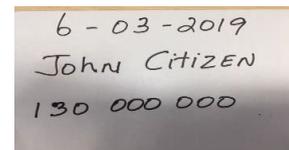


Field Harvester Checklist

Name:	
Accreditation Number:	
Postal Address:	
Contact Numbers:	
Email Address:	

All photos must be date stamped and include your name and accreditation number as per example:



Vehicle Rego Number:		<i>Photo required</i>	
Gun License Number:		<i>Photo required</i>	
Expiry Date:		<i>If no gun licence, please notify the Safe Food QLD office</i>	
DERM License Number this year:		Kangaroo Harvesters only	
Full time:		Part time:	
Species processed:			
<input type="checkbox"/> Kangaroo	<input type="checkbox"/> Boar	<input type="checkbox"/> Deer	<input type="checkbox"/> Goats <i>(Use of Landholders Consent forms – supplied, sighted and verified)</i>
Management Statement provided:	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<i>Photo required</i>
Has an annual review of your Management Statement been conducted?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Last review date: ____/____/____
Is a copy of the African Swine Fever Infographic readily available?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Download here
Tray composition: <i>Photo required</i>			
<input type="checkbox"/> Stainless steel	<input type="checkbox"/> Aluminium	<input type="checkbox"/> Steel	<input type="checkbox"/> Painted <input type="checkbox"/> Galvanised
Hanging rack: <i>Photo required</i>			
<input type="checkbox"/> Stainless steel	<input type="checkbox"/> Galvanised	Overall condition of rack setup:	

Number of spikes:	_____	<input type="checkbox"/>	Stainless steel	<input type="checkbox"/>	Galvanised	<input type="checkbox"/>	Sanitising of Hanging Pins		
Hanging rack when full if possible:			<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<i>Photo required</i>		
Water supply and hygiene information				Water tank capacity:		_____	Litres		
Potable supply:	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	Pumped:	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes
Chlorinated ppm testing:	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	Gravity fed:	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes
Non-Hand Operated Tap:		<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<i>Photo required</i>			
Hand Soap / Dispenser available:		<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<i>Photo required</i>			
Hand Towel available:		<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<i>Photo required</i>			
Steriliser Chemical type:									
Chemical Name:									
Chemical concentration level / per litre of sanitiser:									
Steriliser volume in litres:									
Equipment used in processing:		<input type="checkbox"/>	Knives	<input type="checkbox"/>	Steel holders	<i>Photo required</i>			
Lighting of work area	Number of lights:						<i>Photos required</i>		
	Operating lights for work area:								
Cleaning chemical names:							<i>Photo required</i>		
Where is the vehicle cleaned?							<i>Photo required</i>		
How do you control cross contamination from your clothes during processing?									
Use of Personal Protective Equipment (PPE):	<input type="checkbox"/>	Aprons	<input type="checkbox"/>	Gloves worn	<input type="checkbox"/>	Overalls / Jeans			

Dog box on vehicle:	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Complete separation	<input type="checkbox"/>	Sealed at floor	<i>Photo required</i>		
Wild Game Process Declaration form has been completed by the Processor and provided:								<input type="checkbox"/>	No	<input type="checkbox"/>	Yes
What is available to cover product when it's raining?											
Please provide copies of Harvest Records collected for your busiest month this year:								_____			Month
How many condemns / downgrades for this year?											
Gross faecal contamination			Mould			Body shot					
Off odour			Hydatids			Dog bites					
Other (please specify):											
What other items are held or stored in the processing area?											
<input type="checkbox"/>	Fuel storage	<input type="checkbox"/>	Spare tyres	<input type="checkbox"/>	Jacks	<input type="checkbox"/>	Toolboxes / chains				

Summary of photos required:

<input type="checkbox"/>	Vehicle registration plate (rear vehicle phot)	<input type="checkbox"/>	Non-hand operated tap
<input type="checkbox"/>	Gun license	<input type="checkbox"/>	Hand soap & dispenser
<input type="checkbox"/>	Management Statement	<input type="checkbox"/>	Hand towel dispenser
<input type="checkbox"/>	Vehicle tray & hanging rack	<input type="checkbox"/>	Knives & steel holder
<input type="checkbox"/>	Hanging rack when full	<input type="checkbox"/>	Steriliser
<input type="checkbox"/>	Work lighting	<input type="checkbox"/>	Chemicals used
<input type="checkbox"/>	Dog box on vehicle (if applicable)	<input type="checkbox"/>	Wash area

Please ensure that all the required photos and supporting documentation have been collected before submitting to Safe Food to ensure ease of processing of your field harvester assessment.