

## Farm Organic System Plan Annual Update 2025

Please complete this form in its entirety if you are a new applicant or if you are renewing your certification. Sign this form and attach supporting documentation as specified in Section 8. Incomplete information may lead to a delay in certification. Use additional sheets if necessary. Please also complete the Livestock Organic System Plan Annual Update (Appendix L) if applicable to your operation. Mark any sections that do not apply to your operation as "Not Applicable."

Check this box if you would like us to make information regarding your production available <u>upon request only</u> to potential recognized buyers. *IF YOU AGREE, TCO Cert will release your information exclusively for your business opportunity purposes.* 

## **SECTION 1:** Programs Requested

Operation Name:	Operator Number:
$\uparrow$ The Operation Name must be a person and a person means an individual, a corporation, an legal entity. This name goes on the certificate.	association, or an organization recognized as a
Other Name(s):	
$\uparrow$ Other Name(s) may be another name by which the certificate holder is commonly known in commonly does business under. This name may be added on the certificate but must clearly b Leave blank if you don't have any.	
Contact Person's Name:	
<b>Check ALL the programs for which you are requesting certification and/or verification.</b> Ap, applicable questions) so that your inspection specifically covers each program being reques questions. Certification/verification to any program not requested now cannot be granted at a additional inspection.	ted, and the inspector addresses the necessary
Certification/Verification Programs: Canada Organic Regime (COR) In Conversion to COR Bio-Suisse** CARTV	
Equivalency Programs:	
<b>**Requires submission of additional documents.</b> Please contact your chapter of appropriate forms	r TCO Cert certification coordinator for the
1. Please list current organic certification by other agencies.	
<ol> <li>Do you have access to a copy of the current standards (CAN/CGSB-32.310 and Carrier for all programs for which you are applying?</li> </ol>	AN/CGSB 32.311), and Yes No
3. Do you understand the current organic standards for each program for which you	are applying? Yes No
4. a. Have you reviewed your Farm Organic System Plan (FOSP)?	🗌 Yes 🗌 No
b. <b>Is your contact information on your Farm Organic System Plan (FOSP) up-to</b> <u>If no</u> , please provide the updated phone number, email address, etc. here.	o-date and accurate?

Applicant Initials: \_\_\_\_\_ Date: \_

c. Have you made revisions to your Farm Organic System Plan (FOSP), particularly Section 4E (Storage), and/or List of Fields?	🗌 Yes	🗌 No
<u>If yes</u> , attach the revised pages with the date and your initials and explain the revisions made:		
5. a. Do you intend to certify any livestock or livestock products (milk, eggs, animal fiber) this year? <u>If yes</u> , please complete and submit a <i>Livestock Organic System Plan and Annual Update (Appendix L).</i>	🗌 Yes	🗌 No
b. Do you also intend to certify <u>numerous</u> garden products (vegetables, herbs, berries) or <u>greenhouse</u> <u>grown</u> produce this year?	🗌 Yes	🗌 No
<u>If yes,</u> please complete and submit a <i>Garden-Greenhouse Organic System Plan and Annual Update.</i> c. Do you transform organic products that are either produced on farm or purchased, in any way (other	□ Yes	□ No
than just <b>cleaning/drying/cutting/bagging, etc.)?</b> <u>If yes</u> , please complete and submit a <i>Processing Organic System Plan</i> and a <i>Processing Organic System</i> <i>Plan Annual Update.</i>		

## SECTION 2: Description of Measures Taken to Address Noncompliances and Opportunities for Improvement

Please refer to the letter received with your most recent certificate that lists the previous Noncompliances and Opportunities for Improvements.

Were there any Noncompliances or Opportunities for Improvement concerning your Farm and Livestock Operation(s) from last year's certification?					
If yes, please complete the following table, briefly listing each Noncompliance and Opportunity for Improvement and describing the actions taken to address each one. Add rows if necessary.					
Noncompliance, Opportunity for Improvement Action Ta	ken				
1.					
2.					
3.					
4.					
5.					

