



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 Parker at [b.parker@nasc.cc](mailto:b.parker@nasc.cc) or mail to:

NASC  
PO Box 5168  
Sun City West, AZ 85376

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 Parker at the NASC office (760-751-3360 X105)

SECTION 1: SITE OVERVIEW			
NAME AND ADDRESS OF COMPANY OR SITE RESPONSIBLE:	Uintah Basin Manufacturing LLC DBA Uintah Basin Herbals		
WEB SITE:	<a href="https://uintahbasinherbals.com/">https://uintahbasinherbals.com/</a>		
CONTACT PERSON	Amber Sabin		
TELEPHONE NUMBER:	435-823-0442		
E-MAIL:	<a href="mailto:amber@uintahbasinherbals.com">amber@uintahbasinherbals.com</a>		
<b>BUSINESS DESCRIPTION / SITE DETAILS:</b>			
FACILITY SIZE / # EMPLOYEES:	20,000 square feet. 32 employees.	DATE EST:	04/2020
GENERAL AND PRODUCT LIABILITY INSURANCE LEVELS:	5,000,000	UNION:	Yes
SPECIFY TYPE(S) OF INGREDIENT(S), MANUFACTURING CAPABILITIES, PRODUCTS PRODUCED/SUPPLIED BY THE SITE, SERVICES AND THEIR INTENDED APPLICATIONS:	Dietary ingredients. Finished Dietary Ingredients.		
SITE ACTIVITIES CONDUCTED:	Warehousing and Distribution of dietary ingredients and/or non-dietary ingredients. Manufacturing of finished dietary supplements. Warehousing and distribution of dietary supplements.		
ORGANIZATIONAL CHART:			

SECTION 2: EVIDENCE OF COMPLIANCE		
INDEPENDENT QUALITY CERTIFICATIONS:	IF YES, SPECIFY:	
	QUALITY MANAGEMENT SYSTEM STANDARD:	Yes.
	APPROVAL CERTIFICATES:	NSF/ANSI 455-2 Good Manufacturing Practices for Dietary Supplements.
	NUMBER AND NAME OF REGISTRAR WHO PROVIDED CERTIFICATE OF APPROVAL:	Steven Ault. 3138792.
OTHER CERTIFICATIONS OR EXTERNAL AUDIT PROGRAMS:	USDA Organic, Vegan Verified, Kosher Certified, NSF/ANSI 455-2 Good Manufacturing Practices for Dietary Supplements.	



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WEB SITE:	<a href="https://uintahbasinherbals.com/">https://uintahbasinherbals.com/</a>
DATE OF LAST FDA OR STATE AGENCY CGMP INSPECTION AND OUTCOME (PROVIDE COPY OF REPORT OF OBSERVATIONS FROM LAST FDA OR STATE INSPECTION):	Utah Department of Agriculture and Food. UDAF. 10/16/2020.



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<b>SECTION 3: RAW MATERIAL SUPPLIERS &amp; CONTRACT MANUFACTURERS ONLY</b>	
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)	Yes
DO YOU RE-PACK LARGE QUANTITIES INTO SMALLER QUANTITIES AT YOUR FACILITY: (YES / NO)	Yes
DO YOU SAMPLE EVERY LOT: (YES / NO)	No. Skip Lot Program is put in place.
DO YOU PERFORM ANY BLENDING AT YOUR FACILITY (YES / NO)	Yes
<b>LIST ALL INGREDIENTS HELD AT YOUR FACILITY (ATTACH A LIST/DOCUMENT IF AVAILABLE: (YES / NO))</b>	
PHARMACEUTICAL:	No
NUTRITIONAL:	Yes
BOTANICAL:	Yes
MINERAL:	Yes
ENZYME:	No
HORMONE:	No
PROBIOTIC:	No
CHEMICAL (OTHER):	Yes
<b>METHODS CONDUCTED IN FACILITY: (YES / NO)</b>	
DO YOU USE AN IN-HOUSE LOT NUMBERING SYSTEM?	Yes
DO YOU EVER MIX MULTIPLE LOTS OF THE SAME INGREDIENT WHEN YOU BLEND?	Yes
<b>TESTING INFORMATION:</b>	
<b>*IF YOU RELY ON BOTH IN-HOUSE AND OUTSIDE CONTRACT LABS, PLEASE FILL OUT BOTH SECTIONS*</b>	
DOES THIS FACILITY RELY ON AN <b>IN-HOUSE</b> LAB? (YES / NO)	No
IN-HOUSE TESTS PERFORMED: (YES / NO)	Yes
POTENCY ASSAY OF RAW MATERIALS? (YES / NO)	Yes, Third-Party
RAW MATERIAL ASSAY? (YES / NO)	Yes, Third-party
MICROBIAL? (YES / NO – IF YES SPECIFY)	Yes, Third-party
pH? (YES / NO)	Yes
MOISTURE? (YES / NO)	Yes, Raw Material Vendor COA
ELEMENTAL PESTICIDES? (YES / NO – IF YES SPECIFY)	No
HEAVY METALS? (YES / NO – IF YES SPECIFY)	Yes, Raw Materials, third-party
OTHER? (YES / NO – IF YES SPECIFY)	N/A
<b>IF YOU HAVE AN IN-HOUSE LAB</b> PLEASE SPECIFY WHICH LAB ACCREDITATION ORGANIZATION(S) YOU ARE AFFILIATED WITH:	N/A



