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Farm Organic System Plan

Please complete this form in its entirety if you are new applicant. Please also ensure that you attach the Farm Organic System Plan Annual Update. Sign this form and attach supporting documentation as specified in Section 7. Any incomplete information may lead to a delay in certification. Use additional sheets if necessary. Mark any sections that do not apply to your operation as "Not Applicable." Contact your Chapter Administrator or the Humboldt office, if you have any questions regarding the completion of this form. **This form is confidential when completed.**

Program-specific questions must be completed if certification to that program is being requested, otherwise leave blank

SECTION 1: General Information

<input type="checkbox"/>	Operator Name:	Operator Number:
<input type="checkbox"/>	Operation Name:	
↑ Check off the name(s) to be shown on the Certificate.		
Contact Person's Name (if different from applicant):		
Secondary Contact Person's Name (if applicable):		
PHYSICAL INSPECTION LOCATION INFORMATION		
OPERATION'S CONTACT INFORMATION		
<input type="checkbox"/> Same information as inspection location		
Address:		Mailing Address:
City:	Province:	Postal Code:
City:	Province:	Postal Code:
Phone 1:	Phone 2:	Phone 1:
Phone 2:		Phone 2:
Cell:	Fax:	Cell:
Fax:		Fax:
E-mail Address:		E-mail Address:
Web Site:		Web Site:
Please provide directions to the inspection location(s) and indicate when you are available to contact:		
1. Please list previous organic certification applications to other agencies (name, year(s) of application, outcome of application)		
2. If you are transferring to TCO Cert from another certification agency , have you ever been denied certification, received a Notice of Noncompliance, had your certification proposed for suspension or revocation, or had your certification suspended, cancelled or revoked? If yes, provide a copy of each notice of denial, Notice of Noncompliance, proposal for suspension or revocation, or suspension, cancellation or revocation and attach documentation of the corrective actions taken in response.		<input type="checkbox"/> Not Applicable <input type="checkbox"/> Yes <input type="checkbox"/> No

Applicant Initials: _____ Date: _____

SECTION 2: Soil and Crop Fertility Management

Soil management including crop rotation, must actively build soil fertility, manage plant nutrients, protect natural resources, and prevent soil erosion. All fertility inputs must be verified for compliance to the standards prior to actual use. The operator must monitor fertility practices and procedures to verify that the organic plan is effectively implemented. Plant and animal materials (manure, compost, and non-composted plant materials) must be managed so that they do not contribute to contamination of crops, soil, and water by plant nutrients, pathogenic organisms, heavy metals, or residues of prohibited substances.

A. GENERAL INFORMATION:		
1. What are the major components of your soil and crop fertility plan?		
<input type="checkbox"/> Crop rotation	<input type="checkbox"/> Inter-planting	<input type="checkbox"/> Green manure plow-down/cover crops
<input type="checkbox"/> Summer fallow	<input type="checkbox"/> Sub-soiling	<input type="checkbox"/> Incorporation or crop residues
<input type="checkbox"/> Compost	<input type="checkbox"/> On-farm manure	<input type="checkbox"/> Off-farm manure
<input type="checkbox"/> Soil amendments	<input type="checkbox"/> Side dressing	<input type="checkbox"/> Foliar fertilizers
<input type="checkbox"/> Biodynamic preparations	<input type="checkbox"/> Soil inoculants	<input type="checkbox"/> Other (specify):
2. What are your soil nutrient deficiencies?		
3. How do you monitor the effectiveness of your fertility management program?		
<input type="checkbox"/> Soil testing	<input type="checkbox"/> Microbiological testing	<input type="checkbox"/> Companion crops yields
<input type="checkbox"/> Tissue testing	<input type="checkbox"/> Observation of soil	<input type="checkbox"/> Other (specify):
<input type="checkbox"/> Crop quality testing	<input type="checkbox"/> Observation of crop health	Attach copies of available test results.
4. If you use fertilizers with high salt content (sodium nitrate, potassium sulfate, etc.), how do you prevent salt buildup? <input type="checkbox"/> Not Applicable		
5. Do you burn crop residues? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe what materials are burned and why.		
6. If off-farm inputs are used, please describe the attempts that were made to improve soil fertility, weed control and/or pest control through natural means (rotation, on-farm inputs, etc.) first.		
B. COMPOST USE: <i>If composted material is used as part of the fertility program, it must be produced according to organic standards if it is to be applied as actual "compost" and nor as raw manure.</i> <input type="checkbox"/> Not Applicable		
1. Please provide a list of ingredients in the compost.		
2. Do you monitor compost temperature? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what temperature is maintained?		
3. How long (days) is this temperature maintained?		
4. Has the compost been tested for acceptable limits of human pathogens?		