Applicant Initials: \_\_\_\_\_ Date: \_\_

### **SECTION 3: Farm Plan Management**

At least 36 months of histories are required for all fields/garden that were added to your operation since the	ne last inspection and
are or will eventually be requested for certification (including fields that are currently transitional).	
Please Note:	
<ul> <li>Field Management Summaries must include:</li> <li>The plans for the current year. New operators need to submit the past three (3) years as well</li> </ul>	l ac the plane for the
<ul> <li>The plans for the current year. New operators need to submit the past three (3) years as well current year.</li> </ul>	i as the plans for the
<ul> <li>All fields/garden plots (including newly added fields) whether they are organic (O), in transitio</li> </ul>	n (T) or conventional
(C)	
• Field/Plot numbers and size of each field/plot (acres, hectares, row length, etc.)	
<ul> <li>Crops planted</li> </ul>	
$\circ$ Any inputs (including manure) that were applied. You need to include specific <u>dates</u> of app	lication.
<ul> <li>Pastures and fallow acres</li> </ul>	
In addition, there must be an overview map that shows all fields and garden plots in relation to or	
maps of all fields/production areas which indicate directions, size and shape, buffer zones, and ad	joining land use. <u>The</u>
acres listed on the Field Management Summaries and maps must correspond.	
<ul> <li>If the legal land description/address for each field/farm is not located on the Field Management S field maps or you are a new operator, please submit a List of Fields document that provides this in</li> </ul>	
1. Status of operation:	
□ Organic only	
Split production (org/non-org/different crops)	
Parallel production (org/non-org/visually indistinguishable)	
2. How long have you farmed your operation?	
3. How long have you been certified?	
4. Total number of owned acres?	
5. Total number of rented acres?	
6. Total number of acres rented out?	
7. Total organic acres?	
8. Total acres in transition?	
9. Total conventional acres?	
10. Total acres of non-agricultural/non-production land?	
Please explain what this consists of (i.e., woodland, CRP, native grassland, marsh, etc.):	
11. Have you managed all fields requested for certification for 3 or more years?	Yes No
If no, and you have not already submitted a Prior Land Use Affidavit* (PLUA) for these fields, please	
submit the PLUA with this application.	
* Drive Land Llos Affidavit (DLLLA) or a minute state de surrente. Consultate de sur de la surrente for sur	
* <i>Prior Land Use Affidavit (PLUA)</i> or equivalent document: Completed and signed document from the previous manager stating the (land) use and all inputs applied for the previous three years on all	
newly rented or purchased fields.	
12. NEW FIELDS ADDED AFTER LAST INSPECTION?	Yes No
<u>If yes</u> , please state field numbers.	
Please attach <i>Prior Land Use Affidavit</i> (see annotation above in question # 11) and detailed maps for	
the new fields.	

Applicant Initials: \_\_\_\_\_ Date: \_\_\_

13. Have you taken any fields out of o	pection?	🗌 Yes 🗌 No	
•Please list these fields (field	ID):		
•Please state the reason for r	no longer farming the fields as organi	c:	
<ul> <li>Are these fields still part of y If <u>no</u>, please explain:</li> </ul>	our operation (split production)?		🗌 Yes 🗌 No
Ti <u>no,</u> please explain.			
14. Please describe your risk manage	ement plan to prevent GE contaminat on distances, and equipment and sto		
4.4.4 CAN/CGSB-32.310-2020.	on distances, and equipment and see	rage samuation protocols as now	requested per par.
			-
Please complete the following ta	ble to indicate the specific crops <u>and</u> certification.		be requested for
	Add rows if necessary	/.	
FIELDS/GARDEN	FIELD/PASTURE/GARDEN/	TOTAL AREA PER CROP	PROJECTED PRODUCTION
CROPS REQUESTED FOR CERTIFICATION	NUMBERS/IDENTIFICATION attach list if easier	(acres, hectares, m <sup>2</sup> /ft <sup>2</sup> , row feet)	AMOUNTS (volume including units of
			measure)

Applicant Initials: \_\_\_\_\_ Date: \_\_\_

#### SECTION 4: Seeds, Seedlings, Perennial Stock, Seed Treatments, and Inputs

**Standards require the use of organically grown seeds, and/or planting stock.** Please note that <u>seed treatments are considered</u> <u>inputs</u> and must have been reviewed and approved by TCO Cert prior to use. Annual seedlings must be produced according to organic standards. Non-organic perennial plants (planting stock) must be managed organically for 12 months prior to harvest of crop or sale of the plant as certified organic planting stock. Contact TCO Cert if you need to use non-organic seedlings because of an emergency.

