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

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|--|--|---|---------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input type="checkbox"/> Food Safety <input checked="" type="checkbox"/> Other Consumer Protection | |
| 1. DATE 06/27/2006 | 2. RECORD NO. 0031-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / I | (b)(6) (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 310.18 (b)(4) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER LPBK-SOP |
| 8. ISP CODE 04C01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS PRODUCT - Economic | | |

10. DESCRIPTION OF NONCOMPLIANCE

While performing operational sanitation procedures on the establishment's processing floor I observed approximately 10 front quarters that were being prepared for processing. A noncompliance involving the product (economic/wholesomeness) trend indicator was observed. Three of these quarters were contaminated with hair and/or hide. On one carcass a piece of hide, approximately 1" X 2" in size, was found in the lower neck area near the proximal cervical vertebra. Hairs, too numerous to count were found on all three carcasses on both the exterior and interior surfaces of the neck. A regulatory control action was taken by applying US Retain Tag # B37819279 on the affected front quarters. The establishment's immediate response was to retrim the affected carcasses and to place an employee at the break station to examine carcasses prior to the breaking procedure. Further planned actions given were to [REDACTED].

[REDACTED] After the carcasses were retrimmed, I reinspected them and found no visible contamination. At approximately 1300, after the plant had provided immediate and further planned actions, I removed the regulatory control action.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

All product is Reinspected & Trimmed on this Date. The persons Running the Hidepuller were instructed to monitor each carcass in the neck area and to trim any problem areas. The Production Breakstation employees were also instructed to monitor and trim any Problem areas.

13. PLANT MANAGEMENT RESPONSE (further planned action(s))
[REDACTED]

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
17. DATE
07/18/06

00196

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE

06/27/2006

2. RECORD NO.

0031-2006-9114

3. ESTABLISHMENT NO.

04653G M / 1

4. TO (Name and Title)

Gary Ruse, Plant Manager

5. PERSONNEL NOTIFIED

[REDACTED]

(b)(6)

6. RELEVANT REGULATION(S)

310.18

(b)(7)(c)

7. SECTION/PAGE OF EST. PROCEDURE PLAN

HACCP

SSOP

OTHER

LPBK-SOP

8. ISP CODE

04C01

9. NONCOMPLIANCE CLASSIFICATION INDICATORS

PRODUCT - Economic

10. DESCRIPTION OF NONCOMPLIANCE

additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00197

A0000420 198.000198

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250 and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

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|--|--|---|---------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 06/29/2006 | 2. RECORD NO. 0032-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(6) (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 417.2(c)(4) (b)(4) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP |
| | | OTHER V. M. RNG HACCP plan | |
| 8. ISP CODE 03C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE

As part of a scheduled Raw Not-Ground HACCP (03C02) verification procedure I performed a zero-tolerance audit on the establishment's variety meats. During the inspection of the establishment's oxlips product I observed a zero-tolerance defect on one of the ten pieces of oxlip that I examined. The contamination was yellow to tan in color, fibrous in texture, plant-like in appearance and measured approximately 1 mm X 15 mm in size. The contamination observed fits the definition of ingesta as described in FSIS Directive 6420.2. A regulatory control action was taken by tagging the tub of oxlips with US Retain tag # B37819258. I performed a zero-tolerance audit on the remaining variety meats product and did not find any additional zero-tolerance defects. At approximately 1140, I informed the establishment's slaughter foreman, [REDACTED], of my findings. [REDACTED] informed me that the affected product would be reworked and reinspected. To bring the CCP back under control he stated that he would instruct the head washer to [REDACTED] and he would replace the head boner with a more experienced person. Preventative measures given were: The head flusher will [REDACTED]. 2) If [REDACTED]

After the plant reconditioned the contaminated tub of oxlips I performed a zero-tolerance audit on the product and did not find any additional zero-tolerance defects. After all regulatory requirements were met I removed the regulatory control action on the

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE] *JRM*

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

17. DATE

FSIS Form 5400-4 (7/98)

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00200

A0000420_201-000201

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE


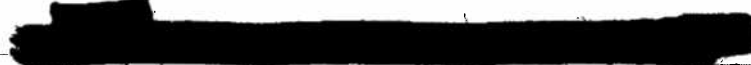
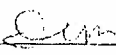
Food Safety Other Consumer Protection

| | | | |
|--|--|---|---------------------|
| 1. DATE 06/29/2006 | 2. RECORD NO. 0032-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED  | (b)(6) (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 417.2(c)(4) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| | HACCP | SSOP | OTHER |
| V. M. RNG HACCP plan | | | |
| 8. ISP CODE 03C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE
oxlips product.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00201

A0000420_202-000202

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---|---|-----------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 06/28/2006 | 2. RECORD NO. 0033-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(6) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] | | (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 417.5(a)(3); 417.5(c) | (b)(4) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| SI. HACCP Plan-CCP#2 | | | |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Recordkeeping | | |

10. DESCRIPTION OF NONCOMPLIANCE

On 06/28/06 I chose to perform the recordkeeping component of an unscheduled 03J01 verification procedure because the HACCP records from the previous week had not been reviewed due to a shortage of inspection personnel. Prior to monitoring the CCP critical limit values, I observed that the pre-shipment review and recordkeeping verification procedures had been signed by Gary Ruse on 06/20/06. During the review of HACCP records for 06/19/06, I noticed that there were no actual values recorded on the [REDACTED] for the [REDACTED] for the times of 0809, 0916, and 0954. This is a non-compliance of HACCP 9 CFR 417.5(a)(3), which states that the establishment shall record and document the monitoring of CCP's and their critical limits, including the recording of actual times, temperatures or other quantifiable values, as prescribed in the establishments HACCP Plan. While following up on the deviation I also noticed there were no corrective actions recorded. In questioning Q.A. Manager [REDACTED] about the corrective actions he stated that the establishment had taken corrective actions but had failed to record their corrective actions. He stated that the establishment had [REDACTED] Because there had not been any carcasses ran through the acid rinse cabinet prior to the deviation there was not any product affected. The establishment [REDACTED] their monitoring frequency from [REDACTED] to ensure that their CCP was under control after their corrective actions were taken.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your right to appeal this [REDACTED] as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[REDACTED SIGNATURE]

15. DATE

7/2/06

16. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

17. DATE

7-11-06

FSIS FORM 5400-4 (7/98)
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00203

A0000420 204-000204

| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD CONTINUATION SHEET | | TYPE OF NONCOMPLIANCE | |
|---|--|---|--|
| 1. DATE | 2. RECORD NO. | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 06/28/2006 | 0033-2006-9114 | 3. ESTABLISHMENT NO. | |
| 4. TO (Name and Title) | | 04653G M / 1 | |
| Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED | (b)(6) |
| 6. RELEVANT REGULATION(S) | | | (b)(7)(c) |
| 417.5(a)(3); 417.5(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | Sl. HACCP Plan-CCP#2 | | |
| 8. ISP CODE | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | | |
| 03J01 | HACCP - Recordkeeping | | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | | |

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTOR



FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00204

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|--|---|------------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 07/12/2006 | 0034-2006-9114 | 04653G M / 1 | |
| 4. TO (Name and Title) | | 5. PERSONNEL NOTIFIED | (b)(6) |
| Gary Ruse, Plant Manager | | Gary Ruse | (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 416.2(b)(1) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER 034-2006-9114 |
| 8. ISP CODE 06D01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS FACILITY - Product Based | | |

10. DESCRIPTION OF NONCOMPLIANCE

At approximately 11:30 a.m. while performing a randomly selected SPS procedure of (06D01) of the mens lavatories, dressing rooms and toilets, I observed the following non-compliances: (1) Several dried pieces of food was scattered over the eating surface of the table. (2) The screen on the west window (near the lunch table) had a corner torn away from the frame allowing the entering of flies. (3) There were used hand towels in the hand wash sink of the lavatory. (4) Candy wrappers, emery paper, hand towels, used bloody cotton gloves, dirt, and fat pieces were scattered on the locker room floor and benches. (5) A putrid odor was coming from a locker due to a piece of spoiled meat that was found at an earlier date by the establishment in the overhead shelf of the locker and that had not been thoroughly cleaned sanitization and deodorization.

The above listed non-compliances are a violation of 9 CFR 416.2(h)(1), which states, dressing rooms, toilet rooms, and urinals must be sufficient in number, ample in size, conveniently located, and maintained in a sanitary condition and in good repair at all times to ensure cleanliness of all persons handling any product. They must be separate from the rooms and compartments in which products are processed, stored, or handled.

Q.C. [REDACTED] was present at the time of my observations. A regulatory control action was taken on the locker-lunch-

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE] 7-14-06

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 306.6

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[REDACTED SIGNATURE]

15. DATE

9/19/06

17. DATE

7-14-06

FSIS FORM 5004
Replaces FSIS Form 5004-1

may be used until exhausted (7/98)

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00206

A0000420_207-000207

(b)(4) (b)(6)
(b)(7)(c)

| | | | |
|---|--|---|------------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD CONTINUATION SHEET | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 07/12/2006 | 2. RECORD NO. 0034-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 416.2(h)(1) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP |
| | | | OTHER 034-2006-9114 |
| 8. ISP CODE 06D01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS FACILITY - Product Based | | |

10. DESCRIPTION OF NONCOMPLIANCE
lavatory area with a U.S. rejection tag #819273.

Q.C. [REDACTED] agreed with the non-compliance and Gary Ruse was made aware of the regulatory control action.

The immediate corrective action taken by the plant was to clean the locker room, and adjoining area, and mending the torn screen on the window. Further planned actions, presented by Q.C. [REDACTED] was to [REDACTED]

[REDACTED] This was presented before the removal of the regulatory control action.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED]

[REDACTED] 7-14-06
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Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98) -Page 2 of 2

00207

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0088. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250, and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---|---|-------------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input type="checkbox"/> Food Safety <input checked="" type="checkbox"/> Other Consumer Protection | |
| 1. DATE 07/18/2006 | 2. RECORD NO. 0035-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(4) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] | | (b)(6) (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 317.2(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER 0035-2006-9114 |
| 8. ISP CODE 04B04 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS PRODUCT - Misbranding | | |

10. DESCRIPTION OF NONCOMPLIANCE

At approximately 9:15 while performing a operational sanitation (01C02) procedure on the establishment's fabrication floor, I observed a non-compliance involving the labeling of product. Boxed product on a floor pallet in packaging had labels stating, "BNLS BEEF PASTRAMI". Further investigation revealed that this cut of meat was being harvested from the 3rd, 4th, and 5th rib (plate area) and it was not cooked. Pastrami is defined in the Food Standards and Labeling Policy Book as "Cooked, cured beef with spices, generally made from the plate but other cuts can be used". The product boxed under the establishment's BLNS BEEF PASTRAMI label is not cooked or cured but is sold fresh. The boxes of "BNLS BEEF PASTRAMI" were retained, with U.S. retain tag #B37819293, until further corrective action is presented.

The establishment's labeling of this product is in violation of 9 CFR 317.2(c)(1) which states: "The name of the product, which in the case of a product which purports to be or is represented as a product for which a definition and standard of identity or composition is prescribed in part 319 of this sub-chapter, shall be the name of the food specified in the standard and in the case of any other product shall be the common or usual name of the food, if any there be, and if there is none, a truthful descriptive designation, as prescribed in paragraph(e) of the section: Section (e) states: Any descriptive designation used as a product name for a product which has no common or usual name shall clearly and completely identify the product. Product which has been

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE] 7-19-06

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)): [REDACTED] was called concerning the product labeled "BNLS Beef Pastrami" These labels were used in error and were not intended for use in the Local Pride Lbs Plant. These labels are being removed from the boxes and all of these labels are to be returned. The correct Generic label is being sent from postville

13. PLANT MANAGEMENT RESPONSE (further planned action(s)): All New labels are being reviewed with [REDACTED] to ensure they are approved & appropriate

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
[Signature: Gary Ruse]
15. DATE
7/20/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED SIGNATURE]
17. DATE
7-26-06

FSIS FORM 5400-1 (7/98)
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00210

A0000420_244-000211

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|---------------------------------|---|---------------------|
| 1. DATE 07/18/2006 | 2. RECORD NO. 0035-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(6) (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] (b)(4) | |
| 6. RELEVANT REGULATION(S) 317.2(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | | SSOP | |
| | | OTHER 0035-2006-9114 | |
| 8. ISP CODE 04B04 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS PRODUCT - Misbranding | |

10. DESCRIPTION OF NONCOMPLIANCE

prepared by salting, smoking, drying, cooking, chopping, or otherwise shall be so described on the label unless the name of the product implies, or the manner of packaging show that the product was subjected to such preparation."

Upon further investigation an additional noncompliance was observed involving [REDACTED] unlabeled boxes of product in the [REDACTED] storage cooler. The product is being packaged and stored without visible labels stating the identity of the boxed product.

Fabrication superintendent [REDACTED] was notified of the non-compliance. The eleven boxes in the cooler was retained with U. S. retain tag's #819292 and #B37819295 until further corrective action has been taken.

This is a non-compliance of 9 CFR 317.1(a) and 9 CFR 317.2(a) which states: " When in an official establishment, any inspected and passed product is placed in any receptacle or covering constituting an immediate container there shall be affixed to such a container a label as described in 317.2(a) a label within the meaning of this part shall mean a display of any printing, lithographing, embossing, stickers, seals, or other written, printed, or graphic matter upon the package liners of any product."

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED]

[REDACTED]

7-19-06

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00211

A0000420_212-000212

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|--|---|-------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 07/19/2006 | 2. RECORD NO. 0036-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 416.13(c); 416.4(a); 416.4(b) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| 0036-2006-9114 | | | |
| 8. ISP CODE 01B02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Corrective Action | | |

10. DESCRIPTION OF NONCOMPLIANCE

At approximately [REDACTED] before performing pre-operational sanitization procedure (01B02), I observed numerous flies in the offal harvesting area. With further observation the fly population on the kill floor was too numerous for operation. Q.C. technician [REDACTED] and [REDACTED] was notified of the pest problem. A regulatory control action of the offal area, and kill floor was taken with U.S. rejection tag's #B37819291 and #B37819306 until a fly control corrective action were provided by the establishment.

When observing the tubs used for edible offal product a non-compliance was found. Hair, dirt, and a piece of dried fat and blood (1/4 of an inch long) was present on the bottom surface of the tub. The tub was rejected with U.S. tag #B37810310 for further cleaning and sanitization. Q.A. manager [REDACTED] was made aware of the regulatory control action.

While performing the (01B02) on the fabrication floor I observed fat on the boning belt, and catch board at the end of the belt. There were marks on the belts edge where it was rubbing on metal leaving metal streaks in the fat left on the belt. Q.C. manager [REDACTED] was informed of the non-compliance, along with [REDACTED] and [REDACTED]. A regulatory control action was taken on the boning table and belt with U.S. rejection tag #B37819308 until further cleaning and sanitization had been

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE] 7/19/06

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)): Additional Bait Stations were put out, Non-toxic Fly Strips were placed in inedible Areas. Loose flies in the plant were killed by Employees

13. PLANT MANAGEMENT RESPONSE (further planned action(s)): The inedible Trailer is not put into the Auger Room until the beginning of production. Flies will be sprayed in Inedible Areas if the problem is severe at end of production and after cleanup. Doors to inedible will remain closed as much as possible. Additional bait Stations will be maintained in outside perimeter of Building. No food or dirty clothing will be allowed in lockers. Corals will be sprayed on a regular basis.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|---|---------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT [REDACTED SIGNATURE] | 15. DATE 7/19/06 |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED SIGNATURE] | 17. DATE 8/1/06 |

00212

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|--|--------------------------------------|--------|
| 1. DATE 07/19/2006 | 2. RECORD NO. 0036-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] | | |
| 6. RELEVANT REGULATION(S) 416.13(c); 416.4(a); 416.4(b) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | | 0036-2006-9114 | (b)(4) |
| 8. ISP CODE 01B02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Corrective Action | | |

10. DESCRIPTION OF NONCOMPLIANCE

completed. The catch board was completely removed for cleaning and sterilization. The boning belt was re-inspected and approved before the regulatory control rejection tag was removed.

All of the non-compliances above are in violation of 9 CFR 416.13(c), which states: " Each official establishment shall monitor daily the implementation of the procedures in the Sanitation SOP's," 9 CFR 416.4(a) and 416.4(b) which states: "(a) All food-contact surfaces, including food-contact surfaces of utensils and equipment, must be cleaned and sanitized as frequently as necessary to prevent the creation of unsanitary conditions and the adulteration of product. (b) Non -food-contact surfaces of facilities, equipment, and utensils used in the operation of the establishment must be cleaned and sanitized as frequently as necessary to prevent the creation of unsanitary conditions and the adulteration of product."

A corrective action for the fly population problem was received from plant manager Gary Ruse, explaining [REDACTED]

[REDACTED] The reduced presence of flies, 180 degree wash and sanitization of all contact surfaces was administered for removal of U.S. rejection tags on the kill floor and offal harvesting area.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED]

00213

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|---|--------------------------------------|-----------|
| 1. DATE 07/31/2006 | 2. RECORD NO. 0037-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / I | (b)(6) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED | (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 417.3(a)(3) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | 0037-2006-9114 | | |
| 8. ISP CODE 03C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | | |

10. DESCRIPTION OF NONCOMPLIANCE

At approximately 10:23 while performing a (03C02) zero-tolerance audit procedure on the establishments variety meat oxlips, I observed a deviation on 4 of the 10 pieces of oxlips. The contamination was fibrous and plant-like in texture, yellowish in color, and varied in length 1/2 inch to an inch long. The observed contamination fit the description of ingesta as described in FSIS directive 6420.2.

A regulatory control action was taken on the bucket of oxlips with U.S. retain tag #B37 819264, and the offal table with U.S. retain tag #B37819091 until the establishment presented a corrective action. I informed Q.A. [redacted] and slaughter foreman [redacted] of the defect.

After the establishment reconditioned the oxlip product, sanitized the offal table, and I reinspected the retained product and found no other defects in the oxlips, I removed the regulatory control action. Additional preventative measures were to [redacted]

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[redacted signature]

7-31-06

You are hereby advised of your right to appeal this decision as authorized by 300.3 which is part of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

16. VERIFICATION SIGNATURE

[redacted signature]

15. DATE

8/3/06

17. DATE

8-3-06

FSIS FORM 5400-4 (7/98)

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A0000420-217-000217

(b)(4)

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE
 Food Safety Other Consumer Protection

1. DATE: 07/31/2006 2. RECORD NO.: 0037-2006-9114 3. ESTABLISHMENT NO.: 04653G M / I

4. TO (Name and Title): Gary Ruse, Plant Manager 5. PERSONNEL NOTIFIED: [REDACTED] (b)(6)
(b)(7)(c)

6. RELEVANT REGULATION(S): 417.3(a)(3)

7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP | SSOP | OTHER
0037-2006-9114

8. ISP CODE: 03C02 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: HACCP - Corrective Action

10. DESCRIPTION OF NONCOMPLIANCE
A similar non-compliance #0032-2006-9114 was written on 06/29/2006. Corrective measures given for this non-compliance were to [REDACTED]. These preventative measures were either not properly implemented or were ineffective in preventing the reoccurrence of contamination of the establishments oxlips.

