

Certified Food Safety Center

Scheduled Process Form for Acid, Acidified or Low Water Activity Foods

Please fill in the form to draft a scheduled process for approval, or copy the format and build your own.

Product Name _____
Date _____
Company Name (if chosen) _____
Name of person responsible for product _____
Address _____
City, State, Zip _____
Telephone / Fax _____

Required Analyses: Please record values for all that apply – See Required Analyses (from Transmittal) Sheet

pH _____ a_w _____
(Water Activity)

Ingredients: Remember to list by **weight**

#	Ingredient*	Description (fresh, canned, sliced, etc.)	Weight (oz, lb, g, kg, etc.)**
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

* If using vinegar, note the acid strength (stated on the bottle) of the brand you use. Ex: Vinegar (5%).

** **All ingredients, even liquids must be weighed.** PLEASE do not assume that 1 cup = 8 oz; a cup of garlic powder weighs much less than a cup of molasses.

Procedure: List **ALL** steps necessary to make your product.

1 _____
2 _____
3 _____
4 _____
5 _____
6 _____
7 _____
8 _____
9 _____
10 _____
11 _____
12 _____

Container type and size: jar or vacuum bag, 500g or 1000g

How will product be sold? Shelf-stable Refrigerated Frozen

Likely buyers? Individuals Institutions Restaurants