

U.S. DEPARTMENT OF AGRICULTURE
FOOD SAFETY AND INSPECTION SERVICE

1. DATE

10/15/2020

2. ESTABLISHMENT NO.

M47316/P47316

GRANT OF INSPECTION

3. DISTRICT CODE

50-23

4. NAME AND MAILING ADDRESS OF APPLICANT (Use 9 Digit Zip Code if Known)

Mr. Larry O'Connell
1200 W. 35th St.
Chicago IL 60609

5. DISTRICT OFFICE CONTACT INFORMATION (mailing address, e-mail, phone number)

1919 S. Highland Ave., Suite 115C, Lombard IL 60148
Chicago.GrantCurator@fsis.usda.gov
630-620-7474

6. LOCATION OF ESTABLISHMENT (PHYSICAL STREET ADDRESS)

Peer Foods - Edinburgh
3013 Presidential Way
Edinburgh IN 46124

7. TYPE OF GRANT

- CONDITIONAL (VALIDATE HACCP PLAN)
 REGULAR

8. TYPE OF INSPECTION (Check all that apply)

- MEAT POULTRY EGG
 IMPORT SILURIFORMES FISH

9. DATE OF INAUGURATION OF SERVICE

October 19, 2020

AGREEMENT AND CERTIFICATION: A survey of your establishment at the location shown above indicates compliance with the applicable requirements in Title 9 CHAPTER III -- FOOD SAFETY AND INSPECTION SERVICE, DEPARTMENT OF AGRICULTURE regulations promulgated under the authority of the Federal Meat Inspection Act, the Poultry Products Inspection Act, or the Egg Products Inspection Act. Accordingly, inspection service is granted.

A copy of FSIS Form 5200-2, *Application for Federal Inspection*, is enclosed or attached. This application specifies the type of operation conducted at your establishment and contains your agreement and certification that you will conform strictly to applicable Federal law and regulations pertaining to the inspection of meat, poultry, Siluriformes fish or egg product or the importation of meat, poultry, Siluriformes fish or egg product.

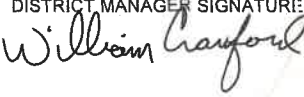
Your establishment is under the supervision of the District Office. Contact the District Office if you need help in interpreting the provisions of the regulations

REMARKS:

In accordance with 9 CFR 304.3(b) and 381.22(b), this Grant of Inspection is issued with conditions for a period not to exceed ninety (90) days, ending January 17, 2021, during which time Establishment M47316/P47316 must validate its Hazard Analysis and Critical Control Points (HACCP) plan(s). Upon successful validation, the conditions of this Grant of Inspection will be removed, and inspection will be granted in accordance with 9 CFR 304.2.

cc:

Financial Processing Center, Des Moines, Iowa
FLS, Circuit 50-23
IIC, Est. M47316/P47316 (IPS # -01-01)
OIEA
PHIS
RMA/RMS
Indiana Board of Animal Health, Indianapolis IN

DISTRICT MANAGER SIGNATURE: Digitally signed by
 WILLIAM CRANFORD
Date: 2020.10.15 07:11:53 -05'00'

PRINT NAME
DR. DONALD FICKEY, DVM, District Manager