The establishment has thus failed to meet the regulatory requirement of 9 CFR 417.3(a) which states: The written HACCP plan shall identify the corrective action to be followed in response to a deviation from a critical limit. The HACCP plan shall describe the corrective action to be taken, and assign responsibility for taking corrective action, to ensure:
(3) Measures to prevent recurrence.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional

11. SIGNATURE OF INSPECTION: [REDACTED] 7-31-06

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00217

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

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|--|---------------------------------|---|--|---------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | | (b)(6) (b)(7)(c) |
| 1. DATE 08/07/2006 | 2. RECORD NO. 0039-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | | (b)(4) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | | |
| 6. RELEVANT REGULATION(S) 416.15(b) | | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | | |
| HACCP | | SSOP | | OTHER |
| Preop. San.-Gen. | | | | |
| 8. ISP CODE 01B01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Corrective Action | | |

10. DESCRIPTION OF NONCOMPLIANCE

While performing a scheduled preoperational sanitation recordkeeping procedure on records generated during the week of July 31-August 4, 2006, I observed two noncompliances involving inadequate corrective actions. The establishment's [REDACTED] for August 2, 2006 indicated that the product contact surfaces of the split saw and carcass wash cabinet were contaminated with fat. The establishment's records indicated that the equipment was recleaned and sanitized but there was not any documentation of the actions taken by the establishment to prevent recurrence of the problem. I asked O. A. Manager, [REDACTED] if preventative measures had been established. He informed me that Sanitation Manger [REDACTED] had not provided any preventative measures. The establishment failed to meet the regulatory requirement's of 416.15(b) in that they did not take measures to prevent the recurrence of contamination of direct product contact surfaces. On August 3, 2006, the establishment's "Quality Assurance Preoperational Sanitation Report" indicated that Drip Cooler, Drip Cooler, Holding Cooler, and dock area were rejected because of contamination of the doorway, tools, ladder and post. The establishment did not indicate if these contaminated areas were product contact areas or noncontact areas. Their records indicate that these areas were recleaned and sanitized but the establishment failed to provide further planned actions for the prevention of recurrence of similar contamination.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE] *CSW*

You are hereby advised of your right to appeal this decision as articulated by 306.3 and/or 381.33 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|---|---------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT <i>[Signature]</i> | 15. DATE 8/12/06 |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE <i>[Signature]</i> | 17. DATE 8/12/06 |

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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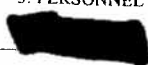
00221

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US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

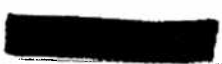
TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|--|---|--------------------------------------|
| 1. DATE 08/07/2006 | 2. RECORD NO. 0039-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED  | (b)(6) (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 416.15(b) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP Preop. San.-Gen. |
| 8. ISP CODE 01B01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Corrective Action | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | |

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE



FSIS FORM 5400-4 (7/98)
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00222

A0000420 223-000223

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---|---|---------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 08/07/2006 | 2. RECORD NO. 0038-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(6) (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 417.3(a)(3) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | 0038-2006-9114 | | |
| 8. ISP CODE 03C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | | |

While performing an unscheduled (03C02) zero-tolerance audit on beef oxlips variety meats, I observed a deviation on 1 of the ten pieces of oxlips. A regulatory control action was taken on the bucket of oxlips with U.S. retain tag #B37819092. I immediately informed slaughter foreman [REDACTED] of the deviation.

The contamination was fibrous and brown in color, 1/4 of an inch long. The observed contamination fit the description of ingesta as described in FSIS directive 6420.2

The establishment discarded the product, and will not harvest any oxlip product until there is a corrective action taken to ensure wholesome product.

After Q.A. [REDACTED] monitored the oxlip product washing, inspection and harvesting to ensure clean product, and the CCP was under control I removed the regulatory control action. Additional monitoring will be implemented to ensure the oxlip product remains clean.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED] 8-7-06

You are hereby advised of your right to appeal this decision as delineated by 9 CFR 310.6

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|---|---------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT Local Miller, N.C. [Signature] | 15. DATE 8/8/06 |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED] | 17. DATE 8-11-06 |

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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A0000420_226-000226

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE
 Food Safety Other Consumer Protection

1. DATE: 08/07/2006 2. RECORD NO.: 0038-2006-9114 3. ESTABLISHMENT NO.: 04653G M / 1

4. TO (Name and Title): Gary Ruse, Plant Manager 5. PERSONNEL NOTIFIED: [REDACTED] (b)(6)
 (b)(7)(c)

6. RELEVANT REGULATION(S): 417.3(a)(3)

7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP 0038-2006-9114 SSOP OTHER (b)(4)

8. ISP CODE: 03C02 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: HACCP - Corrective Action

10. DESCRIPTION OF NONCOMPLIANCE
 A similar non-compliance #0037-2006-9114 was written on 07/31/2006. Corrective action measures taken for this non-compliance were [REDACTED] (2) [REDACTED] (3) [REDACTED] and (4) [REDACTED]

The establishment has thus failed to meet the regulatory requirement of 9 CFR 417.3(a) which states: The written HACCP plan shall describe the corrective action to be taken, and assign responsibility for taking corrective action, to ensure: (3) Measures to prevent recurrence.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in addition regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE: [REDACTED]

[REDACTED] 8-7-06

FSIS FORM 5400-4 (7/98)
 Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

00226

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---|---|---------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 08/08/2006 | 2. RECORD NO. 0040-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / I | (b)(6) (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 416.13(b); 416.13(c); 416.2(d) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | | Operational San. | |
| 8. ISP CODE 01C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | | |

While performing a scheduled operational sanitation procedure (01C02) in the establishment's carcass coolers I observed an operational sanitation noncompliance. Heavily beaded condensation and dripping water were observed near the exit of the acid spray cabinet. The carcass rail for a distance of approximately six feet had heavily beaded condensation on its lower surface. The first three feet of the carcass chain had heavily beaded condensation on its lower surface. The support structures for the carcass rail and chain had water dripping from them. The air curtain unit, above the door frame at the exit of the acid spray cabinet, had water dripping from its vents. I took a regulatory control action on the area by tagging the carcass chain off/on switch with US Reject tag # B37819315. Slaughter operations were stopped at approximately 0850. Q. A. personnel [REDACTED], Slaughter Floor Foreman [REDACTED], Processing Foreman [REDACTED] and Plant Managers (Gary Ruse and David Blake) were informed of the noncompliance and subsequent regulatory control action. The establishment has failed to meet the regulatory requirements of 416.2(d), 416.13(b) and 416.13(c) in that ventilation was not adequate to control condensation to the extent necessary to prevent the creation of insanitary conditions, the operational sanitation SOP's were not performed at a frequency that is adequate to prevent product contamination and the establishment's monitoring frequency for their environmental moisture SSOP was not adequate to detect the presence of insanitary conditions. Corrective actions given by the establishment for the restoration of sanitary conditions were: 1) condensation was wiped from all areas; and 2)

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Signature]
You are hereby advised of your right to appeal this decision as delineated by 306.3 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[Signature]

15. DATE

8/19/06

16. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Signature]

17. DATE

08/16/06

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00229

A0000420-230-000230

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|---|---|--------------------------------------|-----------|
| 1. DATE 08/08/2006 | 2. RECORD NO. 0040-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(6) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] | | (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 416.13(b); 416.13(c); 416.2(d) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | | | |
| SSOP | | | |
| OTHER | | | |
| Operational San. | | | |
| 8. ISP CODE 01C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE

Processing Foreman, [REDACTED] would assign a full time person to remove condensation from the cooler, dock, boning room and packaging area. Measures taken to prevent recurrence of the noncompliance included: 1) not starting operations until the person assigned to control condensation is in place; and 2) Slaughter Foreman [REDACTED] will check the ventilation system (for the acid spray cabinet) prior to the start of operations to assure that it functioning properly. At approximately 1020, after the regulatory requirements of 416.15(b) were met, I removed the regulatory control action and operations resumed.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

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00230

A0000420-231-000231

(b)(6)

Date 08/15/2006

(b)(4)

I [REDACTED] on Monday August 11, 2006 had a problem with condensation in our coolers. I stated to USDA dept that I would place a person to take care of the condensation everyday that person would be in place to do nothing but condensation To remove the chances of cross contamination. On Monday August 14, 2006 I had [REDACTED] I did remove the person to cover my table and was going to replace them but I failed to do so. It caused [REDACTED] minutes of down time and also caused us to receive a NR. I did have that person replaced and will continue to have that person there at all times.

[REDACTED]
Fabrication Manager

00233

A0000420_234-000234

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---------------------------------|---|------------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 08/15/2006 | 2. RECORD NO. 0041-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(6) (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | (b)(6) |
| 6. RELEVANT REGULATION(S) 416.15(a); 416.15(b) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP 0041-2006-9114 |
| 8. ISP CODE 01C02 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Corrective Action | |

10. DESCRIPTION OF NONCOMPLIANCE

While performing a scheduled operational sanitation procedure (01C02) in the carcass coolers I observed an operational sanitation noncompliance. Heavy beaded condensation and dripping water were near the exit doors of the acid wash cabinet. The braces holding the carcass chain, the L-brackets above the chain, and structures within 3 feet of the doors had visible dripping.

Slaughter operations were stopped at 9:28. Slaughter foreman [REDACTED] was immediately made aware of the condensation. He then informed [REDACTED] (Fabrication Supervisor) of the noncompliance. The establishment has failed to meet the regulatory requirements of 416.2(d), 416.13(b) and 416.13(c) in that ventilation was not adequate to control condensation to prevent the creation of unsanitary conditions. [REDACTED] supervised the removal of the beaded condensation and took corrective actions by placing two employees there to see that no condensation recurred. There were no visible contamination of carcasses.

A similar non-compliance #0040-2006-9114 was written 8/08/2006. Corrective action written for this noncompliance states: "Processing foreman [REDACTED] would assign a full time person to remove condensation from the cooler, dock, boning room and packaging area."

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED] 8-15-06

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):
[REDACTED]

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):
[REDACTED]

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
15. DATE

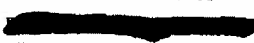
16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
17. DATE

00234

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE
 Food Safety Other Consumer Protection

1. DATE: 08/15/2006 2. RECORD NO.: 0041-2006-9114 3. ESTABLISHMENT NO.: 04653G M / 1

4. TO (Name and Title): Gary Ruse, Plant Manager 5. PERSONNEL NOTIFIED:  (b)(6) (b)(7)(c)

6. RELEVANT REGULATION(S): 416.15(a); 416.15(b)

7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP SSOP OTHER
 0041-2006-9114

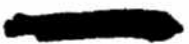
8. ISP CODE: 01C02 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: SSOP - Corrective Action

10. DESCRIPTION OF NONCOMPLIANCE

The establishment has failed to meet the regulatory requirement of 9 CFR 416.15(a) and 416.15(b) which states: (a) Each official establishment shall take appropriate corrective action(s) when either the establishment or FSIS determines that the establishment's Sanitation SOP's may have failed to prevent direct contamination or adulteration of product(s). (b) Corrective actions include procedures to ensure appropriate disposition of product(s) that may be contaminated, restored sanitary conditions, and prevent the recurrence of direct contamination or adulteration of product(s), including appropriate reevaluation and modification of the Sanitation SOP's and the procedures specified therein or appropriate improvements in the execution of the Sanitation SOP's or the procedures specified therein.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in addition regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE



FSIS FORM 5400-4 (7/98)
 Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00235

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

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|--|---|---|------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 08/17/2006 | 2. RECORD NO. 0042-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / I | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6) (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 416.2(a) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP |
| | | OTHER 0042-2006-9114 | |
| 8. ISP CODE 06D01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS FACILITY - Outside Premises | | |

10. DESCRIPTION OF NONCOMPLIANCE

While performing a scheduled (06D01) procedure on official premises, I observed: (1) several soda cans beneath the rear stair way exit from the establishment where employees gather at company break time. The bucket placed at the bottom of stairs was full and over flowing, and waste paper was on the grounds around the bucket, and in the truck wash area. (2) The two yellow barrels for trash use at the end of dock by the truck wash area had water sludge, and was black, that smelled like sewage. (3) There were rotting cardboard barrels, large flat pieces of cardboard, broken pallets, along with good pallets, scattered on the ground along with several large pieces of unused metal pieces behind the metal storage building. (4) Under the loading dock in front of the establishment there were pallets on the ground with fat and debris in and on the wood. (5) By the maintenance walkway under their sheeting material there were brown paper bags, and a birthday balloon that had blown there by the wind. [REDACTED] Quality Assurance Manager) was immediately informed of the regulatory non-compliance.

The above listed non-compliances are a violation of 9 CFR 416.2(a), which states: The grounds about an establishment must be maintained to prevent conditions that could lead to unsanitary conditions, adulteration of product, or interfere with inspection by FSIS program employees. Establishments must have in place a pest management program to prevent the harborage and breeding of pests on the grounds and within establishment facilities. Pest control substances used must be safe and effective

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED] 8-18-06

You are hereby advised of your right to appeal this decision as per 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification [REDACTED] requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
[REDACTED]

15. DATE
8-25-06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]

17. DATE

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection


| | | | |
|--|---|---|-------------------------|
| 1. DATE 08/17/2006 | 2. RECORD NO. 0042-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / I | (b)(6) (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED  | |
| 6. RELEVANT REGULATION(S) 416.2(a) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER 0042-2006-9114 |
| 8. ISP CODE 06D01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS FACILITY - Outside Premises | | |

10. DESCRIPTION OF NONCOMPLIANCE

under the conditions of use and not be applied or stored in a manner that will result in the adulteration of product or the creation of unsanitary conditions.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE



FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

Original & 1 Copy to Establishment, 1 Copy to Inspector
of 2

5-18-06

00237

A0000420_238-000238

(b)(6)
(b)(7)(c)

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250, and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE 2. RECORD NO. 3. ESTABLISHMENT NO.
08/28/2006 0043-2006-9114 04653G M / 1

4. TO (Name and Title) 5. PERSONNEL NOTIFIED
Gary Ruse, Plant Manager [REDACTED]

6. RELEVANT REGULATION(S)
416.13(b)

7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER
0043-2006-9114

8. ISP CODE 9. NONCOMPLIANCE CLASSIFICATION INDICATORS
01C02 SSOP - Monitoring

10. DESCRIPTION OF NONCOMPLIANCE
While performing an operational sanitation procedure (01C02) of the carcass coolers, inside the exit doors of the carcass wash cabinet, I observed a constant drip coming from the ceiling above the wash. It was causing a drip on the carcass chain coming out of the carcass wash. A regulatory control action was taken on the carcass wash cabinet with U.S. rejection tag #B37819317. [REDACTED] Q.A. manager, and [REDACTED] slaughter floor foreman was immediately notified.

This is an operational sanitation noncompliance of regulation 416.13(b) which states: Each official establishment shall conduct all other procedures in the Sanitation SOP's at the frequencies specified.

The corrective action taken was the leak on the roof was tarred to stop the leak, and the U.S. rejection tag was removed.

No visible adulteration of product was observed.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT [REDACTED]

15. DATE 8/29/06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED]

17. DATE 8-31-06

FSIS Form 5400-1
Replaces FSIS Form 5400-1

00239

A0000420 240-000240

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE | |
|--|--|---|--|
| | | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 08/29/2006 | 0045-2006-9114 | 04653G M / 1 | (b)(6) |
| 4. TO (Name and Title) | 5. PERSONNEL NOTIFIED | | |
| Gary Ruse, Plant Manager | [REDACTED] | | |
| 6. RELEVANT REGULATION(S) | | | |
| 417.3(a)(3) | | (b)(4) | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | RNG HACCP Plan | | |
| 8. ISP CODE | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | | |
| 03J01 | HACCP - Corrective Action | | |

10. DESCRIPTION OF NONCOMPLIANCE

On 08/29/06 while performing postmortem inspection duties at the head inspection area of the slaughter floor (I was giving on-line USDA inspection personnel their breaks), I observed that approximately 8 of the 10 heads that I inspected were contaminated with ingesta or fecal material. The majority of the contamination was found on the cheeks and front of the head. In response to this observation I elected to perform an unscheduled 03J01 (zero-tolerance audit) on the establishment's cheek meat. The establishment's HACCP plan for variety meats states that [REDACTED] While performing the zero-tolerance audit I observed a 1" X 1/8" piece of brown, fibrous, plant-like material on the outer surface of one of the ten pieces of cheek meat. The deviation observed fit the description of ingesta as described in FSIS Directive 6420.2. At approximately 1130 I retained all cheek meat product produced during the shift by tagging it with US Retain Tag # B37819085. I also rejected their head boning process by tagging the head boning table with US Reject Tag # B37819084. I proceeded with the zero-tolerance procedure by inspecting 10 pieces of the establishment's oxlips product and 10 pieces of head meat. I did not find any additional zero-tolerance deviations in either product. As required, I continued the procedure by performing a carcass zero-tolerance audit. I examined 4 carcasses and their corresponding tails. I did not observe any zero-tolerance deviations on the carcasses or tails. The establishment has failed to meet the regulatory requirements of 9 CFR 417.3(a)(3) in that the preventative measures offered in response to previous zero-tolerance deviations (on products

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

[Handwritten Signature]

You are hereby advised of your rights as described by 306.5 and 307.33 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT *[Handwritten Signature]* 15. DATE 9/11/06

16. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED] 17. DATE 09/11/06

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Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98) Page 1 of 2

00241

A0000420_242-000242

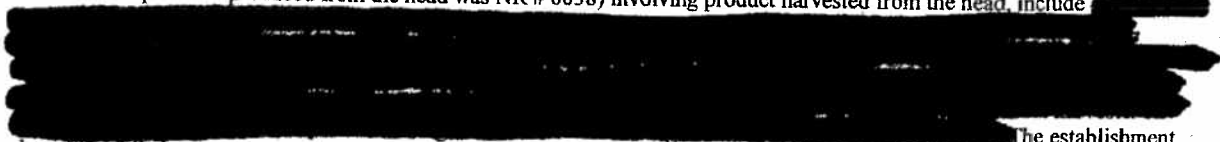
US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE
 Food Safety Other Consumer Protection

| | | | | | |
|--|--|---|---|--------------------------------------|--|
| 1. DATE 08/29/2006 | | 2. RECORD NO. 0045-2006-9114 | | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | | 5. PERSONNEL NOTIFIED [REDACTED] (b)(4) | | |
| 6. RELEVANT REGULATION(S) 417.3(a)(3) (b)(6) | | | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP | OTHER | |
| | | RNG HACCP Plan (b)(7)(c) | | | |
| 8. ISP CODE 03J01 | | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | | |

10. DESCRIPTION OF NONCOMPLIANCE

harvested from the head (oxlips)) have failed to prevent the above mentioned zero-tolerance deviation on cheek meat. The preventative measures given for previous zero-tolerance noncompliance records (The last NR written for a zero-tolerance deviation on products produced from the head was NR # 0038) involving product harvested from the head, include



The establishment has either failed to properly implement these preventative measures or these preventative measures have not been effective in preventing recurrence of zero-tolerance deviations on products harvested from the head.

