



National Animal Supplement Council



**Preferred Supplier Data Sheet (PSDS) for
Raw Material Suppliers and Contract Manufacturers**

All Raw Material Suppliers and Contract Manufacturers must provide the information requested in this form as part of the qualification procedure for acceptance as a Preferred Supplier by NASC. Any fields not applicable to your company should be completed by entering N/A.

Please return copies of the completed form(s) and requested certifications electronically to Bill Bookout at b.bookout@nasc.cc or mail to:

NASC
PO Box 2568
Valley Center, CA 92082

This information will be posted in the Members Section of the NASC Web Site for companies to download for use in qualifying and accepting the supplier.

Questions: contact Bill Bookout at the NASC office (760-751-3360)

SECTION 1: SITE OVERVIEW			
NAME AND ADDRESS OF COMPANY OR SITE RESPONSIBLE:	Lonza Guangzhou Nansha Ltd, 68 Huangge dadaobei, Nansha District, Guangzhou, China		
WEB SITE:	www.lonza.com		
CONTACT PERSON	Richard Sasse		
TELEPHONE NUMBER:	-		
E-MAIL:	richard.sasse@lonza.com		
BUSINESS DESCRIPTION / SITE DETAILS: see www.lonza.com			
FACILITY SIZE / # EMPLOYEES:	About 650	DATE EST:	-
GENERAL AND PRODUCT LIABILITY INSURANCE LEVELS:	-	UNION:	-
SPECIFY TYPE(S) OF INGREDIENT(S), MANUFACTURING CAPABILITIES, PRODUCTS PRODUCED/SUPPLIED BY THE SITE, SERVICES AND THEIR INTENDED APPLICATIONS:	Food and feed ingredients, pharmaceutical products and intermediates, chemical intermediates, customer manufacturing		
SITE ACTIVITIES CONDUCTED:	-		
ORGANIZATIONAL CHART:	-		

SECTION 2: EVIDENCE OF COMPLIANCE			
INDEPENDENT QUALITY CERTIFICATIONS:	yes IF YES, SPECIFY: ISO 9001, FAMI-QS		
	QUALITY MANAGEMENT SYSTEM STANDARD:	ISO 9001	
	APPROVAL CERTIFICATES:	FAMI-QS	
	NUMBER AND NAME OF REGISTRAR WHO PROVIDED CERTIFICATE OF APPROVAL:	-	
OTHER CERTIFICATIONS OR EXTERNAL AUDIT PROGRAMS:	ISO 14001		
WEB SITE:	www.lonza.com		
DATE OF LAST FDA OR STATE AGENCY CGMP INSPECTION AND OUTCOME (PROVIDE COPY OF REPORT OF OBSERVATIONS FROM LAST FDA OR STATE INSPECTION):	-		



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SECTION 3: RAW MATERIAL SUPPLIERS & CONTRACT MANUFACTURERS ONLY	
DO YOU HAVE Q/C RELEASE REQUIREMENTS FOR ALL SHIPMENTS WHEN THEY ARRIVE: (YES / NO)	Yes
DO YOU SAMPLE EVERY LOT OF RAW MATERIALS RECEIVED: (YES / NO)	No
DO YOU RE-PACK LARGE QUANTITIES INTO SMALLER QUANTITIES AT YOUR FACILITY: (YES / NO)	No
DO YOU SAMPLE EVERY LOT: (YES / NO)	Yes
DO YOU PERFORM ANY BLENDING AT YOUR FACILITY (YES / NO)	No
LIST ALL INGREDIENTS HELD AT YOUR FACILITY (ATTACH A LIST/DOCUMENT IF AVAILABLE: (YES / NO)	
PHARMACEUTICAL:	yes
NUTRITIONAL:	yes
BOTANICAL:	-
MINERAL:	-
ENZYME:	-
HORMONE:	-
PROBIOTIC:	-
CHEMICAL (OTHER):	yes
METHODS CONDUCTED IN FACILITY: (YES / NO)	
DO YOU USE AN IN-HOUSE LOT NUMBERING SYSTEM?	yes
DO YOU EVER MIX MULTIPLE LOTS OF THE SAME INGREDIENT WHEN YOU BLEND?	no
TESTING INFORMATION:	
IF YOU RELY ON BOTH IN-HOUSE AND OUTSIDE CONTRACT LABS, PLEASE FILL OUT BOTH SECTIONS	
DOES THIS FACILITY RELY ON AN IN-HOUSE LAB? (YES / NO)	yes
IN-HOUSE TESTS PERFORMED: (YES / NO)	yes
POTENCY ASSAY OF RAW MATERIALS? (YES / NO)	no
RAW MATERIAL ASSAY? (YES / NO)	yes
MICROBIAL? (YES / NO – IF YES SPECIFY)	Only periodical
pH? (YES / NO)	no
MOISTURE? (YES / NO)	yes
ELEMENTAL PESTICIDES? (YES / NO – IF YES SPECIFY)	Only periodical
HEAVY METALS? (YES / NO – IF YES SPECIFY)	Only periodical
OTHER? (YES / NO – IF YES SPECIFY)	-
IF YOU HAVE AN IN-HOUSE LAB PLEASE SPECIFY WHICH LAB ACCREDITATION ORGANIZATION(S) YOU ARE AFFILIATED WITH:	-



