**SHELLFISH PURCHASE RECORD**:

COMPANY NAME: Dealer Certification Number: OR SP or SS

COMPANY ADDRESS:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Shipping Date & Time\* | **ShipperCert #** | **Original Harvest Area** | **ReceivingPurchase Date & Time** | **Received Iced or**  **≤ 45°**  **ambient\*** | **Properly tagged**  **Y/N** | **Quantity, Product**  **And/or**  **Lot #** | **Documentation ≤ 50° internal prior to shipping**  **Y/N\*** | **Corrective Actions Taken** | **Receiving employee**  **initials** |
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Signature of person performing weekly records review: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of person performing weekly records review: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\* Indicates new record keeping requirement