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U.S. DEPARTMENT OF AGRICULTURE
FOOD SAFETY AND INSPECTION SERVICE
APPLICATION FOR FEDERAL INSPECTION
(Meat, Poultry, Siluriform Fish, Egg Products and Import Inspection)

Submit this application electronically, or by mail, to the Grant Curator at the appropriate U.S. Department of Agriculture, Food Safety and Inspection Service, District Office. Complete all sections. If a section is not applicable, enter N/A or None. If additional space is needed for any items, use the continuation sheet provided or an attachment. Number the item.

R
B/A/M/P

SECTION I. APPLICANT INFORMATION

1. Date of Application 1a. Existing Establishment Number (if applicable)

2. Type of Application (check all that apply)
 New Change of Location Change of Ownership Other, specify:

3. Type of Inspection (check all that apply)
 Meat Poultry Egg Products Import Siluriform Fish

4. Form of Organization (check applicable box)
 Individual Cooperative Association Partnership Corporation Education Institution Limited Liability Corporation (LLC) Other

5. If Corporation, Name of State or Territory where Incorporated <input type="text" value="California"/>	6. Date Incorporated mm/ dd/ yyyy <input type="text" value="September 2003"/>	7. Name and Address of Corporate Headquarters Name <input type="text" value="Rocker Bros Meat & Provision, Inc."/> Address <input type="text" value="405 Centinela Avenue"/> City <input type="text" value="Inglewood"/> State <input type="text" value="CA"/> Zip Code <input type="text" value="90302"/> Country <input type="text" value="USA"/>
8. Federal Employer ID# <input type="text" value="02-0707900"/>	9. Dun & Bradstreet # (if applicable) <input type="text" value="N/A"/>	
10. Firm's Code (Import Only) <input type="text" value="N/A"/>		

11. Name of Applicant (person, firm or corporation making application) and mailing address Name <input type="text" value="Rocker Bros Meat & Provision, Inc."/> Address <input type="text" value="405 Centinela Avenue"/> City <input type="text" value="Inglewood"/> State <input type="text" value="CA"/> Zip Code <input type="text" value="90302"/> Country <input type="text" value="USA"/>	12. Telephone number and e-mail address of applicant phone <input type="text" value="(310) 672-0139"/> e-mail <input type="text" value="jhaedo@rockerbrosmeat.com"/>
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13. Actual Name of Company and Physical Location Address of Establishment Name <input type="text" value="Rocker Bros Meat & Provision, Inc."/> Address <input type="text" value="405 Centinela Avenue"/> City <input type="text" value="Inglewood"/> State <input type="text" value="CA"/> Zip Code <input type="text" value="90302"/> Country <input type="text" value="USA"/>	14. Telephone number, mailing address and e-mail address of establishment phone <input type="text" value="(310) 672-0139"/> mailing address <input type="text" value="405 Centinela Avenue, Inglewood, CA 90302"/> e-mail <input type="text" value="jhaedo@rockerbrosmeat.com"/>
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SECTION II. ESTABLISHMENT INFORMATION

15. Establishment Limits: Provide a diagram, schematic or written narrative of the establishment premises that is requested to be under Federal inspection. Use continuation sheet or attachment if necessary. (For egg product plants, submit blueprints via electronic attachment or by mail.)
 on continuation sheet attached document by other means (mail, courier) previously submitted

16. Name and establishment number of other official establishments located in the same facility (if applicable) <input type="text" value="N/A"/>	17. Other names - Doing Business As (DBA) - Use continuation sheet if necessary <input type="text" value="N/A"/>
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18. Estimated date when the establishment will be ready to operate under inspection (mm/ dd/ yyyy)

