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DETAILED REPORT ON AUDIT OF EAST COAST SHIP SUPPLY LLC AGAINST NSF STORAGE AND DISTRIBUTION DUE DILIGENCE GARRETS AUDIT ON 11 APRIL 2024

STANDARD USED	NSF Storage and Distribution Due Diligence Garrets Audit
AUDITOR	Lauren Sorrentino
AUDIT DATE	11/04/24
SITE REFERENCE	C0364725
COMPANY NAME	East Coast Ship Supply LLC
ADDRESS	755 Central Avenue, Unit 1, New Providence,, New Jersey 07974
TELEPHONE	1-510-444-7200
EMAIL	anli@wrist.com
SCOPE OF AUDIT	The scope of the audit was the Food Storage Areas, Coolers, Freezers and Support Areas.
EXCLUSIONS	N/A
SITE REPRESENTATIVES	
Vice President - Wrist North	Andrew Licht
America	
Director, Sales and	Al Hickey

Form ID: SCFS 001

Document ID: East Coast Ship Supply LLC Inspection Code: C0364725

Issue Date: 01/05/23 Version 1

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Operations - Wrist Northeast, Managing Director, East Coast Ship Supply	
Wrist Supervisor - Warehouse / HACCP Coordinator	Fernando Guerrero
Wrist Inventory Analyst - Procurement	Pooja Verma
Ecolab PCO	Wallache Knight

OUTCOME OF EVALUATION

No Critical Deficiencies were identified:	0
Number of Major Deficiencies:	0
Number of Minor Deficiencies:	3

Status of Site:

Gold	\checkmark
Silver	
Bronze	
Fail	

PROFILE

Wrist NWY was established in, New Jersey in February 2010. Wrist NWY is a subsidiary of Wrist North America, part of the Wrist Group A/S located in Aalborg, Denmark. In October 2012. Wrist moved to the current facility of approximately 37,000 sq ft Warehouse that included dry storage, cooler, freezer, docks parking area. The Receiving / Shipping area is located at the back of the building. Wrist NWY, is located in the Greater New Jersey / New York area and capable of daily supply operations to the North East Coast region servicing vessels from Portland Maine To Norfolk VA. Deliveries are made utilizing Wrist's fleet of delivery vehicles including temperature controlled, refrigerated trucks.

Overview of Performance against Standard

1. HACCP

The HACCP plan was included in the Operations Manual with a 4/1/24 review date that is on a Corporate Shared Drive which is site specific. The plan was for this Warehouse Operation and it followed the general principle of Codex Alimentarius.

There was a complete hazard analysis for the receiving and storage of materials and the shipping of product, considering potential physical, biological and chemical hazards associated with each material and operating step. A probability of occurrence and severity was assigned to each hazard and a level of significance assigned. Where the hazard was not judged to be significant, an explanation for this conclusion was given in terms of either prerequisite programs in place to control the hazard or historical evidence.

The risk assessment determined that there were no CCPs in the operation, Prerequisite programs outlined control points that were in place for receiving, storage and shipping. Included were temperature upon receipt, storage and shipping with documented inspection of vehicles, sanitation, pest control, food safety and food defense. A current process flow chart was present.

The Food Safety Plan was last revised 4/1/24. This storage facility is mainly cross dock with no repack operation.

The HACCP team included the General Manager, HACCP Coordinator (NSF HACCP Refresher 12/18/23) and the Regional Quality Manager. Team members were trained monthly and annually.

HACCP team meetings were conducted that included the annual plan review on 3/22/24. There were product descriptions for dry goods, chilled product and freezer product and the process flow diagram followed those three main categories.

2. QUALITY MANAGEMENT SYSTEM

The Branch Manager is on site during production periods and technical support is supplied by Vice President. Customer specifications and codes of practice are available.

Senior Management demonstrated their commitment to store safe and legal products, as evidenced by the strengths of the program as outlined in this report and the active participation of Senior Management and the Corporate VP who flew in from California to be part of the audit and supply support with polices and procedures. The site is a registered food premises with FDA last four digits #7482 and current until 12/31/14. Supplier Approval is performed by Corporate, the site orders the product from a company National Distribution Center. The Record Retention Policy was included in the Operations Manual under Section 5.5 Document Control that included retained number of years, monitoring of records retention, document control and invalid or obsolete record storage, disposal of obsolete documents.

There are no raw materials.

Finished products are traced using a Warehouse Management System. Items are scanned upon receipt, assigned a batch number that follows the item through storage and distribution. Product specifications are held by Corporate.