Corrective actions implemented thus far include discarding the cheek meat into inedible rendering and cleaning/sanitizing the boning table. As of 1600, all corrective actions required by 9 CFR 471.3(a) have not been met, thus the regulatory control action is still in place.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)
 Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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 Page 2 of 2

00242

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|---------------------------------|---|-------------------------|
| 1. DATE 08/28/2006 | 2. RECORD NO. 0044-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(4) (b)(6) (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 417.3(a)(1); 417.3(a)(2); 417.3(a)(3); 417.5(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | | SSOP | |
| SL. HACCP Plan | | | |
| 8. ISP CODE 03J01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | |

10. DESCRIPTION OF NONCOMPLIANCE

On 08/28/06 as part of a 03J02 procedure, I reviewed the establishment's slaughter HACCP records for 08/25/06 to verify that recordkeeping regulatory requirements had been met. While reviewing the monitoring and verification records for CCP [REDACTED] (" [REDACTED] I observed that the records indicated that there had been two zero-tolerance deviations on 08/25/06. The establishment recorded deviations on carcass # [REDACTED] at 1040 and carcass # [REDACTED] at 1308. The establishment's [REDACTED] stated under the [REDACTED] column (for the 1041 audit) "review 3 carcasses, trimmed, explained to trimmers" and (for the 1308 audit) "showed trimmer and trimmed". The monitoring entries were initiated by [REDACTED]. The records review verification was signed by Q.C. Manager, [REDACTED] 1535 on 08/25/06. Because of the above mentioned deviations, I continued to review the establishment's records so that I could verify that the establishment had met all HACCP corrective action requirements for both zero-tolerance deviations. I found only one [REDACTED] for the two deviations observed on 08/25/06. The corrective actions recorded indicated that the cause of the deviation was fecal material and it was eliminated by trimming. The establishment failed to meet the regulatory requirements of 9 CFR 417.3(a)(1) in that they did not identify the step in the slaughter process where the deviation originated nor did they indicate how they eliminated the cause of the deviation at that step. The establishment also failed to meet the HACCP corrective action requirements of 9 CFR 417.3(a)(2) in that they did not take or record the actions they took to

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE] *J. W. M.*
 You are hereby advised [REDACTED] by 106.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

17. DATE

[REDACTED SIGNATURE] *J. W. M.* 10/25/2006
 Replaces FSIS Form 5590-100 until exhausted (7/98) DISTRIBUTION: Original & 1 Copy to Establishment, 1 Copy to Inspector
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00246

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|--|---|--------------------------------------|
| 1. DATE 08/28/2006 | 2. RECORD NO. 0044-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] | (b)(6) (b)(4) (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 417.3(a)(1); 417.3(a)(2); 417.3(a)(3); 417.5(c) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP |
| | SL. HACCP Plan | OTHER |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | |

10. DESCRIPTION OF NONCOMPLIANCE

demonstrate that the CCP was back under control after the cause of the deviation was identified and eliminated. The record only states that carcass numbers [REDACTED] and [REDACTED] were trimmed. The record does not indicate if carcasses back to the last acceptable audit were retained, reworked and reinspected nor does it state the results of the monitoring of any such activities. The establishment's corrective action records indicate that the preventative measures taken involved [REDACTED]. These preventative measures do not meet the requirements of 9 CFR 417.3(a)(3) in that they do not indicate what the trimmers were instructed to do to prevent a recurrence of the deviation nor do they address the preventative measures put in place at the step in the process where the deviation actually originated. The establishment did not meet the requirements of 9 CFR 417.3(a)(4) in that they did not state how adulterated product was prevented from entering commerce. The establishment failed to meet the regulatory requirements of 9 CFR 417.5(a)(3) in that they did not document all corrective actions taken as a response to both of the zero-tolerance deviations. The establishment also failed to meet the regulatory requirements of 9 CFR 417.5(c) in that prior to shipping product they did not adequately review their records to ensure completeness, including the determination that all critical limits were met and if appropriate, corrective actions were taken and recorded.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)
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00247

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|---|---|---|----------------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 09/01/2006 | 2. RECORD NO. 0046-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / I | (b)(6) (b)(4) (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 417.3(a)(1); 417.3(a)(2); 417.3(a)(3); 417.3(a)(4); 417.4(a)(2)(iii); 417.5(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | 0046-2006-9114 | | |
| 8. ISP CODE 03C01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | | |

On 8/31/2006 as part of performing an (03C01) procedure, while reviewing the zero-tolerance reference sheet for the establishments tongue product, I seen a deviation recorded, which stated, that a piece of straw was found on a tongue, identified as injesta. The zero-tolerance sheet had been signed and dated by Q.C. technician [REDACTED] and had been reviewed, verified, and signed by Q.C. manager [REDACTED] at 10:46 on 8/30/2006 that the records had met all HACCP corrective action requirements. With further reviewing I did not find a "[REDACTED]" for the deviation.

The establishment failed to meet the regulatory requirements of CFR 417.3(a). The written HACCP plan shall identify the corrective action to be followed in response to a deviation from a critical limit. The HACCP plan shall describe the corrective action to be taken, and assign responsibility for taking corrective action, to ensure: (1) the cause of the deviation is identified and eliminated; (2) The CCP will be under control after the corrective action is taken; (3) Measures to prevent recurrence are established; and (4) No product that is injurious to health or otherwise adulterated as a result of the deviation enters commerce. CFR 417.5(c) states: Prior the shipping product, the establishment shall review the records associated with the production of that product, documented in accordance with this section, to ensure completeness, including the determination that all critical limits were met and, if appropriate, corrective actions were taken, including the proper disposition of product. Where

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
 [REDACTED] 9-1-06
 You are hereby advised of your right to appeal this decision as delineated by 306.3 and/or 307.3

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

 13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|---|---------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT [Signature] | 15. DATE 9/15/06 |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED] | 17. DATE 9-5-06 |

FSIS FORM 5400
Replaces FSIS Form [REDACTED] (7/98)

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Page 1 of 2

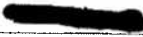
00249

A0000420_250-000250

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE
 Food Safety Other Consumer Protection

1. DATE: 09/01/2006 2. RECORD NO.: 0046-2006-9114 3. ESTABLISHMENT NO.: 04653G M / 1

4. TO (Name and Title): Gary Ruse, Plant Manager 5. PERSONNEL NOTIFIED:  (b)(6)
 (b)(7)(c)

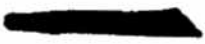
6. RELEVANT REGULATION(S): 417.3(a)(1); 417.3(a)(2); 417.3(a)(3); 417.3(a)(4); 417.4(a)(2)(iii); 417.5(c)

7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP SSOP OTHER
 0046-2006-9114

8. ISP CODE: 03C01 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: HACCP - Corrective Action

10. DESCRIPTION OF NONCOMPLIANCE
 practicable, this review shall be conducted, dated, and signed by an individual who did not produce the record(s), preferably by someone trained in accordance with 417.7 of this part, or the responsible establishment official. CFR 417.4(a)(2)(iii) states: The review of records generated and maintained in accordance with 417.5(a)(3) of this part. A similar non-compliance #0044-2006-9114 was written on 8/28/2006.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE


FSIS FORM 5400-4 (7/98)
 Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00250

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---|---|-------------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 09/08/2006 | 2. RECORD NO. 0047-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / I | (b)(4) (b)(6) (b)(7)(c) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] slaughter floor foreman, Q.A. [REDACTED] | |
| 6. RELEVANT REGULATION(S) 417.3(a)(1); 417.3(a)(2); 417.3(a)(3) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | 0047-2006-9114 | | |
| 8. ISP CODE 03J02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | | |

10. DESCRIPTION OF NONCOMPLIANCE

At approximately 9:20 I performed a scheduled (03J02) zero-tolerance on variety meats. The establishments HACCP plan for [REDACTED] While performing the zero-tolerance audit I observed several pieces of green, plant-like material on the fourth bottom piece of tongue meat, fitting the description of ingesta as described in FSIS Directive 6420.2. The tongue meat was retained with U.S. retain tag # B37819346. I also rejected their head meat, and oxlips with U.S. retain tag #B37819351 and [REDACTED] was immediately notified of the deviation. With further observation, there had not been a Q.A. zero-tolerance audit done for the days production of the variety meats or carcasses. The days production of tongue meat was retained with U.S. retain tag #B37819352, and the cheek meat and oxlips were retained with U.S. retain tag #B37819342.

A similar non-compliance #0045-2006-9114 was written on 8/29/2006. On 9-5-2006 at 19:55 an establishments [REDACTED] was signed by Q.A. [REDACTED] and verified by Q.A. manager [REDACTED] stating: [REDACTED]

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED] 9-10-06

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

SEE ATTACHED

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

SEE ATTACHED

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
(New Plant Manager) David C. Blake

15. DATE
9-11-06

16. VERIFIED BY [REDACTED] PROGRAM EMPLOYEE

17. DATE
9-15-06

FSIS FORM [REDACTED]
Replaces FSIS Form [REDACTED] (7/98)

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00253

A0000420_254-000254

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|---|---|--------|
| 1. DATE 09/08/2006 | 2. RECORD NO. 0047-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(4) |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED [redacted]laughter floor foreman, [redacted] | |
| 6. RELEVANT REGULATION(S) 417.3(a)(1); 417.3(a)(2); 417.3(a)(3) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP 0047-2006-9114 | SSOP | OTHER |
| 8. ISP CODE 03J02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | | |

[redacted]

At approximately 9:40 I observed that the light that had been installed was not operating.

As required, I continued the (03J02) procedure by performing a carcass zero-tolerance audit. On oxtail # [redacted] fibrous green fecal material was observed. [redacted] was present at the audit and trimmed the oxtail. His immediate corrective action was to instruct the employees (split saw, high vacuum, and trimmer) to inspect and trim the tails better before removing the tails for U.S. inspection. Also on carcass # [redacted] a green plant-like material was found in the bung canal in the pelvic area. [redacted] was summoned to the final rail trim audit and the contamination was trimmed. He instructed his employees from the bung stand to the high trim stand to watch better for all contamination. All tails from the days production at that point was retained with U.S. retain tag #B37819355. Also carcasses [redacted] was retained with U.S. retain tag #B37819231 that was in the cooler.

These deviations are a failure to meet the regulatory requirements of 9 CFR 417.3 (a)(3) Corrective actions.

Corrective actions implemented thus far include discarding the tongue meat in inedible rendering and reworking the days production of ox lips, head meat, and oxtails. Carcasses [redacted] are retained in the cooler. As of 16:30, all corrective actions required by 9 CFR 417.3 (a) have not been met and regulatory control action is still in place.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[redacted]

[redacted]

7-10-06

FSIS FORM 5400-4 (7/98)

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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1 Copy to Establishment, 1 Copy to Inspector

00254

A0000420_255-000255

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250, and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---|---|-------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 09/12/2006 | 2. RECORD NO. 0048-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) Gary Ruse, Plant Manager | | 5. PERSONNEL NOTIFIED | |
| 6. RELEVANT REGULATION(S) 416.13(b); 416.13(c) | | (b)(4) (b)(6) (b)(7)(c) | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| 0048-2006-9114 | | | |
| 8. ISP CODE 01C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE
While performing a scheduled operational sanitation procedure (01C02) of the carcass coolers I observed an operational sanitation noncompliance. Inside the exit doors of the carcass wash cabinet, I observed a constant drip coming from the top of the cabinet. It was dripping on the carcasses as they passed the exit doors. A regulatory control action was taken on the carcass wash cabinet with U.S. rejection tag #B37819330. Slaughter operations were stopped at approximately 11:50. (slaughter floor foreman), and (slaughter floor supervisor) were immediately informed of the non-compliance. Carcasses was retained in the carcass cooler with U.S. retain tag #B37819336.

This is an operational sanitation noncompliance of regulation 416.13(b) and 416.13(c), which states:
(b) Each official establishment shall conduct all other procedures in the Sanitation SOP's at the frequencies specified.
(c) Each official establishment shall monitor daily the implementation of the procedures in the Sanitation SOP's.

Corrective actions taken were (1) to wipe all of the extra water off the ceiling, (2) change the elbows on the water line, and (3) change nozzles in the carcass wash. An employee was placed at the exit doors to ensure the dripping did not continue. Further corrective action of the carcasses were to trim the hind quarters of carcasses to ensure no adulteration of product. At

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

9-12-2006

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.33 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):
See Attached

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):
See Attached

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
David C. Blake

15. DATE
9-15-06

16. VERIFICATION SIGNATURE

17. DATE
10-25-06

00259

A0000420_260-000260

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE
09/12/2006

2. RECORD NO.
0048-2006-9114

3. ESTABLISHMENT NO.
04653G M / 1

4. TO (Name and Title)
Gary Ruse, Plant Manager

5. PERSONNEL NOTIFIED

(b)(6)
(b)(7)(c)

6. RELEVANT REGULATION(S)
416.13(b); 416.13(c)

7. SECTION/PAGE OF EST. PROCEDURE PLAN

HACCP

SSOP

OTHER

0048-2006-9114

8. ISP CODE

01C02

9. NONCOMPLIANCE CLASSIFICATION INDICATORS

SSOP - Monitoring

10. DESCRIPTION OF NONCOMPLIANCE

approximately 12:45 after the regulatory requirements of 416.15(b) were met, I removed the regulatory control action and operations resumed.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

FSIS FORM 5400-4 (7/98)

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00260

A0000420_261-000261

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250, and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE
 Food Safety Other Consumer Protection

1. DATE: 09/14/2006 2. RECORD NO.: 0049-2006-9114 3. ESTABLISHMENT NO.: 04653G M / I

4. TO (Name and Title): David Blake, Plant Manager 5. PERSONNEL NOTIFIED: Gary Ruse

6. RELEVANT REGULATION(S): 441.10

7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP SSOP OTHER: None

8. ISP CODE: 04B04 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: PRODUCT - Protocol

10. DESCRIPTION OF NONCOMPLIANCE

On 09/14/2006 I performed a scheduled 04B04 procedure to verify that the establishment was meeting the regulatory requirements pertaining to retained water in raw, single ingredient products (beef carcasses in this case). I reviewed the establishment's records for carcass weight at the hot scale and compared them to records generated for those carcasses prior to shipping. In reviewing records for the previous 5 days of production I observed that some of the carcasses had shown a net weight gain from the hot scale to the cold (shipping) scale. The majority of these carcasses showed a weight gain of from 0 to 10 pounds but carcass # [redacted] from Lot 6, which was shipped on 09/13/03, showed a weight gain of 10 pounds. As a result of the water retention noted in the establishment's records I asked the establishment if they had a written data-collection protocol that would meet the regulatory requirements of 9 CFR 441.10. The plant manager informed me that they did not have any such written protocol but they had been collecting and analyzing carcass weights for weight change (water retention).

For their beef slaughtering process, Local Pride, LLC has several post-evisceration processes involving the use of water that could subject products to the regulatory requirements of 9 CFR 441.10 including the use of a cold water post-evisceration carcass wash, the application of a post-evisceration antimicrobial spray, and the use of a carcass spray chill system as a means of chilling carcass once they are placed in their coolers. Because the establishment's carcass weight data indicates that carcasses are

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[Redacted Signature] *DRM*

You are hereby advised of your right to refuse to answer questions or to stop answering at any time. If you decide to answer questions now, you will still be free to stop answering at any time. If you stop answering at any time, you will not be penalized for not answering. Your answers are being given to the U.S. Department of Agriculture by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)): *In reviewing the records it was found to be a clerical error on the part of the scaler corrections were made to the proper people 10/15/06*

13. PLANT MANAGEMENT RESPONSE (further planned action(s)): *SEE ATTACHED*

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT: *David C Blake* 15. DATE: *11-03-06*

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE: [Redacted Signature] *DRM* 17. DATE: *11/20/06*

FSIS Form 5600-108 (9/97), which may be used until exhausted (7/98) DISTRIBUTION: Original & 1 Copy to Establishment, 1 Copy to Inspector Page 1 of 2

00262

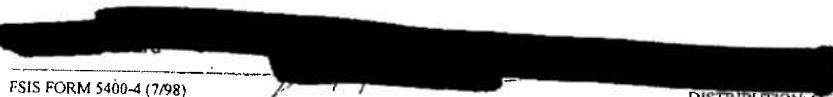
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD CONTINUATION SHEET | | TYPE OF NONCOMPLIANCE | |
|---|----------------|--|---|
| | | <input type="checkbox"/> Food Safety | <input checked="" type="checkbox"/> Other Consumer Protection |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 09/14/2006 | 0049-2006-9114 | 04653G M / 1 | |
| 4. TO (Name and Title) | | 5. PERSONNEL NOTIFIED | |
| David Blake, Plant Manager | | Gary Ruse | |
| 6. RELEVANT REGULATION(S) | | | |
| 441.10 | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | SSOP | OTHER | |
| None | | | |
| 8. ISP CODE | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | |
| 04B04 | | PRODUCT - Protocol | |

10. DESCRIPTION OF NONCOMPLIANCE

retaining water (gaining weight) as the result of their post-evisceration procedures their products are subject to the regulatory requirements of 9 CFR 441.10. The establishment has failed to meet the regulatory requirements of 9 CFR 441.10 (further guidance for interpretation of this regulation is found in FSIS Directive 6700.1) in that their carcasses are retaining water as result of their post-evisceration process and they have not developed a written data-collection protocol to control water retention in their beef carcasses.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

 *[Handwritten Signature]*

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00263

A0000420_264_000264

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|--|---|---------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 10/19/2006 | 2. RECORD NO. 0050-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / I | (b)(6) (b)(7)(c) |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 417.2(c)(4); 417.3(a)(3) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP 0050-2006-9114 | SSOP | OTHER |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE

On 10/19/2006 I performed a scheduled 03J01 procedure to verify HACCP records, observe slaughter conditions and use of devises, and result recordings. At 11:50 while observing hindquarters railed in the dock area for shipment, I observed a fecal smear approximately 1 1/2 "x 2 1/2" inches in size with a green fibrous texture on the back of the round. The hindquarters were retained with an US retain tag B37819375. [REDACTED] quality control manager, was immediately informed of the non-compliance. [REDACTED] confirmed the finding, and the hindquarters was reconditioned by a trimmer stationed at that area. The retain tag was then removed for shipping.