19. MEAT, POULTRY, AND SILURIFORM FISH INSPECTION ACTIVITIES (check all that apply)

<p>19A. SLAUGHTER OPERATIONS</p> <p><input type="checkbox"/> Calf</p> <p><input type="checkbox"/> Cattle</p> <p><input type="checkbox"/> Equine</p> <p><input type="checkbox"/> Goat</p> <p><input type="checkbox"/> Sheep</p> <p><input type="checkbox"/> Swine</p> <p><input type="checkbox"/> Chicken</p> <p><input type="checkbox"/> Duck</p> <p><input type="checkbox"/> Goose</p> <p><input type="checkbox"/> Guinea</p> <p><input type="checkbox"/> Ratite</p> <p><input type="checkbox"/> Squab</p> <p><input type="checkbox"/> Turkey</p> <p><input type="checkbox"/> Siluriform Fish</p>	<p>19B. PROCESSING OPERATIONS</p> <p><input type="checkbox"/> a. Fully Cooked - Not Shelf Stable</p> <p><input type="checkbox"/> b. Heat Treated Not Fully Cooked - Not Shelf Stable</p> <p><input type="checkbox"/> c. Heat Treated - Shelf Stable</p> <p><input type="checkbox"/> d. Not Heat Treated - Shelf Stable</p> <p><input type="checkbox"/> e. Product with Secondary Inhibitors - Not Shelf Stable</p> <p><input checked="" type="checkbox"/> f. Raw - Intact Products</p> <p><input checked="" type="checkbox"/> g. Raw - Non Intact Products</p> <p><input type="checkbox"/> h. Thermally Processed Commercially Sterile</p>	<p>19C. EXEMPTIONS (explain separation from inspected products on continuation sheet)</p> <p><input type="checkbox"/> Custom Processing</p> <p><input type="checkbox"/> Custom Slaughter</p> <p><input type="checkbox"/> Retail Activities</p> <p><u>Religious Exempt Poultry</u></p> <p><input type="checkbox"/> Buddhist eviscerated Poultry</p> <p><input type="checkbox"/> Confucian Non-eviscerated Poultry</p> <p><input type="checkbox"/> Islamic (Halal) Poultry</p> <p><input type="checkbox"/> Kosher Non-eviscerated Poultry</p> <p><u>Religious Exempt Livestock</u></p> <p><input type="checkbox"/> Halal</p> <p><input type="checkbox"/> Kosher</p> <p><input type="checkbox"/> Other (specify on continuation sheet)</p>	<p>19D. JURISDICTION (explain separation from inspected products on continuation sheet)</p> <p><input checked="" type="checkbox"/> FSIS Inspection only</p> <p><input type="checkbox"/> State Inspection</p> <p><input type="checkbox"/> Talmadge-Aiken</p> <p><u>Multiple Agencies</u></p> <p><input type="checkbox"/> N/A</p> <p><input checked="" type="checkbox"/> Dual Jurisdiction Establishment with Food and Drug Administration (FDA)</p> <p><input type="checkbox"/> USDA Agricultural Marketing Service (AMS) Grading/Quality Control</p> <p><input type="checkbox"/> Establishment provides products for the National School Lunch Program</p>
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20. EGG PRODUCTS INSPECTION (check all that apply)

a. Heat Treated But Not Fully Cooked - not shelf stable (liquid and frozen egg product)
 b. Heat Treated - Shelf Stable (dried egg product, 50% Sugar Yolk)
 c. Not Heat Treated - unpasteurized egg product only
 d. Egg Breaking

