

# Organic System Plan for Handlers and Processors

Please fill out this questionnaire if you are requesting organic Handler/Processing certification. Attach an Organic Product Profile (OPP) sheet for each product requested for certification, and a current schematic product flow chart and facility map for each facility which will handle organic products. Use additional sheets if necessary.

**This form must be 100% filled out in order for your application to be considered.**

SECTION 1: General Information		NOP Rule 205.201 and 205.401	
Applicant/company name			
Owner/manager, Title		Primary contact person	
List any other businesses associated with this operation/responsible person (e.g. DBA, trade names, other assumed business names).			
Legal status: <input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Corporation <input type="checkbox"/> Legal partnership (federal form 1065) <input type="checkbox"/> Trust or non-profit <input type="checkbox"/> Cooperative <input type="checkbox"/> Other (specify)			
Year company began	Number of employees	Name of person overseeing organic production	Government permits/licenses
Do you have a copy of current organic standards? <input type="checkbox"/> Yes <input type="checkbox"/> No			
What general categories of organic products are manufactured or planned to be manufactured?			
<i>Provide a complete list of products requested for certification in Section 2: Product Composition and Labeling.</i>			
Type of processing/handling operation, e.g. grain cleaning, canning, freezing:			
List all companies that your operation is co-packing organic product for:			<input type="checkbox"/> Not Applicable
List all companies that are co-packing organic product for your operation:			<input type="checkbox"/> Not Applicable
Are you importing any ingredients or products used in production? If so, what are they? Where are they from?			
Are you exporting any ingredients or products? If so, what are they? Where are they going?			
List previous years certified organic & name of certifying agent.		List current organic certification by other agents.	
Preferred time for inspection visit: <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon Give directions to the processing facility.			
List all noncompliances from last year's certification and state how the noncompliances have been addressed.			
			<input type="checkbox"/> Not applicable
Noncompliance	Date of Notice	Corrective Action Update	
<i>E.g. 205.103(b)(3) Cleaning log</i>	<i>10/21/18</i>	<i>I have implemented a new cleaning log system.</i>	

Has certification ever been denied, suspended, or revoked?  Yes  No  
 If yes, describe the circumstances. List or attach a description of the actions taken to correct noncompliances.

Estimated annual total production      % organic      % non-organic

Is your operation a:  Primary, or  Contract vendor

**If you use contract vendors, give the following information:**

Name of contract vendor	Address	Phone no.	Certified by

List or attach a list stating the general categories of non-organic products produced by your company:

**SECTION 2: Labeling and Product Composition** NOP Rule 205.105, 205.270, 205.300-205.305 and 205.307-205.311

The NOP Rule has 4 categories of products which can use the word "organic". These are "100% organic", "organic", "made with organic (specified ingredients or food group(s))", and products with less than 70% organic ingredients. The % of organic ingredients is calculated by dividing the total net weight or volume (excluding salt and water) of combined organic ingredients by the total weight or volume of all ingredients (excluding salt and water). All ingredients identified as "organic" in the ingredient list must be certified by an accredited certifying agent. Ingredients sourced from non-certified exempt or excluded operations must not be identified or used as organic ingredients.

Products labeled "100% organic" must contain 100% organic ingredients, including processing aids. Products labeled "organic" must contain at least 95% organic ingredients; non-organic ingredients must not be commercially available\* in an organic form; and all synthetic ingredients and processing aids must be on the National List. Products labeled "made with organic (specified ingredients or food group(s))" must contain at least 70% organic ingredients. For "100% organic," "organic," and "made with ..." products, both organic and non-organic ingredients must not be produced using excluded methods, sewage sludge, or ionizing radiation. Products labeled "organic" or "made with..." must not include organic and non-organic forms of the same ingredient, except that a non-organic ingredient in a product labeled "made with..." may contain organic and non-organic forms of the same ingredient, but the ingredient must not be labeled as "organic" on the ingredient statement or be counted in the calculation of the product's organic percentage. Products with less than 70% organic ingredients can only identify the organic ingredients in the information panel. Refer to the National List, Sections 205.605 and 205.606, to determine which nonagricultural substances and non-organically produced agricultural ingredients are allowed in or on products labeled "organic" or "made with...".

