



Processing Organic System Plan

Please complete this form in its entirety and ensure that you attach the Organic Processing Plan Annual Update if you are renewing your certification. Sign this form and attach all applicable supporting documentation. Incomplete information may lead to a delay in certification. Use additional sheets if necessary. Program-specific questions must be completed if certification to that program is being requested, otherwise leave blank.

SECTION 1: General Information

Operation Name:	Operator Number:
-----------------	------------------

↑ **The Operation Name must be a person and a person means an individual, a corporation, an association, or an organization recognized as a legal entity. This name goes on the certificate.**

Other Name(s):

↑ **Other Name(s) may be another name by which the certificate holder is commonly known in the marketplace or any other name(s) the certificate holder wants added on the certificate. Leave blank if you don't want any other name 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:
----------	----------	----------	----------

Cell:	Fax:	Cell:	Fax:
-------	------	-------	------

E-mail Address:	E-mail Address:
-----------------	-----------------

Web Site:	Web Site:
-----------	-----------

SECOND INSPECTION LOCATION ADDRESS (if applicable):

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 Body , 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, 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
---	---

3. Type of processor:

- Primary
 Contracted facility – Name of primary:

4. Status of operation:

- 100% Organic to each requested program
 Mixed processing (org/non-organic—different products and/or programs)
 Parallel processing (org/non-organic—same products)

Estimated annual total production: % organic; % non-organic

5. Please briefly describe your overall operation. Include the frequency of organic production runs.

IMPORTANT NOTE: the inspection of your operation should occur when organic products are being prepared.

6. Custom manufactured products and private labeling

- a) Does your operation involve other companies in the production of your product(s)? Yes No
(This could include co-packers and warehouses or additional locations)

If so, please list these entities; provide a description of the business connections, and what services they provide to your operation.

If the other entity is in an organic certification program, please submit a copy of their organic certification with their Product Addendum showing compliance to the COR. If the other company is not in a certification program, you may be required to complete a Memorandum of Understanding form and the Questionnaire for the Contractual Service Provider.

Please contact TCO Cert for guidance.

- b) Does your operation custom produce for other companies? Yes No

If yes, provide the name of each entity and a description of the services you provide:

If yes, are they certified organic? Yes No

Do they provide you with ingredients or products? Yes No

If yes, list the ingredients or products they provide you with:

- c) Do you apply labels on behalf of the entity? Yes No

If yes, please list the brand name(s) of the product and submit a copy of their label to TCO Cert for approval.

You may need to complete a Private Label Agreement if your operation involves custom produce products for another entity. Please contact TCO Cert for guidance.

7. Please identify any local, state, provincial, federal, or third party certifications that you have, or inspections that have occurred at your operation. Include any certificates or inspections from local, provincial, or federal health departments.

Applicant Initials: _____ Date: _____

SECTION 2: Product Composition/Labeling

An operation may seek certification or an attestation for several activities including processing/preparation, packaging and labelling.

Please complete and attach the TCO Cert Product & Label Profiles, the Product List, the Supplier List, and the Organic Product Profile (OPI). Equivalent documents may be used in place of the (OPI) as long as they include all of the necessary information (ingredients, organic status, source, etc.) that is noted on the TCO Cert OPI sheet.

For products that are certified by another Certification Body (CB), please attach a copy of the current product certificate, the product list or addendum, a colour copy of the product label(s)/package or carton artwork including display cases and provide written verification that the CB has approved these.