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C. MANURE USE: *If raw or aged manure is used, it must be used in accordance to the applicable organic program. Each organic program has different requirements concerning the use of raw manure.* Not Applicable

1. What forms of manure do you use?
 None Fully composted Semi-solid Other (specify):
 Piled Liquid Pelleted

2. What type of crops do you grow (check all that apply)?
 Crops not used for human consumption
 Crops for human consumption whose edible portion has direct contact with the soil
 Crops for human consumption whose edible portion does not have direct contact with the soil
 If you grow crops for human consumption and use raw manure, you **must** ensure that the dates of manure applications are clearly documented on field histories or in other records.

3. List all ingredients/additives (hay, straw, woodchips/shavings, pit additives, etc.) for the manure that is used. For off-farm, attach additive specifications of off-farm manure (if applicable), along with a statement from the supplier verifying that no prohibited substances (i.e. herbicides, odor suppressants, etc.) were applied to the manure or around the pile.

4. Please indicate the type of operation where the manure is sourced: Is it a fully caged system where animals are not able to turn 360 degrees or are livestock kept permanently in the dark?

5. What precautions do you take to ensure water, soil or crops are not contaminated by manure runoff?

D. NATURAL RESOURCES: *Standards require that production practices must maintain or improve the natural resources of the operation, including soil and water quality. Practices must minimize erosion. Irrigation water should not contaminate organic crops with prohibited materials. Methods to conserve water usage should be part of the irrigation plan.*

SOIL CONSERVATION
 1. Do you have any soil erosion problems? Yes No
 If yes, please indicate fields and nature of the problem(s).

2. What conservation practices are used? None
 Terraces Permanent waterways Riparian management
 Contour farming Windbreaks Undersowing/interplanting
 Strip cropping Firebreaks Maintain wildlife habitat
 Conservation tillage Tree lines wildlife habitat conservation
 Winter cover crops Retention ponds Other (specify):

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WATER USE	
3. In what ways is water used in your operation?	<input type="checkbox"/> Not Applicable
<input type="checkbox"/> Irrigation <input type="checkbox"/> Livestock <input type="checkbox"/> Foliar sprays <input type="checkbox"/> Washing crops <input type="checkbox"/> Greenhouse <input type="checkbox"/> Other (specify):	
4. Source of water:	
<input type="checkbox"/> On-site well(s) <input type="checkbox"/> River/creek/pond <input type="checkbox"/> Irrigation district <input type="checkbox"/> Spring <input type="checkbox"/> Municipal/county <input type="checkbox"/> Other (specify):	
5. Type or irrigation system:	
<input type="checkbox"/> None <input type="checkbox"/> Micro-spray <input type="checkbox"/> Center pivot <input type="checkbox"/> Other (specify): <input type="checkbox"/> Drip irrigation <input type="checkbox"/> Flood <input type="checkbox"/> Underground	
6. What input products are applied through the irrigation system, either to organic or non-organic fields?	<input type="checkbox"/> None
7. What products do you use to clean irrigation lines/nozzles?	<input type="checkbox"/> None
8. Is the system shared with another operator? If yes, what products do they use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Is the system flushed and the flushes documented between conventional and organic use if prohibited materials are used?	<input type="checkbox"/> Not Applicable <input type="checkbox"/> Yes <input type="checkbox"/> No
WATER QUALITY	
10. What practices are used to protect water resources?	
<input type="checkbox"/> Fencing livestock from waterways <input type="checkbox"/> Scheduled use of water to conserve its use <input type="checkbox"/> Tensiometer/monitoring <input type="checkbox"/> Other (specify): <input type="checkbox"/> Laser leveling/land forming	
11. What water contamination problems do your experience (why and where)?	<input type="checkbox"/> None
12. Describe your efforts to minimize water contamination problems listed above.	