The NOP Rule has specific requirements for principal display panel information relating to the use of the term "organic", depending on the % of organic ingredients in the finished product. For all products, the organic ingredients must be identified in the ingredient information panel. Up to three ingredients or food groups can be listed on the principal display panel for products labeled as "made with organic (ingredients or food group(s))". The term "organic" cannot be used to describe a non-organic ingredient in a product name. Water and salt cannot be identified as "organic". The name of the certifying agent must be identified on the information panel below the name of the handler or distributor, preceded by the statement, "Certified organic by..." or similar phrase. The address and telephone number of the certifying agent may be displayed.

The USDA seal can be used on "100% organic" or "organic" products, but not on products labeled "made with...". A certifying agent's seal, logo or other identifying mark can be used on "100% organic," "organic" or "made with...". Products with less than 70% organic ingredients cannot use either the USDA seal or the certifying agent's name, seal or logo. The certifying agent's seal cannot be displayed more prominently than the USDA seal.

*\*Commercial availability - The ability to obtain a production input in an appropriate form, quality, or quantity to fulfill an essential function in a system of organic production or handling, as determined by the certifying agent in the course of reviewing the organic plan. If you are using products listed in 205.606 or applicable products in 205.605, attempts to source organic versions and/or reasons that the organic version is not of the necessary form, quality, or quantity, must be submitted annually.*

**Attach an Organic Product Profile (OPP) sheet and examples of all labels used for each product requested for certification.**  
 All OPPs submitted for all organic products.  
 All labels submitted for all organic products.

**A. PRODUCTS HANDLED, SOLD, LABELED, OR REPRESENTED AS "100% ORGANIC"** (All ingredients, including processing aids, are certified 100% organic.)  
*\*If more space is needed, please attach a separate list with all requested products.*

List all "100 % Organic" products and check appropriate boxes.  None

Name of product (As you would like it to read on your certificate)	Organic ingredients identified in information panel (✓)	Certifying agent name identified on label (✓)	Use USDA seal on label (✓)	Use certifying agent seal/logo on label (✓)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**B. PRODUCTS HANDLED, SOLD, LABELED, OR REPRESENTED AS "ORGANIC"** (At least 95% certified organic ingredients; non-organic ingredients must be used in accordance with the National List.)  
*\*If more space is needed, please attach a separate list with all requested products.*

List all "Organic" products and check appropriate boxes below:  None

Name of product (As you would like it to read on your certificate)	Organic ingredients identified in information panel (✓)	Certifying agent name identified on label (✓)	Use USDA seal on label (✓)	Use certifying agent seal/logo on label (✓)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Are any non-organic agricultural ingredients used?**  Yes  No  
 If yes, list all organic products which contain non-organic agricultural ingredients.

If yes, describe your attempts to source organic ingredients.

**Are sulfites, nitrates, or nitrites added during the production or handling process?**  Yes  No  
 If yes, list all organic products produced with sulfites, nitrates, or nitrites.

**Do any products labeled "organic" show the percentage of organic ingredients on the label?**  Yes  No  
 If yes, list all products so labeled.

Does the size of the percentage statement exceed one-half the size of the largest type size on the panel on which the statement is displayed?  Yes  No

Does the percentage statement appear in its entirety in the same type size, style, and color without highlighting?  Yes  No

Is the percentage rounded down to the nearest whole number?  Yes  No

**C. PRODUCTS HANDLED, SOLD, LABELED, OR REPRESENTED AS "MADE WITH ORGANIC (SPECIFIED INGREDIENTS OR FOOD GROUP(S))"**

(At least 70% certified organic ingredients; up to 3 ingredients or food groups can be listed on Principal Display Panel)  
 \*If more space is needed, please attach a separate list with all requested products.