A. PRODUCTS
<p>1. List all organic products your company is <u>requesting for organic certification</u> that are <u>also produced in a non-organic form</u>. Attach a list if necessary. <input type="checkbox"/> List attached</p>
B. PRODUCTS with Greater than 70% Ingredients
<p>1. Please briefly describe the documentation that is maintained to verify the organic status of the ingredients.</p>
<p>2. Are any non-organic agricultural ingredients used? <input type="checkbox"/> Yes <input type="checkbox"/> No (TCO Cert expects the operator to check at least three known suppliers of organic ingredients on an annual basis.) If yes, be sure each one is listed in the <i>TCO Cert Supplier List</i>. If yes, provide TCO Cert with a written copy of your attempts to source equivalent organic agricultural ingredients (32.310 par 9.2.1 d) for your “organic” products only (not applicable to 70-95% products). If yes, be sure to provide documentation confirming compliance for: a) any annotation restrictions in PSL tables 6.3 or 6.4 if the substance is listed, b) the GE prohibition in 1.4.a and the substrate requirement in 6.2 of the PSL, c) the irradiation prohibition in 1.4.c d) the cloned livestock prohibition in 1.4.h If yes, please submit specification sheet, technical sheet, or MSDS for each non-organic agricultural ingredient. If you do not have the above documentation, please explain why not:</p>
<p>3. If “ingredients classified as food additives” or “ingredients not classified as food additives” listed in PSL tables 6.3 and 6.4 are used, be sure each one is listed in the <i>TCO Cert Supplier List</i> and you have documentation confirming compliance for: a) any annotation restrictions in PSL tables 6.3 or 6.4 if the substance is listed, b) the GE prohibition in 1.4a and the substrate requirement in PSL table 6.2, c) the irradiation prohibition in 1.4.c d) the cloned livestock prohibition in 1.4h. If yes, please submit specification sheet, technical sheet or MSDS for each “ingredients classified as food additives” or “ingredients not classified as food additives”. If ingredients not listed in 6.3 or 6.4 are used, please list them here.</p>

Applicant Initials: _____ Date: _____

4. Are any flavours used?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Are any processing and/or packaging aids used?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, be sure each one is listed in the <i>TCO Supplier Spreadsheet</i> and provide product information such as technical specifications, and labels, etc.	
6. If yes, and they are non-organic agricultural processing aids be sure to have documentation confirming compliance for: a) any annotation restrictions in PSL table 6.5 if listed, b) the GE prohibition in 1.4a and the substrate requirement in 6.2 of the PSL, c) the nanotechnology restrictions in 1.4b d) the irradiation prohibition in 1.4.c e) the cloned livestock prohibition in 1.4h.	
7. And if yes, and they are non-agricultural processing aids be sure they are listed in PSL table 6.5 and have documentation confirming compliance for: a) any annotation restrictions in PSL table 6.5 b) the GE prohibition in 1.4a and the substrate requirement in PSL table 6.2 c) the nanotechnology restrictions in 1.4b d) the irradiation prohibition in 1.4.c e) the cloned livestock prohibition in 1.4h	
8. If you do not have the above documentation, explain why not.	
9. If yes, please submit specification sheet, technical sheet or MSDS for each non-organic agricultural processing aid or non-agricultural processing aid. <i>Remember - only non-agricultural processing aids listed in PSL table 6.5 may be used.</i>	
C. Ingredients Originating from the USA	
1. Do you use any organic agricultural ingredients that are produced in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, do you have a COR, JAS or EU certificate for these ingredients?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If not, do you have Canada / US Equivalency documentation for these ingredients?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Canada and the United states have an Equivalency Arrangement. There are three exceptions for NOP certified products entering Canada:	
<ul style="list-style-type: none"> • Sodium or Chilean nitrate is prohibited • Crops grown in hydroponic or aeroponic system are prohibited • Products from non-ruminant animals must be produced according to CAN/CGSB 32.310 	
<input type="checkbox"/> Yes, I have attached the applicable documentation.	
<input type="checkbox"/> No, please explain:	
D. Products Destined for Markets in the USA	
1. Are your products destined for markets in the USA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If you have answered yes, please be aware that under the Canada/US Equivalency Arrangement, product from animals treated with antibiotics may not be marketed in the USA. If you have questions on this, contact TCO Cert for guidance.</i>	
<i>Please also note that your products must be labeled in compliance with USDA NOP labeling regulations. Please refer to the TCO Cert Labelling Guide. Products and ingredients exported to the USA and imported into Canada from the USA must have documents that state: "Certified to the terms of the Canada/US Organic Equivalence Arrangement". This documentation may be stated on a Transaction Certificate, Product List or Addendum, on a Bill of Lading, Purchase Order, or other documentation, and must be submitted to TCO Cert.</i>	
E. Products Destined for Market in the EU and Japan	
1. Is your product destined for markets in Europe?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Is your product destined for markets in Japan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If YES, please contact the TCO Cert office for guidance.	