This is a noncompliance of 9 CFR 417.2(c)(4) which states: List the procedures, and the frequency with which those procedures will be performed, that will be used to monitor each of the critical control points to ensure compliance with the critical limits:

As required I performed a zero-tolerance (03J02) on the high final rail and observed a feces smear on the first half flank of carcass #867, 2"x 6" inches in size with a fibrous texture and green color. [REDACTED] slaughter foreman was present at the time of the zero-tolerance and agreed the smear was feces. His corrective action was informing the flanker of the feces smear

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE] 10-19-06

You are hereby advised of your right to appeal this decision as delineated in 9 CFR 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|--|---------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT [Signature] | 15. DATE 11-2-06 |
| 16. VERIFICATION SIGNATURE [REDACTED] | 17. DATE 11-3-06 |

FSIS FORM 5400-4 (7/95)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00266

| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD CONTINUATION SHEET | | TYPE OF NONCOMPLIANCE | |
|---|---------------------------------|--|--|
| | | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 1. DATE 10/19/2006 | 2. RECORD NO. 0050-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / I | (b)(4) (b)(6) (b)(7)(c) |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 417.2(c)(4); 417.3(a)(3) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| | HACCP | SSOP | OTHER |
| 0050-2006-9114 | | | |
| 8. ISP CODE 03J01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE

and the employee was to wash the air knife more often, and inspect the area before releasing the carcass for the hide puller. He also instructed the employee at the pre-gutting station to inspect the flank area before releasing the carcass for further processing. [REDACTED] (quality control technician) retained carcasses # [REDACTED] that was in the cooler for further inspection and reconditioning. Carcass # [REDACTED] was re-inspected and reconditioned and released.

Due to the severity of size and degree of contamination on carcass [REDACTED] I elected to do another audit on carcasses [REDACTED] at 15:20, and # [REDACTED] at 16:05. There were failures on both carcasses. Carcass [REDACTED] failed zero-tolerance due to feces on the 1st hock 1/2 x2" in size. [REDACTED] for the corrective action. On carcass [REDACTED] rice sized piece of feces and hair was observed on the first half on the outside near the backbone. The corrective action is to have [REDACTED]. Both of these carcasses were reconditioned and released, [REDACTED] retained carcasses # [REDACTED] in the cooler for further inspection and reconditioning.

These non-compliances are a failure to meet 9 CFR 417.3(a)(3).

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

[REDACTED SIGNATURE]

10-19-06

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

Page 2 of 2

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US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE

10/23/2006

2. RECORD NO.

0051-2006-9114

3. ESTABLISHMENT NO.

04653G M / I

4. TO (Name and Title)

David Blake, Plant Manager

5. PERSONNEL NOTIFIED

(b)(4)

6. RELEVANT REGULATION(S)

310.22(d)(1); 417.5(a)(1)

7. SECTION/PAGE OF EST. PROCEDURE PLAN

HACCP

SSOP

OTHER

LPBK 1/Pg. 12-16

(b)(6)

(b)(7)(c)

8. ISP CODE

03J01

9. NONCOMPLIANCE CLASSIFICATION INDICATORS

HACCP - Monitoring

10. DESCRIPTION OF NONCOMPLIANCE

[REDACTED]
slaughter process indicates that [REDACTED]

[REDACTED] The establishment's flow chart for their [REDACTED]

[REDACTED] The establishment failed to meet the regulatory requirements of 9 CFR 310.22(d)(1) in that they did not follow their prerequisite program pertaining to SRMs. The establishment did not adequately identify carcass # [REDACTED] as being from a bovine that was 30 months of age or older.

I asked [REDACTED] for an immediate corrective action. He stated that the carcass would be identified according to their stated procedures and that he would monitor the head wash personnel for the remainder of the day to ensure that they adequately perform dentition procedures. As a preventative measure he stated that [REDACTED] regulatory control action after I verified the immediate corrective actions.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED]
FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97)

(7/98)

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00272

A0000420_273-000273

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|--|---|-------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 10/23/2006 | 2. RECORD NO. 0051-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 310.22(d)(1); 417.5(a)(1) | | (b)(4) (b)(6) (b)(7)(c) | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | LPBK 1/Pg. 12-16 | | |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE

On October 23, 2006 while performing head inspection procedures on the establishment's slaughter floor I observed a noncompliance involving the establishment's prerequisite program for specified risk materials (SRMs). At the head inspection station I observed a bovine head with two sets (4 permanent teeth) of fully erupted permanent teeth (carcass tag # [REDACTED]). After I performed postmortem inspection procedures on the head, the gut buggy operator removed the head from the head rack. I asked him to place the head in the gut buggy wash room and not to throw it into the inedible truck. I finished my inspection procedures on the viscera and waited for the carcass to pass the final inspection rail and hot scale. I asked the plant personnel who work at this final step in the slaughter process if they were finished with the carcass. I then rechecked carcass [REDACTED] for any indication that it had been properly identified as being 30 months of age or older animal. The carcass did not have a [REDACTED] nor was its spinal column marked with ink. Since the establishment stated that they were finished with the carcass and I had identified it as being over 30 months of age I took a regulatory control action by placing US Retain Tag # B37819408 on the carcass. I then informed Q.A. technician, [REDACTED] and Slaughter Foreman, [REDACTED] of the noncompliance. I took them to the gut buggy wash room and showed them the head (it was tagged with tag # [REDACTED]). The establishment's prerequisite program for their [REDACTED]

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED]

You are hereby advised of your right to appeal this decision under 9 CFR 301.3 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
David C. Blake

15. DATE
10-26-06

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]

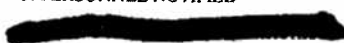
17. DATE
10/26/06

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00271

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---|---|-------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 10/23/2006 | 2. RECORD NO. 0052-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED  | |
| 6. RELEVANT REGULATION(S) 417.2(c)(5) | | (b)(4) (b)(6) (b)(7)(c) | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | 0052-2006-9114 | | |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | | |

10. DESCRIPTION OF NONCOMPLIANCE
 On October 23, 2006, while performing an 03J01 procedure I elected to do a zero-tolerance on the final rail. While auditing a randomly selected four carcasses of the days production, I observed fecal material in the bung canal of carcass # [redacted]. It was green in color and a plant-like texture. The carcass was retained with US retain tag #B37819431. [redacted] slaughter floor foreman, was immediately notified of the non-compliance. [redacted] was shown the fecal material and he agreed with the finding. He reconditioned the carcass for further processing. His immediate corrective action for the non-compliance was to explain and show the [redacted], and to have the [redacted], quality assurance technician was summoned to the rail for the last audit verification. Carcasses [redacted] were retained in the cooler with US retain tag #B37819434 until further corrective actions are presented to USDA.

This is a non-compliance of CFR 417.2(c)(5). A similar non-compliance #0050-2006-9114 was written 10-19-2006.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

 10-23-06

You are hereby advised of your right to appeal this decision as delineated in...

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION

17. DATE

FSIS FORM 5400-4 (7/98)

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00276

A0000420_277-000277

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

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|--|--|---|-------------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 10/26/2006 | 2. RECORD NO. 0053-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(6) (b)(7)(c) |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 416.2(h)(1) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP |
| | | | OTHER 0053-2006-9114 |
| 8. ISP CODE 06D01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS FACILITY - Product Based | | |

10. DESCRIPTION OF NONCOMPLIANCE
At approximately 7:40 while performing an (06D01), official premises, I observed a non-compliance of the Mens locker-lavatory facility. The room was rejected with U.S. rejection tag #B37819332, and [REDACTED] foreman in load out) was immediately notified. I observed (1) the trash can by the eating table was overflowing with food wrappers and hand towels onto the floor, (2) in the lavatory area there were used hand towels on the floor, toilet tissue on the floor, a wet pop flat propped against the stool, and the urinal has waste material on the inside rim, (3) in the locker room area there were frocks, gloves, and rubber gloves piled on a plastic on the floor just inside the doorway, beard nets, hair nets, food wrappers, cut off sleeves of a tee shirt, and dirt on the unswept floors, and empty pop glasses on the locker benches.

This is a failure to meet US regulation #416.2(h)(1) which states: (1) dressing rooms, toilet rooms and urinals must be sufficient in number, ample in size, conveniently located, and maintained in a sanitary condition and in good repair at all times to ensure cleanliness of all persons handling any product. They must be separate from the room and compartments in which products are processed, stored or handled.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and [REDACTED] 10-26-06

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):
[REDACTED]

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):
[REDACTED]

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|--|----------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT David Blake | 15. DATE 11-03-06 |
| 16. VERIFICATION SIGNATURE [REDACTED] INSPECTION EMPLOYEE | 17. DATE 11-3-06 |

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

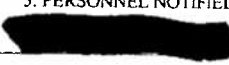
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Page 1 of 2

00278

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

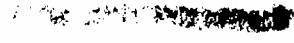
Food Safety Other Consumer Protection

| | | | |
|--|---|--------------------------------------|-------------------------|
| 1. DATE 10/26/2006 | 2. RECORD NO. 0053-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) David Blake, Plant Manager | 5. PERSONNEL NOTIFIED  | | |
| 6. RELEVANT REGULATION(S) 416.2(h)(1) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER 0053-2006-9114 |
| 8. ISP CODE 06D01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS FACILITY - Product Based | | |

(b)(6)
(b)(7)(c)

10. DESCRIPTION OF NONCOMPLIANCE

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.



11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE





FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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Page 2 of 2

10-26-06

00279

A0000420_280-000280

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250, and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---------------------------------|---|----------------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 11/01/2006 | 2. RECORD NO. 0054-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(6) (b)(4) (b)(7)(c) |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 416.13(a); 416.13(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN HACCP SSOP OTHER 0054-2006-9114 | | | |
| 8. ISP CODE 01B02 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Implementation | |

10. DESCRIPTION OF NONCOMPLIANCE
While performing an (01B02) Pro-operation sanitization procedure, at approximately 7:16 I observed a pre-operational non-compliance in the packaging and weighing area. There were (1) 25 cargo hooks with used paper towels wrapped around them lying on the floor next to the scales, (2) pieces of meat on the scales, and floor under the scale, (3) dried blood on the floor, (4) used gloves lying on equipment, (5) pallets on the floor with fat and debris stuck to the wood, and (6) an empty box on the floor with used paper towels inside with tape and used plastic.

The room was immediately rejected with US rejection tag #B37819368, and [REDACTED] fabrication and shipping foreman, was immediately notified of the non-compliance. He immediately notified [REDACTED] slaughter floor foreman. The scales are used for the weighting of offal products each morning.

There were also three (3) boning barrels setting inside the cooler with rendering product from the cooler floor, three quarters to one half full of dirty floor fat, and water. These barrels were not marked as inedible, and was rejected with US rejection tag #B37819405. [REDACTED] was notified of the mislabeled barrels.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED] 11-1-06

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.2.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)): In Reference to the Dirty Packaging area The hooks were Removed The Scale and floor were cleaned & sanitized Pallets were washed & not Restocked. All garbage was Disposed of. In Ref to The yellow inedible barrels They were moved to inedible area and the contents were disposed to inedible

13. PLANT MANAGEMENT RESPONSE (further planned action(s)): This Area in packaging will be monitored And if necessary cleaned on [REDACTED]

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT: David C. Blake
15. DATE: 11-2-06

16. VERIFIED BY: [REDACTED] INSPECTION PROGRAM EMPLOYEE
17. DATE: 11-2-06


FSIS FORM 5400-1 (9/97), which may be used until exhausted.
DISTRIBUTION: Original & 1 Copy to Establishment, 1 Copy to Inspector
Page 1 of 2

00281

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|--|---|--------------------------------------|
| 1. DATE 11/01/2006 | 2. RECORD NO. 0054-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / I |
| 4. TO (Name and Title) David Blake, Plant Manager | 5. PERSONNEL NOTIFIED  | |
| 6. RELEVANT REGULATION(S) 416.13(a); 416.13(c) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP |
| 0054-2006-9114 | | |
| 8. ISP CODE 01B02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Implementation | |

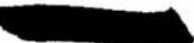
10. DESCRIPTION OF NONCOMPLIANCE

These rejection tags were left until immediate corrective action was taken. The packaging area was immediately hosed down and cleared of all trash debris and the pallets were hosed off and stacked in a receivable area. The boning barrels were dumped and cleaned out, and marked as inedible barrels. Additional corrective action was to give additional training for the sanitization crew foreman.

This is a failure of US regulation CFR 416.13(a) which states: Each official establishment shall conduct the pre-operational procedures in the Sanitation SOP's before the start of operations.
And CFR 416.13(c) which states: Each official establishment shall monitor daily the implementation of the procedures in the Sanitation SOP's

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE





FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

Copy to Establishment Copy to Inspector

00282

A0000420_283-000283

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---------------------------------|---|-------------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 11/27/2006 | 2. RECORD NO. 0055-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(4) (b)(6) (b)(7)(c) |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 417.2(c)(4) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | | SSOP | |
| HACCP RNG VM | | OTHER | |
| 8. ISP CODE 03C01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE

On 11/27/2006 at approximately 1710, I performed a scheduled 04C01 procedure (boneless meat inspection) on the establishment's variety meats. While examining the establishment's oxlips I observed a zero-tolerance noncompliance. The contamination observed met the definition of ingesta found in FSIS Directive 6420.1. The piece of ingesta was approximately 10 mm X 2 mm in size, brown in color and had a plant-like texture. I took a regulatory control action on the product by applying US Retain Tag # B37829433 to the container of oxlips. I showed the contamination to [REDACTED], the establishment's Q.A. technician. I then informed the slaughter supervisor [REDACTED] the plant superintendent, [REDACTED] and the Q.A. manager [REDACTED] of the noncompliance. [REDACTED] informed me that the establishment would rework the product. Since [REDACTED] did not take a regulatory action on the head harvesting area of the slaughter floor. At approximately 1815, CSI [REDACTED] reinspected the affected tub of oxlips. He did not observe any zero-tolerance contamination.

Preventative measures given by [REDACTED] included [REDACTED] The plant

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your rights and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|--|----------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT [REDACTED SIGNATURE] | 15. DATE 11/29/06 |
| 16. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED SIGNATURE] | 17. DATE 11/29/06 |

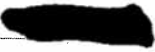
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00283

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|---|--------------------------------------|---------------------|
| 1. DATE 11/27/2006 | 2. RECORD NO. 0055-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) David Blake, Plant Manager | 5. PERSONNEL NOTIFIED  | | (b)(6) (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 417.2(c)(4) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| HACCP RNG VM | | | |
| 8. ISP CODE 03C01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | | |


10. DESCRIPTION OF NONCOMPLIANCE

reworked and reinspected the affected container of oxlips as a means to assure that no adulterated product entered commerce.

The establishment's head harvesting procedures were not adequate to prevent the production of contaminated product and the establishment failed to meet the regulatory requirements of 9 CFR 417.2(c)(4) in that their monitoring procedures were not sufficient to detect the zero-tolerance contamination.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE


FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00284

A0000420_285-000285

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|--|---|-----------------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input type="checkbox"/> Food Safety <input checked="" type="checkbox"/> Other Consumer Protection | |
| 1. DATE 12/05/2006 | 2. RECORD NO. 0056-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(4) (b)(6) (b)(7)(c) |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 313.2 | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER Beef SI Hum Han/p3 |
| 8. ISP CODE 04C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS PRODUCT - Protocol | | |

10. DESCRIPTION OF NONCOMPLIANCE
On 12/05/2006 at approximately 0710 while performing ante-mortem inspection I observed a Category III (Water and Feed Availability) humane handling noncompliance. When I observed the water tank for pens [REDACTED] (there were approximately [REDACTED] cows split between the two pens) there was not any water present in the water trough. The water tanks/troughs have a capacity of approximately [REDACTED] and normally are provided with water automatically with intake controlled by a float. Because of a broken pipe this system was not functional and water was being provided by a garden hose. I asked the yards man [REDACTED] the time at which the cattle in pens [REDACTED] had arrived at the plant. He replied that they had come in [REDACTED] and the tank had water in it at that time. He stated that the end of the hose was knocked out of the tank at sometime between [REDACTED]. [REDACTED] took an immediate corrective action by placing the water hose back into the tank. At approximately 0715 I informed the plant superintendent, [REDACTED] of the noncompliance. I confirmed that water was available to the cattle in pens [REDACTED] at approximately 0720.

On [REDACTED] of the establishment's [REDACTED]. The establishment did not meet the requirements of this SOP. The establishment also failed to meet the regulatory requirements of 9 CFR 313.2(e) which requires that water be available to livestock at all times.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]

You are hereby advised of your right to inspect the violation as delineated by 306.5 and/or 381.55 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT _____ 15. DATE _____

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE _____ 17. DATE _____

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Page 1 of 2


00287

A0000420-288-000288

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET


TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|---|---|--------------------------------------|---------------------|
| 1. DATE 12/05/2006 | 2. RECORD NO. 0056-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) David Blake, Plant Manager | 5. PERSONNEL NOTIFIED  | | (b)(6) (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 313.2 | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN HACCP SSOP OTHER Beef SI Hum Han/p3 | | | |
| 8. ISP CODE 04C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS PRODUCT - Protocol | | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | | |

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE


FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00288

A0000420_289-000289

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

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|--|---------------------------------|---|----------------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 12/11/2006 | 2. RECORD NO. 0057-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(6) (b)(4) (b)(7)(c) |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 417.3(a)(1); 417.3(a)(2); 417.3(a)(3) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | | SSOP | |
| HACCP slaughter | | OTHER | |
| 8. ISP CODE 03J01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | |

10. DESCRIPTION OF NONCOMPLIANCE
 At approximately 14:30 on 12/11/06 while performing a scheduled 03J02, I observed a zero tolerance failure on a four carcass audit. I observed numerous pieces of green colored, fibrous plant like material on the neck of the second half of the fourth carcass audit #373. [REDACTED] plant superintendent, was immediately notified of the non-compliance, and the contaminated area was trimmed. [REDACTED] slaughter foreman, was summoned to the rail, and he was made aware of the zero tolerance failure. [REDACTED] corrective actions to bring the CCP under control was to [REDACTED] Carcasses in the cooler [REDACTED] through # [REDACTED] were retained with U.S. retain tag # B37819442 for further corrective action.

