



United States Department of Agriculture

Agricultural Marketing Service, Specialty Crops Program, Specialty Crops Inspection Division

Instructions for Submittal of the Specialty Crops Inspection (SCI) Division Vendor Form for Audit Services

Beginning October 1, 2018, all applicants choosing to have a USDA GAP audit, performed by one of the USDA/AMS state departments of agriculture, will receive two bills for the audit service – one from the state and one from USDA.

The applicant must follow the following steps to set up or update their account with the USDA billing office. While the form may be submitted at any time prior to the audit, the applicant should submit it, at a minimum, within five business days after the completion of the audit.

1. Complete the [SCI Division Vendor Form SC-430](#). See the attached example for how to complete the form.
2. Send the form to SCI Division Audit Services Branch (ASB) using one of the following methods:
 - a. Email to SCReimbursement@ams.usda.gov
 - b. Fax to 866-230-9168
 - c. Mail to:

USDA, AMS, SCI, ASB
1400 Independence Avenue, SW
Stop 0247, Room 0707-S
Washington, DC 20250-0247

Please note that, while the bill will not be issued until after certification or audit documentation is completed, failure to set up an account or to pay either the state or USDA bill will be reason to cancel the USDA GAP certification.



**SPECIALTY CROPS INSPECTION DIVISION
VENDOR FORM**

TO BE FILLED OUT BY THE ORIGINATING OFFICE

CHECK ONE: NEW APPLICANT UPDATING EXISTING APPLICANT INFORMATION

DATE:	PACA LICENSE NUMBER:		
October 1, 2018	N/A		
ORIGINATING OFFICE (include office # and state):	APPLICANT NUMBER (IF NEW LEAVE BLANK):		
N/A			
APPLICANT NAME:	CONTACTS:		
John Smith Farm and Market	John Smith		
ADDRESS (STREET ADDRESS REQUIRED):	CITY	STATE:	ZIP:
123 Farm and Market Road	Anywhere	NY	12345
BILLING ADDRESS (IF DIFFERENT THAN STREET ADDRESS):	CITY:	STATE:	ZIP:
P.O. Box 123	Anywhere	NY	12345
DOING BUSINESS AS (Use this section if certificate recipient is different to the person above):			
PHONE:	FAX:		
100-222-3456	100-222-3457		
EMAIL:	TAX ID NUMBER (REQUIRED):		
johnsmith@farmandmarket.com	10-12345		
<input checked="" type="checkbox"/> SCENARIO A: AN APPLICANT THAT IS NOT LISTED IN THE FEIRS/BIIS GLOBAL LIST OF APPLICANTS. <input type="checkbox"/> SCENARIO B: AN APPLICANT THAT IS LISTED IN THE GLOBAL FEIRS/BIIS DATABASE, BUT DOES NOT HAVE AN ACCOUNT NUMBER FOR THE LOCAL OFFICE.			
APPLICANT WILL BE A:	DATE SENT TO SERVICE CENTER OR BILLING STAFF:		
<input checked="" type="checkbox"/> BILLING <input type="checkbox"/> COD	September 28, 2018		

TO BE FILLED OUT BY SERVICE CENTER OR BILLING STAFF

DATE RECEIVED:	FMMI NUMBER:
APPLICANT NUMBER GENERATED (LIST NUMBER HERE):	NOTES:
	For audit services, submit the form via one of these methods: - by email to SCReimbursement@ams.usda.gov - by fax to 866-230-9168 - by mail to: USDA, AMS, SCI, ASB 1400 Independence Avenue, SW Room 0707-S, Stop 0247 Washington, DC 20250-0247
DATE ENTERED INTO FEIRS/BIIS & FMMI:	
DATE ORIGINATING OFFICE NOTIFIED APP. IS IN FEIRS/BIIS & FMMI:	