Applicant Initials: _____ Date: _____

F. WASTE PRODUCTS:

1. Will any byproducts, substandard or discarded materials from certified organic products be sold as organic? For example, to a livestock operator, or a compost operator, or a secondary processor. Yes No

If yes, list all these materials from organic products and describe the audit trail documentation maintained.

SECTION 3: Pest Management and Post-Harvest Substances

Organic standards require good production and manufacturing practices be adopted to prevent pests. These are outlined in 8.3.1 of CAN/CGSB 32.310. These strategies include the removal of pest habitat and food, prevention of access, environmental management, traps and lures as listed in Table 8.2 of the Permitted Substances Lists (PSL).

If measures listed in 8.3.1 are documented and found to be ineffective then substances listed in Table 8.2 of the PSL may be used. Measures must be taken to prevent contact with ingredients, organic products, and packaging materials.

*If pest control substances that are not listed in Table 8.2 of the PSL and post-harvest substances not listed in 8.3 are used under any mandatory government program, **operators must notify TCO Cert**, monitor, and document their use.*

Substances listed in Table 8.3 of the PSL may be used for post-harvest storage.

The use, storage, and disposal of unlisted pest control substances must be documented.

1. Attach a facility map showing the location of traps.

2. Who is responsible for pest control in the operation?

In house.

Contract pest control service* Name of service provider:

***Pest management must be under the control of the certified operator, even if pest control is contracted.**

3. Check all pest problems you generally have:

flying insects

crawling insects

rats

mice

spiders

birds

other (specify):

4. Check all pest management practices you use:

removal of pest habitat

removal of pest food sources

removal of pest breeding areas

sealed doors and/or windows

repair of holes, cracks, etc.

screened windows, vents, etc.

physical barriers

sheet metal on sides of building exterior

air curtains

air showers

positive air pressure in facility

good sanitation

cleanup of spilled product

exclusion

monitoring

mowing

incoming ingredient inspection for pests

inspection zones around interior perimeter

ultrasound devices

light devices

mechanical traps

heat treatments

temperature control

electrocutors

scare eye balloons

freezing treatments

vacuum treatments

5. Only when **pest management** practices described in #4 above are ineffective, may you use pest control substances listed in PSL table 8.2.

Not applicable, no substances listed in tables 8.2 are used.

Yes, pest control substances listed in tables 8.2 are used either inside or outside the facilities as follows:

If yes, please provide MSDS or technical information to TCO Cert for approval of the product before you use it.

Applicant Initials: _____ Date: _____

GENERIC SUBSTANCE/BRAND NAME	TARGET PEST	LOCATION WHERE USED	METHOD OF APPLICATION

6. Only when **pest control substances listed** in #5 above are ineffective, or there is a mandatory government program in place, pest control substances not listed in table 8.2 of the PSL may be used provided there is no risk to organic product, packaging materials status, or integrity.

- Not applicable - No unlisted substances are used
 Yes, pest control substances not listed in tables 8.2 either inside or outside the facilities are summarized below

If yes, please provide MSDS or technical information to TCO Cert for approval of the product before you use it.

GENERIC SUBSTANCE / BRAND NAME	TARGET PEST	LOCATION WHERE USED	METHOD OF APPLICATION

7. If you are using substances listed in PSL table 8.3 for post-harvest storage please list them.

Not Applicable

GENERIC SUBSTANCE / BRAND NAME	TARGET PEST	LOCATION WHERE USED	METHOD OF APPLICATION

8. Are records kept of all pest management practices, and the use of pest control substances and the storage, and disposal of unlisted pest control substances (whether in-house or contracted)?

