





Beef Primal Product Quality Attribute Sheet

Produit Product Title	Beef Hereford Flanchet Pad MPQAS
Product code IHC Code	58060
DLC Product Life	42 days from pack date
Emballage Packaging Type	Hereford Branded Vacuum Bag and Box
Conditionnement Bag Size / Crate Fill	400 x 400 vacuum shrink bag

This specification must not be changed without prior agreement with ABP

Spécifications Appearance		
Key Butchery Attributes	<ul style="list-style-type: none"> Hereford Pad Bavette Flanchet , fully pad and trimmed. 	
Packaging Detail	<p>6 per bag, packed in a 400 x 400 Hereford vacuum shrink bag. Vacuum seal intact, secure, no evidence of seal contamination leakage. Label to be applied to bag on detailing ; (Name of the product;Batch / Job code; Packing date;Country of Origin; Plant Slaughter number;Plant deboning number; Keep less than 5 *C An external carton label is applied with all batch / job code data</p>	
Presentation	<ul style="list-style-type: none"> Packed 6 per bag, 6 bags per box – Hereford Branded Box 	
Appearance / Possible Defects	<p>The product must be free from metal,plastic,tumours, abscesses and cysts and trims</p> <p>Meat should not exhibit signs of bruising blood splash or dark cutting Absence of cartilage and bone tips</p>	 

ABP Rathkeale Hereford Flanchet Pad SP Specification

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Issued by: James Nolan		Approved by: James Nolan Boning Hall Manager



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Approbation Client/Customer Acceptance Sheet

Commercial Authorisation

Quality Assurance Authorisation

Nom/Name: _____

Nom/Name: _____

Visa/Signature: _____

Visa/Signature: _____

Date: _____

Date: _____

Supplier acceptance:

Technical criteria for Beef. This specification is applicable from date of signature by both parties. The supplier confirms agreement with the specification and is authorised to confirm that we will adhere to a HACCP – based Quality Assurance System and all appropriate legal requirements, to ensure compliance.

Commercial Authorisation

Quality Assurance Authorisation

Nom /Name: James Nolan

Nom/Name: Tom Keating

Visa/Signature: _____

Visa/Signature: _____

Date: _____

Date: _____

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