If using non-organic seed and/or planting stock, you must have records of your attempts to source organic seed and/or planting stock. **Please be aware that this includes seed for cover crops.** 

If non-organic seedlings are used, you must maintain records to verify when the organic management of these seedlings began.

List all seeds, seedlings, perennial stock, and seed treatments used or planned for use in the current crop season. Mark with an X the appropriate boxes and provide other information as needed. Add rows if necessary. Ensure that all seed and inoculant labels and receipts, documented seed searches, Untreated/Treated Seed Affidavits and Non-GE Affidavits (if applicable) for any conventional seed, seedlings, or planting stock used are either submitted to TCO Cert or available for the Verification Officer to review.

No seeds/seedlings/planting stock used

Seed/ Variety	Source/ Supplier	Organic	Untreated	Treated	Where planted? Field/Plot Identification	Type/Brand of Treatment: Fungicide/Pesticide/ Inoculant
1. What type of documentation do you maintain for seed/seedlings used?         Copies of organic certificates and       Seed tags       BOLs         addendum       Non-GE affidavits       Scale tickets         Bin records       GE test results       Untreated/treated seed affidavits         Receipts       Invoices       Other (specify):         Seed search       Seed catalogues						
<b>4 A. CROP AND SOIL INPUTS:</b> No inputs used						
<ul> <li>List all soil fertility inputs, soil mix ingredients, foliar sprays, pest and disease control products, water additives, or other inputs used or intended for use on proposed organic and transitional fields. Add rows if necessary. All inputs used or intended for use during the current year and in the previous two years must be listed on your Field Management Summaries.</li> <li>Please submit labels (or full ingredients lists if not indicated on label) for each input prior to use for which you have not previously requested a review and received approval. This information needs to be submitted with this Organic System Plan Annual Update.</li> </ul>						
					Applicant Ini	tials: Date:

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•	Please note that a	guaranteed anal	ysis is not sufficien	it; in	ngredients must l	be listed.
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•	If inputs contain any biolo	ogical ingredients available in GE varieties, N	Non-GE Affidavits must be submitted.
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•	If synthetic micronutrients are applied for soil fertilization, documented soil or plant deficiency or the need for a
	preventative application (by testing or visual symptoms) need to be in place for verification.

<ul> <li>preventative application (by testing or visual symptoms) need to be in place for verification.</li> <li>If an input is wild sourced (e.g., seaweed), an affidavit must be submitted documenting the source and sustainability of the harvest of wild material.</li> </ul>					
Full Product Name	Brand Name or Source (e.g., produced on-farm)	Reason for use of the product	Actually Used (AU) or Planned (P)		
	, , , , , , , , , , , , , , , , , , ,				
1. *					
1. Is compost used or plan	nnea for use?		Yes No Not Applicable		
<u>If yes</u> : a. List all compost ingr	edients/additives:				
	on to show that <u>compost ingredient</u> 2020 Permitted Substances List	<u>s</u> are in accordance with Table 4.2 of the			
c. Attach documentation		e compost meets the requirements as			
	used, what was the source of the m				
🗌 On-farm from organi		rm from organic livestock	🗌 Not Applicable		
On-farm from conve		rm from conventional livestock			
3. If manure from on-farm conditions of the livesto	🗌 Not Applicable				
CAN/CGSB-32.310-202	U can be determined.				
<ol> <li>a. If the manure is sour affidavit needs to be meet the requirement</li> </ol>	Not Applicable				
	·	Manure affidavit attached?	🗌 Yes 🗌 No		
b. Is a documented sea	arch in place for sourcing manure fro	om organic or transitional livestock?	🗌 Yes 🗌 No		
the management plan t	o ensure that livestock is controlled reach the portion of the crop intend	ogram, please provide a full description of and that manure or manure related ded for harvest, as per restrictions outlined	🗌 Not Applicable		

