



Audit checklist Agriculture Cattle (regular audit)

Audit details			
Scheme participant			
QS locations audited			
Additional location information, e.g. coordinator or identification number			
Name of contact			
Regular audit	Initial audit		Follow-up audit
Unannounced regular audit	Yes		No
Random sample audit			
Audit of special purpose			
Parallel audit			
Date of audit (from)		Date of audit (until)	
Start of audit (hh:mm)		End of audit (hh:mm)	
Audit duration (hh:mm)			
Combined audit (norm/standard/programme)			
Certification body			
First name/surname of auditor			
Repeated D evaluation/general K.O.		Remark repeated D evaluation/general K.O.	
Comments			
Preliminary audit result		Number of agreed corrective actions	

Place, date

Signature/s of auditor/s

I hereby confirm the data concerning the company and the audit.

I have received a copy of the audit report (at least front page) and of the corrective actions report.

Place, date

Signature of person responsible

Company details - Cattle farming

Name of company	
Street and house number	
Postal code and town	
Telephone/fax number	
Email address	
QS location number (VVVO-No.)	
Registered production scope no.	
QS identification number	
Name of person responsible	
Name of coordinator	

Scope - Cattle farming (#mandatory;##including outdoor access or open-front-stables: valid for production scope 1002; Number of places = maximum number of places that can be used)

Production scope	Production number	Indoor [#]	Number of places	Outdoor ^{##}	Number of places
Cattle farming					
Cattle production	1001				
Calf production	1002				
Calf breeding	1004				
Dairy farming	1008				
Suckling cow production	1016				

Additional information - Cattle farming

	yes	no
On farm mixer (production of own feed materials and compound feedstuff)		
Use of commercial mobile feed milling and mixing plants		
Transport (own animals, own vehicles)		
Transport less than 50 km		
Transport less than 60 km		
Transport over 65 km		



Qualitätssicherung. **Vom Landwirt bis zur Ladentheke.**





Company: _____

Date: _____

Requirement no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
<p>* = For this requirement the evidence or measurement tool used for evaluation of compliance with the QS requirement must be documented, regardless of the outcome of the assessment.</p>										
2 General requirements										
2.1 General system requirements										
2.1.1	1	C	D=K.O.	General company data						
2.1.2	1	C		Implementation and documentation of self-assessment *						
2.1.3	1	C		Fulfillment of measures of the self-assessment						
2.1.4	1	C		Incident and crisis management						
a 3 Livestock production requirements										
a 3.1 Traceability and labelling										
a 3.1.1	1	C		Operational purchases and incoming goods						



Require- ment no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
a 3.1.2	1	C	D=K.O.	Marking and identification of livestock						
a 3.1.3	1	C	D=K.O.	Origin and marketing *						
a 3.1.4	1	C	D=K.O.	Stock records *						
a 3.2 Animal welfare farming										
a 3.2.1	1	C	D=K.O.	Monitoring and care of livestock *						
a 3.2.2	1	C	D=K.O.	General farming requirements *						
a 3.2.3	1	C	D=K.O.	Handling sick and injured animals *						
a 3.2.4	1	C		Shed floor						
a 3.2.5	1	C		Shed climate, temperature, noise pollution, ventilation						
a 3.2.6	1	C		Lighting *						
a 3.2.7	1	C	D=K.O.	Space allowances *						
a 3.2.8	1	C	D=K.O.	Alarm system *						



Require- ment no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
a 3.2.9	1	C		Emergency power generator						
a 3.2.10	1	C		Livestock transport						
a 3.2.11	1	C		Transportability						
a 3.2.12	1	C		Requirements on loading and unloading equipment for livestock transport						
a 3.2.13	1	C	D=K.O.	Handling livestock during loading						
a 3.2.14 R	1	C		Dehorning of calves*						
a 3.3 Feed and feeding										
a 3.3.1	1	C	D=K.O.	Feed supply *						
a 3.3.2	1	C		Hygiene of feeding facilities						
a 3.3.3	1	C		Feed storage						
a 3.3.4	1	C	D=K.O.	Feed procurement *						
a 3.3.5	1	C		Assignment of compound feed deliveries (bulk) to location numbers						



Require- ment no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
a 3.3.6	1	C		Feed production (on-farm mixer)						
a 3.3.7	1	C		Feed production in cooperation					X	
a 3.3.8	1	C	D=K.O.	Use of mobile feed milling and mixing plants						
a 3.4 Drinking water										
a 3.4.1	1	C	D=K.O.	Water supply *						
a 3.4.2	1	C		Hygiene of drinking facilities						
a 3.5 Animal health/medication										
a 3.5.1	1	C		Care contract with farm veterinarian						
a 3.5.2	1	C	D=K.O.	Implementation of the stock care *						
a 3.5.3	1	C	D=K.O.	Procurement and application of medicines and vaccines						
a 3.5.4	1	C	D=K.O.	Storage of medicines and vaccines *						
a 3.5.5	1	C	D=K.O.	Identification of treated livestock						



