**FEMAS Gatekeeping Application Form**

|  |  |
| --- | --- |
| FEMAS Participant / ApplicantCompany Name |  |
| IF a FEMAS Participant,FEMAS ID number |  |
| FEMAS Participant / ApplicantContact name |  |
| FEMAS Participant / ApplicantContact email address |  |
| Date of Submission |  |
| Please confirm if there is a date when it is hoped certification will be complete |  |
|  |
| Feed Material / Additive name |  |
| Legal category of material / reference number |  |
| FEFANA feed classification tool output attached? (where relevant) |  |
| Supplier name and address |  |
| Source and Country of origin |  |
| Rationale for gatekeeping |  |
|  |
| Product specification including packaging / bulk delivery format |  |
| Details of steps within the supply chain (a flow chart would assist this) |  |
| Estimated quantity to be traded during a 12-month period |  |
| Method of supplier approvale.g. Questionnaire / Supplier Audit |  |
| Certifications held by supplier and / or source |  |
| Please provide an overview of the production process (a process flow chart would assist this). |  |
| Proposed analysis based on FEMAS Calculator results |  |
| Please provide an overview of any transport and storage in the proposed supply chain. |  |
| Please supply any further information and evidence that will support your application. You may include appended files. |