Not Applicable
 Yes No

For all substances used, please attach pest control substance labels and copies of the SOP and/or GMP pertinent sections.

Applicant Initials: _____ Date: _____

SECTION 4: Maintaining Organic Integrity

All operations that handle, store and transport organic products for production and processing are to maintain the inherent organic qualities of the product through strict adherence to the procedures and principles of this standard. Operators are responsible for maintaining organic integrity at all points of the market supply chain, from production through point of sale to the final consumer.

A. PRODUCT FLOW: Attach a complete detailed written description or schematic product flow chart and a map that shows the equipment and movement of all organic products, from incoming/receiving through production to outgoing/shipping. On the flow chart indicate where ingredients are added and/or processing aids are used. All equipment and storage areas must be identified.

B. ORGANIC CONTROL POINTS: Similar to Hazard Analysis Critical Control Points (HACCP), Organic Control Points (OCPs) are points in a production system where the integrity of the organic product may be compromised. Examples are improper cleaning of equipment prior to running organic product, resulting in contamination by sanitation substances or commingling with non-organic products left in the equipment, or use of a prohibited pesticide when organic product is present, resulting in contamination by a prohibited material or substance. **OCPs should be noted on your processing flow chart.**

1. If you have employees, are they trained on organic production requirements and is this training documented? Yes No
If yes, please explain how they are trained and describe the documentation that is maintained for the training.

2. Does parallel processing occur at any of the facilities utilized for organic processing? Yes No
If yes, please complete the remaining questions in this section.

3. Please describe the system in place to prevent commingling and to provide a separation of organic processing by time and place from non-organic processing? Not Applicable

4. How are specific organic lots identified and what measures are taken to avoid mixtures or exchanges with non-organic products? Not applicable

****Please note if the preparation or packaging of organic products occurs infrequently, please be aware that you must contact the TCO Cert office in advance of the organic run. ****

C. MONITORING

1. Do you have a monitoring or quality assurance program in place? Yes No

If yes, what program do you use?

ISO HACCP TQM other (specify):

If a plan is in place, you may submit relevant sections of these programs with this application.

2. Do you have a product recall system in place? Yes No

If yes, please summarize the basic system that is in place and if mock recall exercises have been successful.

Applicant Initials: _____ Date: _____

D. EQUIPMENT:

List all food contact equipment used in processing.

EQUIPMENT NAME	FUNCTION	IF NOT DEDICATED ORGANIC		
		IS EQUIPMENT CLEANED PRIOR TO ORGANIC PRODUCTION?	IS EQUIPMENT PURGED PRIOR TO ORGANIC PRODUCTION?	IS THE CLEANING/PURGE DOCUMENTED?
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

1. If equipment is purged/cleaned, please describe the procedure(s) followed (indicate quantities of purged product, final disposition of this product, records maintained, etc.).

E. WATER:

1. Check ways water is used in processing. None used
 ingredient cooling cleaning equipment
 processing aid product transport other (specify):
 cooking cleaning organic products

2. Source of water:
 municipal on-site well other (specify):
 If you have an on-site well, please submit your most recent water test results to TCO Cert.

3. What on-site water treatment processes such as chlorination, filtration, are used? None

4. Is the water that is used as an ingredient or comes in contact with product or food contact surfaces potable? Yes No

5. How do you monitor the quality of the potable water? How often?

6. List any known water contaminants. None

7. Is the wastewater leaving the operation neutralized and monitored?

Applicant Initials: _____ Date: _____

F. BOILER ADDITIVES

1. Are boiler additives used where culinary steam generated by a boiler are exposed to food or food contact surfaces?
 No boiler additives are added to the system.
 Yes, please list the boiler additives and attach the label information and Safety Data Sheet for each additive.

Boiler additives must not compromise organic product integrity. Substantiation will be needed to demonstrate compliance.

G. SANITATION:

Attach a complete list of ingredients, label information, and Safety Data Sheet for cleaning and sanitizing products, for all substances used on food or food contact surfaces.