List all "Made with organic (ingredients or food group(s))" products and check appropriate boxes below:  None

Name of product (As you would like it to read on your certificate)	How many ingredients or food groups are listed on the label?	List each ingredient or food group <sup>1</sup> shown on the principal display panel	Organic ingredients identified in information panel (✓)	Certifying agent name identified on label (✓)	Certifying agent seal/logo on label (✓)
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Does the "made with organic ingredients" statement on the principal display panel exceed one-half the size of the largest type size on the panel?  Yes  No

Does the "made with organic ingredients" statement on the principal display panel appear in its entirety in the same type size, style, and color without highlighting?  Yes  No

Do any products labeled "made with organic ingredients" show the percentage of organic ingredients in the product?  Yes  No

If yes, does the size of the percentage statement exceed one-half the size of the largest type size on the panel on which the statement is displayed?  Yes  No

Does the percentage statement appear in its entirety in the same type size, style, and color without highlighting?  Yes  No

Is the percentage rounded down to the nearest whole number?  Yes  No

**D. PRODUCTS WITH LESS THAN 70% ORGANIC INGREDIENTS (organic ingredients listed only in the ingredient statement)**

List all products which contain less than 70% organic ingredients:  None

**E. BY-PRODUCTS**

Will any by-products from certified organic products be sold as certified organic?  Yes  No  Not applicable

If yes, list all organic products manufactured from by-products:

Include information on organic by-products as applicable on this Organic Handling Plan.  
 Attach an Organic Product Profile sheet for each product.

<sup>1</sup> Choose from the following food group listings: beans, fish, fruits, grains, herbs, meats, nuts, oils, poultry, seeds, spices, sweeteners, vegetables, or processed milk products.

**F. WATER** No water used**Check ways water is used in processing:**

- ingredient    processing aid    cooling    cleaning organic products  
 cooking    product transport    cleaning equipment    other (specify)

**Source of water:**                       municipal                       on-site well                       other (specify)

**Does the water meet the Safe Drinking Water Act?**                       Yes    No  
*Attach copy of water test, if applicable.*

**What on-site water treatment processes are used?**                       None

**Is steam used in the processing or packaging of organic products?**                       Yes    No  
 If yes, describe how steam is used:

**If steam has direct contact with organic products, do you use:**                       No direct contact

steam filters                       condensate traps                       testing of finished products  
 testing of condensate                       other (specify)

**List products used as boiler additives.**                       No boiler additives used  
*Attach a label and product information (e.g. volatility) for boiler additives, if applicable.*

**Describe how you monitor water quality.**

**How often do you conduct water quality monitoring?**

weekly    monthly    annually    as needed    other (specify)

**SECTION 3: Assurance of Organic Integrity**

NOP Rule 205.201(a), 205.270 and 205.272

NOP Rule requires that handling practices and procedures present no contamination risk to organic products from commingling with non-organic products or contact with prohibited substances. Packaging materials, bins, and storage containers must not have contained synthetic fungicides, preservatives, or fumigants. Reusable bags or containers must be clean and pose no risk to the integrity of organic products. Procedures used to maintain organic integrity must be documented.

**A. PRODUCT FLOW**

**Attach a complete written description or schematic product flow chart which shows the movement of all organic products, from incoming/receiving through production to outgoing/shipping. Indicate where ingredients are added and/or processing aids are used.**                       Product Flow Attached

**B. ORGANIC INTEGRITY**

**Do you have an organic integrity program in place to address areas of potential commingling and/or contamination?**                       Yes    No

If yes, list specific control points you have identified in your process and state how you have addressed them to protect organic integrity, or attach a copy of your organic integrity program.

If no, do you have plans to implement an organic integrity program?                       Yes    No

**C. MONITORING**

**Do you have a Quality Assurance program in place?**

Yes  No

If yes, what program do you use?  ISO  HACCP  TQM  other (specify)

**Are any outside quality assessment services used (e.g. AIB)?**

Yes  No

If yes, name of company

**Product testing:** (Check all that apply)

- ingredients tested prior to purchase  ingredients tested upon receipt  finished products tested  
 products tested during production  other (specify)

**How do you prevent the use of ingredients produced using excluded methods (genetic engineering), sewage sludge, or ionizing radiation?** (Check all that apply)

- GE testing  letters from manufacturers  other (specify)

**Are ingredient samples retained?**

Yes  No

If yes, how long?

**Are finished product samples retained?**

Yes  No

If yes, how long?