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SECTION 3: Crop Management

Standards require a crop rotation plan that maximizes soil organic matter content, prevents weed, pest, and disease problems, and manages deficient or excess plant nutrients. Your crop rotation may include sod, cover crops, green manure crops, and catch crops. Cultural practices, such as the selection of plant species and varieties adapted to site-specific conditions should be used to enhance crop health.

- All weed, pest and disease control inputs used or intended for use during the current year and used in the previous three years must be listed on your Field History Sheets.
- Name of the product and date of last use of a prohibited substance must be in field histories.

A. CROP ROTATION:

1. What are the main crop rotations that are used in your operation (example: corn, soybeans, alfalfa 2 years—repeat)? Please note all general rotations used.

B. WEED MANAGEMENT PLAN:

1. What are your problem weeds?

2. What weed control methods do you use?

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Crop rotation | <input type="checkbox"/> Mowing | <input type="checkbox"/> Smother crops | <input type="checkbox"/> Other (specify): |
| <input type="checkbox"/> Field preparation | <input type="checkbox"/> Livestock grazing | <input type="checkbox"/> Corn gluten | |
| <input type="checkbox"/> Delayed seeding | <input type="checkbox"/> Flame weeding | <input type="checkbox"/> Soap-based herbicide | |
| <input type="checkbox"/> Monitoring soil temperature | <input type="checkbox"/> Steam weeding | <input type="checkbox"/> Use of fast emerging varieties or other appropriate species | |
| <input type="checkbox"/> Soil sterilization | <input type="checkbox"/> Electrical | <input type="checkbox"/> Sprayer application of herbicide | |
| <input type="checkbox"/> Mechanical cultivation | <input type="checkbox"/> Black fallow | <input type="checkbox"/> Prevention of weed seed set | |
| <input type="checkbox"/> Use of hand tools | <input type="checkbox"/> Non-synthetic mulch | | |
| <input type="checkbox"/> Hand weeding | <input type="checkbox"/> Synthetic mulch | | |

3. Do you keep a record of how often you utilize these weed control methods; e.g., dates and fields when you cultivate or flame weed a specific field? Yes No

4. If you use plastic or other synthetic mulches, is the mulch removed at the end of the growing harvest season? Not Applicable Yes No

If no, what is the reason?

5. If you use newspaper or other recycled paper for mulch, do you use paper with glossy or colored inks? Not Applicable Yes No

C. PEST MANAGEMENT PLAN:

1. What are your problem insect pests?

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2. What strategies do you use to control pest damage to crops? <input type="checkbox"/> None		
<input type="checkbox"/> Crop rotation <input type="checkbox"/> Timing of planting <input type="checkbox"/> Companion planting <input type="checkbox"/> Frog ponds <input type="checkbox"/> Bat houses <input type="checkbox"/> Bird houses <input type="checkbox"/> Hand picking <input type="checkbox"/> Trap crops <input type="checkbox"/> Monitoring	<input type="checkbox"/> Physical barriers <input type="checkbox"/> Physical removal <input type="checkbox"/> Traps <input type="checkbox"/> Lures <input type="checkbox"/> IPM <input type="checkbox"/> Insect repellents <input type="checkbox"/> Use of allowed products <input type="checkbox"/> Use of restricted products <input type="checkbox"/> Animal repellents	<input type="checkbox"/> Limited use of prohibited products <input type="checkbox"/> Selection of appropriate plant species/varieties <input type="checkbox"/> Development of habitat for natural enemies <input type="checkbox"/> Release of predators/parasites of pest species <input type="checkbox"/> Other (specify):
3. Do you keep a record of how often you use these pest control methods, i.e., dates when you scout or apply inputs to a specific field or crop? <input type="checkbox"/> Yes <input type="checkbox"/> No		
D. DISEASE MANAGEMENT PLAN:		
1. What are your problem crop diseases?		
2. What disease prevention strategies do you use?		
<input type="checkbox"/> None <input type="checkbox"/> Field sanitation <input type="checkbox"/> Crop rotation <input type="checkbox"/> Plant spacing <input type="checkbox"/> Vector management <input type="checkbox"/> Soil balancing	<input type="checkbox"/> Solarization <input type="checkbox"/> Companion planting <input type="checkbox"/> Compost/tea use <input type="checkbox"/> Use of allowed materials <input type="checkbox"/> Use of restricted materials	<input type="checkbox"/> Limited use of prohibited materials <input type="checkbox"/> Selection of appropriate plant species/varieties <input type="checkbox"/> Sprayer application of fungicide <input type="checkbox"/> Timing of planting/cultivating <input type="checkbox"/> Other (specify):
3. Were any of the weed/pest/disease control inputs applied to your land part of a disease control program imposed by a local or governmental agency and/or used for scientific tests approved by a proper authority? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please identify which ones and explain:		

