



samen in gezondheidsproducten



Nederlands Zekerheidssysteem
Voedingssupplementen Topsport

Checklist POA's HACCP-Plus/NZVT-system

Please send this form to the Dopingautoriteit (nzvt@dopingautoriteit.nl)

Company name	
Address	
Zipcode, City	
Country	
VAT number	
Email address (contact for website)	
Phone no. (contact no. for website)	
Brand name (if different from company name)	
Product name	
Product description	
Product category	Weight lose / amino acid / anti-oxidant / creatin / protein(powder) / joints / herb / multivitamin-mineral / single vitamin / vitamin complex / mineral complex / single mineral / other / probiotics / ribose / sportsdrink / fish oil
Product form	Tablet / capsule / drink / etc
Batch number on product	
BBE date	
Date of filling	
Frequency of NZVT analysis	Irregular: - Less than two batches a year and/or - The company cannot declare by forehand to participate with at least two batches per product a year. At least two batches per product a year: - The company declares prior to the analyses and has promotion activities as described in phase two* All produced batches of a product participate: - The company has signed the 'Agreement for use of NZVT for promotion activities'.

* As mentioned in 'NZVT promotion activities' (Annex 7 and 8 of the NZVT manual).

Points of attention (POA)	Performed?	Remarks
Control of all POAs of form F-04-05?	YES / NO	
Did the supplier sign the supplier assessment form F-08-03?	YES / NO	
Is the supplier being audit on a regular base?	YES / NO	
Is the procedure of line release performed in order to prevent cross contamination? Check procedure of line release.	YES / NO	

In case a question cannot be answered with a YES, the company is required to substantiate that the product meets the norms of a NZVT product. Detailed information regarding subjects not answered with YES must be enclosed.

This form is filled in completely and truthfully at(date)

By: (signature)