YOLO COUNTY DEPARTMENT OF AGRICULTURE • WEIGHTS AND MEASURES HUMBERTO IZQUIERDO

COMMISSIONER/SEALER

Organic Livestock Plan Questionnaire: Ruminants and Non-Ruminants

Please fill out this form if you are requesting organic certification of ruminant livestock (cows, goats, sheep) and non-ruminant livestock (pigs, rabbits, poultry) A separate Organic Production System Plan Questionnaire for crop production must be filled out if you are growing your own feed or other organic crops for sale. Use additional sheets if necessary.

Attach Livestock Pasture History sheets for new areas or changes in pastures, and applicable test results.

| SECTION 1: GENERAL I | NFOF | RMATION | | | | | |
|--|-------------------------|----------------------------------|-----------|---|----------------------|---|--|
| Name | O | Operation name | | FOR OFFICE USE ONLY | | | |
| Address | Address | | City | | Date Received | | |
| Phone | | Fax | | | Date of final review | | |
| | | | | | Reviewers initials | | |
| Legal Status: Sole proprietors Legal Partnership (federal for Other (Please Specify): | • | Trust or no | n-profit | ☐ Corporation | Organic Certific | anic Certification number | |
| Year first certified | | evious organic ation by other | | List current orga certification by o | | Have you ever been denied Certification? Describe below YES NO | |
| Describe circumstances: | Describe circumstances: | | | | | | |
| Do you understand current organic standards? ☐ YES ☐ NO Link to the NOP standards: www.ams.usda.gov/rules-regulations/organic If unable to access organic standards electronically, contact your certifier | | | | ations/organic | | | |
| Do you intend to grow your own fe | ed this | year? | | □ NO | | | |
| If yes, have you filled out the organ | nic prod | uction system | plan ques | tionnaire? | YES NO | | |
| If no, please contact your certifying agent to get the organic production system plan questionnaire. | | | | | | | |
| Do you plan to participate in any complex handling or processing such as brokering, distributing, making multi-ingredients (flavored milk, cheese, sausage, etc.)? | | | | | | | |
| If no, please contact your certifying agent to get the organic handler/processor system plan questionnaire. | | | | | ire. | | |
| Please note: Operations that perform simple processing of raw animal products (milk and egg) are not required to fill out the organic handler/processor systems plan. If this applies to your operation, complete simple handling section for livestock in this OSP. | | | | | | | |

| SECTION 2A | : LAND REC | UIREMENTS | | NOP 205.202 | |
|---|---|--|--------------------|------------------------|--|
| Are all fields requested for certification been registered as organic with CDFA? YES NO If Yes, note registration number: If No, please go to your county's department of agriculture and complete a 3-year pesticide use search. Once the search is complete and there has been no prohibited materials used, go to CDFA's website to initiate the registration process: https://organic.cdfa.ca.gov/OrganicReg/ ADJOINING LAND USE: NOP RULE requires that organic production areas have distinct boundaries and buffer zones to prevent the unintended application of a prohibited substance or contact with a prohibited substance that is applied to adjoining land not under organic management. Buffer areas may change annually, depending on contamination potential from adjoining land uses. The width of the minimum buffer is dependent on certifying agent policy. The NOP Rule requires that the buffer must be sufficient in size or other features (windbreaks, diversion ditches) to prevent the unintended contact by prohibited substances applied to adjacent land areas. Show all adjoining land uses on your field maps | | | | | |
| LOCATION/ FIELD NUM- BERS | CROP | TYPE OF BUFFER (CROP LAND, TREELINE, HEDGEROW, WILDLIFE PLANTING, GRASS STRIP) | WIDTH OF BUFFER | ADJOINING LAND USE | |
| | | | | | |
| SECTION 25 | P. I AND DE | QUIREMENTS | | NOP 205.202 | |
| | | vent drift and contamination | | None | |
| | | | | _ | |
| Written notification to: Highway Departments Aerial / Ground Spray Companies (i.e. mosquito vector control) Adjoining landowners Other (Please specify): | | | | | |
| Verbal notification to: Highway Departments Aerial / Ground Spray Companies (i.e. mosquito vector control) Adjoining landowners Other (Please specify): | | | | | |
| Have you posted organic signage along roadsides that adjoin organic fields? Yes No | | | | | |
| SECTION 2C: Biodiversity and Conservation NOP 205.200 | | | | | |
| Production practices implemented must maintain or improve the natural resources of the operation by integrating practices that conserve resources and promote biodiversity. Natural resources is defined by the National Organic Program (NOP) as the physical, hydrological, and biological features of the production operation, including soil, water, wetlands, woodlands, and wildlife. | | | | | |
| Do you participate in any National Resource Conservation Service (NRCS); Farm Service Agency (FSA), land trust, or other conservation programs? | | | | | |
| ☐ Yes ☐ No | | | | | |
| If yes, describe the programs that you participate in | | | | | |
| What soil and water conservation practices do you utilize in your operation? | | | | | |
| ☐ Rotational Grazing ☐ Composing pasture plantings of diverse species ☐ Plant native vegetation along stream banks | | | | | |
| ☐ Control sens | itive area access | Locate feed stations and wat | er troughs away | from streams and water | |
| Restoring (| Restoring grasslands, riparian habitat, forest, and wetland areas Other (Please specify): | | | | |