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Date: \_

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<b>4 B. SPLIT AND PARALLEL PRODUCTION:</b> Please be aware that growing crops that are <b>not visually distinguishable is not allowed</b> under the COR standards. Please refer to the exceptions outlined in par. 5.1.4; 5.1.5 (a & b) of the CAN/CGSB 32.310-2020.					Not Applicable	
transition and/or <u>If yes</u> , list specifie	Do you grow the same crops (i.e., soybeans, corn, apples, etc.) organically and non-organically (in cransition and/or conventionally)? If yes, list specific crop varieties in the following table for both organic and transitional/conventional crops and be sure to indicate if they are visually distinguishable. Add rows if necessary.				☐ Yes ☐ No	
SPECIFIC NON- ORGANIC CROP VARIETY/ BRAND	MARK WITH AN "X" IF GE	FIELD/PLOT NUMBERS/ IDENTIFICATION	SIMILAR ORGANIC CROP VARIETY	VISUALLY DISTINGUISHABLE FROM CONVENTIONAL VARIETY (Y or N)	TOTAL AREA (acres, hectares, m <sup>2</sup> /ft <sup>2</sup> , row feet, etc.)	PLANNED USE OF CROP (sale, seed, non- organic livestock feed, etc.)
2. If the farm/garde entire enterprise			lease provide t	he transition plan to cor	overt the	Not Applicable
complete separa	te location		d be clearly ide	non-organic products be ntifiable as organic or n		Yes No Not Applicable
	ODUCTION					Not Applicable
fields?	rohibited s	oil amendments, herbio	-	sticides on your <b>conven</b> t	tional	_ Not Applicable _ Yes _ No
<u>IT yes</u> , please list	the prohib	ited inputs that are be	ing used.			
5. Please describe v	vhere these	inputs are stored and	how it is ensur	ed that organic products	s are not contar	ninated.
	Applicant Initials: Date:					

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6. Do you grow GE crops and/or use GE technology in the conventional portions of your operation?	Yes No
If yes, please describe where the GEs are used in the operation.	

## SECTION 5: Summary of Organic Crop Inventory and Disposition Since Previous Inspection Affidavit

1. Is your information in the "Crop Storage" section of your Farm Organic System Plan (FOSP),       Yes         Section 4E, up to date? <u>If no</u> , please update and submit Section 4E and your bin map with this completed Farm Organic         System Plan Annual Update.						
The following informa	tion is from		(date: M/D/Y) to	0		date: M/D/Y).
This information shou	ld be from your las	t inspection until th	e date that this fo	orm is completed.		
Please include all cro	ps and inventory t	hat were listed on la	ast year's <i>Inspect</i>	tion Affidavit (IA).	Add rows if neo	essary.
5 A. This informati <u>PORTION</u> of last ye			and HARVESTE	<u>ED LAST YEAR</u> a	s listed on th	e <u>BOTTOM</u>
Last Year's Crops/Products	Number of (acres, hectares, m²/ft², row feet)	Actual Amount Produced	Date of Harvest	Amount Disposed	Quantity in Inventory	Storage Location ID Number
5 B. This informati <u>PORTION</u> of last ye			<u>s in inventory</u> (o	organic and conv	ventional) <u>FR</u>	OM the TOP
Crop/Product	Year(s) Produced	Amount Disposed Since Last Inspection	Quantity Still i Inventory	n Storage Location I Number	-	State: :/Transitional or nventional

Applicant Initials: \_\_\_\_\_ Date: \_

Crop/Product	Year(s) Produced	Amount Disposed Since Last Inspection	Quantity Still in Inventory	Storage Location ID Number	State: Organic/Transitional or Conventional