SECTION 4: Maintenance of Organic Integrity

A. ADJOINING LAND USE: <i>Standards and regulations require that organic harvest areas have distinct boundaries and buffer zones to prevent the unintended application of a prohibited substance or contact with a prohibited substance that is applied to adjoining land not under organic management. Adjoining land includes cropland, pastures, residential property, fallow land, etc. Buffer areas may change annually, depending on the contamination potential from adjoining land uses. If crops within the required buffer zone are harvested, records must be maintained demonstrating storage and disposition as non-organic crop. Please be sure to identify all buffer areas on all field maps.</i>	
1. Are you familiar with the uses of the land adjoining your organic fields and do you watch for potential problems? <input type="checkbox"/> Yes <input type="checkbox"/> No	

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2. What types of buffer zones (crop, tree lines, grass strips, etc.) do you maintain around your organic fields?
3. What is the width of the buffers?
4. How are buffers managed (plowed down, let stand, harvested, etc.)?
5. If buffers are in crop and harvested, what is done with this crop and how is commingling avoided?
All necessary buffer zones must be clearly identified on the field maps
6. Do you conduct any GMO testing for your seed and/or product(s) to be sold? <input type="checkbox"/> Yes <input type="checkbox"/> No
7. Is there any potential for unintended contamination from run-off or waterways? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify in which fields (and mark on your field maps):
8. Which of the following additional safeguards are used to prevent unintended contamination? <input type="checkbox"/> None Written notification to: <input type="checkbox"/> Government/highway departments <input type="checkbox"/> Drainage commissions <input type="checkbox"/> Electric companies <input type="checkbox"/> Farm Service office <input type="checkbox"/> Aerial spray companies/airports <input type="checkbox"/> Other (specify):
9. Have you posted "No Spray" signs along roadsides that adjoin organic fields? <input type="checkbox"/> Yes <input type="checkbox"/> No
10. Do any fields or portions of fields flood frequently (more than once every 10 years)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list field numbers:
B. EQUIPMENT: <i>To prevent commingling and contamination, all equipment used in organic crop production must be free of non-organic crop residues and prohibited materials. Equipment used for both organic and non-organic farming (including equipment used to harvest buffer zones) must be cleaned prior to use on organic fields or crops. Records documenting the cleaning of equipment must be maintained.</i>
1. Are clean-out logs kept for all equipment (including custom equipment) that is used for both organic and non-organic crop production? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Equipment only used on organic fields/crops (not used in buffers/non-organic fields)
2. Is your equipment maintained so that fuel, oil and hydraulic fluid do not leak? <input type="checkbox"/> Yes <input type="checkbox"/> No
3. Could any equipment you use have been contaminated by previous uses? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe:
4. If used equipment was purchased, was a thorough clean-down performed and documented? <input type="checkbox"/> Yes <input type="checkbox"/> No
C. HARVEST: <i>Standards require that containers, bins, and packaging materials must not contain synthetic fungicides, preservatives, or fumigants. All reusable containers must be thoroughly cleaned and pose no risk of contamination prior to use.</i>
1. Describe your harvesting methods and the steps taken to protect organic crops from commingling and contamination during harvest.