SECTION 2D: PASTURE FOR RUMINANT LIVESTOCK

NOP 205.240

An organic livestock operation must provide a functioning management plan for pasture and rangeland. If applicable, you may provide your NRCS plan in lieu of filling out this section; however, your NRSC plan must address the questions below. For each ranch include maps that identify grazing areas, sources of water, fencing, and shade.

Rangeland resources:

USDA-NRCS National Range and Pasture Handbook (www.glti.nrcs.usda.gov/technical/publications/nrph.html)
Pasture resources:

SECTION 3A: LIVESTOCK DESCRIPTION AND ORIGIN: MAMMALS NOP Section 205.236 Organic livestock (mammals) and all replacement animals must be under continuous organic management from the last third gestation. Mammals used for dairy production must be under continuous organic management for one year prior to the marketing of milk & milk products, except when an entire head is converted to organic, the producer may feed 80% organic feed for the first 9 months and 100% organic feed for the last 3 months. Type of mammal Breeds Number of Number Organic Animals Nonorganic Date of purchased (cow, goat, sheep) females of males replacement nonorganic replace-☐ Certificate animals ment animals attached What sources were used for purchased livestock? Describe how you identify individual animals, including non organic replacement animals: ☐ Plastic Ear Tags ☐ Ear Notching ☐ Brand ☐ Electronic Ear Tags (EID) Other (Please Describe): Tattoo **SECTION 3B: SOURCE OF LIVESTOCK: POULTRY** NOP Section 205.236 (ducks, quail, turkeys, chicken) Poultry or edible poultry products must be poultry that has been under continuous organic management no later than the second day of life. not applicable Types of Poultry Number of Nonorganic Breeds Number of Organic poultry Date of purchased CERTIFICATE females **Poultry** nonorganic remales **ATTACHED** (replacements) placements

| What sources were used for purchased poultry? |
|--|
| Describe how you identify your flock: |
| ☐ Visual☐ Group Identification☐ Coop (House) Number☐ Other (Please Specify): |
| If you raise both organic and nonorganic birds describe how products (eggs) are identified and kept separate: not applicable |
| SECTION 4: LIVESTOCK HEALTH CARE PRACTICE STANDARD NOP 205.238; 205.603 Producers must establish and maintain year-round livestock living conditions which accommodate the natural health and behavior of animals involved. These conditions include: access to the outdoors, clean drinking water, sunlight, shelter, and |
| shade. Continuous confinement of any animal is prohibited. Continuous confinement of ruminants in feedlots yards, and feeding pads is prohibited. |
| Water used for organic livestock must be potable and readily accessible. Water tests for: coliform, bacteria, nitrates and/or known contaminates may be required. |
| What is your source of water? On-site well Municipal River/creek/pond Spring Other (Please specify): |
| Are any additives added to water? Yes No |
| Please describe where water sources are located: |
| Describe how you prevent erosion and risks of contamination around water sources: |
| Describe reasons for and methods for any physical alternations (i.e.branding; castration; beak trimming; tail docking) |
| Indicate additional components of preventative healthcare used in your operation: |
| □ breed/species □ closed herd (or flock) □ isolate sick animals □ monitor for pests, diseases, and injuries □ good sanitation □ vector control □ Other (Please specify): |
| What traits of your livestock breed(s) make them suitable to your environment? |

| How often do | you monitor | livestock | health? |
|--------------|-------------|-----------|---------|
| | | | |

If prohibited materials are used to restore animals' health, how do you identify the segregated animals?

