

Return this form as a digital file. Due to data entry costs, I will charge an additional \$30 per product for forms returned to me as scans, photos, or paper copies. Please use Acrobat or Acrobat Reader to complete this form. Other PDF apps may not render properly.

Request for Scheduled Process – Acid & Acidified Foods (ver 22, 2025-03-20)

Date

Product Name			Co-packer or processing location (if known)
Company Name			
Owner/Contact Name			
Address			
City, State, Zip			
Telephone	<input type="text"/>	FCE ¹	<input type="text"/>
Email	<input type="text"/>		

Product Analysis

Please enter the pH of a product sample, if known. If not known, please send a sample to David A French, Aardvark Associates, 591 Pine Grove Furnace Rd, Aspers PA 17304-9652².

pH

Recipe

	Ingredient ³	Descriptors <small>form: e.g. fresh, canned (brand, ingredients); piece size, vinegar strength</small>	Weight ⁴ (oz, lb, g, kg)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

¹ FCE is the FDA Food Canning Establishment number, which you will need if you are processing yourself. Check here if you want one.

² Aardvark Associates is not a FDA LAAF-accredited lab; such services are only required by the FDA for certain enforcement situations.

³ If using vinegar, note the acid strength (stated on the bottle) of the brand you use. Ex: Vinegar (5%).

⁴ Use dropdowns to select units. If possible, use weight units. **Conversion from volume units will cost you more.** Do not assume that 1 cup weighs 8 oz avoirdupois (weight ounces); a cup of garlic powder weighs much less than a cup of molasses. Fluid ounce is not a weight unit.

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Product Name

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Preparation method. List all steps necessary to make your product and what type/amount of heat is involved:

1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	

How much does your recipe yield? _____ What is your intended batch size? (lb, gal) _____

If known, specify processing conditions that you would like to be considered to make this product safe and stable:

Water bath Hot fill Other _____

What packaging do you plan to use? Include a manufacturer's specification, send a container sample, or enter information here:

Type (e.g. Cylindrical glass jar) _____ Capacity _____ Diameter (mm) _____ Height (mm) _____

If not cylindrical, describe container and its dimensions below. Container manufacturer & their SKU _____

Add additional pages as necessary. Your product's UPC code _____ - _____

Notes. Mention anything else you think I should know:

Thank you for your patronage.