This is a non-compliance of CFR 417.3(a)(1), (a)(2), (a)(3).
 This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
 [REDACTED]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):
 [REDACTED]

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):
 [REDACTED]

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
 [REDACTED]

15. DATE
 3-17-07

16. VERIFICATION BY [REDACTED] EMPLOYEE
 [REDACTED]

17. DATE
 3-19-07

00291

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---|---|---------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 12/20/2006 | 2. RECORD NO. 0059-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / I | (b)(4) |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | (b)(6) (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 417.4(a)(2)(iii); 417.5(a)(3); 417.5(b); 417.5(c) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP Bison VM CCP 1 | SSOP | OTHER |
| 8. ISP CODE 03J02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Recordkeeping | | |

10. DESCRIPTION OF NONCOMPLIANCE
On 12/20/2006 I performed a 03J02 verification procedure by conducting a records review of the establishment's HACCP records that had been generated on 12/19/2006. Prior to conducting the records review I verified that the pre-shipment reviews for variety meats had been signed and dated. While reviewing the establishment's record ([REDACTED]) for CCP ([REDACTED]) [REDACTED] observed that the establishment failed to document that results of their (1728) monitoring audit of head meat. The monitoring procedure had been performed as demonstrated by the [REDACTED] generated in response to an observation of fecal material found in the head meat. The monitoring record for head meat at the 1728 audit only contained the time. There was not an entry indicating the results of the audit nor was the entry signed or initialed. The establishment had performed their records review verification procedure for this CCP at 1013 as demonstrated by the signature of the Q.A. Manager, [REDACTED]. The establishment failed to meet the regulatory requirements of 9 CFR 417.4(a)(2)(iii) in that prior to signing the records review verification, the establishment failed to adequately review the records to assure that all monitoring procedures had been performed and documented. The establishment failed to meet the regulatory requirements of 9 CFR 417.5(a)(3) in that their bison variety meats record did not contain the monitoring results for CCP 1 for head meat at the 1728 audit. The establishment failed to meet the regulatory requirements of 9 CFR 417.5(b) in that the monitoring entry for CCP [REDACTED] was not made at the time of the specific event occurred nor was the entry

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED]
You are hereby advised of your right to be represented by counsel as guaranteed by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|---|----------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT David C Blake | 15. DATE 12-21-06 |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED] | 17. DATE 12/21/06 |

00295

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|--|---|--------------------------------------|
| 1. DATE 12/20/2006 | 2. RECORD NO. 0059-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 |
| 4. TO (Name and Title) David Blake, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] | (b)(6) (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 417.4(a)(2)(iii); 417.5(a)(3); 417.5(b); 417.5(c) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP |
| | Bison SL VM CCP 1 | |
| 8. ISP CODE 03J02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Recordkeeping | |

10. DESCRIPTION OF NONCOMPLIANCE

signed or initialed by the establishment employee making the entry. The establishment also failed to meet the regulatory requirements of 9 CFR 417.5(c) in that prior to signing the preshipment review (and shipping product), the establishment failed to adequately review their records to ensure completeness. Failure to document CCP monitoring results could result in the production and shipment of adulterated products.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

DISTRIBUTION: Original & 1 Copy to Establishment, 1 Copy to Inspector
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00296

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE | |
|--|-----------------------|---|--|
| | | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 12/18/2006 | 0058-2006-9114 | 04653G M / 1 | (b)(4) (b)(6) |
| 4. TO (Name and Title) | 5. PERSONNEL NOTIFIED | | (b)(7)(c) |
| David Blake, Plant Manager | [REDACTED] | | |
| 6. RELEVANT REGULATION(S) | | | |
| 417.3(a)(3) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| | HACCP | SSOP | OTHER |
| HACCP RNG VM CCP 1 | | | |
| 8. ISP CODE | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | |
| 03J01 | | HACCP - Corrective Action | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | | |
| <p>On 12/18/2006 at approximately 1640 as part of a scheduled 03J02 procedure I performed a zero-tolerance audit of the establishment's cheek meat. While examining the sixth piece of cheek meat (# [REDACTED]) I observed 5 pieces of contamination that met the definition of ingesta as described in FSIS Directive 6420.2. The pieces of ingesta were approximately 2 mm wide by 10 mm long, yellow in color, and had a fibrous, plant-like texture. I immediately took a regulatory control action on the affected product (all product back to the establishment's last acceptable audit) by tagging it with US Retain Tag # B34787021. I took a regulatory control action on the establishment's head harvesting process by tagging the head boning table with US Reject Tag # B 34787022 thus stopping the production of those products harvested from the head at the head boning table. I proceeded with the zero-tolerance audit by performing an audit of the establishment's head meat. I did not observe any zero-tolerance deviations in the head meat. Because oxlips are located next to cheek meat on the head and because both products are harvested at the head boning table, I performed a zero-tolerance audit on the establishment's oxlips. On the third piece of product examined I found a piece of contamination that also met the definition of ingesta. The zero-tolerance deviation was yellow in color, approximately 2 mm x 10 mm in size, fibrous or plant-like in texture. Oxlips, back to the last acceptable audit, were tagged with US Retain Tag # B34787023. (The establishment's [REDACTED])</p> | | | |
| 11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE | | | |
| [REDACTED] | | | |
| You are hereby advised of your right to [REDACTED] | | | |
| 12. PLANT MANAGEMENT RESPONSE (Immediate action(s)): | | | |
| | | | |
| 13. PLANT MANAGEMENT RESPONSE (further planned action(s)): | | | |
| | | | |
| This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action. | | | |
| 14. SIGNATURE OF PLANT MANAGEMENT | | 15. DATE | |
| | | | |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE | | 17. DATE | |
| | | | |

00298

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|--|--|--------------------------------------|
| 1. DATE 12/18/2006 | 2. RECORD NO. 0058-2006-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 |
| 4. TO (Name and Title) David Blake, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6) (b)(4) (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 417.3(a)(3) | 7. SECTION/PAGE OF EST. PROCEDURE PLAN HACCP SSOP OTHER HACCP RNG VM CCP 1 | |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | |

10. DESCRIPTION OF NONCOMPLIANCE

[REDACTED] At approximately 1650 [REDACTED] the slaughter floor supervisor, was notified of the zero-tolerance deviations. The establishment stated that they would rework all affected product back to the last acceptable audit as a means of assuring that no adulterated product entered commerce. I reexamined the retained product after the establishment had reworked and reinspected it, and did not find any zero-tolerance contamination. At approximately 1830, the regulatory control action taken on the cheek meat and oxlips was removed. Because the establishment was not able to provide a preventative measure, the regulatory control action taken on the head boning table remained in place.

A similar noncompliance involving a zero-tolerance deviation was document on NR # 0055-2006-9114 dated 11/27/2006. The noncompliance involved oxlips, which like cheek meat is harvested from the head at the head boning table. The preventative measures given for the deviation documented on NR # 0055-2004-9114 included [REDACTED]

[REDACTED] These preventative measures were either not implemented or were not effective in preventing the reoccurrence of this zero-tolerance deviation on products harvested from the head thus the establishment has failed to meet the regulatory requirements of 9 CFR 417.3(a)(3).

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00299

A0000420_299-00299

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---------------------------------|---|---------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 01/05/2007 | 2. RECORD NO. 0001-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(6) (b)(7)(c) |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED | |
| 6. RELEVANT REGULATION(S) 417.3(a)(3) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN HACCP SSOP OTHER HACCP Corrective Act | | | |
| 8. ISP CODE 03J01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | |

10. DESCRIPTION OF NONCOMPLIANCE

At approximately 10:55 while doing a scheduled (03J01) procedure, I observed a zero-tolerance failure on the second half of the first carcass. Carcass # had a 4inch x 4inch area with green plant like material on the neck. plant supervisor, was immediately summoned to the high rail for observation. He agreed on the findings, and summoned laughter floor foreman to the rail for observation. The line was stopped at this point for reconditioning, and a corrective action put in place to get the CCP under control. The immediate corrective actions were to change the dressing procedure at the hide puller station to eliminate the neck coming in contact with the hide as it is being skinned. Also the new employees at the trimming stations were informed of added observation and trimming tasks. (Quality Assurance technician) would also monitor that area every Carcasses # in the cooler were retained with US retain tag #B34787025 until further corrective actions have been put in place. As required further zero tolerance on all variety meats were made. No further failures were observed

A similar NR was written on 12-11-06, with an immediate corrective action of putting up a permanent light in the weasld rodding station for better visibility for rodding weasads and trimming. At the time of this non-compliance I observed no additional or permanent light at this particular station.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
 1-8-07

You are hereby advised of your right to appeal this decision 35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s))

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
 Blake

15. DATE
3-19-07

16. VERIFIED BY INSPECTION PROGRAM EMPLOYEE

17. DATE
3-19-07

FSIS FORM Replaces FSIS Form until exhausted (7/98)

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Page 1 of 2

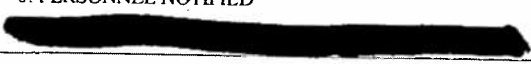
00302

A0000420_302-000302

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE


Food Safety Other Consumer Protection

| | | | |
|--|---|---|---------------------|
| 1. DATE 01/05/2007 | 2. RECORD NO. 0001-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(6) (b)(7)(c) |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED  | |
| 6. RELEVANT REGULATION(S) 417.3(a)(3) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| HACCP Corrective Act | | | |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | | |

This is a non-compliance failure of CFR #417.3(a)(3)

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE



FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00303

A0000420_303-000303

request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and reviewing the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250-4040 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Project Director, 1215 Jefferson Avenue, Washington, DC 20503.

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE
 Food Safety Other Consumer Protection

1. DATE: 02/12/2007 2. RECORD NO.: 0008-2007-9114 3. ESTABLISHMENT NO.: 04653G M / 1
 (b)(4) (b)(6) (b)(7)(c)

4. TO (Name and Title): David Blake, Plant Manager 5. PERSONNEL NOTIFIED: [REDACTED]

6. RELEVANT REGULATION(S): 417.4(a)(2)(ii)

7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP SSOP OTHER: HACCP

8. ISP CODE: 03J01 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: HACCP - Plant Verification

10. DESCRIPTION OF NONCOMPLIANCE:
 On 2-12-2007, as part of a scheduled (01C02) procedure, I reviewed the establishments Beef Slaughter HACCP plans' records to verify that the establishment was meeting all HACCP regulatory requirements. I reviewed the establishments HACCP plans including their monitoring and verification procedures prior to reviewing the daily records.

Verification activities include [REDACTED]

During a review of the establishments [REDACTED] for the week of 2-9-2007, I observed the following non-compliances.

(1) The establishment failed to perform their [REDACTED] (2) [REDACTED] and [REDACTED]

The establishment failed to meet regulatory requirements of 9CFR 417.4(a)(2)(ii) in that they did not perform their [REDACTED] as stated in the [REDACTED]

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE: [REDACTED] 2-15-07

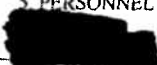
You are hereby advised of your right to appeal this decision. 12. PLANT MANAGEMENT RESPONSE (Immediate action(s)): [REDACTED]

13. PLANT MANAGEMENT RESPONSE (further planned action(s)): [REDACTED]

This document contains confidential information that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.


14. SIGNATURE OF EMPLOYEE: [REDACTED] 15. DATE: 2-18-07
 17. DATE: A00004207_320-000320

00320
 00320

| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD CONTINUATION SHEET | | TYPE OF NONCOMPLIANCE | |
|---|--|---|--|
| | | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 02/12/2007 | 0008-2007-9114 | 04653G M / 1 | |
| 4. TO (Name and Title) | 5. PERSONNEL NOTIFIED | | (b)(6) (b)(7)(c) |
| David Blake, Plant Manager |  | | |
| 6. RELEVANT REGULATION(S) | | | |
| 417.4(a)(2)(ii) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | | SSOP | OTHER |
| HACCP | | | |
| 8. ISP CODE | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | |
| 03J01 | | HACCP - Plant Verification | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | | |

The establishment also failed the regulatory requirements of 417.5(c) in that prior to shipping product the plant failed to adequately review their records to ensure all verification activities had been performed.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE  2-1507

00321

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE 2. RECORD NO. 3. ESTABLISHMENT NO. (b)(4) (b)(6)
 01/11/2007 0002-2007-9114 04653G M / 1 (b)(7)(c)

4. TO (Name and Title) 5. PERSONNEL NOTIFIED
 David Blake, Plant Manager [REDACTED]

6. RELEVANT REGULATION(S)
 317.2(c); 317.8; 352.7(b)

7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER
 | | | | N/A

8. ISP CODE 9. NONCOMPLIANCE CLASSIFICATION INDICATORS
 04B04 PRODUCT - Misbranding

10. DESCRIPTION OF NONCOMPLIANCE

On 01/11/2007, I received notification from my Front Line Supervisor (FLS) [REDACTED] that misbranded/mislabeled bison product produced at this establishment had been received at [REDACTED] Maryland. According to the e-mail I received, Consumer Safety Inspector (CSI), [REDACTED], took a regulatory control action on two boxes of bison pillars by applying a USDA retain tag. The two boxes of bison pillars weighed [REDACTED] and [REDACTED] lbs and had green label that had the bar codes 93060507001720E8000 and 93060507001750E8001. The green label also contained a date of 11-02-06 (This was the date that the bison were slaughtered). The labels on the two above mentioned products contained an inspection legend that was round in shape instead of the triangular shaped inspection legend that is required for bison products. Upon receiving notification of the mislabeled/misbranded product I immediately informed Q. A. Manager, [REDACTED] of the noncompliance involving the misbranding/mislabeled of products. I asked that he collect all labels that they use on bison product and that they bring those labels to my office for review. I asked [REDACTED] if they had any boxed bison product on the premises. He stated that they did not. I then proceeded to the establishment's freezers to verify that there were not any boxed bison products at this establishment. At approximately 0830 I was able to verify that this establishment did not have any bison carcasses or boxed bison product in this establishment. At approximately 1030, I examined the bison labels that the establishment had provided and observed that they had two different types of inspection legends on their bison labels.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your right to appeal this decision.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT 15. DATE
 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE 17. DATE

00307

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | | |
|--|---|--------------------------------------|--------------|--------|
| 1. DATE 01/11/2007 | 2. RECORD NO. 0002-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(4) | (b)(6) |
| 4. TO (Name and Title) David Blake, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] | | | |
| 6. RELEVANT REGULATION(S) 317.2(c); 317.8 | | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER N/A | |
| 8. ISP CODE 04B04 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS PRODUCT - Misbranding | | | |

10. DESCRIPTION OF NONCOMPLIANCE

One set of bison product labels had the correct, triangular shaped inspection legend and the other set of bison product labels had the incorrect, round inspection legend. I could not ascertain how many incorrect labels had been used. I informed [REDACTED] that they needed to provide documentation concerning the location of any potential misbranded/ mislabeled bison offal product that had been produced and boxed at this establishment so that product could be located if a recall was necessary. He provided me with the shipping documents (bills of Lading) for the dates that bison products had been shipped from this establishment. A review of the daily disposition records indicated that since March, 2006 bison had been slaughtered on the 4 following days: 11/02/06, 12/07/06, 12/14/06 & 12/19/06. The plant's records indicate that this product was shipped on 11/03/06, 12/08/06, 12/15/06 & 12/20/06. (Bison offal products are boxed at this establishment and the carcasses are shipped to [REDACTED] in [REDACTED] for fabrication.) Boxed bison offal products produced on 11/02/06 were shipped to [REDACTED] in [REDACTED] on 11/08/06. According to [REDACTED] and the plant's records, all other bison offal product was shipped to the establishment's sister plant [REDACTED] in [REDACTED]. [REDACTED] stated that all offal product shipped to [REDACTED] had undergone further processing at that plant. The establishment has failed to meet the regulatory requirements of 9CFR 317.2(c)(5) and 317.8 in that a false or misleading inspection legend was placed on the two above mentioned boxes of bison pillars and the inspection legend was not of the triangular shape required by 9 CFR 352.7(b).

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

00308

A0000420_308-000308

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE 01/15/2007
2. RECORD NO. 0003-2007-9114
3. ESTABLISHMENT NO. 04653G M / 1
4. TO (Name and Title) David Blake, Plant Manager
5. PERSONNEL NOTIFIED [REDACTED]
6. RELEVANT REGULATION(S) 416.2(e)(2); 416.2(e)(3); 416.2(e)(4)
7. SECTION/PAGE OF EST. PROCEDURE PLAN HACCP SSOP OTHER None
8. ISP CODE 06D01
9. NONCOMPLIANCE CLASSIFICATION INDICATORS FACILITY - Structural

10. DESCRIPTION OF NONCOMPLIANCE

On 01/15/07 at approximately 1255, while walking to the restrainer box area of the slaughter floor to perform a humane slaughter procedure (04C02), I observed that the floors near the trolley wash, in the blood pit and the [REDACTED] wash station were covered with water, clotted blood and other liquid disposable waste. Maintenance personnel were present and attempting to unclog the floor drain in the blood pit. With continued observation I noticed that two or three plant employees walked through the liquid waste as they performed midshift clean-up duties. I also observed a rack of clean trolleys in the flooded area near the trolley wash. The clean-up personnel then moved these trolleys out of the area and into another room near the kill floor. At approximately 1305 I took a regulatory action on the affected (flooded) area of the slaughter floor by taping the area off with US Reject Tag # B34787024. I informed Slaughter Supervisor, [REDACTED] of the noncompliance and informed him that he needed to prevent all personnel, other than the maintenance crew, from entering the tagged off area. At approximately 1315, I located the trolleys that had been exposed to the liquid waste and took a regulatory action by tagging them with US Reject Tag # B34787006. I informed Quality Assurance Manager, [REDACTED] of my actions. The establishment failed to meet the regulatory requirement of 9CFR 416.2(e)(2), 416.3(e)(3) and 416.3(e)(4) in that their plumbing system was not adequately maintained to properly convey sewage and other liquid waste from the establishment thus leading to the creation of insanitary conditions on the slaughter floor and the contamination of equipment and utensils. The establishment's immediate corrective action was to

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your right to [REDACTED] as delineated by 306.5 and/or 307.15 of 9 CFR

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.


