



DELAWARE DEPARTMENT OF  
**AGRICULTURE**

2320 SOUTH DUPONT HIGHWAY  
DOVER, DELAWARE 19901  
AGRICULTURE.DELAWARE.GOV

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## FOOD SAFETY AUDIT COST-SHARE PROGRAM

### ADMINISTERED BY THE DELAWARE DEPARTMENT OF AGRICULTURE

This cost-share program is designed to assist Delaware fruit and vegetable growers with the cost associated with obtaining a third-party food safety audit and the testing of their agricultural water. Delaware growers can now receive financial support in obtaining a third-party audit to verify they are following effective food safety practices. Audits verify that fruits and vegetables are produced, packed, handled, and stored in the safest manner possible to minimize risks of microbial food safety hazards. Part of verifying good agricultural and good handling practices is by ensuring the water used in crop production and postharvest activities is safe.

The Delaware Department of Agriculture, Food Products Inspection Section, will pay 80 percent of the cost of a successful USDA AMS or commercial third-party food safety audit with a maximum reimbursement of \$1,000 per year, per farm. Upon successful completion, the department will also pay 80 percent of the cost associated with annual water testing, with a maximum reimbursement of \$500 per year, per farm. For 2019, 2020 and 2021, USDA has agreed to defray 100 percent of the costs associated with Harmonized GAP and Harmonized GAP+ audits, in Delaware. If USDA has covered 100 percent of the applicant's successful audit, the applicant is still eligible for water testing reimbursement through this cost-share and should proceed to fill out this application.

To be eligible for assistance, Delaware fruit and vegetable growers must meet the following requirements:

- Growers must have *successfully* completed a third-party USDA AMS or commercial audit.
- Growers must submit receipts for the water tests performed
- All paperwork must be submitted to the Delaware Department of Agriculture between *October 1, 2018 and September 30, 2022*, to be eligible for reimbursement. In the event of limited funds, preference will be given to audits on a first come, first serve basis until funds are depleted.

Applicants must fully complete the necessary application and be able to show verification of successful audit completion, billing and proof of payment for the audit. In addition, the State of Delaware requires all applicants to register in the new State of Delaware eSupplier Portal before payments can be made. If you have previously been reimbursed through the state, your information is still on file but be sure to update any information in the new portal, as necessary. This portal can be located at [https://accounting.delaware.gov/w9\\_notice.shtm](https://accounting.delaware.gov/w9_notice.shtm).

For information regarding Delaware Department of Agriculture/ USDA AMS food safety audits please contact Brenda Clements, Food Products Inspection Field Supervisor at 302-698-4546 or via email at [Brenda.Clements@delaware.gov](mailto:Brenda.Clements@delaware.gov).

If you have questions regarding the cost-share program, please contact Amanda Ziegler at 302-698-4522 or via email at [Amanda.Ziegler@delaware.gov](mailto:Amanda.Ziegler@delaware.gov).



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## Food Safety Audit And Water Testing Cost-Share Program Application

To be eligible for reimbursement the applicant ***must submit all paperwork to the Delaware Department of Agriculture between October 1, 2018 and September 30, 2022.*** The Delaware Department of Agriculture, Food Products Inspection Section, will pay 80% of the cost of a Delaware Department of Agriculture Authorized USDA AMS or commercial third party food safety audit with a maximum reimbursement of \$1,000 per year, per farm AND 80% of the cost of water testing up to \$500 per year, per farm only once that farm has successfully passed a USDA AMS or commercial food safety audit; until funding source is depleted. ***For 2019, 2020 and 2021, USDA has agreed to defray 100% of the costs associated with Harmonized GAP and Harmonized GAP+ Audits; in Delaware. If USDA has covered 100% of the applicants successful audit, the applicant is still eligible for water testing reimbursement through this cost-share and should proceed to fill out this application.***

### GENERAL INFORMATION

Name of Payee:		
Contact Person or Business Name (if different than payee):		
Name of Farm:		
Mailing Address:		
City:	State:	Zip Code:
Phone Number:	Email:	
Social Security or Tax Identification Number for Payee:		
Location Address (if different from mailing address):		
City:	State:	Zip Code:

### FOOD SAFETY AUDIT SUPPORT

Date of Certification:	Certification Number:	Total Audit Fee: \$ _____
Certification Agent/Agency Mailing Address:		
City:	State:	Zip Code:

### WATER TESTING SUPPORT

Total Fee(s) for associated Water Testing: \$ _____
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## SUBMISSION INSTRUCTIONS

Completed applications along with the required paperwork (as specified below) should be submitted via email to [DE.ProduceSafety@delaware.gov](mailto:DE.ProduceSafety@delaware.gov), faxed to (302) 736- 9142 **OR** mailed to Delaware Department of Agriculture, Food Products Inspection – Cost Share Reimbursement, 2320 S. DuPont Highway, Dover, DE 19901.

**Required paperwork for reimbursement:**

- Cost Share Application
- Audit Certificate
- Proof of audit payment (invoice, copy of check, etc..)
- If requesting reimbursement for water testing, submit copies of all receipts

## PROGRAM ACKNOWLEDGMENTS

*I am a Delaware fruit and/or vegetable grower/packer. I hereby apply to the Delaware Department of Agriculture for cost-share reimbursement fees under their 2018 Specialty Crop Block Grant Project: "Market Access Assistance to Delaware Growers through Third Party Food Safety Audit and Water Testing Support". I verify that the information I provided on this application is true and correct.*

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

<b>For Official Use Only</b>	
Audit Certificate #:	Total invoiced auditing fees: \$ _____ 80% = \$ _____
Water Receipts? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total invoiced water testing fees: \$ _____ 80% = \$ _____
Total Reimbursement: \$ _____	
<b>Reimbursement Approvals:</b>	
W9 Verified by: _____ Date: ____ / ____ / ____	
Approved by: _____ Date: ____ / ____ / ____	