



Attestation/Custom Service Organic System Plan Annual Update – New Applicant 2026

Please complete this form in its entirety. Sign this form and attach supporting documentation as specified in Section 4. 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”.

Be sure to complete and submit your Attestation/ Custom Service Organic System Plan.

SECTION 1: Programs Requested

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:	
Certification/Verification Programs:	
<input type="checkbox"/> Attestation of Compliance (COR) <input type="checkbox"/> Bio Suisse** <input type="checkbox"/> CARTV (Quebec operators <u>only</u>)	
** Requires submission of additional documents. Contact your TCO Cert Certification Coordinator to request the appropriate forms.	
1. Do you have access to a copy of the current standards (CAN/CGSB-32.310 and CAN/CGSB-32.311), for the program for which you are applying?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Do you understand the current organic standards for the program for which you are applying?	<input type="checkbox"/> Yes <input type="checkbox"/> No
USER FEES	
Applicable to currently certified chapter members only:	
<ul style="list-style-type: none"> • Your user fee will be based upon the revenue you collected for the organic related services you rendered, e.g., seed cleaning fees that you charged for cleaning organic product. 	
<input type="checkbox"/> “Revenue Based User Fee Remittance” form attached <input type="checkbox"/> I already submitted the form and paid for last year	
Please submit the “Revenue Based User-Fee Remittance” form as it applies to last year with this application and send payment in with your certification payment this year.	

SECTION 2: Services/Procedures/Products/Customers

1. Please identify the full brand name of these products and the name of the customers:	
Please submit copies of current certificates and product addendums for the new organic products/customers.	
Full Brand Name of Product	Name of Customer

Applicant Initials: _____ Date: _____

2. Please describe custom services you are currently offering for organic products:
Please submit a copy of the flow chart for processes used.

Custom Service	Description of custom Service

3. Are you performing any packaging and/or labelling activities for any customers? Yes No

If yes, please submit a Packaging and Labelling Organic System Plan Annual Update – New Applicant and a Processing Organic System Plan to TCO Cert.

SECTION 3: Additional Comments

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

SECTION 4: Affirmation

I affirm that all statements made in this application are true, correct, and complete. The organic products for which I have performed custom service have been processed according to the certification standards. I understand that the operation may be subject to an unannounced inspection 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: operation contact information, applicant contact information, legal status, ownership or control of the operation, or any change in the operation 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 organic products are handled in accordance with 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.

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

- Product flow chart, please include Organic Control Points (OCP)
- Facility map (you may want to attach pictures too)
- Pest management map (if applicable)
- Current Product List with full brand names of products being handled.
- Customer List including their products, the name of their Certification Body, and programs to which they are certified/verified.
- Copy of current organic certificate and product addendum for all customers.
- Water testing results (if applicable).
- Other (specify):

Applicant Initials: _____ Date: _____