



North Shore Economic Vitality Partnership
PO Box 1069
Hanapepe, HI 96716-1069
nsevp.org

Hawai'i GroupGAP Application for Food Hubs & Aggregators

Applicant Information

Applicant Name (Primary Contact): _____

Food Hub Name (to be listed on food safety documents): _____

Cell Phone: _____ Office Phone: _____

Email: _____ Website: _____

Food Hub Physical Address: _____

City: _____ Zip Code: _____ - _____

Food Hub Mailing Address (if same as physical address): _____

City: _____ Zip Code: _____ - _____

Do you have access to a computer and the internet? Yes No

If yes, are you comfortable communicating via email? Yes No

Do you have access to a smartphone? Yes No

Please rate yourself on your timeliness in response to requests and questions:

I need reminders, I respond in a few days, I respond right away

Please Note: Google applications will be utilized in a variety of ways during the cohort. If you are unable to access Google applications using your primary email address, you will be required to set up a Gmail account for this purpose.

Food Hub Information

Do you own or lease the building where aggregation operations take place?: Own Lease

Building Total square feet: _____

How many produce farms do you currently aggregate products from? _____

What types of crops are you currently sourcing though your supplier farms?

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Do you aggregate or hold any products other than raw fruits and vegetables? Yes No

If yes, indicate the other products your hub aggregates, holds, and/or distributes:

Eggs, Meats (including poultry), Fish/ Shellfish, Dairy products, Honey, Value-added products, Other: _____

How many pounds of product have you sold in the last 3 months? _____ Pounds

How many pounds of product have you sold in the last year? _____ Pounds

How long have you been aggregating produce? _____ Years _____ Months

Does your operation have insurance? Yes No

If yes, what type of insurance/ coverage?: _____

Number of Employees: _____ Full-time, _____ Part-time, _____ Non-Compensated (Family, owners, etc.)

What language(s) do you and your workers speak at the food hub? _____

If needed, do you have access to a translator to help you in this program? Yes No N/A

Produce Supplier Practices:

Which of the following practices does your aggregation facility look for when onboarding new produce suppliers?

Non-certified but practicing organic, Certified Organic, Fair Trade, Chemical free,
 Certified USDA Good Handling Practices (GHP), Certified Naturally Grown,
 Integrated Pest Management, Certified USDA Good Agricultural Practices Certified (GAP),
 Other, please list: _____

Please check the types of records a supplier is required to keep to be eligible to supply your aggregation facility: Traceability records, Pesticide application, Delivery records, Harvest records,
 Cleaning and sanitation records Restroom cleaning, Water quality records, None,
 other, please list: _____

Do you make an initial site visit to supplier farms? Yes No

If yes, do you make any follow-up site visits to supplier farms? Yes No

If yes, how often? _____

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Please describe the minimum infrastructure requirements a farm must meet to be accepted as a supplier.
For example: do you require supplier farms to have on-site restrooms, handwashing stations, cold storage, transportation for delivery to your facility, etc.

Infrastructure:

Does the food hub have a restroom on site for workers to use? Yes No

Are handwashing facilities with clean, potable (drinking water quality) water available to all workers in the areas where they work? Yes No

What is your food hub's water source?

Municipal (county), Surface water (ditch), Well, Catchment

Sales:

Check the box that corresponds to your annual gross sales: \$10,000 or less, \$10,000- \$25,000, \$25,000- \$50,000, \$50,000- \$75,000, \$75,000- \$100,000, \$100,000- \$150,000, Over \$150,000

Where are you currently selling your produce?

Mobile retail (roadside), K-12 Schools, Food processors, Farmers Markets, Online sales, Restaurants/Caterers, Distributors, Small local grocery stores, Supermarkets, Food Hubs, CSA, Hospitals, Other (Please describe): _____

Do you intend to expand so that you can sell your product to other institutional markets, such as hospitals and/or schools? Yes No

Food Safety

Which of the following records does your food hub maintain?

Supplier farm information, Delivery logs, Cleaning and sanitizing, Pest control, Sales, Employee training, Temperature logs, Traceability records, Other (please specify): _____

Please Note: Digital recordkeeping via HeavyConnect is strongly preferred. Participants using HeavyConnect will receive a discount. As a Hawai'i GGAP Member you will be set up with an individual recordkeeping account for all required HarmonizedGAP/+ records.

Have you had any food safety training? Yes No

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Do you currently have written procedures or a food safety plan in place? Yes No

If Yes, please highlight what is included in your food safety plan or SOPs:

Is there a demand for food safety certification in your current market(s)? Yes No

Do you anticipate you will need food safety certification in the next few years? Yes No

Are any of your buyers requesting the following (check any that apply):

- Traceability or recall plan, Written food safety plan or SOPs, Food safety certification,
- Water quality analysis, Microbial Testing.

How do you see your business changing over the next 5 years with food safety certification? Please describe.

Where or how did you hear about North Shore EVP?

Social Media:

Do you use social media to advertise your farm? Yes No

If yes, what do you use? Facebook ____ Instagram ____ Other ____

If you will share your social media account name(s) with us, please include here:

Facebook: _____

Instagram: _____

Other: _____

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Additional Questions or Comments

Do you have any questions for us or any additional information about your operation you'd like us to know?

Please send completed applications to info@nsevp.org