14. SIGNATURE OF PLANT MANAGEMENT [REDACTED]
15. DATE 1-16-07
16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED]
17. DATE 1-16-07

00314

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection


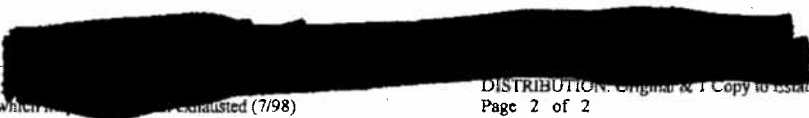
| | | | |
|--|---|---|---------------|
| 1. DATE 01/15/2007 | 2. RECORD NO. 0003-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(6) |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED  | (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 416.2(e)(2); 416.2(e)(3); 416.2(e)(4) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER None |
| 8. ISP CODE 06D01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS FACILITY - Structural | | |

10. DESCRIPTION OF NONCOMPLIANCE

unplug the drains, then clean and sanitize the affected floors. At approximately 1345, after observing that the floor drains had been unclogged and sanitary conditions had been restored to the area, I removed my regulatory control action.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

FSIS FORM 5400-4 (7/98)
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00315

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0069. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE
 Food Safety Other Consumer Protection

| | | |
|----------------------------|--|----------------------|
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. |
| 01/17/2007 | 0004-2007-9114 | 04653G M / 1 |
| 4. TO (Name and Title) | 5. PERSONNEL NOTIFIED | |
| David Blake, Plant Manager | [REDACTED] | |
| 6. RELEVANT REGULATION(S) | 7. SECTION/PAGE OF EST. PROCEDURE PLAN | |
| 310.1(a) | HACCP SSOP OTHER | |
| | N/A | |
| 8. ISP CODE | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | |
| 06D02 | FACILITY - Product Based | |

10. DESCRIPTION OF NONCOMPLIANCE

On 01/17/07 a noncompliance involving other inspection requirements, specifically, the failure to present all parts of the carcass for post-mortem inspection was observed.

On 01/17/07 Local Pride, LLC slaughtered [REDACTED] head of bison at the beginning of the shift. The slaughter and inspection of bison started at approximately 0800 and ended at approximately 1245. At approximately 1325, during his lunch break, Food Inspector [REDACTED] observed a condemned bison head, that had not undergone post-mortem inspection, in an inedible, white combo located on the outside of the establishment. At approximately 1327, I went to the west dock to observe the head in question. The bison head (and tongue) were on the west dock when I examined it. It did not contain an identification tag nor were the required post-mortem cuts made in the lymph nodes and cheek meat. At approximately 1335, [REDACTED] (Slaughter Supervisor), [REDACTED] (Plant Superintendent) and [REDACTED] (Q.A. Manager) were informed of the noncompliance. Plant personnel and I then removed the bison heads from the combo so that a determination could be made as to the identification of the uninspected head. It was determined by the establishment that the uninspected head and tongue belonged to carcass # [REDACTED] then performed the required post-mortem inspection procedures on the head and tongue with no abnormalities found.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your right to a copy of this report.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

[Signature: David Blake]

15. DATE

3-19-07

16. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

17. DATE

03/19/07

00311

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE
 Food Safety Other Consumer Protection

1. DATE: 01/18/2007 2. RECORD NO.: 0005-2007-9114 3. ESTABLISHMENT NO.: 04653G M / 1

4. TO (Name and Title): David Blake, Plant Manager 5. PERSONNEL NOTIFIED: (b)(4) (b)(6) (b)(7)(c)

6. RELEVANT REGULATION(S): 417.3(a)(3)

7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP SSOP OTHER
 HACCP Corrective Act

8. ISP CODE: 03J01 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: HACCP - Corrective Action

10. DESCRIPTION OF NONCOMPLIANCE

At approximately 12:00 while doing an unscheduled (03J01) procedure, requested by online inspector [redacted], I observed a zero-tolerance failure on the first half of the second carcass audit. Carcass # [redacted] had a feces smear 1inch x 1 inch with a green color on the top round next to the H-Bone split. [redacted], slaughter foreman, was present at the time of the observation. The line was stopped at this point for further reconditioning of the carcass and immediate corrective action put in place. The immediate corrective actions were more training for the new employee at the bunging station and [redacted] was to monitor all trimming at the final high trim rail. Carcasses # [redacted] through # [redacted] were retained with U.S. retain tag #B34787007 in the cooler, until further corrective actions have been put in place. As required zero-tolerance on all variety meats were made. No further failures were observed.

Similar NR's were written on 12-11-2006, (NR #0057-2006-9114) and 1-05-2007, (NR #0001-2007-9114). The immediate corrective actions on both NR's were to further train the "new" employees.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [redacted] -19-07

You are hereby advised of your right to appeal this decision as delineated by 306.5

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT: David Blake 15. DATE: 3-21-07

16. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [redacted] 17. DATE: 3-27-07

00317

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

1. DATE: 02/07/2007
 2. RECORD NO.: 0006-2007-9114
 3. ESTABLISHMENT NO.: 04653G M / 1 (b)(4) (b)(7)(c)
 4. TO (Name and Title): David Blake, Plant Manager
 5. PERSONNEL NOTIFIED: [Redacted] & David Blake
 6. RELEVANT REGULATION(S): 310.22(d)(4); 417.5(a)(1)
 7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP, SSOP, OTHER, BSE/SRM SOP
 8. ISP CODE: 03J01
 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: HACCP - Recordkeeping
 10. DESCRIPTION OF NONCOMPLIANCE:

On 02/07/2007 while performing a review of the establishment's SOP, SSOP and HACCP records for the date of 02/06/07, I observed a noncompliance involving the documentation of the implementation and monitoring of the establishment's BSE/SRM Standard Operating Procedure (SOP).

The establishment has prerequisite programs (SOPs) that address the regulatory requirements (9 CFR 310.22) pertaining to the removal, segregation and disposition of Specified Risk Materials. These programs are 1) [Redacted]

[Redacted] The establishment has a monitoring record for their [Redacted] which they complete [Redacted] but this record does not document all the monitoring procedures that they perform to meet the recordkeeping regulatory requirements of 9 CFR 310.22. 9 CFR 310.22(d)(4) states "Recordkeeping

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

You are hereby advised of your right [Redacted]

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

15. DATE

16. VERIFICATION SIGNATURE OF INSPECTING PROGRAM EMPLOYEE

17. DATE

00326

| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD CONTINUATION SHEET | | TYPE OF NONCOMPLIANCE | |
|---|--|---|--|
| 1. DATE | 2. RECORD NO. | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 02/07/2007 | 0006-2007-9114 | 3. ESTABLISHMENT NO. | |
| 4. TO (Name and Title) | | 04653G M / 1 | (b)(6) |
| David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED | (b)(7)(c) |
| 6. RELEVANT REGULATION(S) | | [REDACTED] & David Blake | |
| 310.22(d)(4); 417.5(a)(1) | | | (b)(4) |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | BSE/SRM SOP | | |
| 8. ISP CODE | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | | |
| 03J01 | HACCP - Recordkeeping | | |

10. DESCRIPTION OF NONCOMPLIANCE

requirements. (i) Establishments that slaughter cattle and establishments that process the carcasses or parts of cattle shall maintain daily records sufficient to document the implementation and monitoring of the procedures for the removal, segregation, and disposition of the materials listed in paragraph (a) of this section, and any corrective actions taken". The establishment failed to meet this regulatory requirement in that their records do not contain documentation of the monitoring of: 1) the disposal of the head (Which contains the brain, skull, eyes, and trigeminal ganglia.) and spinal cord of 30 month and older cattle, 2) the disposal of the distal ileum of the small intestine, 3) the adequacy of identification of carcasses that were derived from cattle that were 30 months of age or older at the time of slaughter (The establishment does not fabricate carcasses at this establishment. They are sent to other establishments to be processed where the vertebral column and dorsal root ganglia are removed and disposed. Carcasses derived from 30 months of age and older cattle need to be identified so that the spinal cord and dorsal root ganglia can be removed at the processing plant), and 4) the removal and disposal of the lingual tonsil from the tongue. By failing to document the monitoring of all parts of their [REDACTED]

the establishment does not have supporting documentation for this decision and thus has failed to meet the regulatory requirements of 9 CFR 417.5(a)(1). Similar monitoring deficiencies were observed on records back to 10/01/06.

Q.A. technician, [REDACTED] and Plant Manager, David Blake, were informed of the noncompliance prior to noon on 02/07/07.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

II. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

00327

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250 and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE
 Food Safety Other Consumer Protection

1. DATE: 02/12/2007 2. RECORD NO.: 0007-2007-9114 3. ESTABLISHMENT NO.: 04653G M / 1 (b)(4)

4. TO (Name and Title): David Blake, Plant Manager 5. PERSONNEL NOTIFIED: [REDACTED] (b)(6)
 (b)(7)(e)

6. RELEVANT REGULATION(S): 417.4(a)(2)(ii)

7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP SSOP OTHER
 HACCP

8. ISP CODE: 03C01 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: HACCP - Plant Verification

10. DESCRIPTION OF NONCOMPLIANCE

On 2-12-2007, as part of a scheduled (01C02) procedure, I reviewed the establishments [REDACTED] plans' records to verify that the establishment was meeting all HACCP regulatory requirements. I reviewed the establishments HACCP plans including their monitoring and verification procedures prior to reviewing the daily records.

The establishment has [REDACTED]. Verification activities include the [REDACTED].

During a review of the establishments [REDACTED] the week of 2-09-2007, I observed the following noncompliance's, (1) [REDACTED]

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE: [REDACTED] 2-15-07

You are hereby advised of your right to appeal this decision as delineated by 9 CFR 161.104.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. [REDACTED] 15. DATE: 2-18-07

16. [REDACTED] INSPECTION PROGRAM EMPLOYEE 17. DATE: 2-20-07

00323

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|--|--------------------------------------|--------|
| 1. DATE 02/12/2007 | 2. RECORD NO. 0007-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(4) |
| 4. TO (Name and Title) David Blake, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] | | |
| 6. RELEVANT REGULATION(S) 417.4(a)(2)(ii) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| HACCP | | | |
| 8. ISP CODE 03C01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Plant Verification | | |

10. DESCRIPTION OF NONCOMPLIANCE

The establishment failed to meet regulatory requirements of 9CFR 417.4 (a) (2) (ii) in that they did not perform their [REDACTED]

The establishment also failed the regulatory requirements of 417.5(c) in that prior to shipping product the plant failed to adequately review their records to ensure all verification activities had been performed.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

02-15-07

48300

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---|---|-----------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 02/14/2007 | 2. RECORD NO. 0009-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(6) |
| 4. TO (Name and Title) David Blake, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] | | (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 416.13(b); 416.13(c) | | (b)(4) | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| Operational SSOPs | | | |
| 8. ISP CODE 01C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE

At approximately 1510, on 02/14/07 while observing operations in the offal harvesting area of the slaughter floor I observed an operational sanitation noncompliance that resulted in the direct contamination of product. Water was observed dripping off the pipes, located above the offal preparation table, and onto the offal table and the product located on it. I took a regulatory control action by applying US Reject Tag # B19573572 to the offal table. The establishment removed the contaminated product from the table and placed it in white, plastic tubs which I tagged with US Retain Tag # B19573574. Products retained under this tag were approximately 8 livers, 1 oxtails, 10 lbs. of head meat (from the tongue trimmings), 6 hearts and 1 tongue. I informed Slaughter Supervisor, [REDACTED], of the noncompliance. The establishment restored sanitary conditions to the area by wiping the water off the pipes, and washing the offal table with water then sanitizing it with a chemical sanitizer. The establishment stated that they needed to monitor the area [REDACTED] for the remainder of the day to determine if the cause of the dripping water was condensation or accidental overspray from the offal area. The establishment stated that they would rework the retained product by washing it and applying [REDACTED] acid. At approximately 1540, I removed the US Reject Tag from the offal harvesting table. At approximately 1640, [REDACTED] reinspected the retained product and removed the US Retain Tag. At approximately 1650 Inspector [REDACTED] again observed water dripping from the overhead pipes onto the offal processing table. A regulatory control action was taken by tagging the table with US Reject Tag # B19573568. A regulatory

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE] *SJM*

You are hereby advised of your right to refuse inspection and to be deemed by 306.3 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

| | |
|---|----------------------|
| This [REDACTED] notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action. | |
| 14. [REDACTED] | 15. DATE 2-18-07 |
| 16. VERIFICATION SIGNATURE [REDACTED] | 17. DATE 02-23-07 |

00329

| | | | |
|---|----------------|---|--|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD CONTINUATION SHEET | | TYPE OF NONCOMPLIANCE | |
| | | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 02/14/2007 | 0009-2007-9114 | 04653G M / I | |
| 4. TO (Name and Title) | | 5. PERSONNEL NOTIFIED | |
| David Blake, Plant Manager | | [REDACTED] (b)(6) (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) | | | |
| 416.13(b); 416.13(c) (b)(4) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | SSOP | OTHER | |
| Operational SSOPs | | | |
| 8. ISP CODE | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | |
| 01C02 | | SSOP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE

control action was taken on the product that was on the table by tagging it with US Retain Tag # B19573766. Sanitary conditions were restored by washing the table with hot water and sanitizing it with a chemical sanitizer. Affected product was reworked and sprayed with [REDACTED] acid. During this second incident establishment maintenance personnel observed that the dripping water occurred as a result of an accidental discharge of the spray nozzle that is used to apply peroxyacetic acid to their offal products. The employee using the sprayer nozzle accidentally discharged it, leading to the spray hitting the overhead pipes. Preventative measures given by [REDACTED] involved [REDACTED]. After all requirements of 9 CFR 416.15 were met the regulatory control actions were released.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED] *[Signature]*

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97) (Do not use until exhausted (7/98))

DISTRIBUTION: Original & 1 Copy to Establishment, 1 Copy to Inspector
Page 2 of 2

00330

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|--|---|--|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE | |
| | | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 02/15/2007 | 0010-2007-9114 | 04653G M / 1 | |
| 4. TO (Name and Title) | 5. PERSONNEL NOTIFIED | | (b)(4) |
| David Blake, Plant Manager | [REDACTED] | | (b)(6) |
| 6. RELEVANT REGULATION(S) | | | (b)(7)(c) |
| 417.2(c)(4) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | SI. HACCP Plan CCP 1 | | |
| 8. ISP CODE | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | | |
| 03J01 | HACCP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE

At approximately 1050 on 02/15/07 while performing operational sanitation procedures at the establishment's transfer hallway, I observed a zero-tolerance deviation on carcass # [REDACTED]. This carcass was an animal slaughtered on 02/14/07. The contamination observed was on the loin area of the carcass near the last rib and was approximately 4 mm in diameter, greenish-brown in color and had a yellow piece of fibrous material (hay) as part of its composition. This contamination meets the definition of fecal material as described in FSIS Directive 6420.2. A regulatory control action was taken by tagging the carcass with US Retain Tag # B19573575. [REDACTED], the plant's superintendent, was immediately notified of the deviation. A review of the establishment's slaughter HACCP records from 02/14/07 revealed that the establishment had performed their first carcass zero-tolerance audit [REDACTED] of the day on carcass # [REDACTED]. All carcasses from # [REDACTED] to # [REDACTED] were retained for rework and reinspection. The establishment has a critical control point (CCP [REDACTED]) in its [REDACTED]. The above described zero-tolerance deviation was found beyond the CCP, approximately 24 hours after slaughter and just prior to the loading of the carcass for shipment. The establishment has failed to meet the regulatory requirements of 9 CFR 417.2(c)(4) in that their monitoring was not sufficient to detect the deviation. The establishment identified the cause of the deviation to be the improper release of the chain on the hide puller after the hide has been removed from the carcass. To prevent further similar deviations, [REDACTED] stated that he would instruct the hide puller

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE] *Sum*

You are hereby advised of your right to [REDACTED] by 9 CFR 301.25 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document is intended to inform you that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|------------|----------|
| 14. SIC | 15. DATE |
| [REDACTED] | 2-18-07 |
| 16. V | 17. DATE |
| [REDACTED] | 02-23-07 |

00334

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE

02/15/2007

2. RECORD NO.

0010-2007-9114

3. ESTABLISHMENT NO.

04653G M / 1

4. TO (Name and Title)

David Blake, Plant Manager

5. PERSONNEL NOTIFIED

[REDACTED]

(b)(4)

(b)(6)

6. RELEVANT REGULATION(S)

417.2(c)(4)

(b)(7)(c)

7. SECTION/PAGE OF EST. PROCEDURE PLAN

HACCP

SSOP

OTHER

SI. HACCP Plan CCP 1

8. ISP CODE

03J01

9. NONCOMPLIANCE CLASSIFICATION INDICATORS

HACCP - Monitoring

10. DESCRIPTION OF NONCOMPLIANCE

operators to change the way they released the tension on the chains of the hide puller. The Q. A. department stated they would [REDACTED]
The establishment reworked and reinspected the above mentioned carcasses, including carcass [REDACTED]. After the establishment reinspected the carcasses I reexamined carcass [REDACTED] and found no additional zero-tolerance deviations. The regulatory control action was then removed.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

FSIS FORM 5400-4 (7/98)

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

DISTRIBUTION: Original & 1 Copy to Establishment, 1 Copy to Inspector
Page 2 of 2

00335

A0000420 335-000335

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|--|----------------------|-------|
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 02/15/2007 | 0011-2007-9114 | 04653G M / 1 | |
| 4. TO (Name and Title) | 5. PERSONNEL NOTIFIED | | |
| David Blake, Plant Manager | [REDACTED] | | |
| 6. RELEVANT REGULATION(S) | | | |
| 417.3(a)(1); 417.3(a)(2); 417.3(a)(3) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | HACCP CCP1 | | |
| 8. ISP CODE | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | | |
| 03J02 | HACCP - Corrective Action | | |

(b)(4)
(b)(6)
(b)(7)(c)

10. DESCRIPTION OF NONCOMPLIANCE

At approximately 11:15 while doing a scheduled (03J02) procedure, I observed a zero-tolerance failure on the first half of a two carcass audit. I observed an identifiable plant like green feces smear 1/4 inch by 1/4 inch, on the edge of a wizard knife cut on the inside round [REDACTED] slaughter foreman, was immediately summoned to the high final rail for a corrective action, and reconditioning of the carcass. The line was stopped until the carcass was reconditioned to USDA regulation. [REDACTED] further corrective actions were to have the second trimmer on the final rail not release the carcasses for further trimming, and USDA inspection, until he felt the carcass was free of contamination. Further corrective actions was [REDACTED]

Carcasses [REDACTED] through [REDACTED] was retained with USDA retain tag #B19 573771 in the cooler, until further corrective actions have been put in place. As required zero-tolerance on all variety meats were made. No further failures were observed.

This is a failure to meet USDA regulation 417.3(a)(1), and 417.3(a)(2).