**Do you have a product recall system in place?**

Yes  No

**D. EQUIPMENT**

List all equipment used in processing and check appropriate boxes below:

Equipment Name	Capacity	Check if equipment is cleaned prior to organic production (✓)	Check if cleaning is documented (✓)	Check if the equipment is purged prior to organic production (✓)
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If equipment is purged, list and describe purge procedures, quantities purged, and documentation.

**E. SANITATION**

**Check all cleaning methods used:**

- sweeping  vacuuming  compressed air  clean in place (CIP)  steam cleaning  
 scraping  manual washing  sanitizing  other (specify)

Provide information on your cleaning program, products used, and check appropriate boxes below:

Area	Type of cleaning	Cleaning equipment used	Products used	Frequency	Check if cleaning is documented (✓)
Receiving area					<input type="checkbox"/>
Ingredient storage					<input type="checkbox"/>
Product transfer					<input type="checkbox"/>
Production area					<input type="checkbox"/>
Production equipment					<input type="checkbox"/>
Packaging area					<input type="checkbox"/>
Finished product storage					<input type="checkbox"/>
Loading dock					<input type="checkbox"/>
Building exterior					<input type="checkbox"/>
Accidental spills					<input type="checkbox"/>
Other (specify)					<input type="checkbox"/>

Are all surfaces which contact organic products food grade?  Yes  No

Do you test food contact surfaces or rinsate for cleaner/sanitizer residues?  Yes  No

Are any persistent cleaners/sanitizers used at your operation (e.g. quaternary ammonium)?  Yes  No

If yes, do any persistent cleaners/sanitizers contact surfaces that contact organic products?  Yes  No  
 If yes, describe how the compounds/residues are removed.

Where are cleaning/sanitizing materials stored?

List all cleaning and sanitizing products used on your operation below:

Attach label / product information for cleaning and sanitizing products.

Cleaning / Sanitation Product Brand Name	Manufacturer	Approved			Explain if each material has food contact. • If removed from equipment, explain method of removal. • If restricted, describe compliance with NOP rule annotation.
		O M R I	W S D A	I S D A	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## F. PACKAGING

### Check types of packaging material used:

- paper     cardboard     wood     glass     synthetic fiber     metal     plastic  
 foil     waxed paper     aseptic     natural fiber     other (specify)

### Where are packaging materials stored?

### Are any fungicides, fumigants, or pest control products used in this storage area?

- Yes     No

If yes, describe use and list specific products.

### Have any packaging materials been exposed to synthetic fungicides, preservatives, or fumigants?

- Yes     No

If yes, describe exposure, including name of products used:

### Are packaging materials reused?

- Yes     No

If yes, describe how reusable packaging materials are cleaned prior to use:

## G. STORAGE

### Provide information on your storage areas by completing the following table:

Use	Location	Type/ capacity	Identificatio n name or number	Is storage unit dedicated organic? (✓)	Comments on potential for contamination or commingling problems
Ingredient storage				<input type="checkbox"/>	
Packaging material storage				<input type="checkbox"/>	
In-process storage				<input type="checkbox"/>	
Finished product storage				<input type="checkbox"/>	
Off-site storage*				<input type="checkbox"/>	
Other (specify)				<input type="checkbox"/>	

\*If there is off-site storage, give name, address, phone number, contact person, and type of products stored at off-site facility.

## H. TRANSPORTATION OF ORGANIC PRODUCTS

### Incoming Transportation:

### In what forms are incoming products received?

- dry bulk     liquid bulk     tote bags     tote boxes     cardboard drums  
 metal drums     paper bags     foil bags     other (specify)

### How are incoming products transported?

**Do you arrange incoming product transport?**  Yes  No

If you use transport companies, have they been notified of organic handling requirements?  Yes  No

**Are transport units used to carry non-organic products or prohibited substances?**  Yes  No

If yes, explain how you ensure that inbound transport units are cleaned prior to loading organic products:

Is the inspection/cleaning process documented?  Yes  No

**Are organic products shipped at the same time as non-organic in the same transport units?**  Yes  No

If yes, check all steps taken to segregate organic products:

