



**TEXAS DEPARTMENT OF AGRICULTURE  
SPECIALTY CROP BLOCK GRANT PROGRAM  
GOOD AGRICULTURAL PRACTICES (GAP)  
CERTIFICATION ASSISTANCE PROGRAM**

TODD STAPLES, COMMISSIONER

**APPLICATION INSTRUCTIONS**

- The Good Agricultural Practices (GAP) program is a cost-share/reimbursement program designed to assist Texas specialty crop industry producers with the cost of a GAP food safety audit.
- Funding for this program is provided by the United States Department of Agriculture- Agricultural Marketing Service (USDA-AMS) Specialty Crop Block Grant Program.
- The Texas Department of Agriculture (TDA) will pay **up to \$750** of the cost of having USDA, or a qualified private auditing company, conduct third party audit(s) to verify an establishment's food safety program.
- Reimbursement is limited to the cost of the audit or \$750, whichever is less, per operation for audits passed after successful completion of GAP Food Safety Training. Participating growers will be responsible for paying any balance due above \$750.
- TDA will only reimburse for audits of approved specialty crops, including, but not limited to, citrus, lettuce, pecans, peppers, spinach, onions and tomatoes. A list of approved crops can be found on USDA-AMS's website, [www.ams.usda.org](http://www.ams.usda.org).
- TDA will begin accepting applications on **November 15, 2010**.
- Funds are available on a **first-come, first-serve basis** until funds are depleted. Applications must be complete and have all required documentation to be considered. Applications missing documentation, or otherwise deemed incomplete, will not be considered for funding until sufficient information has been received by TDA.
- To apply for a partial reimbursement of certification costs, you must complete the Good Agricultural Practices (GAP) Certification Assistance Program Application (ER-120) and have a Texas Payee Identification Number.
- If you do not already have a Texas Payee Identification Number, you will need to submit a Texas Application for Payee Identification Number (AP-152) along with the reimbursement application.
- An applicant must be a Texas-based producer of specialty crops.
- Applications must be notarized.
- If you are applying for reimbursement of more than one audit a separate application must be completed for each audit performed.
- Applications should be mailed to:

**Mailing Address:**

Texas Department of Agriculture  
External Relations Division  
Specialty Crop Audit Reimbursement - *or* -  
P.O. Box 12847  
Austin, Texas 78711

**Physical Address:**

Texas Department of Agriculture  
External Relations Division  
Specialty Crop Audit Reimbursement  
1700 N. Congress Avenue  
Austin, Texas 78701

Voice: (512) 463-6908 or (800) 835-5832 ♦ Fax: (888) 223-9048 ♦ [Grants@TexasAgriculture.gov](mailto:Grants@TexasAgriculture.gov)

Hearing Impaired: (800) 735-2988 ♦ [www.TexasAgriculture.gov](http://www.TexasAgriculture.gov)



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[FOR TDA USE ONLY]	
File No.	_____
Date Received:	_____
Date Approved:	_____

**APPLICATION FORM**

**ER-120**

**APPLICATION CHECKLIST**

**REQUIRED:**

- Form ER-120
- Copy of certificate showing a successfully completed and passed third party GAP audit
- Copy of "paid" invoice from the auditing company showing the total cost of service
- Certificate showing completion of Texas AgriLife Extension Service Good Agricultural Practices (GAPs) Food Safety training
- Form W-9
- Payee Identification Number Application if the organization has not received any payments from the State of Texas

**OPTIONAL:**

- Direct Deposit Form for electronic deposit of grant payments.

**SECTION 1 – BUSINESS CONTACT INFORMATION – Print or type the following information.**

Full legal business name (owner's name if sole proprietor – no aliases) *(Must match name on Form W-9)*

D.B.A. (if applicable)

Type of Operation (check all that apply):  grower  packer  handler

Type of Business  Corporation  Limited Liability Co.  Limited Partnership  General Partnership  
(check one):  Sole Proprietorship  Cooperative  Other (specify) \_\_\_\_\_

Federal Identification Number *(must be (9) nine digits)* *( Must match Tax Payer Identification number on Form W-9)*

Social Security Number (if sole proprietor)

**APPLICANT - Responsible Officer, Partner, Manager or Owner**

*Please list the full legal name (no aliases or nicknames) of the primary person responsible for the business.*

First Name	Last Name	<input type="checkbox"/> Mr.	<input type="checkbox"/> Dr.
		<input type="checkbox"/> Ms.	<input type="checkbox"/> Other _____
Mailing Address	City	State	Zip
			County
Business Phone ( ) -	Cell Phone ( ) -	E-mail Address	

