## **DRAFT**

[Company Name] and [State Regulatory Agency] agree to participate in the voluntary NCIMS HACCP Program per the provisions provided in Appendix K of the current PMO. Both parties agree to provide the necessary resources to successfully implement and enforce the voluntary program. Industry and regulatory personnel shall be trained per the requirements in Appendix K.

Should either party determine that they can no longer support the program, enforcement shall revert back to the traditional program.

The initial HACCP listing audit may commence once [Company Name] has generated 60 days of the required NCIMS HACCP records.

We hereby agree to and submit this agreement knowingly and voluntarily to participate in the NCIMS HACCP Program.

State Rating Program Administrator	[Title of Most Responsible]
[State Regulatory Agency]	[Company Name]
Date	Date