MPI Regulation & Assurance

Systems Audit, Assurance & Monitoring

Pastoral House

25 The Terrace

PO Box 2526

Wellington 6140

# National Microbiological Database – Raw Ground Beef NMD Demographics

1. **Plant Name & Registration**

|  |  |
| --- | --- |
| Plant Name:  Address: | Licence/registration number:  Postal address: |

1. **Plant Information**

|  |  |
| --- | --- |
| Plant Manager: | Phone:  Cell phone:  E-mail: |
| NMD Controller: | Phone:  Cell phone:  E-mail: |
| Deputy NMD Controller: | Phone:  Cell phone:  E-mail: |
| Veterinary Technical Supervisor: | Phone:  Cell phone:  Email: |

1. ***E. coli O157*:H7 & NMD *Salmonella* Laboratory**

|  |  |
| --- | --- |
| Laboratory: | |
| Contact Laboratory Person: | Phone:  E-mail: |

|  |
| --- |
| Please describe the process; from receipt/storage of bulk manufactured beef to final product: |

|  |
| --- |
| Please describe any other procedures specific to your process that you think may favourably or adversely affect microbiological contamination of the carcass: |

|  |
| --- |
| Other comments: |

1. **Trade Type**

|  |  |
| --- | --- |
| Domestic: | US Listed: |

1. **Information verified and approved by**

|  |  |
| --- | --- |
| **Name:**  **Signature:** | **Date:** |

Please send Demographic form by e-mail to: [NationalMicrobiological.Database@mpi.govt.nz](mailto:NationalMicrobiological.Database@mpi.govt.nz)