Livestock Health Care Materials: Please list all materials that you use or plan to use. All materials must be on the national list of synthetic materials allowed for use in livestock production (NOP 205.603). Documentation must be maintained for materials that have restricted use. All appropriate medications must be used to restore animals' health, medications should not be withheld to protect an animal's organic status. Maintain all records for inspection.

| Type of material | Product Name / Manufacturer | Health Problem | Animal Class |
|------------------|--------------------------------|----------------|--------------|
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Describe problem pests that affect your livestock (flies, external parasites, predators):

| Pest Type | Monitoring methods | Preventative pest control strategies |
|-----------|--------------------|--------------------------------------|
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If preventative pest control is not effective, please list materials used in your operation to control pests:

| Material | Brand | Manufacturer | Location and method of application |
|----------|-------|--------------|------------------------------------|
| | | | |

| SECTION 4: LIVESTOC NOP 205.238; 205.603 | (HEALTH CARE PRAC | TICE STANDARD CONT | INUED |
|--|-------------------------------|-------------------------------------|------------------------------|
| What types of health care pra | ctices do you implement ir | your operation? | |
| manure management | dry clean bedding | secure food storage | use of sanitizers |
| pasture/range management | | | |
| If sanitizers are used, list sanitiz additives) below: | ers that come into contact w | ith animals and animal products | (including drinking water |
| Note: Contact your certifier poduction are listed in NOP 205. | | tizers. Approved sanitizers us | sed in organic livestock pro |
| Brand Name | Manufacturer | Locatio | on Used |
| Ex. bleach | Ex. Clorox company | Ex. Disinfect roosting area | |
| | | | сс. |
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| SECTION 5: LIVESTOCE | | | NOP 205.239 |
| health and natural behavior of | | aintain livestock living conditions | s that accommodate the |
| Describe the regional climate of if applicable, describe ruminan | | affects animals' access to the ou | utdoors, and |
| | | | |
| What type of bedding is used f | or animals? | ☐ N/A (rangela | and/pasture) |
| What types of shelters and oth | er structures are used for yo | ur animals? | |
| | | | |
| | Vala Cartified (| Organic Agriculture | |

| , | | |
|---|--|----------------------------------|
| Parturition | | |
| Lactation dry off | | |
| Milking | | |
| Shearing | | |
| Reasons for confinement | Circumstances | Length of confinement |
| Confinements of rum | inants: | e ruminant livestock |
| Special projects (4-H) | | |
| Life stage | | |
| Animal Safety | | |
| Illness/Injury | | |
| Inclement Weather | | |
| Reasons for confinement | Circumstances | Length of confinement |
| Animals may be temporarily denied acconfined: | ccess to the outdoors. Describe circumstances in | which animals would need to be |
| streams, etc. to protect water quality a | and human health): | |
| | prevent environmental degradation (Non-point so | urce runoff, direct discharge to |
| How are wastes removed? | | |
| f feedlots and yards are used, how a | re they managed? | |
| If yes, describe how you prevent con | ntact of prohibited materials with animals and soil: | |
| Is lumber treated with arsenate, or a | ny other substances used in any structures? | es No |

| Finishing | | | |
|--|-------------------------|---------------------------------------|--|
| Not to exceed 1/5 th of animal's total life (or 120 days) | ıl | | |
| OFOTION C. FEED BATIO | NO 6 | FEED FOR NON BUMINAN | NOD 005 007 |
| | | FEED FOR NON-RUMINAN | |
| products, including pasture and f | orage ainin g | All feed must be organically produc | th a total feed ration composed of agricultural ed and handled by operations certified to NOP ed. Feed or forage containing antibiotics is |
| Class of Livestock | | Daily Ra | tions per Animal |
| Ex. laying hens (Americana) | | Layer pellet: 30lb/flock of 100 birds | 3 |
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| Livestock Feed Sources | | | |
| ☐ Certificate (purchased | feed | l) Crop production | on OSP (farm produced feed) |
| Feed Type | | Source | Certifier (attach certificate) |
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| SECTION 6A: FEED ANI | D DRY MATTER I | NTAKE FOR <u>RUM</u> | <u>INANTS</u> | NOP 205.237 (d) |
|---|-----------------------|--|---------------|------------------------------|
| Ruminant livestock producers agricultural products, including poertified to NOP standards. Danimal. | pasture and forage. A | II feed must be organi d MD) and dry matter inta | cally produce | ed and handled by operations |
| Class of Livestock | | Feed Types | | Season |
| | Purchased | Pastu | re | |
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| Liveriant Food Comme | | | | |
| Livestock Feed Sources | | | | |
| ☐ Certificate (purchase | ed feed) | ☐ Crop pr | roduction O | SP (farm produced feed) |
| Feed Type | | Source | | er (attach certificate) |
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SECTION 6B: DRY MATTER CALCULATION

For all class and types of ruminants: an average of 30% of all dry matter intake must be consumed from pasture during the grazing season. As defined grazing season is the period of time when pasture is available. The grazing season must be at least 120 days/year, but does not need to be continuous.