21. IMPORT INSPECTION (check all that apply)

<p>21A. Species</p> <p><input type="checkbox"/> Meat</p> <p><input type="checkbox"/> Poultry</p> <p><input type="checkbox"/> Egg Products</p> <p><input type="checkbox"/> Siluriform Fish</p>	<p>21C. Types of Products (egg products)</p> <p><input type="checkbox"/> Egg /Egg Products</p> <p><input type="checkbox"/> Shell Eggs</p> <p><input type="checkbox"/> Liquid Eggs</p> <p><input type="checkbox"/> Frozen Eggs</p> <p><input type="checkbox"/> Dried Eggs</p>	<p>21D. Types of Products (meat and poultry only)</p> <table style="width:100%;"> <tr> <td style="width:50%; vertical-align: top;"> <p><input type="checkbox"/> Fully Cooked - Not Shelf Stable</p> <p><input type="checkbox"/> Frozen from an APHIS restricted country 9 CFR 94.4 (b)</p> <p><input type="checkbox"/> Frozen</p> <p><input type="checkbox"/> Perishable</p> <p><input type="checkbox"/> Heat Treated - Not Fully Cooked - Not Shelf Stable</p> <p><input type="checkbox"/> Heat Treated - Shelf Stable</p> <p><input type="checkbox"/> Not Heat Treated - Shelf Stable</p> <p><input type="checkbox"/> Product with Secondary Inhibitors - Not Shelf Stable</p> <p><input type="checkbox"/> Raw - Non-Intact</p> <p><input type="checkbox"/> Ground product</p> <p><input type="checkbox"/> Other Non-intact</p> </td> <td style="width:50%; vertical-align: top;"> <p><input type="checkbox"/> Raw - Intact</p> <p><input type="checkbox"/> Cuts (including bone-in and boneless meats)</p> <p><input type="checkbox"/> Boneless and/or skinless parts</p> <p><input type="checkbox"/> Other Intact</p> <p><input type="checkbox"/> Carcasses</p> <table style="width:100%;"> <tr> <td><input type="checkbox"/> Beef</td> <td><input type="checkbox"/> Equine</td> </tr> <tr> <td><input type="checkbox"/> Goat</td> <td><input type="checkbox"/> Lamb</td> </tr> <tr> <td><input type="checkbox"/> Mutton</td> <td><input type="checkbox"/> Pork</td> </tr> <tr> <td><input type="checkbox"/> Poultry</td> <td><input type="checkbox"/> Ratite</td> </tr> <tr> <td><input type="checkbox"/> Veal</td> <td><input type="checkbox"/> Veal-hide on</td> </tr> </table> <p><input type="checkbox"/> Thermally Processed/Commercially Sterile</p> <table style="width:100%;"> <tr> <td><input type="checkbox"/> Soups</td> <td><input type="checkbox"/> Comed (species)</td> </tr> <tr> <td><input type="checkbox"/> Other</td> <td><input type="checkbox"/> Ham</td> </tr> </table> </td> </tr> </table>	<p><input type="checkbox"/> Fully Cooked - Not Shelf Stable</p> <p><input type="checkbox"/> Frozen from an APHIS restricted country 9 CFR 94.4 (b)</p> <p><input type="checkbox"/> Frozen</p> <p><input type="checkbox"/> Perishable</p> <p><input type="checkbox"/> Heat Treated - Not Fully Cooked - Not Shelf Stable</p> <p><input type="checkbox"/> Heat Treated - Shelf Stable</p> <p><input type="checkbox"/> Not Heat Treated - Shelf Stable</p> <p><input type="checkbox"/> Product with Secondary Inhibitors - Not Shelf Stable</p> <p><input type="checkbox"/> Raw - Non-Intact</p> <p><input type="checkbox"/> Ground product</p> <p><input type="checkbox"/> Other Non-intact</p>	<p><input type="checkbox"/> Raw - Intact</p> <p><input type="checkbox"/> Cuts (including bone-in and boneless meats)</p> <p><input type="checkbox"/> Boneless and/or skinless parts</p> <p><input type="checkbox"/> Other Intact</p> <p><input type="checkbox"/> Carcasses</p> <table style="width:100%;"> <tr> <td><input type="checkbox"/> Beef</td> <td><input type="checkbox"/> Equine</td> </tr> <tr> <td><input type="checkbox"/> Goat</td> <td><input type="checkbox"/> Lamb</td> </tr> <tr> <td><input type="checkbox"/> Mutton</td> <td><input type="checkbox"/> Pork</td> </tr> <tr> <td><input type="checkbox"/> Poultry</td> <td><input type="checkbox"/> Ratite</td> </tr> <tr> <td><input type="checkbox"/> Veal</td> <td><input type="checkbox"/> Veal-hide on</td> </tr> </table> <p><input type="checkbox"/> Thermally Processed/Commercially Sterile</p> <table style="width:100%;"> <tr> <td><input type="checkbox"/> Soups</td> <td><input type="checkbox"/> Comed (species)</td> </tr> <tr> <td><input type="checkbox"/> Other</td> <td><input type="checkbox"/> Ham</td> </tr> </table>	<input type="checkbox"/> Beef	<input type="checkbox"/> Equine	<input type="checkbox"/> Goat	<input type="checkbox"/> Lamb	<input type="checkbox"/> Mutton	<input type="checkbox"/> Pork	<input type="checkbox"/> Poultry	<input type="checkbox"/> Ratite	<input type="checkbox"/> Veal	<input type="checkbox"/> Veal-hide on	<input type="checkbox"/> Soups	<input type="checkbox"/> Comed (species)	<input type="checkbox"/> Other	<input type="checkbox"/> Ham
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<input type="checkbox"/> Other	<input type="checkbox"/> Ham																	
<p>21B. Mode of Transportation</p> <p><input type="checkbox"/> Rail Cars</p> <p><input type="checkbox"/> Ocean Vessel</p> <p><input type="checkbox"/> Trucks</p> <p><input type="checkbox"/> Airline</p> <p><input type="checkbox"/> Other, specify: <input style="width:50px; height:20px;" type="text"/></p>																		

SECTION IV. PERSONS RESPONSIBLY CONNECTED WITH APPLICANT

22. The applicant must provide a list of persons responsibly connected with the establishment. Include all partners, officers, directors, holders, or owners of 10 percent or more of voting stock or employees in a managerial or executive capacity. Check the appropriate box for 10% or more voting stock. Use continuation sheet or provide an attachment if necessary.

