

## APPLICATION CHECKLIST

---

To ensure that this agreement has been completed a checklist has been provided for your convenience. Please remember that it is still your responsibility to thoroughly review, complete, and submit all required documents. When completed please enclose the required documents with this checklist and submit to the State Distributing agency for approval. A partial agreement may result in delaying approval.

**For your added convenience you can complete the agreement online.** Just click on shaded areas and start typing.

**Please DO NOT make any changes to the selections in this agreement that has already been completed by our agency!!**

- 1 \_\_\_\_\_ Signed and dated copy of SPA (must include Federal EIN #)
  
- 2 \_\_\_\_\_ Value Pass Through Systems - selected by Processor
  
- 3 \_\_\_\_\_ A copy of Sales Verification Plan (if selecting NOI or Alternate VPT System)
  
- 4 \_\_\_\_\_ Approved Summary End Product Data Schedules
  
- 5 \_\_\_\_\_ Subcontractor information completed in its entirety (if applicable)
  
- 6 \_\_\_\_\_ Red Meat Processor – Grading selected
  
- 7 \_\_\_\_\_ WBSCM Material & BP-ID No. Chart – destination data forms needed for new addresses only
  
- 8 \_\_\_\_\_ Broker Information (if applicable)
  
- 9 \_\_\_\_\_ Hold and Recall Information

**\*SPA and all related documents must be mailed to PO Box 659 Butner, NC 27509-0659 or Street Address 2582 W. LyonStation Road, Creedmoor, NC 27522.\***

**NATIONAL PROCESSING AGREEMENT (NPA)**  
**STATE PARTICIPATION AGREEMENT (SPA)**

---

This Agreement is subject to the terms and conditions set forth in the National Processing Agreement made by and between the U.S. Department of Agriculture, Food and Nutrition Service and \_\_\_\_\_ (Processor).

\_\_\_\_\_ (Processor) duly attests that no alterations have been made to the ACDA Core State Participation Agreement (SPA).

**State Distributing Agency:** NCDA & CS Food Distribution    **Processor:** \_\_\_\_\_

**Name:** Gary W. Gay    **Federal EIN:** \_\_\_\_\_

**Title:** Director Food Distribution    **Name:** \_\_\_\_\_

**Address:** P.O. Box 659    **Title:** \_\_\_\_\_

**City, State, Zip:** Butner, NC 27509-0659    **Address:** \_\_\_\_\_

**Contact:** Tysha Sherard    **City, State, Zip:** \_\_\_\_\_

**Phone:** 919-575-4490    **Contact:** \_\_\_\_\_

**Fax:** 919-575-4143    **Phone:** \_\_\_\_\_

**E-mail:** Tysha.Sherard@ncagr.gov    **Fax:** \_\_\_\_\_

**Web Address:** www.ncagr.gov    **E-Mail:** \_\_\_\_\_

**Web Address:** \_\_\_\_\_

**Signature:** \_\_\_\_\_    **Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_    **Date:** \_\_\_\_\_

---

**Period of Agreement:** This Agreement shall become effective on July 1, 20<sup>14</sup> and will terminate on or before June 30, 20<sup>15</sup> pursuant to USDA Policy Memorandum FD-048 (Maximum of 5 years). Additionally, the SPA may be amended as necessary should any of the information change during the agreement period. This Agreement shall not be amended except by a written agreement signed by the parties hereto.

**Agreement Termination:** This agreement may be terminated by either party upon 30 days written notice. Disposition of the USDA Foods inventory shall be in accordance with Article 20 of the National Processing Agreement.

**Hold/Recall Contact Information:** At a minimum, the State and processor must provide each other with the following hold and recall contact information:

***Primary point of contact***

- Name: Tony Wilkins
- Telephone number: 919-575-4490
- Mobile phone number: 919-368-9629
- Fax number: 919-575-4143
- Email address: Tony.Wilkins@ncagr.gov

***A back-up contact if the primary is unavailable***

- Name: Gary Gay
- Telephone number: 919-575-4490
- Mobile phone number: 919-691-0006
- Fax number: 919-575-4143
- Email address: Gary.Gary@ncagr.gov

**1. Value Pass Through Systems.** State Agency will indicate which value pass through systems are acceptable in their State. Processor will indicate which value pass through systems they desire to use in the State and have been approved by USDA in the NPA (National Processing Agreement).

Permitted By State	Value Pass Through System	Selected by Processor
✓	Direct Sale	
✓	Refund to Recipient Agency	
✓	Net Price Through Distributor (NOI)*	
✓	Alternate Value Pass Thru System* (requires FNS approval)	
✓	Fee for Service – billed by processor	
✓	Fee for Service – billed by distributor	

**\*Sales Verification Required – MUST submit sales verification plan along with SPA**

***If sales verification is required, check one:***

State delegates sales verification to the processor [see 7 CFR 250.19(2)(vi)(C)]

***Processor should submit their Sales Verification Plan to the State Agency.***

State will conduct sales verification

**2. Summary End Product Data Schedules (SEPDS).** Processor will submit SEPDS to State with the completed State Participation Agreement. The SEPDS contains summary information from approved EPDS and a master SEPDS approved by USDA. Processor may select specific EPDS for processing in a given State. The State also has the option to accept or reject individual products listed on the SEPDS and, in the case of multiple USDA Foods available for processing, may accept or reject certain USDA Foods for processing.  
Note: the case weight listed on the SEPDS **MUST** match the label on the finished case.