# SECTION 6: Maintaining Organic Integrity

1. Do you plan to harvest buffers, combining or baling?	🗌 Yes* 🗌 No
*Please be sure to maintain buffer harvest and disposal records.	
2. Is equipment used only for organic crops (not in buffers nor on conventional/transitional fields nor to	🗌 Yes 🗌 No
handle non-organic seed)?	
If no, is equipment used for handling of (check all that apply):	
Conventional crops	
Transitional crops	
Buffer crops Non-organic seed	
3. Please describe how equipment (including any custom equipment) that is also used on non-organic	□ N/A
land is cleaned.	
Is the cleaning documented?	□Yes □No
4. Is any custom equipment used/hired (planting, harvesting, etc.)?	Yes No
- Thuse place list suctors equipment/convises	
a. <u>If yes</u> , please list custom equipment/services.	
<ul> <li>b. Are clean-out records for custom equipment maintained?</li> <li>5. What measures are taken to prevent contamination and commingling of organic products with non-organic products with non-o</li></ul>	Yes No
transportation (e.g., seals used, transportation dedicated organic, etc.)?	anic products during
6. Have you submitted a sample copy of your Bill of Lading (BOL) that accompanies organic products in	🗌 Yes 🗌 No
transport?	
<u>If no</u> , please submit a sample BOL with this completed Farm Organic System Plan Annual Update	
(FOSPAU).	
7. Do you use any off-farm storage units?	🗌 Yes 🗌 No
If yes, please submit an Off-Farm Storage Affidavit and have available at inspection.	
Inspection of the off-farm storage units need to be included in the annual inspection of your	
operation.	
8. Did you use the services of a custom service provider?	Yes No
a. Please specify the name of the Custom Service Provider:	
b. Please check off the services provided:	
Grain Cleaning:	
Grain Drying:	
Grain Storage:	
Other:	
c. Does the Custom Service Provider maintain Attestation of Compliance to the COR documentation?	🗌 Yes 🗌 No

Applicant Initials: \_\_\_\_\_ Date: \_\_\_\_

	e attach the current Attestation and Addendum document for the custom service nave documents on hand at time of inspection.	
If you are cleaning,	note the following: lanning on using the custom services of a contractual service provider (seed oring, drying, etc.) which <u>does not</u> hold an Attestation of Compliance the service acility and activities need to be included in the annual inspection of your operatior	

#### **SECTION 7: Additional Comments**

Please provide any additional comments or information pertinent to this Organic System Plan Annual Update including your livestock operation if applicable. Please describe any main changes made or planned this year for your operation (e.g., practices, land use, crops, materials, facilities, custom services used, etc.).

#### **SECTION 8: 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 policies 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)

<b>J</b>
Please maintain copies of the Organic System Plan and other supporting documents as part of your record keeping system.
Submit completed form, fees and supporting documents to your Chapter Administrator or, if not a Chapter member, to TCO Cert.
I have attached the following required documents (with name on each page):
*Completed, signed, and dated Operator Licensing Agreement
Documents from previous certifier (if other than TCO Cert) or dual certification application (if applicable)
Showing field identification, organic status, buffers and adjoining land
use)
*Overview map showing all fields/garden plots of the holding/enterprise in relation to one another
Field Management Summary Form (previously Field Histories Form) – organic, non-organic, and in conversion
> *Documentation for fields owned/rented for less than three years (*applicable when producer(s) has not been in
control/managing the land requested for certification for <u>at least</u> the last 36 months prior to certification application)
🗌 *Formal conversion or transition plan
Documentation of soil deficiencies (if applying micronutrients)
Input product labels and/or list of ingredients, including seed information/non-GE affidavits (required for all off-farm inputs)
Seed Search document for non-organic seeds/perennial planting stock
Seed and seed inoculants information/non-GE affidavits
Seed cleaner documentation
Labels/sales documentation for farm products to be sold as organic (bulk or retail)
Off-farm storage affidavit
*Note: Documents need to be submitted only for new applicants or for changes in the operation.

Applicant Initials: \_\_\_\_\_ Date: \_