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2. What kind of harvest records are kept to document harvest dates, amounts, etc.? Please describe.

3. What types of handling units are used for harvesting?
 Gravity wagons/boxes PVC plastics Other (specify):
 Truck boxes Wooden totes
 Cardboard/waxed boxes Plastic containers

4. Are the handling units indicated above new or used? New Used
 If used, what did they contain prior to organic use?

5. Are the containers used for organic crops only? Yes No
 If no, are they cleaned and the cleaning documented prior to organic use? Yes No

D. POST-HARVEST HANDLING: *Standards require that post-harvest handling procedures do not commingle organic products with non-organic crops and prevent contact with prohibited materials.* Not Applicable

1. Indicate which post-harvest handling procedures and equipment are used:
 On-Farm Cleaning
 Off-Farm Cleaning
 Name of off-farm cleaner:
 Certification and/or attestation documentation attached? Yes No
 Mobile Cleaner
 Name of mobile cleaner:

2. If on-farm cleaning, is either the post-harvest area or equipment used for both organic and non-organic products? Yes No
 If yes, describe measures taken to prevent commingling and contamination and the documentation that is maintained.

3. Please describe all equipment sanitation and maintenance practices used:

4. Is documentation of such sanitation and maintenance maintained? Yes No

5. Please describe what forms of documentation are maintained:

6. Check types of packaging material used:
 None(bulk sales, no packaging) Metal Natural fiber
 Paper Foil Synthetic fiber
 Cardboard Plastic Tote sacks (plastic lined or unlined)
 Wood PVC plastics Other (specify):
 Glass Waxed paper

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7. If the product is to be sold as a food product (i.e. food-grade soybeans), is packaging documented as food-grade? Yes No

8. In what form are finished products shipped?

9. Has packaging been treated with any substance that could lead to contamination problems for your organic products? Yes No

If yes, what are they?

E. CROP STORAGE: Operators must keep organic and non-organic crops in separate storage areas and prevent commingling and contamination. Storage records must be maintained and kept current. No organic crop storage

Identify all storage units (including any rented space not under your control). Please attach additional sheets if necessary.

STORAGE ID #	ON-SITE OR OFF-SITE (If off-site, please note location)	TYPE OF STORAGE (bin, pole building, wagon, stack yard, barn, etc.)	CAPACITY	ORGANIC ONLY (OO), CONVENTIONAL (CO), or NOT DEDICATED (ND)

1. Do you use the same storage units (bins, granary, gravity boxes, etc.) for organic, in conversion, buffer harvests and non-organic crops? Yes No

If yes, is it stored in bulk? Yes No

How do you segregate crops to avoid commingling in storage?

2. Are storage units clearly labeled? Yes No

3. If you have non-organic bins, are your bins labeled for organic use (i.e. split/parallel operations, buffer harvest)? Not Applicable Yes No

If no, please explain:

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4. How do you ensure storage units are free from non-organic residues/prohibited material prior to storage of organic crops?
5. How are units cleaned and what material are used?
6. How do you prevent/control insect and/or rodent pests in crop storage areas? <input type="checkbox"/> No pest problems
Please list any products in Section 4B (inputs) of the Farm Organic System Plan Annual Update and attach labels for each product.
F. TRANSPORTATION
1. Describe how organic products are transported (truck, rail; bulk, covered with tarp, closed totes, sealed container, etc.):
2. What steps are taken to protect the integrity of organic products during transport? <input type="checkbox"/> Dedicated organic only <input type="checkbox"/> Inspecting transport units <input type="checkbox"/> Use of Off-Farm <input type="checkbox"/> Cleaning transport units prior to loading Transportation Cleaning prior to loading <input type="checkbox"/> Letter/contract with Affidavits transport company stating <input type="checkbox"/> Other (specify): organic requirements
3. Are transport units cleaned prior to the organic load? <input type="checkbox"/> Yes <input type="checkbox"/> No Describe how transport is cleaned and materials used:

SECTION 5: Record Keeping System

Standards require that records disclose all activities and transactions of the operation, be maintained for 5 years, demonstrate compliance with the applicable Standards and be available for review. Certification standards also require that records be sufficient to allow for organic products to be tracked from sale to the field/location where they were produced/harvested.