Do you use a subcontractor for the production of any items covered in this agreement?  Yes  No

If yes, please identify the subcontractor by name, address, USDA plant number, and each item produced.

---

---

---

Processor must provide written notification to the State Agency of any change(s) to the SEPDS including the nature of the change(s); notification may be made electronically.

**3. CN Labeling.** Products, which contribute toward the school meal pattern requirements, may qualify for CN labeling. State should check those that apply.

- CN Labeling is optional. Recipient Agencies may request CN labeled products.
- CN Labeling is required, if applicable, for the processed product.
- Submit CN labels with SEPDS.

**4. Nutritional Information.** Recipient Agencies need nutritional information to comply with USDA regulations. State should check those that apply:

- Processor must provide nutrition information to RA upon request.
- Processor's nutrition information has been submitted to USDA Database.
- Processor's nutrition information is available on their web site.

(Provide the web address) \_\_\_\_\_

- Processor must submit nutrition information with the SEPDS

**5. Grading.** Red Meat grading will be performed under (check one)

- Full Certification per AMS Instruction MGC 640 (formerly known as Option 2 grading)
- PCCP per AMS Instruction MGC 638

**6. By products.** If by products are produced, describe method of valuation and credit.

---

---

---

**7. List of Eligible Recipient Agencies.** State will provide a list of eligible Recipient Agencies to the processor upon State approval of the State Participation Agreement.

**8. Backhauling of USDA Foods.** If backhauling is permitted, processor must notify the State before backhauling products. Please check those that apply.

State permits backhauling  Yes  No

Backhauling permitted from State Warehouse  School District

State requires attached form for requesting approval to backhaul Yes No

**9. Special Instructions for Delivery of End Product to Designated Delivery Locations:**

---

---

---

**10. Electronic Receipting for USDA Foods (FD-062)**

Processor must register on the USDA's Web Supply Chain Management (WBSCM) or other applicable USDA system(s). Please register immediately after receiving business partner identification number.

Processor is required to enter all shipment receipts within three business days of delivery, using the Web Supply Chain Management (WBSCM) Shipment Receipt Function. (USDA FD Memo-062).

**11. Additional State Requirements.**

- Processor must register on the USDA’s Web Supply Chain Management (WBSCM) or other applicable USDA systems. Please register immediately after receiving business partner identification number. After the creation of a new Business Partner-ID the processor must notify the state of their new BP-ID number who will then contact [WBSCM-Ship-To@fns.usda.gov](mailto:WBSCM-Ship-To@fns.usda.gov) in order to be mapped to the new destination. For our use NCDA will require a Destination Data Form (FNS-7) whenever a new location is added.
- Complete chart below in its entirety. If adding a new address please submit a destination data form along with the SPA.

WBSCM Material No.	Commodity Code (Old)	Shipping Address	WBSCM BP-ID # (Ship-To #)

- Processor will provide ending inventory balances to recipient agencies at a minimum on a monthly basis.
- The State Participation Agreement (SPA) may be terminated immediately at the option of the DA for noncompliance of its terms and conditions by the processor or if any right in favor of the DA is threatened or jeopardized by the Processor and/or his agent. This SPA may be terminated by either party upon 30 days written notice to the other. Disposition of DF inventory, either physical or book, with Processor or payment of value thereof shall be based on Article 20 the National Processing Agreement.
- All paperwork must be sent to the attention of the appropriate person as instructed from this office. Monthly Performance Reports and SEPDS are to be sent to **Tysha Sherard**.
- NCDA & CS FDD **does not accept Monthly Performance Reports or SEPDS by fax**. Both these documents contain many numbers, often in small font, and are difficult to read by fax. Faxed SEPDS or Performance Reports will be discarded without being reviewed. These items may be submitted either as a hard copy by mail or else by e-mail if the processor has the capability of including an electronic signature with the reports submitted via e-mail. Exceptions may be made for certain conditions, but prior approval to fax these items must be obtained to ensure their review and approval. Lateness of reports is not an acceptable exception.

Processor will provide NCDA&CS with **Broker** information, if applicable:

**Broker Name:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip Code:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Web Address:** \_\_\_\_\_

**\*Processor will update SDA with broker changes**

**Hold/Recall Contact Information**

State Agency: **NCDA&CS Food Distribution Division**

***PROCESSOR HOLD AND RECALL CONTACT INFORMATION***

Name of Processor: \_\_\_\_\_

**Primary Contact**

Name: \_\_\_\_\_

Office Telephone Number: \_\_\_\_\_

Mobile Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Back-up Contact**

Name: \_\_\_\_\_

Office Telephone Number: \_\_\_\_\_

Mobile Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

***PLEASE COMPLETE AND RETURN ALONG WITH THE SPA AND NOTIFY THE STATE AGENCY IMMEDIATELY AS CHANGES OCCUR***