- |  |   |
|--|---|
| <input type="checkbox"/> use of separate pallets         | <input type="checkbox"/> pallet tags identifying "organic"                |
| <input type="checkbox"/> organic product shrink wrapped  | <input type="checkbox"/> organic product sealed in impermeable containers |
| <input type="checkbox"/> separate area in transport unit | <input type="checkbox"/> other (specify)                                  |

**In-Process Transportation:**

**How are in-process products transported?**

**Explain how you ensure that in-process transport units are cleaned prior to loading organic products:**

Is the inspection/cleaning process documented?  Yes  No

**Outgoing Finished Product Transportation:**

**In what form are finished products shipped?**

- |                                      |                                      |  |   |  |                                    |
|--------------------------------------|--------------------------------------|--|---|--|------------------------------------|
| <input type="checkbox"/> dry bulk    | <input type="checkbox"/> liquid bulk | <input type="checkbox"/> cardboard drums | <input type="checkbox"/> paper bags     | <input type="checkbox"/> foil bags       | <input type="checkbox"/> tote bags |
| <input type="checkbox"/> metal drums | <input type="checkbox"/> mesh bags   | <input type="checkbox"/> cardboard cases | <input type="checkbox"/> plastic crates | <input type="checkbox"/> other (specify) |                                    |

**How are outgoing products transported?**

**Do you arrange outgoing product transport?**  Yes  No

If you use transport companies, have they been notified of organic handling requirements?  Yes  No

**Are transport units used to carry non-organic products or prohibited materials?**  Yes  No

If yes, explain how you ensure that outgoing transport units are cleaned prior to loading organic products:

Is the inspection/cleaning process documented?  Yes  No

**Are organic products shipped at the same time as non-organic in the same transport units?**  Yes  No

If yes, check steps taken to segregate organic products:

- |   |  |
|---|--|
| <input type="checkbox"/> use of separate pallets                          | <input type="checkbox"/> pallet tags identifying "organic" |
| <input type="checkbox"/> organic product shrink wrapped                   | <input type="checkbox"/> separate area in transport unit   |
| <input type="checkbox"/> organic product sealed in impermeable containers | <input type="checkbox"/> other (specify)                   |

NOP Rule requires management practices to prevent pests, such as removal of pest habitat, food sources, and breeding areas, and prevention of access to handling facilities. Environmental factors, such as temperature, light, humidity, atmosphere, and air circulation, may be used to prevent pests. Pests may be controlled using mechanical or physical means, such as traps, light, or sound. Lures and repellents may be used if they do not contain prohibited substances or products produced using excluded methods (genetically engineered). If these measures are not effective, a synthetic substance not on the National List may be used provided the certifying agent approves use of the substance, method of application, and measures taken to prevent contact with ingredients or organic products. Use of pest control products must be documented and included as part of the Organic Handling Plan.

**Attach a facility map showing the location of equipment, storage areas, pest control, etc.**

Facility map attached

**What type of pest management system do you use?**

In-house: name of responsible person;

Contract pest control service: name, address, phone number:

**Are records kept of your pest monitoring activities?**

Yes  No

**Check all aspects of your waste management system that apply:**

on-site dumpster  material recycling  daily pick-up of waste  
 composting  field application of waste  other (specify)

**Does your waste management system provide habitat and/or food sources for pests?**

Yes  No

If yes, please describe:

**Check all pest problems you generally have:**

flying insects  crawling insects  rats  mice  spiders  birds  
 other (specify)