1. Check all cleaning methods used:
 sweeping manual washing other (specify):
 scraping clean in place (CIP)
 vacuuming steam cleaning
 compressed air sanitizing

Provide information (as applicable for your operation) on your cleaning program and list **all** substances used on all **food contact surfaces**.

AREA	METHOD 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"/>
Other (specify):					<input type="checkbox"/>

2. Do all surfaces that have contact with organic products that will be sold as food product consist of a Yes No food grade material?

3. Describe the measures (e.g. removal events CAN/CGSB 32.310 par 3.59) in place to prevent unintended contamination of organic product with cleaners and sanitizers.

4. Do you test food contact surfaces or rinsate for cleaner/sanitizer residues? Not Applicable Yes No

Please attach copies of your Standard Sanitation Operation Procedures (SSOPs) and/or GMP pertinent sections, if applicable.

H. PACKAGING:

1. Check types of packaging materials used:
 bulk, no packaging metal synthetic fiber
 paper foil other (specify):
 cardboard plastic
 wood waxed paper
 glass natural fiber

Applicant Initials: _____ Date: _____

2. Are all packaging materials for food products food grade? Yes No
Packaging materials for food products must be food grade. Please provide TCO Cert with a food grade statement from the supplier.

3. Where are the packaging materials stored?

4. Are any fungicides, fumigants, or pest control products used in the storage area for the packaging materials? Yes No
 If yes, describe use and products:

5. Have any packaging materials been exposed to, or do they contain any synthetic fungicides, preservatives, intentional nano particles, or fumigants? Yes No
 If yes, describe exposure, including name of products used.

6. Are packaging materials reused? Yes No
 If yes, describe this packaging (prior use(s)/contents), how reusable packaging materials are cleaned prior to use and if this is documented (and if so, how).

7. Have you confirmed that nano sized particles in the packaging are not transferring to the organic product? Yes No

I. STORAGE:

1. Provide information on your storage areas by completing the following table.

TYPE OF STORAGE	TYPE OF STORAGE UNIT/AREA (Bins, Specific Section of Warehouse, Freezer, etc.)	IS STORAGE UNIT DEDICATED ORGANIC?
Ingredient Storage		<input type="checkbox"/> Yes <input type="checkbox"/> No
Packaging Material Storage		<input type="checkbox"/> Yes <input type="checkbox"/> No
In-process Storage		<input type="checkbox"/> Yes <input type="checkbox"/> No
Finished Product Storage		<input type="checkbox"/> Yes <input type="checkbox"/> No
Off-site Storage*		<input type="checkbox"/> Yes <input type="checkbox"/> No
Other (specify):		<input type="checkbox"/> Yes <input type="checkbox"/> No

2. *If off-site storage is used, give name, address, phone number, contact person and type of products stored at off-site facility. Please note: if the facility is in an organic certification / attestation program please attach certification documentation. If it is not please complete a Memorandum of Understanding (MOU) and the MOU Questionnaire.

3. If your storage units/areas are not dedicated to organic products, what measures are taken to ensure that commingling/contamination of organic products does not occur?

