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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.

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 the name the holder commonly does business under. This name may be added on the certificate but must clearly be referred to as "doing business as" or "DBA." Leave blank if you don't have any.					
Contact Person's Name:					
Secondary Contact Person's Name (if applicable):					
PHYSICAL INSPECTION LOCATION INFORMATION			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:		
Please provide directions to the inspection location(s) and indicate when you are available to contact:					

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 (Initials) (Date)

1. Have you ever previously applied for organic certification by TCO Cert or another Certification Body? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list the name of the Certification Body, year(s) of application, outcome of application:	
2. Are you taking over previously certified organic land? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please attach the completed and signed Prior Land Use Affidavit AND the previous Certification and Addendum documents for this land.	
3. Are you currently certified and transferring to TCO Cert from another Certification Body? <input type="checkbox"/> Yes <input type="checkbox"/> No If transferring to TCO Cert from another Certification Body, a Letter of Good Standing from the Sending CB is required.	

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 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? <table style="width: 100%; margin-top: 5px;"> <tr> <td><input type="checkbox"/> crop rotation</td> <td><input type="checkbox"/> inter-planting</td> <td><input type="checkbox"/> green manure plow-down/cover crops</td> </tr> <tr> <td><input type="checkbox"/> summer fallow</td> <td><input type="checkbox"/> sub-soiling</td> <td><input type="checkbox"/> incorporation or crop residues</td> </tr> <tr> <td><input type="checkbox"/> compost</td> <td><input type="checkbox"/> on-farm manure</td> <td><input type="checkbox"/> off-farm manure</td> </tr> <tr> <td><input type="checkbox"/> soil amendments</td> <td><input type="checkbox"/> side dressing</td> <td><input type="checkbox"/> foliar fertilizers</td> </tr> <tr> <td><input type="checkbox"/> biodynamic preparations</td> <td><input type="checkbox"/> soil inoculants</td> <td><input type="checkbox"/> other (specify):</td> </tr> </table>	<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):
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<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? <table style="width: 100%; margin-top: 5px;"> <tr> <td><input type="checkbox"/> soil testing</td> <td><input type="checkbox"/> microbiological testing</td> <td><input type="checkbox"/> companion crop yields</td> </tr> <tr> <td><input type="checkbox"/> tissue testing</td> <td><input type="checkbox"/> observation of soil</td> <td><input type="checkbox"/> other (specify):</td> </tr> <tr> <td><input type="checkbox"/> crop quality testing</td> <td><input type="checkbox"/> observation of crop health</td> <td></td> </tr> </table> <p style="text-align: center;">Attach copies of available test results.</p>	<input type="checkbox"/> soil testing	<input type="checkbox"/> microbiological testing	<input type="checkbox"/> companion crop 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							
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<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														
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.															

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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: *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 not as raw manure.* Not Applicable

1. Please provide a list of ingredients in the compost.

2. Do you monitor compost temperature? Yes No
 a. If yes, what temperature is maintained?
 b. How many days is this temperature maintained?

3. Has the compost been tested for acceptable limits of human pathogens? Yes No
 Describe the results:

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 are not used for human consumption.
 Crops are for human consumption whose edible portion has direct contact with the soil.
 Crops are for human consumption whose edible portion does not have direct contact with the soil.
 NOTE: 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.) added to the manure being used. For off-farm manure, attach additive specifications (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. Describe the operation the manure is sourced from:

Is it a fully caged system where animals are not able to turn 360 degrees or kept permanently in the dark? Yes No
An Off-Farm Manure Use Affidavit, or equivalent, must be obtained and signed prior to use.

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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

- | | | |
|---|--|--|
| <input type="checkbox"/> Terraces | <input type="checkbox"/> Permanent waterways | <input type="checkbox"/> Riparian management |
| <input type="checkbox"/> Contour farming | <input type="checkbox"/> Windbreaks | <input type="checkbox"/> Undersowing/interplanting |
| <input type="checkbox"/> Strip cropping | <input type="checkbox"/> Firebreaks | <input type="checkbox"/> Maintain wildlife habitat |
| <input type="checkbox"/> Conservation tillage | <input type="checkbox"/> Tree lines | <input type="checkbox"/> Wildlife habitat conservation |
| <input type="checkbox"/> Winter cover crops | <input type="checkbox"/> Retention ponds | <input type="checkbox"/> Other (specify): |

WATER USE

3. In what ways is water used in your operation? 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: None

<input type="checkbox"/> Drip irrigation	<input type="checkbox"/> Center pivot
<input type="checkbox"/> Micro-spray	<input type="checkbox"/> Underground
<input type="checkbox"/> Flood	<input type="checkbox"/> Other (specify):

6. What input products are applied through the irrigation system, either to organic or non-organic fields? None

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7. What products do you use to clean irrigation lines/nozzles? None

8. Is the system shared with another operator? Yes No
 If yes, what products do they use?

9. Is the system flushed and the flushes documented between conventional and organic use if prohibited materials are used? Not Applicable
 Yes No

WATER QUALITY

10. What practices are used to protect water resources?
 Fencing livestock from waterways Scheduled use of water to conserve its use
 Tensiometer/monitoring Other (specify):
 Laser leveling/land forming