**SECTION 2 – PRIMARY CONTACT INFORMATION** – (if different from applicant)

*This person can answer day-to-day questions about the organization.*

Same As Above

First Name of Contact (if different from applicant)	Last Name of Contact	<input type="checkbox"/> Mr.	<input type="checkbox"/> Dr.
		<input type="checkbox"/> Ms.	<input type="checkbox"/> Other _____
Contact E-mail Address	Contact phone number ( ) -		

**SECTION 3 – GAP AUDIT INFORMATION**

1. Does the company have more than one specialty crop producing location? (If yes, provide the number of locations) i.e. another location not covered by the audit referenced in this application.	<input type="checkbox"/> Yes <input type="checkbox"/> No #: _____
2. Of those specialty crop producing locations, how many GAP audits were performed for the operation listed in this application?	#: _____
3. How many acres were included in the audit referenced in this application?	#: _____ acres
4. Did the applicant participate in GAP and GHP training offered by Texas AgriLife Extension Service?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Did the applicant successfully complete and pass a third party GAP audit?	<input type="checkbox"/> Yes <input type="checkbox"/> No

6. List the types of specialty crops that were included in the audit? (Example: spinach and onions)

\_\_\_\_\_

7. Third-party GAP audit was conducted for the following areas:

- Farm Review                       Traceback  
 Field Harvest and Field Packing     Water Test(s)  
 Storage and Transportation  
 Other (specify) \_\_\_\_\_

8. Please provide the physical street address of location that was audited, use EMS address for rural routes.

Address			
City	State	Zip	County

9. GAP audit(s) were performed by: (Please check one)

**USDA** -- Provide the date that the audit was completed?      /      /  
    mm dd yyyy

- OR -

**Private Company** -- Provide the date that the audit was completed?      /      /  
    mm dd yyyy

**Please provide the contact information of the person that conducted the audit.**

Name of company	Name of contact person			
Main Address	City	State	Zip	
Phone ( ) -	Fax ( ) -	Email of contact person		

**SECTION 4 – REQUIRED SUPPORTING DOCUMENTATION**

Producers applying for Good Agricultural Practices Third Party Audit funds must provide TDA with the following information regarding your audit:

- **Copy of certificate showing a successfully completed and passed third party GAP audit;**
- **Copy of “paid” invoice from the auditing company showing the total cost of service; and**
- **Copy of certificate showing completion of Texas AgriLife Extension Service GAP and GHP Food Safety Training.**

Applications submitted without documentation to support third party GAP audit will be returned and no grant will be awarded. If information provided is not adequate, TDA may require additional information or documentation.

**SECTION 5 – PRODUCER CERTIFICATIONS**

By signing below, applicant:

- (1) certifies that all information provided in connection with this application is true and correct;
- (2) acknowledges that any misrepresentation or false statement made by applicant or an authorized agent of applicant in connection with this application, whether intentional or not, will constitute grounds for denial of this application and may be the subject of substantial civil and/or criminal liability and sanctions;
- (3) acknowledges that acceptance of funds in connection with this application acts as acceptance of the authority of the Texas Department of Agriculture (TDA), or any successor agency, the State Auditor’s Office (SAO), or any successor agency, the U.S. Department of Agriculture (USDA), the Office of the Inspector General (OIG), and/or the Comptroller General of the United States (CGUS) to conduct an investigation in connection with those funds, and applicant further agrees to cooperate fully with TDA or its successors, SAO or its successor, USDA, OIG and/or CGUS in the conduct of the audit or investigation, including allowing TDA, SAO, USDA, OIG, and/or CGUS to inspect applicant’s premises and providing all records requested during the grant period and for at least three years after the grant has terminated; and
- (4) acknowledges, if applicant is an individual, that this application and any payments owed to applicant in connection with this application may be denied due to delinquency in payment of a guaranteed student loan and for failure to pay child support. The person signing this application certifies that he or she is authorized to submit this application and to make the preceding certifications and acknowledgements on behalf of applicant.

**Notice of Penalties: The penalty for knowingly making false statements or false entries, or attempts to secure money through fraudulent means, may include fines and/or incarceration and/or forfeiture of funds.**

**SECTION 5 - PRODUCER/AGENT SIGNATURE**

<b>X</b> _____	/ /
PRINTED NAME:	<b>DATE</b> mm dd yyyy

State of Texas  
 County of \_\_\_\_\_  
 SWORN TO AND SUBSCRIBED before me on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
 Notary Public, State of Texas

NOTARY SEAL

Notary’s printed name: \_\_\_\_\_  
 Notary’s commission expires: \_\_\_\_\_

This application becomes public record and is subject to disclosure. With few exceptions, you have the right to request and be informed about the information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. (Reference: Government Code, Sections 552.021, 552.023, and 559.004.)