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OUTSIDE CONTRACT LABS USED	
PLEASE LIST YOUR MOST FREQUENTLY USED CONTRACT LABS AND THEIR ACCREDITATION STATUS: (e.g., ISO, FDA, USDA, AOAC, USP, NSF, NPA, A2LA, ANSI, ETC.) *PLEASE PROVIDE ACCREDITATION NUMBER*	
NAME OF LAB #1:	
ADDRESS / LOCATION:	
CONTACT NAME / PHONE NUMBER:	
LIST ANY CERTIFICATIONS FOR THE LAB:	
TESTING PERFORMED BY THE OUTSIDE LAB:	
POTENCY ASSAY OF RAW MATERIALS? (YES / NO)	
RAW MATERIAL ASSAY? (YES / NO)	
MICROBIAL? (YES / NO – IF YES SPECIFY)	
pH? (YES / NO)	
MOISTURE? (YES / NO)	
ELEMENTAL PESTICIDES? (YES / NO – IF YES SPECIFY)	
HEAVY METALS? (YES / NO – IF YES SPECIFY)	
OTHER? (YES / NO – IF YES SPECIFY)	
NAME OF LAB #2:	
ADDRESS / LOCATION:	
CONTACT NAME / PHONE NUMBER:	
LIST ANY CERTIFICATIONS FOR THE LAB:	
TESTING PERFORMED BY THE OUTSIDE LAB:	
POTENCY ASSAY OF RAW MATERIALS? (YES / NO)	
RAW MATERIAL ASSAY? (YES / NO)	
MICROBIAL? (YES / NO – IF YES SPECIFY)	
pH? (YES / NO)	
MOISTURE? (YES / NO)	
ELEMENTAL PESTICIDES? (YES / NO – IF YES SPECIFY)	
HEAVY METALS? (YES / NO – IF YES SPECIFY)	
OTHER? (YES / NO – IF YES SPECIFY)	
NAME OF LAB #3:	
ADDRESS / LOCATION:	
CONTACT NAME / PHONE NUMBER:	
LIST ANY CERTIFICATIONS FOR THE LAB:	
TESTING PERFORMED BY THE OUTSIDE LAB:	
POTENCY ASSAY OF RAW MATERIALS? (YES / NO)	
RAW MATERIAL ASSAY? (YES / NO)	
MICROBIAL? (YES / NO – IF YES SPECIFY)	
pH? (YES / NO)	
MOISTURE? (YES / NO)	
ELEMENTAL PESTICIDES? (YES / NO – IF YES SPECIFY)	
HEAVY METALS? (YES / NO – IF YES SPECIFY)	
OTHER? (YES / NO – IF YES SPECIFY)	



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SECTION 4: CGMP COMPLIANCE DETAILS

PROVIDE A BRIEF SUMMARY OF HOW THE SUPPLIER COMPLIES WITH EACH APPLICABLE ELEMENT OF THE CURRENT GMP GUIDELINES. NON-APPLICABLE ELEMENTS SHOULD BE NOTED AS SUCH.

Production based on HACCP procedures

IS FACILITY ISO CERTIFIED? YES / NO: IF YES SPECIFY THE ISO STANDARD AND ATTACH CURRENT CERTIFICATE.	yes
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LIST AND ATTACH ANY OTHER CERTIFICATIONS OR EXTERNAL AUDIT PROGRAMS (E.G., NSF, USP, NPA, ISO, ETC.):	FAMI-QS
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SPECIFY MOST RECENT FACILITY INSPECTIONS BY STATE, FEDERAL, OR
FOREIGN AGENCY (DATE OF INSPECTION, AND RESULTS OF THE INSPECTION SPECIFY AGENCY):

DATE	INSPECTION AGENCY	RESULTS OF THE INSPECTION

SECTION 5: ADDITIONAL INFORMATION

Hazard Plan (HACCP) / DATE IMPLEMENTED:	yes
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STATISTICAL PROCESS CONTROL/PROCESS ANALYTICAL CONTROL:	no
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CORPORATE BIOTERRORISM ACT COMPLIANCE:	yes
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DESCRIBE ALL MEASURES TAKEN BY FACILITY TO ENSURE PRODUCT QUALITY AND PRODUCT CONTAMINATION PREVENTION.	Production in closed system, release analytics, incoming goods control
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MEMBERSHIP IN INDUSTRY TRADE GROUPS:	-
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SECTION 6: CONTRACT MANUFACTURERS

HOW DO YOU GUARANTEE BANNED SUBSTANCES (STIMULANTS, NARCOTICS, STEROIDS, DIURETICS, BETA-2-AGONISTS, BETA BLOCKERS, MASKING AGENTS, OR SIMILAR SUBSTANCES) ARE NOT PRESENT IN YOUR INGREDIENTS?	Raw material control, closed production
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HOW DO YOU QUALIFY AN INGREDIENT MANUFACTURER?	yes
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SECTION 7: AUTHENTICITY OF INFORMATION & CONTACT INFORMATION

COMPANY NAME:	Lonza		
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CONTACT NAME:	Richard Sasse	TITLE:	Associate director, Global product management
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E-MAIL ADDRESS:	richard.sasse@lonza.com		
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BY SIGNING BELOW, I CERTIFY THAT THE INFORMATION GIVEN BY ME TO THE NATIONAL ANIMAL SUPPLEMENT COUNCIL (NASC), INC. IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT IF THE INFORMATION PROVIDED IS NOT THOROUGH AND COMPLETE, NASC WILL REJECT THE FORM AND RESUBMISSION OF THE FORM WILL BE REQUIRED.

	February 17, 2016
SIGNATURE	DATE