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<b>OUTSIDE CONTRACT LABS USED</b>	
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*	
<b>NAME OF LAB #1:</b>	Analytical Resource Laboratories (ARL)
ADDRESS / LOCATION:	520 S 850 E Suite B3, Lehi, UT 84043
CONTACT NAME / PHONE NUMBER:	Dana Dunn, 801-847-7722
LIST ANY CERTIFICATIONS FOR THE LAB:	ISO 17025:2017
<b>TESTING PERFORMED BY THE OUTSIDE LAB:</b>	
POTENCY ASSAY OF RAW MATERIALS? (YES / NO)	Yes, Raw Material identity testing.
RAW MATERIAL ASSAY? (YES / NO)	Yes, Raw Material identity testing.
MICROBIAL? (YES / NO – IF YES SPECIFY)	Yes, Raw material and Finished Goods
pH? (YES / NO)	No
MOISTURE? (YES / NO)	No
ELEMENTAL PESTICIDES? (YES / NO – IF YES SPECIFY)	No
HEAVY METALS? (YES / NO – IF YES SPECIFY)	Yes, Raw Materials
OTHER? (YES / NO – IF YES SPECIFY)	No
<b>NAME OF LAB #2:</b>	Advanced Botanical Consulting & Testing inc (ABC Testing)
ADDRESS / LOCATION:	1169 Warner Ave, Tustin, CA 92780
CONTACT NAME / PHONE NUMBER:	Wendi Wang, botanichem@aol.com
LIST ANY CERTIFICATIONS FOR THE LAB:	ISO/IEC 17025:2017
<b>TESTING PERFORMED BY THE OUTSIDE LAB:</b>	
POTENCY ASSAY OF RAW MATERIALS? (YES / NO)	Yes.
RAW MATERIAL ASSAY? (YES / NO)	Yes
MICROBIAL? (YES / NO – IF YES SPECIFY)	Yes, Stability Testing.
pH? (YES / NO)	No
MOISTURE? (YES / NO)	No
ELEMENTAL PESTICIDES? (YES / NO – IF YES SPECIFY)	No
HEAVY METALS? (YES / NO – IF YES SPECIFY)	No
OTHER? (YES / NO – IF YES SPECIFY)	Mineral/Nutraceutical and Stability Testing.
<b>NAME OF LAB #3:</b>	
ADDRESS / LOCATION:	
CONTACT NAME / PHONE NUMBER:	
LIST ANY CERTIFICATIONS FOR THE LAB:	
<b>TESTING PERFORMED BY THE OUTSIDE LAB:</b>	
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.

IS FACILITY ISO CERTIFIED? YES / NO: IF YES SPECIFY THE ISO STANDARD AND ATTACH CURRENT CERTIFICATE.	No
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LIST AND ATTACH ANY OTHER CERTIFICATIONS OR EXTERNAL AUDIT PROGRAMS (E.G., NSF, USP, NPA, ISO, ETC.):	NSF/ANSI 455-2 Good Manufacturing Practices for Dietary Supplements,
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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
01/06/2022	NSF	Passed
06/02/2021	Oregon Tilth	Passed
10/16/2020	Utah Agriculture and Food	Passed

**SECTION 5: ADDITIONAL INFORMATION**

Hazard Plan (HACCP) / DATE IMPLEMENTED:  
Yes. 04/20/2020

STATISTICAL PROCESS CONTROL/PROCESS  
ANALYTICAL CONTROL:  
Yes.

CORPORATE BIOTERRORISM ACT  
COMPLIANCE: Yes.

DESCRIBE ALL MEASURES TAKEN BY  
FACILITY TO ENSURE PRODUCT QUALITY  
AND PRODUCT CONTAMINATION  
PREVENTION:  
HACCP Hazard Analysis plan, Quality Control  
Unit

MEMBERSHIP IN INDUSTRY TRADE GROUPS:

**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?	Critical Control points are put in place. Quality Systems are put in place.
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HOW DO YOU QUALIFY AN INGREDIENT MANUFACTURER?	Supplier Verification Program.
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**SECTION 7: AUTHENTICITY OF INFORMATION & CONTACT INFORMATION**

COMPANY NAME:	Uintah Basin Herbals		
CONTACT NAME:	Taleah Garisau	TITLE:	QAQC Director
E-MAIL ADDRESS:	qcqa@uintahbasinherbals.com		

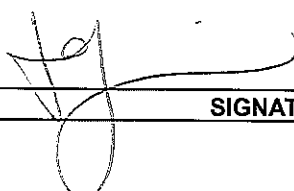
BY SIGNING BELOW, I CERTIFY THAT THE INFORMATION GIVEN BY ME TO THE NATIONAL ANIMAL SUPPLEMENT COUNCIL (NASC), INC. IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT IF THE INFORMATION PROVIDED IS NOT THOROUGH AND COMPLETE, NASC WILL REJECT THE FORM AND RESUBMISSION OF THE FORM WILL BE REQUIRED.



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	01/18/22
SIGNATURE	DATE