

Documentation Forms for Organic Crop Producers

Land Use History Verification

Organic Producer Name:	Crop Production Year:	
I,, aff or were under my management and co that during this time, to the best of my treated seed, synthetic fertilizers, or other	firm that the parcel(s) of land described introl during the following dates: knowledge, there were no herbicides, p er prohibited materials applied to this la	below were farmed/ranched by me I also affirm esticides, fungicides, fungicide- ind.
Description of land parcel(s) by assessor description):	r's parcel number, county, township/sec	tion/range, (or other regulatory
Number of acres in parcel(s):		
All materials that have been applied to of application, and field number or parc		what was applied, the specific date
Parcel / Field Location & Crop	Material / Manufacturer	Date Applied
I submit that the above is true and acc	urate on this date of	
Signature		
Name (printed)		