1. How long do you keep your records?
2. Do you maintain a Complaint Log? <input type="checkbox"/> Yes <input type="checkbox"/> No

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3. Which of the following records do you keep for organic production?

<input type="checkbox"/> Field maps	<input type="checkbox"/> Compost production records
<input type="checkbox"/> Field activity log(s)	<input type="checkbox"/> Documentation of previous land use for rented and/or newly purchased land
<input type="checkbox"/> Field history sheets (previous three years)	<input type="checkbox"/> Input records for soil amendments, seeds, manure, foliar sprays and pest control products (including all labels)
<input type="checkbox"/> Documentation of attempts to source organic seeds and/or planting stock	<input type="checkbox"/> Harvest records that show field numbers, date of harvest and harvest amounts (including custom harvest records)
<input type="checkbox"/> Documentation of organic seedlings	<input type="checkbox"/> Clean transport records
<input type="checkbox"/> Equipment cleaning records	<input type="checkbox"/> Storage records that show storage location, storage identification, field numbers, amounts stored, and cleaning activities
<input type="checkbox"/> Sales records (purchase order, contract, invoice, cash receipts, cash receipt journal, sales journal)	<input type="checkbox"/> Monitoring records (soil tests, tissue tests, water tests, quality tests, observations)
<input type="checkbox"/> Shipping records (scale ticket, dump station ticket, bill of lading)	<input type="checkbox"/> Other (specify):
<input type="checkbox"/> Audit control summary/register	
<input type="checkbox"/> Transaction Certificates	
<input type="checkbox"/> Copy of Organic System Plan	

4. Which of the following records do you keep for conventional production? Not Applicable

<input type="checkbox"/> Field maps	<input type="checkbox"/> Paid labor records	<input type="checkbox"/> Harvest records
<input type="checkbox"/> Field history sheets	<input type="checkbox"/> Storage records	<input type="checkbox"/> Shipping records
<input type="checkbox"/> Input records	<input type="checkbox"/> Sales records	<input type="checkbox"/> Other (specify):

These records must also be available for the inspector

5. Do labels and/or sales documents accompany any organic products**? Yes No
 **If yes, please submit samples for each type of label or Bill of Lading that is used and/or sales documentation.

6. If a lot numbering system is used, please provide a sample and describe what each component means:

SECTION 6: Additional Comments

Please provide any additional comments or information pertinent to this Organic System Plan.

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SECTION 7: Affirmation

I affirm that all statements made in this application are true, correct, and complete. No prohibited products have been applied to any of my organically managed fields during the three-year period prior to projected harvest. I understand that the operation may be subject to unannounced inspection and/or sampling for residues at any time as deemed appropriate. I understand that acceptance of this form in no way implies granting of certification by TCO Cert. I agree to abide by TCO Cert Bylaws and the certification standards and/or certification requirements applicable to my operation. I agree to notify TCO Cert in writing of changes in any of the following: farm contact information, applicant contact information, legal status, ownership or control of the operation. I agree to maintain for at least five years all records related to my organic operation. I agree to pay all fees assessed by TCO Cert. I further agree to abide by and fulfill duties and obligations to TCO Cert, as written in the Operator Licensing Agreement. I affirm that I understand the standards/regulations for the specific program(s) that I have requested and that the requested products were grown in accordance to these standards/regulations.

Signature of Operator

Date (M/D/Y)

Please maintain copies of the Organic System Plan and other supporting documents as part of your record keeping system.

Submit completed form, including the Farm Organic System Plan Annual Update, fees and supporting documents to your Chapter Administrator or, if not a Chapter member, to TCO Cert.

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