11. What water contamination problems do your experience (why and where)? 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? (For example: corn, soybeans, alfalfa 2 years, repeat)
Please describe 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 – appropriate species
<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
<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"/> Other (specify):
<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, including dates and fields? 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

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C. PEST MANAGEMENT PLAN:

1. What are your problem insect pests?

2. What strategies do you use to control pest damage to crops? None

- | | | |
|---|--|---|
| <input type="checkbox"/> Crop rotation | <input type="checkbox"/> Physical barriers | <input type="checkbox"/> Limited use of prohibited products |
| <input type="checkbox"/> Timing of planting | <input type="checkbox"/> Physical removal | <input type="checkbox"/> Selection of appropriate plant species/varieties |
| <input type="checkbox"/> Companion planting | <input type="checkbox"/> Traps | <input type="checkbox"/> Development of habitat for natural enemies |
| <input type="checkbox"/> Frog ponds | <input type="checkbox"/> Lures | <input type="checkbox"/> Release of predators/parasites of pest species |
| <input type="checkbox"/> Bat houses | <input type="checkbox"/> Insect repellents | <input type="checkbox"/> Integrated Pest Management |
| <input type="checkbox"/> Bird houses | <input type="checkbox"/> Use of allowed products | <input type="checkbox"/> Use of restricted products |
| <input type="checkbox"/> Hand picking | <input type="checkbox"/> Animal repellents | <input type="checkbox"/> Other (specify): |
| <input type="checkbox"/> Trap crops | <input type="checkbox"/> Monitoring | |

3. Do you keep a record of how often you use these pest control methods, i.e., dates when you scout fields or apply inputs to a specific field or crop? Yes No

D. DISEASE MANAGEMENT PLAN:

1. What are your problem crop diseases?

2. What disease prevention strategies do you use? None

- | | | |
|--|--|---|
| <input type="checkbox"/> Field Sanitation | <input type="checkbox"/> Solarization | <input type="checkbox"/> Limited use of prohibited products |
| <input type="checkbox"/> Crop rotation | <input type="checkbox"/> Companion planting | <input type="checkbox"/> Selection of appropriate plant species/varieties |
| <input type="checkbox"/> Plant spacing | <input type="checkbox"/> Compost/tea use | <input type="checkbox"/> Sprayer application of fungicide |
| <input type="checkbox"/> Vector management | <input type="checkbox"/> Use of allowed materials | <input type="checkbox"/> Other (specify): |
| <input type="checkbox"/> Soil balancing | <input type="checkbox"/> Use of restricted materials | |

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? Yes No
If yes, please identify which ones and explain:

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B. EQUIPMENT: *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.***

1. Are clean-out logs kept for all equipment (including custom equipment) that is used for both organic and non-organic crop production?
 Yes No Equipment is 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? Yes No

3. Could any equipment you use have been contaminated by previous uses? Yes No
 If yes, describe:

4. If used equipment was purchased, was a thorough clean-down performed and documented? Yes No

C. HARVEST: *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.*

1. Describe your harvesting methods and the steps taken to protect organic crops from commingling and contamination during harvest.

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 they are 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

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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

- Grain Cleaning
- Grain Drying
- Other, please specify:

Off-Farm Custom Services: Please specify the name of the Custom Service Provider.

- Grain Cleaning:
- Grain Drying:
- Grain Storage:
- Other:

Does the Custom Service Provider maintain Certification and/or Attestation of Compliance to the COR documentation?

- Yes No

If yes, please attach current documentation.

Mobile On-Farm Custom Services: Please specify the name of the Custom Service Provider.

- Grain Cleaner:
- Grain Dryer:

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 the sanitation and maintenance maintained? Yes No

5. Please describe what forms of documentation are maintained:

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6. Check types of packaging material used:

- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> None (bulk sales, no packaging) | <input type="checkbox"/> Metal | <input type="checkbox"/> Natural fiber |
| <input type="checkbox"/> Paper | <input type="checkbox"/> Foil | <input type="checkbox"/> Synthetic fiber |
| <input type="checkbox"/> Cardboard | <input type="checkbox"/> Plastic | <input type="checkbox"/> Tote sacks (plastic lined or unlined) |
| <input type="checkbox"/> Wood | <input type="checkbox"/> PVC plastics | <input type="checkbox"/> Other (specify): |
| <input type="checkbox"/> Glass | <input type="checkbox"/> Waxed paper | |

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). If needed, insert lines (for the fillable form) or attach additional sheets.

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

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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:

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? No pest problems

If products/inputs are used, list on the Farm Organic System Plan Annual Updated 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?
 Dedicated organic only Inspecting transport units prior to loading Use of Off-Farm Transportation Cleaning Affidavits
 Cleaning transport units prior to loading Letter/contract with transport company stating organic requirements Other (specify):

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3. Are transport units cleaned prior to the organic load? Yes No
 Describe how the transport units are cleaned and what materials are used:

SECTION 5: Record Keeping System

The Canadian Organic 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? Yes No

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

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

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

- | | | |
|---|--|---|
| <input type="checkbox"/> Field maps | <input type="checkbox"/> Paid labour 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 at the time of inspection

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:

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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.

Signature of Operator

Date (M/D/Y)

Please maintain copies of this 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 a TCO Cert Certification Coordinator (Direct Associates).

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