Applicant Initials: _____ Date: _____

4. Where are cleaning or sanitizing materials stored? Where are oils, paints, lubricants, and pesticides stored?	
5. Are organic products clearly identifiable in the storage areas and areas managed in a manner to allow for the identification of lots and to prevent commingling or contamination with prohibited substances?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. If the operation has parallel processing or handles non-organic products, are non-organic products stored in separate areas from the organic products?	<input type="checkbox"/> Not Applicable <input type="checkbox"/> Yes <input type="checkbox"/> No
7. If yes, what measures do you take to ensure that organic products are clearly identifiable from the non-organic products to avoid mixtures or exchanges of organic products with non-organic products?	<input type="checkbox"/> Not Applicable
8. If yes, what cleaning measures do you implement prior to the storage of the organic products?	<input type="checkbox"/> Not Applicable
9. Do you record cleaning measures?	<input type="checkbox"/> Not Applicable <input type="checkbox"/> Yes <input type="checkbox"/> No
J. TRANSPORTATION OF ORGANIC PRODUCTS AND INGREDIENTS:	
Every measure must be taken to ensure that the integrity of organic input, ingredients and products are not compromised in transit. The following information must accompany organic product:	
<ul style="list-style-type: none"> a. the name and address of the person or organization responsible for the production, preparation or distribution of the product b. the name of the product c. the organic status of the product d. information that ensures traceability, for example, the lot number. 	
1. The above information accompanies the incoming and outgoing organic products. If no, please explain why.	<input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Incoming Raw Ingredients</u>	
2. In what forms are incoming products/ingredients received?	
<input type="checkbox"/> dry bulk	<input type="checkbox"/> metal drums
<input type="checkbox"/> liquid bulk	<input type="checkbox"/> cardboard drums
<input type="checkbox"/> tote bags	<input type="checkbox"/> paper bags
<input type="checkbox"/> foil bags <input type="checkbox"/> other (specify):	
3. Do you arrange incoming product transportation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. How do you ensure that inbound transport units are free from prohibited products/residues prior to loading organic products (documented cleaning, new units, etc.)?	
5. Check all steps taken to segregate organic products:	
<input type="checkbox"/> dedicated organic-only transport units	<input type="checkbox"/> use of pallets
<input type="checkbox"/> organic product shrink wrapped	<input type="checkbox"/> separate area in transport unit
<input type="checkbox"/> pallet tags identifying "organic"	<input type="checkbox"/> other (specify):
<u>In-Process Products</u>	
<input type="checkbox"/> Not Applicable	
6. How is in-process product transported?	

Applicant Initials: _____ Date: _____

7. How do you ensure that in-process transport units (buckets, carts, etc.) are free from prohibited products/residues prior to loading organic products (documented cleaning, new units, etc.)?

Outgoing Finished Product

8. Please describe:

- a) how are outgoing products transported?
- b) who arranges this transportation?
- c) how do you ensure transportation units do not pose a risk to the organic integrity of the product?

9. How do you ensure that outbound transport units are free from prohibited products/residues prior to loading organic products (documented cleaning, new units, etc.)?

10. In what form are finished products shipped?

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

11. Check steps taken to segregate organic products from non-organic products:

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

12. Please describe the packaging, containers, or vehicles that are utilized for transporting organic products (including to wholesalers and retailers). Include a description of the method of sealing the packaging, container, or vehicle to ensure that substitution of the content cannot be achieved without manipulation of the seal.

13. When transporting product, what methods are taken to ensure that all equipment used in the transportation of organic product is free from non-organic product or conventional residues and invertebrate and vertebrate pests?

14. Is documentation maintained that verifies that during transportation, the integrity of the organic products is maintained and the conditions meet all pertinent COR requirements? Yes No

15. If you are the party owning the product at the point of transport (and the transportation company is not in a certification or an attestation program), do you maintain documentation that verifies that the organic integrity of the product has been maintained throughout the transportation process? Not Applicable Yes No

Applicant Initials: _____ Date: _____

SECTION 5: Record Keeping

Organic standards require Operators maintain records and relevant supporting documentation concerning inputs and details of their use, production, preparation and transport of organic products. Operators shall fully record and disclose all activities and transaction in sufficient detail to be easily understood and sufficient to demonstrate compliance with the standards. Records must be maintained for 5 years and be available for review. Organic products must be tracked from incoming ingredients on through to the sale of finished product. Organic ingredients must be verified as certified to the program(s) for which certification will be sought. Amounts of organic finished products must balance with certified organic ingredients procured.

1. How do your records trace the finished product back to all of its ingredients and balance organic ingredients in and organic products out?