**Check all pest prevention and management practices you use:**

<input type="checkbox"/> removal of exterior habitat/food sources	<input type="checkbox"/> inspection zones around interior perimeter	<input type="checkbox"/> monitoring
<input type="checkbox"/> sheet metal on sides of building exterior	<input type="checkbox"/> incoming ingredient inspection for pests	<input type="checkbox"/> ryania
<input type="checkbox"/> good sanitation	<input type="checkbox"/> clean up spilled product	<input type="checkbox"/> fogging
<input type="checkbox"/> sealed doors and/or windows	<input type="checkbox"/> screened windows, vents, etc.	<input type="checkbox"/> exclusion
<input type="checkbox"/> physical barriers	<input type="checkbox"/> positive air pressure in facility	<input type="checkbox"/> mowing
<input type="checkbox"/> precipitated silica	<input type="checkbox"/> ultrasound/light devices	<input type="checkbox"/> boric acid
<input type="checkbox"/> sticky traps	<input type="checkbox"/> repair of holes, cracks, etc.	<input type="checkbox"/> pyrethrum
<input type="checkbox"/> electrocutors	<input type="checkbox"/> release of beneficials	<input type="checkbox"/> nitrogen
<input type="checkbox"/> pheromone traps	<input type="checkbox"/> scare eye balloons	<input type="checkbox"/> rotenone
<input type="checkbox"/> freezing treatments	<input type="checkbox"/> mechanical traps	<input type="checkbox"/> carbon dioxide
<input type="checkbox"/> heat treatments	<input type="checkbox"/> vacuum treatments	<input type="checkbox"/> fumigation
<input type="checkbox"/> vitamin baits	<input type="checkbox"/> disodium octal tetrahydrate	<input type="checkbox"/> air showers
<input type="checkbox"/> diatomaceous earth	<input type="checkbox"/> crack and crevice spray	<input type="checkbox"/> air curtains
<input type="checkbox"/> other (specify)		

List all pest control products used in the last 12 months or those which are anticipated to be used. The following information may be submitted on a separate document or form if desired.

Attach label / product information for all pest control products.

Product Brand Name	Manufacturer	Target pest	Location where used	Method of application	Date of last application

Are records kept of all pesticide applications?  Yes  No

If a pest control substance is used, list all measures taken to prevent contact with organic products, ingredients or packaging materials.

Are any substances used which are prohibited according to the National List?  Yes  No

If yes, did you contact the certifying agent for prior approval before using?  Yes  No

If prohibited pest control products were used, what measures are you taking or planning to take to prevent their use in the future?

Are there any substances intended for use which are not listed above?  Yes  No

If yes, list substances intended for use:

**SECTION 5: Record Keeping**

NOP Rule 205.103

NOP Rule requires that records disclose all activities and transactions of the operation, be maintained for 5 years, and demonstrate compliance with the NOP Rule. Organic products must be tracked from receipt of incoming ingredients to sale of finished products. Organic ingredients must be verified as certified organic. Amounts of organic finished products must balance with certified organic ingredients purchased. All relevant documents must identify products as "organic." All records must be accessible to the inspector.

Will you keep your records for at least 5 years?

Yes

Which of the following records do you keep for organic processing/handling?

Incoming:

- purchase orders
- contracts
- invoices
- receipts
- receiving records
- receiving summary log (12 mos.)
- bills of lading
- scale tickets
- quality test results
- Certificates of Analysis
- copies of organic certificates of ingredients

- verification of non-GMO ingredients
- verification of ingredients produced not using sewage sludge
- verification of ingredients produced/handled without ionizing radiation
- documentation that organic ingredients are not commercially available, when using non-organic ingredients
- for imported products, import documentation tracing back all movement to last certified entity
  - Transaction Certificates
  - customs forms
  - phytosanitary certificates
- other (specify)

**In-Process:**

- ingredient inspection forms
- packaging reports
- production reports
- blending reports
- sanitation logs
- QA reports
- equipment clean-out logs
- production summary records (12 mos.)
- other (specify)

**Storage:**

- ingredient inventory reports
- finished product inventory reports
- other (specify)

**Outgoing:**

- shipping log
- sales invoices
- purchase orders
- shipping summary log
- audit control register
- other (specify)
- bills of lading
- sales orders
- phytosanitary certificates
- export declaration forms
- complaint log
- scale tickets
- sales summary log
- transport unit inspection/cleaning forms
- Transaction Certificates
- copies of Certificates of Organic Operation

**Describe your lot numbering system.**

**Can your record keeping system track the finished product back to all ingredients?**  Yes  No

**Can your record keeping system balance organic ingredients in and organic products out?**  Yes  No

**When organic products are sold, are they identified as organic on the sales documentation?**

- Yes
- No (if no please explain)