



APPLICATION FOR PRODUCE SAFETY RULE QUALIFIED EXEMPTION

Requirements for Qualified Exemption as defined in 302 KAR 60:010. Section 4 and 21 CFR §112.5:

Both of the following requirements must be met. Please complete both pages.

- A. During the previous 3-year period preceding the applicable calendar year, the average annual monetary value of **food*** (as defined in Sec.112.3) the farm sold directly to **qualified end-users*** (as defined in Sec 112.3) during such period exceeded the average annual monetary value of the food the farm sold to all other buyers during that period:

**The term "food" means (1) articles used for food or drink for man or other animals, (2) chewing gum, and (3) articles used for components of any such article.*

**Qualified end-users, with respect to a food, means the consumer of the food (where the term consumer does not include a business); or a restaurant or retail food establishment (as those are terms are defined in § 1.227) that is located:*

- 1) In the same state or the same Indian reservation as the farm that produced the food; or*
- 2) Not more than 275 miles from such farm*

AND

- B. The average monetary value of all food (as defined in Sec.112.3) the farm sold during the 3-year period preceding the applicable calendar year was less than \$500,000, adjusted for inflation

Name of Applicant: _____ Phone: _____

Mailing Address: _____
Street City State Zip Code

Name of Farm: _____ Email: _____

Farm Address: _____
Street City State Zip Code

➤ Is your farm registered as a legal entity with the Secretary of State? Yes ☐ No ☐

Please indicate which crops are grown, packed, harvested, or held on your farm?

___ Kale, head lettuce, leafy greens	___ Peppers	___ Onions
___ Cucumbers	___ Cantaloupes	___ Other _____
___ Tomatoes	___ Honey Dew Melons	

Where do you sell your produce? _____

Produce Safety Alliance Grower Training Completion Date (required under 302 KAR 60:010): _____

Applicant Signature: _____ Title: _____ Date _____

By signing this form, I attest that this information is accurate for my operation and I meet all qualifications for Qualified Exemption. I will notify the Kentucky Department of Agriculture if my farm is no longer eligible for a Qualified Exemption, so that any requirements can be reassessed to ensure continued compliance with the Produce Safety Rule.

QUALIFIED EXEMPTION WORKSHEET

Please complete this worksheet and send it in with the Qualified Exemption application.
To be Eligible for a Qualified Exemption: 'A' is less than 'B' AND 'C' is more than 'D'

Total food sales (in addition to produce, these sales include all other food for humans, feed for animals, and sales of live food animals)

Year 1 (Sales year: _____) \$ _____

Year 2 (Sales year: _____) \$ _____

Year 3 (Sales year: _____) \$ _____

Average total food sales \$ _____ **A**

Inflation adjusted¹ threshold for (range) \$ 665,947 **B**

Sales to qualified end users (QEUs) (e.g. consumers anywhere, or grocery stores and restaurants within 275 miles or within the same state)

Year 1 (Sales year: _____) \$ _____

Year 2 (Sales year: _____) \$ _____

Year 3 (Sales year: _____) \$ _____

Average food sales to QEUs \$ _____ **C**

Sales to non-qualified end users (QEUs) (e.g. wholesale buyers, distributors, auctions)

Year 1 (Sales year: _____) \$ _____

Year 2 (Sales year: _____) \$ _____

Year 3 (Sales year: _____) \$ _____

Average food sales to non-QEUs \$ _____ **D**

Sales receipts must also be retained to support this record.

¹FDA updates the inflation adjusted value (B) yearly:

<https://www.fda.gov/food/guidanceregulation/fsma/ucm554484.htm>

Baseline Value for Cut-offs (2011)	Value in 2020	Value in 2021	Value in 2022	Value in 2023	Value in 2024	Average 3 Year Value for 2022 - 2024
\$500,000	\$575,972	\$602,382	\$644,795	\$668,297	\$684,459	\$665,947

Send application to:
Kentucky Department of Agriculture
Produce Safety Program
107 Corporate Drive
Frankfort, KY 40601
or email: Angel.Hughes@ky.gov

For Official Use Only

____ Paperwork reviewed & exemption denied

____ Paperwork reviewed & exemption approved

WW Farm Number _____

Date _____

Reviewers Initials _____