Similar NR's were written on 1-5-07, #0001-2007-9114, and 1-18-07, #0005-2007-9114. All NR's are linked due to the same unsanitary dressing procedures.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED] 2-15-07

You are hereby advised of your right to appeal this decision as

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document is a warning that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

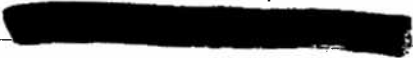
14. [REDACTED] 15. DATE 2-18-07
16. [REDACTED] PROGRAM EMPLOYEE 17. DATE 2-20-07

0337

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|--|----------------------|-----------|
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 02/15/2007 | 0011-2007-9114 | 04653G M / I | (b)(6) |
| 4. TO (Name and Title) | 5. PERSONNEL NOTIFIED | | (b)(7)(c) |
| David Blake, Plant Manager |  | | |
| 6. RELEVANT REGULATION(S) | 417.3(a)(1); 417.3(a)(2); 417.3(a)(3) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | HACCP CCPI | | |
| 8. ISP CODE | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | | |
| 03J02 | HACCP - Corrective Action | | |
| 10. DESCRIPTION OF NONCOMPLIANCE | | | |

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE



2-15-07

00338

(b)(6)

On Feb 15, 07, We failed a ZERO
Tolerance, for fecal material found
on a hind quarter where the first leg
opens it up. My actions taken were
to put a trimmer inbetween flanker's
2nd legges, after our 2nd zero tolerance
and passing I went and monitored work
with my first legges and showed him
where I thought he was getting the
Round dirty after a few cows went
through it looked that the cattle were
getting clean. Monday starting I will be
monitoring my legges on their cleanliness.

[REDACTED]

2-18-07

00339

A0000420_339-000339

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|--|---|-------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 02/19/2007 | 2. RECORD NO. 0012-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] (b)(4) (b)(6) (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 310.22(d)(1); 417.5(a)(1) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | LPBK/ pg. 16 | | |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Monitoring | | |

10. DESCRIPTION OF NONCOMPLIANCE

On 02/19/07 at 1140, as part of a scheduled 03J02 procedure, I began verifying the effectiveness of the establishment's segregation, removal and disposal of SRMs by observing tongues that were hanging on the cooling rack. During this observation I noticed that two of the ten tongues I observed still had lingual tonsil present on the tongue. At 1155, after reviewing the establishment's HACCP programs and records I returned to the tongue rack to see if the lingual tonsil had been removed. At this time I noticed that all nonkosher tongues had been removed from the rack. I asked the plant employee who was working in the area if he had boxed the product. He replied that the product had been boxed and was in the scale room. I immediately went to the scale room and observed that there were four boxes of nonkosher tongues from the day's production that had been labeled, weighed and taped shut. I asked the employee to open one of the boxes so I could inspect them. Upon examination of the first box of tongues I observed that tongue # [REDACTED] still had that portion of the tongue that contains the lingual tonsil. At 1201 I took a regulatory control action by tagging the above mentioned boxes (4) of nonkosher tongues with US Retain Tag numbers B37819469 & 70. At approximately 1210 Q. A. Manager, [REDACTED] and Plant Superintendent, [REDACTED] were informed of the noncompliance.

The establishment's hazard analysis (HA) for their beef slaughter HACCP plan [REDACTED] The

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

You are hereby advised of your right [REDACTED] of 301.43 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|--|----------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT David C. Blake | 15. DATE 2-20-07 |
| 16. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED] | 17. DATE 02-23-07 |

00342

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE
02/19/2007

2. RECORD NO.
0012-2007-9114

3. ESTABLISHMENT NO.
04653G M / I

4. TO (Name and Title)
David Blake, Plant Manager

5. PERSONNEL NOTIFIED
[REDACTED] (b)(6) (b)(7)(c)

6. RELEVANT REGULATION(S)
310.22(d)(1); 417.5(a)(1)

7. SECTION/PAGE OF EST. PROCEDURE PLAN

HACCP

SSOP

OTHER

LPBK/ pg. 16

8. ISP CODE

03J01

9. NONCOMPLIANCE CLASSIFICATION INDICATORS

HACCP - Monitoring

10. DESCRIPTION OF NONCOMPLIANCE

[REDACTED]

[REDACTED]. The establishment failed to meet the regulatory requirements of 9 CFR 310.22(d)(1) in that they did not properly implement the written procedures that they have developed for the removal of the SRM (lingual tonsil) from the tongue. The establishment has also failed to meet the regulatory requirements of 9 CFR 417.5(a)(1) in that the failure to properly remove the SRM from the tongue does not support the plant's decision in its [REDACTED]

At approximately 1210, [REDACTED] the slaughter supervisor, informed me that he would train the tongue trimmer on proper tonsil removal and monitor him until he could do it properly. At 1345, after the establishment reworked and reinspected all tongues produced from the beginning of the shift, I reinspected the product. I did not find any lingual tonsil on the tongues I inspected so at 1357 I removed the regulatory control action.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE]

[Handwritten Signature]

FSIS FORM 5400-4 (7/98)

Replaces FSIS Form 5400-4 (9/97), which is no longer available (7/98)

DISTRIBUTION: Original & 1 Copy to Establishment, 1 Copy to Inspector

Page 2 of 2

00343

A0000420_343-000343

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

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|--|--|---|------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input type="checkbox"/> Food Safety <input checked="" type="checkbox"/> Other Consumer Protection | |
| 1. DATE 02/21/2007 | 2. RECORD NO. 0013-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(6) |
| 4. TO (Name and Title) David Blake, Plant Manager | 5. PERSONNEL NOTIFIED | | (b)(4) (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 313.2 | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | SSOP | OTHER Humane Hand./2-3 | |
| 8. ISP CODE 04C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS PRODUCT - Protocol | | |

10. DESCRIPTION OF NONCOMPLIANCE
 Category IV-Handling During Antemortem On 02/21/2007 at 0700 at the beginning of antemortem inspection as I observed the establishment's cattle at rest I observed a humane handling noncompliance. In pens & there was not sufficient room for cattle to lie down. The cattle that were in these holding pens arrived at the facility at 1730 on 02/20/07. beef cows, which weighed an average of lbs., were placed in pen and beef cows, weighing an average of lbs., were put in pen. At 0704 I informed the plant superintendent, of the noncompliance. I took a regulatory control action on the pens at 0705 by tagging them with US Reject Tag # B37819471 & 72. The establishment took an immediate corrective action to reduce the overcrowding by moving some of the cattle to empty pens. At 0730 I removed the regulatory control action taken on the pens. At 0740 I spoke with the Q.A. manager, about the establishment's further planned actions. He stated that he would counsel the yard's employee on the amount of space he needed to provide cattle so they can lie down. He also stated that pens filled during the night should only be filled to 1/2 to 3/4 of capacity.

The establishment has written procedures for the humane handling and slaughter of livestock.

9 CFR

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
 [Redacted Signature] *JUM*

You are hereby advised of your right to appeal this determination by 306.3 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|---|----------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT <i>David C. Blake</i> | 15. DATE 02-22-07 |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE <i>JUM</i> | 17. DATE 02-23-07 |

00347

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|-------------------------------------|--|---------------------------|
| 1. DATE 02/21/2007 | 2. RECORD NO. 0013-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(6) |
| 4. TO (Name and Title) David Blake, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] | | (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 313.2 | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | | SSOP | OTHER Humane Hand./2-3 |
| 8. ISP CODE 04C02 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS PRODUCT - Protocol | |

10. DESCRIPTION OF NONCOMPLIANCE

313.2(e) states that animals shall have access to water in all holding pens and, if held longer than 24 hours, access to feed. There shall be sufficient room in holding pens for animals held overnight to lie down. The establishment failed to follow their humane handling program and to meet the regulatory requirements of 9 CFR 313.2(e) in that they placed too many cattle in holding pens & thus not allowing sufficient room for cattle that were held overnight to lie down.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE] *Jim*

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted.

DISTRIBUTION: Original & 1 Copy to Establishment, 1 Copy to Inspector
Page 2 of 2

00348

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250: and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

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|--|---|---|-------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 02/20/2007 | 2. RECORD NO. 0014-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] (b)(4) (b)(6) (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 417.3(a)(3) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| HACCP | | | |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | | |

10. DESCRIPTION OF NONCOMPLIANCE
While performing a scheduled (03J01), at approximately 12:15 I observed a non compliance on the second half of carcass # [REDACTED] on a four carcass audit. I observed an identifiable green plant like feces smear on the brisket, 2 inches by 1/2 inch in size. The line was stopped and [REDACTED] slaughter foreman, was immediately summoned to the final trim rail inspector stand. He reconditioned the carcass for USDA inspection.

[REDACTED] immediate corrective action was to instruct the gutter and pre-gutter to trim and inspect the brisket area for contamination. He also went to the source of the problem on the flanking station and instructed the flanker to open the hide more in the brisket area to prevent the hide from slapping the exposed carcass. He also will monitor this station to see that the hide was getting pulled back far enough to prevent contamination and restore the [REDACTED] failure.

This is a failure to meet USDA regulatory requirement of CFR471.3(a)(3).

As required I performed zero-tolerance on tails, and variety meats and no failures were found. No carcasses were retained in the cooler because the plants Q.A. technician had done a zero-tolerance on carcass # [REDACTED]

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[REDACTED] 2-22-07
You are hereby advised of your right to appeal this decision as outlined in 9 CFR 89.161-163.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

14. SIGNATURE OF PLANT MANAGEMENT
David C. Blake
15. DATE
2-28-07
16. VERIFIED BY (Name and Title of FSIS EMPLOYEE)
[REDACTED]
17. DATE
2-28-07

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|--|---|--------------------------------------|
| 1. DATE 02/20/2007 | 2. RECORD NO. 0014-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 |
| 4. TO (Name and Title) David Blake, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] (b)(4) | |
| 6. RELEVANT REGULATION(S) 417.3(a)(3) | (b)(6) (b)(7)(c) | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP HACCP | SSOP OTHER |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | |

10. DESCRIPTION OF NONCOMPLIANCE

Similar NR's were written on 2-15-2007, # 0011-2007-9114, and 1-18-2007, #005-2007-9114. The immediate corrective actions on both NRs' were to have additional trimming done and to do more training on the "new" employees, and they were monitored until the [REDACTED] was under control.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

II. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE] 2-22-07

FSIS FORM 5400-4 (7/98)

Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted.

DISTRIBUTION: Original & 1 Copy to Establishment, 1 Copy to Inspector
Page 2 of 2

60352

A0000420_352-000352

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|--|---|-------------------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 02/22/2007 | 2. RECORD NO. 0015-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(4) |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | (b)(6) (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 416.16(a) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER Pre-operational Sani |
| 8. ISP CODE 01B01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Recordkeeping | | |

10. DESCRIPTION OF NONCOMPLIANCE

On 02/21/07 while observing operational sanitation in the scale/packaging area of the establishment I watched as plant personnel handled exposed product during packaging. I asked Q.A. Technician, [REDACTED] if the area had been cleaned and sanitized prior to the beginning of operations. [REDACTED] stated that the entire area including the scale and tables had been cleaned and sanitized; and that [REDACTED] had performed preoperational sanitation monitoring procedures on the area prior to the start of operations. On 02/22/07, I performed a scheduled (01B01 procedure) preoperational sanitation recordkeeping review of the establishment's preoperational sanitation records for the implementation and monitoring of their preoperational sanitation procedures. The establishment's pre-operational sanitation standard operating procedures (SSOP) states under [REDACTED] that [REDACTED].

[REDACTED] A review of the establishment's records indicated that the establishment did not have records indicating that they had implemented and monitored their preoperational SSOP's for the scale/packaging room and for the cutting boards, meat wash sink, and lights and overhead at the east end of the processing floor for the dates of 02/01/07, 02/05/07, 02/06/07, 02/07/07, 02/08/07, 02/12/07,

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED]

[Signature]

You are hereby advised of your right to appeal this action under 9 CFR 381.55 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
[Signature: David C. Blake]

15. DATE
3-19-07

16. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
[Signature]

17. DATE
03/19/07

00354

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD CONTINUATION SHEET

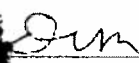
TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|---------------------------------|--|-----------|
| 1. DATE 02/22/2007 | 2. RECORD NO. 0015-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(6) |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 416.16(a) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | | SSOP | |
| Pre-operational Sani | | | |
| 8. ISP CODE 01B01 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Recordkeeping | |

10. DESCRIPTION OF NONCOMPLIANCE
 02/13/07, 02/14/07, 02/15/07, 02/19/07, 02/20/07 and 02/21/07. By failing to document the implementation and monitoring of the preoperational SSOP's in the above mentioned areas, the establishment failed to meet the regulatory requirements of 9 CFR 416.16(a) which states that each official establishment shall maintain daily records sufficient to document the implementation and monitoring of the Sanitation SOP's and any corrective actions taken. Q.A. Manager [REDACTED] was notified of the noncompliance at approximately 1400 on 02/22/07.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
 [REDACTED] 

FSIS FORM 5400-4 (7/98)
 Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)
 Page 2 of 2
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00355

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
 NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|---|--------------------------------------|-------------------|
| 1. DATE 02/27/2007 | 2. RECORD NO. 0016-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) David Blake, Plant Manager | 5. PERSONNEL NOTIFIED | | |
| 6. RELEVANT REGULATION(S) 317.2(c) 317.2(1) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER Labeling |
| 8. ISP CODE 04B03 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS PRODUCT - Misbranding | | |

(b)(6)
(b)(7)(c)

10. DESCRIPTION OF NONCOMPLIANCE
 At approximately 11:30 while performing a scheduled (04B03) procedure, I was watching the unloading of pre-made boxes from a semi trailer. While observing the boxes I seen they had no "safe handling instructions" on them. Knowing the plant was waiting for the boxes for their offal product, I immediately went to the freezer to see if any of the days production of offal had been packaged in the mislabeled boxes. I observed hearts and oxtail product in misbranded boxes.

(plant superintendent), (offal supervisor), and (Q.A. supervisor), were immediately made aware of the non-compliance.

The freezer was tagged with USDA retain tag #B19573772. This is a failure to meet USDA regulatory requirements of CFR 317.2(1). immediate corrective action is to have "safe handling" labels printed and applied to all offal boxes prior to shipping. The retain tag will remain on the freezer until further planned action is taken.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

 2-27-07

You are hereby advised of your right to appeal this decision as delineated by 306

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|---|----------|
| 14. SIGNATURE OF PLANT MANAGEMENT | 15. DATE |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE | 17. DATE |

00358

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

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|--|---------------------------------|---|---------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input type="checkbox"/> Food Safety <input checked="" type="checkbox"/> Other Consumer Protection | |
| 1. DATE 02/27/2007 | 2. RECORD NO. 0016-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(6) (b)(7)(c) |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | |
| 6. RELEVANT REGULATION(S) 317.2(c) 317.2(i) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP |
| | | | OTHER Labeling |
| 8. ISP CODE 04B03 | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS PRODUCT - Misbranding | |

10. DESCRIPTION OF NONCOMPLIANCE

At approximately 11:30 while performing a scheduled (04B03) procedure, I was watching the unloading of pre-made boxes from a semi trailer. While observing the boxes I seen they had no "safe handling instructions" on them. Knowing the plant was waiting for the boxes for their offal product, I immediately went to the freezer to see if any of the days production of offal had been packaged in the mislabeled boxes. I observed hearts and oxtail product in misbranded boxes.

[REDACTED] (plant superintendent), [REDACTED] (offal supervisor), and [REDACTED] (Q.A. supervisor), were immediately made aware of the non-compliance.

The freezer was tagged with USDA retain tag #B19573772. This is a failure to meet USDA regulatory requirements of CFR 317.2(1). [REDACTED] immediate corrective action is to have "safe handling" labels printed and applied to all offal boxes prior to shipping. The retain tag will remain on the freezer until further planned action is taken.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative actions.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE] 2-27-07

You are hereby advised of your right to appeal this decision as delineated by 306.5 and 6.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

16. VERIFICATION SIGN

15. DATE

17. DATE

[REDACTED SIGNATURE] 3-02-07
3-5-07

00359

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|-----------------------|---|--|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE | |
| | | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 03/05/2007 | 0018-2007-9114 | 04653G M / 1 | |
| 4. TO (Name and Title) | 5. PERSONNEL NOTIFIED | | (b)(6) |
| David Blake, Plant Manager | [REDACTED] | | (b)(7)(c) |
| 6. RELEVANT REGULATION(S) | | | |
| 416.13(c); 416.2(e) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN HACCP SSOP OTHER | | | |
| SSOP/Env Moist. | | | |
| 8. ISP CODE | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | |
| 01C02 | | SSOP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE

On 03/05/07 while performing on-line inspection duties at the carcass inspection area of the slaughter floor Slaughter Food Inspector, [REDACTED] observed water dripping off an overhead pipe located near the hot scale. At 12:10, after confirming Inspector [REDACTED] finding, I took a regulatory control action by applying US Reject Tag B37819477 to the final inspection rail, thus stopping the movement of carcasses through the area. I took a regulatory control action on all carcass (carcass # [REDACTED] back to the beginning of the shift by applying US Retain Tag # B37819484. I informed [REDACTED] Q.A. Technician, and [REDACTED] Plant Superintendent, of the noncompliance.

The dripping water was observed coming from a plumbing ventilation pipe that enters the building from the roof, runs parallel to the wall for 6 feet and then runs along the wall and enters a floor drain near the head meat harvesting table. The dripping water was seen coming from an elbow joint that is located approximately 6 feet below the ceiling. The elbow joint is located directly above a fan. The fan was running at the time the noncompliance was observed. The fan is oriented so that air blows from the fan onto the hind quarters of carcasses as they traverse the area between the final rail and the hot scale. Direct product contamination occurred as the water droplets hit the fan and sprayed onto the carcasses.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED] *JUM*

You are hereby advised of your rights under the Freedom of Information Act.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

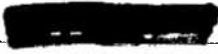
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|-----------------------------------|----------|
| 14. SIGNATURE OF PLANT MANAGEMENT | 15. DATE |
| [REDACTED] | |
| 16. SIGNATURE OF INSPECTOR | 17. DATE |
| [REDACTED] <i>JUM</i> | 03/19/07 |

00361

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|--|---|--------------------------------------|
| 1. DATE 03/05/2007 | 2. RECORD NO. 0018-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 |
| 4. TO (Name and Title) David Blake, Plant Manager | 5. PERSONNEL NOTIFIED  | |
| 6. RELEVANT REGULATION(S) 416.13(c); 416.2(e) | (b)(6) (b)(7)(c) | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP SSOP/Env Moist. |
| 8. ISP CODE 01C02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS SSOP - Monitoring | |

10. DESCRIPTION OF NONCOMPLIANCE

The establishment's immediate corrective actions to restore sanitary conditions included redirecting the dripping water into another drain, turning the fan off and recleaning the affected area. At 1351, the regulatory control action taken on the area was removed and the establishment resumed operations. As of the writing of the noncompliance record, product disposition had not been determined thus the regulatory control action has not been removed. The plant stated that they would need to examine the ventilation pipe and ceiling before they could provide a preventative measure.