2. How long do you keep your records?

3. Do you maintain a Complaint Log? Yes No

4. Which of the following records do you keep for organic processing/preparation?

Incoming Ingredients

- | | |
|--|--|
| <input type="checkbox"/> purchase orders
<input type="checkbox"/> contracts
<input type="checkbox"/> invoices
<input type="checkbox"/> receipts
<input type="checkbox"/> bills of lading
<input type="checkbox"/> customs forms
<input type="checkbox"/> scale tickets
<input type="checkbox"/> quality test results
<input type="checkbox"/> certificates of analysis
<input type="checkbox"/> transaction certificates
<input type="checkbox"/> organic certificates | <input type="checkbox"/> verification of non-GMO ingredients
<input type="checkbox"/> verification of ingredients produced not using sewage sludge
<input type="checkbox"/> verification of ingredients produced/handled without ionizing radiation
<input type="checkbox"/> documentation of commercial unavailability of organic ingredients when using non-organic ingredients for products labeled as "organic"
<input type="checkbox"/> verification no intentional nano technology used
<input type="checkbox"/> receiving records
<input type="checkbox"/> receiving summary log
<input type="checkbox"/> other (specify): |
|--|--|

In-Process

- | | |
|---|--|
| <input type="checkbox"/> ingredient inspection forms
<input type="checkbox"/> blending reports
<input type="checkbox"/> production reports
<input type="checkbox"/> equipment clean-out logs
<input type="checkbox"/> sanitation logs
<input type="checkbox"/> packaging reports | <input type="checkbox"/> QA report
<input type="checkbox"/> production summary records (12 mos.)
<input type="checkbox"/> other (specify): |
|---|--|

Storage

- | | |
|--|---|
| <input type="checkbox"/> ingredient inventory reports
<input type="checkbox"/> finished product inventory reports | <input type="checkbox"/> other (specify): |
|--|---|

Outgoing Finished Product

- | | |
|--|---|
| <input type="checkbox"/> shipping log
<input type="checkbox"/> bills of lading
<input type="checkbox"/> scale tickets
<input type="checkbox"/> purchase orders
<input type="checkbox"/> sales orders
<input type="checkbox"/> sales invoices (must identify organic product as organic)
<input type="checkbox"/> phytosanitary certificates
<input type="checkbox"/> export declaration forms | <input type="checkbox"/> transaction certificates
<input type="checkbox"/> transport unit inspection/cleaning forms
<input type="checkbox"/> copies of certificates of organic product
<input type="checkbox"/> shipping summary log
<input type="checkbox"/> sales summary log
<input type="checkbox"/> audit control register
<input type="checkbox"/> other (specify): |
|--|---|

5. Describe your lot numbering system.

Applicant Initials: _____ Date: _____

6. Do you ensure that all invoices, BOLs and other sales documents indicate a lot number, a reference to the organic status (specifying the certification program) of the product, and the name of the certifier? Yes No

SECTION 6: Additional Comments

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

SECTION 7: Affirmation

I affirm that all statements made in this application are true, correct, and complete. The organic products for which I am requesting certification have been processed/prepared according to the COR, including CAN/CGSB 32.310 and 32.311, the current SIC interpretations and the Organic Products Regulations. 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 application 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: contact information, legal status, ownership or control of the operation, or any change in the operation or situation either intended or unintended that may affect its compliance. 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 produced in accordance to these standards/regulations.

Signature of Owner/Manager

Date (M/D/Y)

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

I have attached the following required documents (with name on each page):

- *Completed, signed, and dated Operator Licensing Agreement (OLA)
- *Product flow chart, please include Organic Control Points (OCP)
- *Facility map (you may want to attach pictures too)
- *Pest management map of traps (if applicable)
- *Product List
- *Supplier list (all applicable pages)
- *Product & Label Profile
- *Organic Product Ingredients sheets (or equivalent) for each product requested for certification/attestation
- *Artwork for labels for finished product to be sold as organic, where applicable
- *Label Approval Request form for each organic product that is labelled
- *Sample of audit trail documents, illustrating traceability of organic product, and demonstrating compliance
- Other (specify):

***Note: Documents need to be submitted only for new applicants or for changes.**

Applicant Initials: _____ Date: _____