Name and Title		Present e-mail and home address			Holder of 10% or more voting stock? (if corporation)
First	David	e-mail	drocker@rockerbrosmeat.com		<input checked="" type="checkbox"/> yes
Last	Rocker	Address	4541 Westchester Drive		<input type="checkbox"/> no
		City	Woodland Hills		
Title	Owner	State	CA	Zip Code 91364	Country USA
First	Sheldon	e-mail	srocker@rockerbrosmeat.com		<input checked="" type="checkbox"/> yes
Last	Rocker	Address	4910 Calle De Arbolles		<input type="checkbox"/> no
		City	Torrance		
Title	Owner	State	CA	Zip Code 90505	Country USA
First	Jacqueline	e-mail	jhaedo@rockerbrosmeat.com		<input type="checkbox"/> yes
Last	Haedo	Address	12224 Chandler Blvd #7		<input checked="" type="checkbox"/> no
		City	Valley Village		
Title	QA, HACCP Director	State	CA	Zip Code 91607	Country USA
First		e-mail			<input type="checkbox"/> yes
Last		Address			<input type="checkbox"/> no
		City			
Title		State		Zip Code	Country
First		e-mail			<input type="checkbox"/> yes
Last		Address			<input type="checkbox"/> no
		City			
Title		State		Zip Code	Country
First		e-mail			<input type="checkbox"/> yes
Last		Address			<input type="checkbox"/> no
		City			
Title		State		Zip Code	Country

23. Enter the name of each person listed in Block 22 who has been convicted in any Federal or state court of (1) any felony, or (2) more than one violation of any law, other than a felony, based upon the acquiring, handling, or distributing of unwholesome, mislabeled, or deceptively packaged food or fraud in connection with transactions in food. Include the nature of the crime(s), indicate felony/misdemeanor, the date of the conviction and the court in which convicted. If none, check the box. If yes, check the yes box and explain. Use continuation sheet if necessary.

None Yes, explain

24. List each conviction against the applicant or recipient (person, firm or corporation) in any Federal or state court of any (1) felony, or (2) more than one violation of any law, other than a felony, based upon the acquiring, handling, or distributing of unwholesome, mislabeled, or deceptively packaged food or upon fraud in connection with transactions in food. Include the nature of the crime(s), indicate felony/misdemeanor, the date of conviction and the court in which convicted. If none, check the box. If yes, check the yes box and explain. Use continuation sheet if necessary.

None Yes, explain

25. Check appropriate boxes if conditions for receiving inspection have been met in accordance with 9 CFR 304.3 and 381.22 for meat and poultry inspection only. Check all applicable boxes. (Does not apply to egg product inspection.)

Developed written recall procedures Developed written Sanitation Standard Operating Procedures (SSOP) Conducted a hazard analysis and developed a Hazard Analysis and Critical Control Point Plan (HACCP)

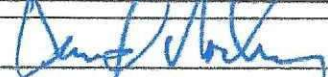
26. Applicant has been provided with a copy of the Privacy Act Notice?

Yes No

AGREEMENT AND CERTIFICATION: If inspection is granted under the application, I (we) expressly agree to conform strictly to the Federal Meat Inspection Act (21 U.S.C. 601 et seq.), or the Poultry Products Inspection Act (21 U.S.C. 451 et seq.), or the Egg Products Inspection Act, (21 U.S.C. 1031 et seq.), and the regulations governing the inspection of the meat, poultry or egg product inspection of the United States Department of Agriculture (9 CFR Part 301 et seq.). I CERTIFY that all statements made herein are true to the best of my knowledge and belief.

WARNING: Persons knowingly and willfully making false, fictitious, or fraudulent statements or entries are subject to \$10,000 fine or imprisoned not more than five years, or both, as prescribed by Title 18 U.S.C. 1001. This is an Equal Opportunity Program. If you believe you have been discriminated against because of race, color, religion, sex, national origin, age or handicap, write immediately to the Secretary of Agriculture or the Administrator, FSIS, Washington, DC 20250.

27. Typed or written name and title of person signing application
 David Rocker, Owner

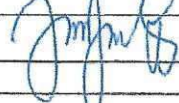
28. Signature


TO BE COMPLETED BY USDA FSIS OFO DISTRICT OFFICE ONLY

29. Is this establishment: (check all that apply) under State Inspection? in the Cooperative Interstate Shipment (CIS) Program? to be under the Talmadge-Aiken Act?

30. Date application received by District Office
 3/27/2017

31. Official inspection number(s) assigned by District Office
 M1160/P9208

32. Signature of the District Manager


33. Date
 04/11/2017

19D - FSIS - Beef & Poultry, Raw Intact & Raw Non Intact
FDA - FISH