Require- ment no.	Factor	Filter-1		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
a 3.6 Hygiene										
a 3.6.1	1	C		Buildings and equipment						
a 3.6.2	1	C		Hygiene on the farm						
a 3.6.3	1	C		Handling litter, dung and feed leftovers						
a 3.6.4	1	C		Carcass storage and pick- up *						
a 3.6.5	1	C		Pest monitoring and control *						
a 3.6.6	1	C		Cleaning and disinfection measures						
a 3.7 Monitoring programme										
a 3.7.1 R	1	C		Fattening calves: residue control program						
a 3.8 Livestock transport										
a 3.8.1	1	C		Requirements for transporting own livestock with own vehicles					X	
a 3.8.2	1	C		Requirements for the means of transportation					X	



Requirement no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D/ K.O.	E	Comments/corrective action number
a 3.8.3	1	C	D=K.O.	Available space during livestock transport *					X	
a 3.8.4	1	C		Cleaning and disinfection of means of transportation					X	
a 3.8.5	1	C		Delivery documents					X	
a 3.8.6	1	C	D=K.O.	Time intervals for feeding and watering as well as duration of transportation and resting times (for livestock transport over 50 km)					X	
a 3.8.7	1	C		Transport papers (for livestock transport over 50 km)					X	
a 3.8.8	1	C	D=K.O.	Proof of qualification for drivers/carers (for livestock transport over 65 km)					X	
g II VLOG-Additional Module										
g II.1 Requirement (only relevant for locations registered for VLOG-Additional Module)										
g II.1.1	0	C		Requirement "ohne Gentechnik"						



Company: _____

Date: _____

Requirement no.	Factor	Filter ¹		Criterion/ requirement	A	B	C	D	E	Comments/corrective action number
* = For this requirement the evidence or measurement tool used for evaluation of compliance with the QS requirement must be documented, regardless of the outcome of the assessment.										
e I regional windows										
e I.1 Requirement (only relevant for locations registered for Regionalfenster via their coordinator)										
e I.1.1	1			Identification of regional goods						
e I.1.2	1			Marking of delivery documents						

Company: _____ Date _____

Calculation of audit result

1. Balance of subtotals

Calculation	A	B	C	D	E
(1) Number of evaluations					9

Sum of evaluations (excluding E evaluations)	
---	--

2. Calculation of the proportion of C and D evaluations*

Proportion of C evaluations		(Number of C evaluations / sum of evaluations) * 100
Proportion of D evaluations		(Number of D evaluations / sum of evaluations) * 100
Proportion of C and D evaluations		Proportion of C + proportion of D

3. Preliminary audit result

	Percentage of C evaluations	Percentage of D evaluations	Percentage of C+D evaluations	Audit result
<p>*Status I: If the 5 % target is exceeded, status I will still be assigned if there is only one C-evaluation.</p> <p>**Status II: If the percentage with regard to the proportion of D evaluations is exceeded, status II is assigned if only one D evaluation exists and no C evaluation</p>	max. 5,0%	0,0%		QS-Status I*
	max. 10,0%	max. 3,0%	max. 10%	QS-Status II**
	max. 20%	max. 10%	max. 20%	QS-Status III
Number of K.O.	Percentages exceeded			Audit not passed.
	K.O.	Audit not passed.		
	General K.O./ repeated D evaluation	Audit not passed.		



Qualitätssicherung. Vom Landwirt bis zur Ladentheke.



Company:

Date:

Corrective actions report

I hereby confirm that the following corrective actions were agreed upon between me and the auditor.

The certification body is to be informed no later than the expiry of the deadline set out in the action plan about the implementation of a corrective action.

Place, date

Signature/s of auditor/s

Signature of person responsible

Serial no.	Requirement No.	Evaluation (C, D/K.O.)	Description of nonconformity	Agreed corrective actions	Scope (CGF,C,P)	Deadline for correction
1						
2						
3						
4						
5						
6						
7						
8						



Qualitätssicherung. Vom Landwirt bis zur Ladentheke.



Company:

Date:

Review of the implementation of corrective actions

Place, date

Signature/s of auditor/s

Serial no.	Implemented	Not implemented	Comments (if any)	Date
1				
2				
3				
4				
5				
6				
7				
8				