The auditor initiated a mock trace and the company was able to complete it with 100% accountability as outlined under Section 2.7.4. The auditor chose the Milk Full Cream 3.2-3.7% UHT 1 LTR that was viewed during the site tour. It began at 10:25 am and concluded at 12:07 pm with 100% accountability for 2700 pieces. The facility was able to show the original Receiving Invoice, Inventory Records, Sales Invoices and On Hand Documentation that showed a forward and back test.

Records were complete, filled out in ink, with dates, initials or the person completing the task with a Supervisor review.

The Recall Procedure was outlined under 6.7 Product Recall/Traceability. Decision to recall a product was assigned Quality Manager, Branch Manager, CEO, Senior Vice President has the written authority to make a decision for a recall.

The auditor viewed the last mock test conducted on 4/2/24 that was listed on the QAF B10 Recall Worksheet for Sauce Sweet & Sour batch number 6348917 for 72 cases, It began at 11:15 am and concluded 12:34 pm with 100% accountability. Backup documentation included the PO, Inventory Reports, Shipping Documentation.

The Customer Complaint Program was outlined under 6.6 that included Handling Customer Complaints, Actions Taken, Corrective Action Report and Release Forms.

Viewed during the audit was the email system for the site that covered over, short and damaged complaints. There were no Food Safety concerns.

Specific areas were set up in the Warehouse and labeled for Non Conforming Products

Viewed during the audit the Inventory Write Off Removal Form dated 4/1-4/5/24 that documented damaged, expired - stock and the Hold and Release/Returned/Damaged/Expired Product Form.

Status, Corrective Actions, Dates and Signatures were listed on the form.

Form ID: SCFS 001

3. PREMISES/ENVIRONMENT CONTROLS

Premises:

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Environment:

The Warehouse was constructed in such a manner to store safe food that meets regulatory requirements and customer specifications. Products were stored on racks in the dry, refrigerated and frozen storage areas. Perimeters were maintained to allow for inspection, cleaning and pest control. The exterior was observed to be well maintained and well constructed. No vegetation or debris was noted that might harbor pests. Trash receptacles on the exterior were covered and clean. Doors were secured from the outside for site security. Controls:

Prerequisite programs were in place for Receiving, Inventory and Stock Control, temperature checks for freezer and refrigerated products. No ice or condensation was noted in either. Doors and docks were sealed to prevent pest entry. A computerized Warehouse Management System was used to for traceability, inventory and stock rotation. Temperatures are monitored twice daily for the cooler and freezer, records were reviewed for 2024. All the chilled products are moved to the storage within 15 mins as per company policy. Thermometer calibration is performed weekly, a certified reference thermometer is used as well, records were

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Third party contractors are used. Viewed during the audit under 13.4 was the Maintenance Schedule that listed equipment, method, frequency, person responsible and verified by.

All contractors and visitors have to sign in. Viewed during the audit was the sign in for the IPM contractor. Sanitation Systems was outlined under 13.3 Master Sanitation Schedule.

All cleaning equipment was stored in a locked closet.

Viewed during the audit were random samples of the QAD B05 D Daily Cleaning Schedule, Weekly, Monthly and Quarterly completed forms.

The facility has an online training system. Included was Sanitation, SSOPs, GMPs. An online system is used to monitor training for all employees and shows the results.

All entries are key coded, visitors are asked for identification before entering.

The building exterior and grounds were well maintained and no pest harborages were observed.

Adequate trash and waste disposal facilities were available with no standing water on the premises that could attract pests. No evidence of pests were present during the site visit.

Ecolab Pest Elimination was contracted IPM provider. Certificate of Insurance 12/1/24, Pesticide Applicator State of New Jersey 10/31/24, Pesticide Applicator Business 10/31/24. SDS First Strike Soft Bail EPA # 7173-258. PCO Monthly checks and the facility off weeks with documentation. Documented on the Pest Sighting Evidence Log no activity 23-24.

Standard clause. No.	Details of Non Conformance CRITICAL	Corrective Action Timescale
	None	

Standard	Details of Non Conformance	Corrective Action
clause. No.	MAJOR	Timescale
	None	

Standard clause. No.	Details of Non Conformance MINOR	Corrective Action Timescale
3.14.1	NC: Minor webbing was noted in three rack storage areas in the Dry Food Warehouse.	28 days satisfactory evidence received
3.15.3	NC: site map had not been reviewed since 2017 as outlined in the program scope.	28 days satisfactory evidence received
5.1.3	NC: Although the facility are recording the temperatures manually at 7am and 3pm, there is no alarm system in place to verify that there had been no breakdowns of the cooler and freezer units after hours. Note - no issues identified in the records reviewed and the facility was able to verify that there had been no breakdowns of the units from review of call out records.	28 days satisfactory evidence received