The establishment failed to meet the regulatory requirements of 9 CFR 416.2(e)(3) in that their plumbing system was not adequately installed or maintained to prevent adulteration of product and prevent the creation of insanitary conditions on the slaughter floor. The establishment also failed to meet the regulatory requirements of 9 CFR 416.13(c) in that the implementation of their SSOP plan was not adequate to prevent the creation of insanitary conditions and the contamination of product.

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/98)

DISTRIBUTION: Original & 1 Copy to Establishment, 1 Copy to Inspector
Page 2 of 2

00362

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE | |
|--|-----------------------|---|--|
| | | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | (b)(4) |
| 03/01/2007 | 0017-2007-9114 | 04653G M / I | |
| 4. TO (Name and Title) | 5. PERSONNEL NOTIFIED | | (b)(6) (b)(7)(c) |
| Sholom Rubashki, Plant Manager | [REDACTED] | | |
| 6. RELEVANT REGULATION(S) | | | |
| 417.3(a)(1); 417.3(a)(2); 417.3(a)(3) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| | HACCP | SSOP | OTHER |
| | HACCP | | |
| 8. ISP CODE | | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | |
| 03J01 | | HACCP - Corrective Action | |

10. DESCRIPTION OF NONCOMPLIANCE

While performing a scheduled (03J01), at approximately 9:28 I observed a non compliance on the first half of carcass [REDACTED] of a two carcass audit. I observed an identifiable green plant like feces material scattered on the midline, and a 1/2 x 1/4 inch smear on the flank muscle. [REDACTED] slaughter foreman, was immediately summoned to the final trim rail inspection stand. He reconditioned the carcass for further USDA inspection.

[REDACTED] immediate corrective action was to instruct the trimmers to pay particular attention to that area, and the flanker was advised of the unsanitary conditions of the flank area and mid line. [REDACTED] will monitor that area until he felt the CCP was back under control.

This is a failure to meet USDA regulatory requirements of CFR 417.3(a)(1), and 417.3(a)(2).

As required I performed zero-tolerance on tails, and variety meats and no failures were found. Carcasses [REDACTED] through [REDACTED] were retained with USDA retain tag #B19573581 in the cooler until further corrective actions are put in place.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED]

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/or 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT

15. DATE

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

17. DATE

60364

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | |
|--|---|--------------------------------------|
| 1. DATE 03/01/2007 | 2. RECORD NO. 0017-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 |
| 4. TO (Name and Title) Sholom Rubashki, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] (b)(6) (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 417.3(a)(1); 417.3(a)(2); 417.3(a)(3) | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP |
| | HACCP | OTHER |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | |

10. DESCRIPTION OF NONCOMPLIANCE

Similar NR's were written on 2-20-2007, #0014-2007-9114, and 2-15-2007 #0011-2007-9114. In NR #0014-2007-9114, the corrective action states; "[REDACTED] advised the flanker of the problem and instructed him to open the hide up in the brisket area, to prevent the hide from slapping the exposed carcass. The flanker was observed until it was ensured the flanker was doing the procedure properly".

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED]

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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Page 2 of 2

00365

A0000420_365-000365

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

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|--|--|---|--|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE | |
| | | <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> Other Consumer Protection |
| 1. DATE | 2. RECORD NO. | 3. ESTABLISHMENT NO. | |
| 03/13/2007 | 0019-2007-9114 | 04653G M / I | |
| 4. TO (Name and Title) | 5. PERSONNEL NOTIFIED | | |
| David Blake, Plant Manager | [REDACTED] (b)(4) (b)(6) (b)(7)(c) | | |
| 6. RELEVANT REGULATION(S) | | | |
| 417.2(c)(5); 417.3(a)(3) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | HACCP | SSOP |
| | | OTHER | |
| | | SI. HACCP plan CCP 1 | |
| 8. ISP CODE | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS | | |
| 03J01 | HACCP - Corrective Action | | |

10. DESCRIPTION OF NONCOMPLIANCE

On 03/13/07 at 1348, as part of a scheduled 03J02 procedure and in response to repeated findings of zero-tolerance contamination on carcasses at the final carcass inspection area by Inspector [REDACTED] I performed a zero-tolerance audit (03J01). On the leading half of the first carcass examined (carcass # [REDACTED]) I observed a piece of contamination approximately 10 inches behind the shoulder and 8 inches from the dorsal midline that met the definition of fecal material as described in FSIS Directive 6420.2. The contamination measured approximately 4 mm in diameter, was green in color, had a fibrous texture and was plant-like in appearance. I immediately notified [REDACTED] the plant supervisor and [REDACTED] Q.A technician, of the noncompliance. At 1350, I took a regulatory control action by stopping the slaughter line. The plant took an immediate corrective action on the affected carcass by removing the contamination in accordance with 9 CFR 310.18(a). [REDACTED] stated that the cause of the deviation was fecal material splattering off the hide puller chain during removal of the hide from the hide puller. [REDACTED] stated that the plant's last acceptable zero-tolerance audit occurred on carcass # [REDACTED] I took a regulatory control action on carcasses # [REDACTED] to # [REDACTED] by applying US Retain Tag numbers B37819503 and 08 to the first kosher and nonkosher carcasses within this group. [REDACTED] stated that she would [REDACTED] as a means to assure that the CCP was back under control after they implemented their corrective actions. These corrective actions were: 1) [REDACTED] and 2) [REDACTED] At

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED] *DVM*

You are hereby advised of your right to appeal this action.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|---|----------|
| 14. SIGNATURE OF PLANT MANAGEMENT | 15. DATE |
| <i>[Signature]</i> | 3-19-07 |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE | 17. DATE |
| [REDACTED] <i>DVM</i> | 03/19/07 |

00367

US Department of Agriculture
 FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|---|---|---|-------|
| 1. DATE 03/13/2007 | 2. RECORD NO. 0019-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] (b)(4) (b)(6) (b)(7)(c) | |
| 6. RELEVANT REGULATION(S) 417.2(c)(5); 417.3(a)(3) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| SI. HAACP plan CCP 1 | | | |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | | |

10. DESCRIPTION OF NONCOMPLIANCE

approximately 1356 after receiving these corrective actions, I released the regulatory control action. I continued the carcass zero-tolerance by examining carcass # [REDACTED] # [REDACTED] and # [REDACTED]. No additional zero-tolerance contamination was observed. I completed the 03J01 procedure by performing a zero-tolerance audit on tails, head meat and cheek meat. No zero-tolerance deviations were found. [REDACTED] stated that [REDACTED] had performed two additional zero-tolerance audits, with the last audit being on carcass # [REDACTED]. [REDACTED] stated that the CCP was back under control at this point. Carcass # [REDACTED] through [REDACTED] were retained under the above mentioned retain tags until the plant has the opportunity to rework and reinspect them.

A similar noncompliance (NR # 0010-2007-9114) was written on 02/15/07. To prevent recurrence of the noncompliance the establishment stated that they would [REDACTED]. This preventative measure was either not properly implemented or was ineffective in preventing recurrence of fecal contamination. The plant thus failed to meet the regulatory requirements of 9 CFR 417.3(a)(c). The plant also has failed to meet the regulatory requirements of 9 CFR 417.2(c)(5) in that their monitoring of CCP 1 (carcass zero-tolerance) was not sufficient to detect the zero-tolerance contamination found by FSIS inspection personnel. On Friday, 03/09/07 during a brief meeting with Q. A. Manager, [REDACTED] I spoke about the concerns the Agency has with the increase in zero-tolerance contamination observed over the last three months.

This documents serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE] *vim*

00368

A0000420_368-00036

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|--|---|---------------------------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 03/15/2007 | 2. RECORD NO. 0020-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(4) |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] | (b)(6) (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 310.25(a) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER Gen.E. coli plan |
| 8. ISP CODE 05A02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS E. COLI - Other / None | | |

10. DESCRIPTION OF NONCOMPLIANCE

While performing a review of the establishment's microbiological testing results I observed the following regulatory noncompliances involving the establishment's (Generic) E. coli Biotype 1 testing program. 1) The establishment's records indicate that during the week of March 4-10, 2007 plant personnel performed two sponge samples. Daily disposition records indicate that [REDACTED] cattle and [REDACTED] bison were slaughtered during that week. Both E. coli samples were taken from bison carcasses. The predominate type of livestock slaughtered at this establishment is cattle. The establishment thus failed to meet the regulatory requirements of 9 CFR 310.25(a)(1) which states that each official establishment that slaughters livestock must test for E. coli Biotype 1. Establishments that slaughter more than one type of livestock or both livestock and poultry, shall test the type of livestock or poultry slaughtered in the greatest number. 2) During the weeks of February 11-17, 2007 and March 4-10, 2007, the establishment failed to perform any sponge sampling for E. coli Biotype 1 on their beef carcasses. 9 CFR 310.25(a)(2) (iii) states slaughter establishments as defined in paragraph (a)(2)(v) of this section, must take samples at a frequency proportional to the volume of production at the following rates: (A) Cattle, sheep, goats, horses, mules and other equines: 1 test per 300 carcasses, but, a minimum of one sample during each week of operation. The establishment slaughtered [REDACTED] cattle during the week of February 11-17 and [REDACTED] cattle during the week of March 4-10. At least one E. coli Biotype 1 sample should have been taken each of those weeks. 3) A review of the establishment E. coli sponge sampling records and associated process

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE] *DUM*

12. PLANT MANAGEMENT RESPONSE (immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

| | |
|---|----------------------|
| 14. SIGNATURE OF PLANT MANAGEMENT <i>David C. Blake</i> | 15. DATE 3-19-07 |
| 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE [REDACTED] | 17. DATE 03/19/07 |

FSIS Form 5400-4 (9/97), which may be used until exhausted (7/98)

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00371

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

| | | | |
|--|--|--------------------------------------|---------------------|
| 1. DATE 03/15/2007 | 2. RECORD NO. 0020-2007-9114 | 3. ESTABLISHMENT NO. 04653G M / 1 | (b)(4) |
| 4. TO (Name and Title) David Blake, Plant Manager | 5. PERSONNEL NOTIFIED [REDACTED] | | (b)(6) (b)(7)(c) |
| 6. RELEVANT REGULATION(S) 310.25(a) | | | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | | | |
| HACCP | | SSOP | |
| | | OTHER Gen.E. coli plan | |
| 8. ISP CODE 05A02 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS E. COLI - Other / None | | |

10. DESCRIPTION OF NONCOMPLIANCE

control chart dating back to October 19, 2007 indicate that the establishment is not collecting samples randomly. The dates of sampling indicates that nearly all samples were taken from cattle slaughtered on the last one or two days of the work week. Since not all carcasses from cattle slaughtered early in the week are not present during the time of random carcass selection and sampling they are not in the sampling pool and do not have a chance of being selected. This is particular true with Kosher carcasses which are shipped within 24 hours of being slaughtered. The establishment's generic E. coli testing program under [REDACTED] states [REDACTED]

[REDACTED]. The establishment has failed to meet the regulatory requirements of 9 CFR 310.25(a)(1) and (2) in that their written procedures are not designed so that all cattle slaughtered during the week are included in the sampling pool thus randomness of carcass selection is not achieved. 4) 9 CFR 310.25(a)(4) states that results of testing shall be recorded onto a process control chart by the type of livestock slaughtered. The establishment's process control chart contains results of sampling from both the beef and bison carcasses. Since beef are the predominate type of livestock slaughtered only their test results should be recorded on the process control chart.

This document serves as written notification that failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED]

FSIS FORM 5400-4 (7/98)
Replaces FSIS Form 5400-4 (9/97), which may be used until exhausted (1/99)

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A0000420_372-0003

00572

The request for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

| | | | |
|--|---|---|-------|
| US Department of Agriculture FOOD SAFETY AND INSPECTION SERVICE NONCOMPLIANCE RECORD | | TYPE OF NONCOMPLIANCE <input checked="" type="checkbox"/> Food Safety <input type="checkbox"/> Other Consumer Protection | |
| 1. DATE 03/20/2007 | 2. RECORD NO. 0021-2007-9114 | 3. ESTABLISHMENT NO. 04653G M /1 | |
| 4. TO (Name and Title) David Blake, Plant Manager | | 5. PERSONNEL NOTIFIED [REDACTED] (b)(4) | |
| 6. RELEVANT REGULATION(S) 417.3(a)(3) | | (b)(6) (b)(7)(c) | |
| 7. SECTION/PAGE OF EST. PROCEDURE PLAN | HACCP | SSOP | OTHER |
| | SI. HACCP Plan CCP 1 | | |
| 8. ISP CODE 03J01 | 9. NONCOMPLIANCE CLASSIFICATION INDICATORS HACCP - Corrective Action | | |

10. DESCRIPTION OF NONCOMPLIANCE

At approximately 1630 on 03/20/07 Slaughter Food Inspector [REDACTED] informed me that the plant was repeatedly presenting carcasses for final inspection that contained zero-tolerance contamination. As a result of his findings I decided to perform an unscheduled 03J01 (carcass zero-tolerance audit) procedure. I began the 4 carcass audit at approximately 1705. On the leading half of the first carcass (# [REDACTED]) examined I observed a 1 mm x 5 mm piece of contamination on the outside round (rump) that was green in color, fibrous in texture and plant-like in appearance. I immediately informed [REDACTED], the plant superintendent, of the noncompliance. On the leading half of the second carcass (# [REDACTED]) examined I observed 6-8 pieces of contamination on the posterior surface of the fore shank. The contamination met the definition of fecal material as described in FSIS Directive 6420.2. The pieces of fecal material ranged in size from 3 to 10 mm in diameter. The contamination was fibrous in texture, plant-like in appearance, and brown in color. I again informed [REDACTED] of the noncompliance. Both carcasses were retrimmed in accordance with 9 CFR 310.18. No additional zero-tolerance contaminants were found on the remaining two carcasses, tails, head meat or cheek meat. A regulatory control action was taken by retaining carcasses back to the last acceptable audit. Carcass #s [REDACTED] to [REDACTED] were retained with US Retain Tag #s B37819531 to 34. [REDACTED] stated that the cause of the deviation on the outside round was dirty tails hitting the carcass. He stated the deviation on the shank was a result of a cut made in the hide [REDACTED]. Corrective actions given by the plant were to

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

[REDACTED SIGNATURE] *Dum*

You are hereby advised of your rights under 306.5 and 381.35 of 9 CFR.

12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
David C Blake

15. DATE
3-21-07

16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE

17. DATE

00374

This report for this information is voluntary. It is needed to monitor defects found in this inspection system. It is used by FSIS to determine whether establishments are in compliance. 9 CFR 301 and 9 CFR 381. FORM APPROVED OMB No. 0583-0089. OMB DISCLOSURE STATEMENT: Public reporting burden for this collection of information is estimated to average 7 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250, and to the Office of Information and Regulatory Affairs, Office of Management and Budget.

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE: 03/27/2007
 2. RECORD NO.: 0022-2007-9114
 3. ESTABLISHMENT NO.: 04653G M / I (b)(6)
 (b)(7)(c)

4. TO: (Name and Title): David Blake, Plant Manager
 5. PERSONNEL NOTIFIED: [REDACTED] (b)(4)

6. RELEVANT REGULATION(S): 310.18

7. SECTION/PAGE OF EST. PROCEDURE PLAN: HACCP | SSOP | OTHER: Product - Economic

8. ISP CODE: 04C03
 9. NONCOMPLIANCE CLASSIFICATION INDICATORS: Product - Economic

10. DESCRIPTION OF NONCOMPLIANCE
 While performing operational sanitation procedures in the establishment's carcass coolers I observed a noncompliance involving the product (economic/wholesomeness) trend indicator. The first five carcasses in the cooler from the day's production had visible ingesta and hairs too numerous to count in and surrounding the atlas bone in the neck. A regulatory control action was taken by applying U.S. retain tag #B37819541 on carcass # [REDACTED] through [REDACTED] of the days production. I immediately applied U.S. retain tag #B37819802 on the carcass wash on the slaughter floor and summoned [REDACTED] (plants supervisor) and [REDACTED] (slaughter foreman) to the area.

[REDACTED] immediate corrective action was to trim all the atlas bones on the rail, and instruct the head dropper to clean his knife after every cut when removing the head. He also instructed the low trimmer to look at every atlas bone in the neck and trim if needed. An additional employee was placed at the final rail to monitor the atlas bones until the carcasses were free of the contamination.

At approximately 1600 hrs. after the carcasses had been retrimmed I re-inspected them and found no visible contamination. The U.S. retain tag was removed prior to shipment.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE: [REDACTED] 3-27-07

You are hereby advised of your right to appeal this decision as delineated by 306.5 and/o
 12. PLANT MANAGEMENT RESPONSE (Immediate action(s)):

13. PLANT MANAGEMENT RESPONSE (further planned action(s)):

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

14. SIGNATURE OF PLANT MANAGEMENT
 15. DATE
 16. VERIFICATION SIGNATURE OF INSPECTION PROGRAM EMPLOYEE
 17. DATE

00376

US Department of Agriculture
FOOD SAFETY AND INSPECTION SERVICE
NONCOMPLIANCE RECORD CONTINUATION SHEET

TYPE OF NONCOMPLIANCE

Food Safety Other Consumer Protection

1. DATE
03/27/2007

2. RECORD NO.
0022-2007-9114

3. ESTABLISHMENT NO.
04653G M / 1

4. TO (Name and Title)
David Blake, Plant Manager

5. PERSONNEL NOTIFIED


6. RELEVANT REGULATION(S)
310.18

7. SECTION/PAGE OF EST. PROCEDURE PLAN

HACCP

SSOP

OTHER

Product- Economic

8. ISP CODE

04C03

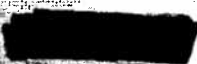
9. NONCOMPLIANCE CLASSIFICATION INDICATORS

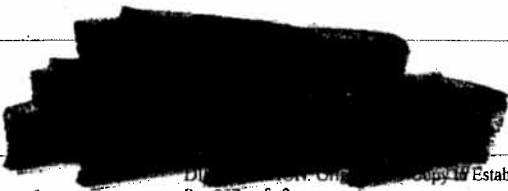
Product - Economic

10. DESCRIPTION OF NONCOMPLIANCE

This document serves as written notification that your failure to comply with regulatory requirement(s) could result in additional regulatory or administrative action.

11. SIGNATURE OF INSPECTION PROGRAM EMPLOYEE


FIS FORM 5400-4 (7/98)
Replaces FIS Form 5400-4 (9/97), which may be used until exhausted (7/98)


3-27-07
One copy to Establishment, 1 Copy to Inspector
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