• Predict dry matter demand (DMD) in pounds. For example, beef cattle consume ~2.5% of their body weight in dry matter per day.

1,000 lb Angus Cow (2.5%) = 25 lbs of dry matter per day

• Determine dry matter intake from non pasture feed sources. For example, the cow above eats 10 pounds of oat hay in addition to pasture. The dry matter content of oat hay is average 90%

10 lbs(90%) = 9 lbs of dry matter (non pasture)

References for dry matter:

UC Cooperative Extension www.animalscience.ucdavis.edu/faculty/robinson/projects)

Beef Magazines composition tables (www.beefmagazine.com/nutrition/feed-composition-tables)

Dairy Cattle 7th revised edition, 2001 (www.nap.edu/catalog.php?record_id=9825)

Small Ruminants(sheep & goats), 2000 (www.nap.edu/catalog.php)

• Determine estimated dry matter intake from pasture. Estimated DMD – dry matter intake from non pasture feed sources= estimated DMI from pasture

25 lbs (DMD) - 9 lbs = 16 lbs per day DMI from pasture

Calculate dry matter percentage intake from pasture.
 The percent DMI from pasture = estimated DMI (pasture)/ estimated DMD x 100

16 lbs/ 25 lbs x 100 = 64%

| DMD (lbs) (25 lbs) | Feed Type (oat hay) | DMI (non pasture) (9lbs) | Estimated DMI (pasture) | DMI % |
|---------------------------|---------------------------|--|----------------------------------|--|
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| | DMD (lbs) (25 lbs) | DMD (lbs) (25 lbs) Feed Type (oat hay) | (25 lbs) (oat hay) (non pasture) | (25 lbs) (oat hay) (non pasture) (pasture) |

| SECTION 7: SIMPLE ON-FARM HANDLING LIVESTOCK | NOP 205.270 (a); 205.271 |
|---|---|
| Complete this section if you plan on making silage, grinding feed; milking a packing eggs. Provide maps of all storage and handling facilities. If applicable proved by certifier prior to use. Contact certifier before purchasing sanitizers national list. | le, labels used for packaging must be ap- |
| For Milk Handling: | not applicable |
| What type of milk handling system do you use: | |
| Describe cleaning cycle for milking equipment: | |
| Please list brand and manufacturer of cleaners used when sanitizing equipment | nt: |
| How many animals do you currently milk? | |
| What is your estimated productions (gallons): | |
| Handling for slaughter: | not applicable |
| Name of facility where your animals are slaughtered: | attach certificate |
| How are animals loaded? | |
| What form of transportation is used? | |
| How long does transportation take? | |
| Are animals provided with food in transit? YES NO | |
| Are animals provided with water in transit? YES NO | |
| How many hours from loading until time of slaughter? | |
| Are animals sold through auction yards? YES NO | |
| How long do animals stay at an auction yard? | |
| Describe how are animals organically managed at an auction yard: | |
| | |

| Egg handling: not applicable | not applicable | | | | |
|---|----------------|--|--|--|--|
| How do you prevent comingling of organic and conventional eggs? not applicable, 100%organic | | | | | |
| If packing, what type of packing material is used? cardboard wood other (please describe): | | | | | |
| Do you reuse packaging from other sources? No Yes | | | | | |
| If yes, what sources? | | | | | |
| Do you clean eggs with sanitizers? No Yes | | | | | |
| If yes, List brand name and manufacturer: | | | | | |
| | | | | | |
| Other products: not applicable | | | | | |
| List handling activities and products that apply to your operation: | | | | | |
| Are livestock or livestock products processed by a certified facility? | | | | | |
| □ No | | | | | |
| Yes, but ownership of final product is transferred | | | | | |
| Yes, and ownership is retained (fill out table below) | | | | | |
| | | | | | |
| | | | | | |
| Product Label or Brand Name of Processor Certifier | | | | | |
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| For each product listed above attach: current label product profile organic processor certificate | | | | | |
| For each product listed above attach: | | | | | |

| NOP Rule requires that records disclose all activities and transactions of the operation, be maintained for 5 years, and demonstrate compliance with the NOP Rule. Which of the following records do you keep for organic livestock production? Field maps CDFA Registration NRCS plan Documentation of purchased animals Animal Health records (vaccines & medications) Purchased feed, feed supplements, feed labels Dry matter test results (feed) Input records (cleaners and sanitizers- keep all labels) Transportation records Equipment cleaning records Handling records that show location and activities Sales records (purchase order, contract, invoice, cash receipts, cash receipt journal, sales journal, etc.) Certified processor's certificate If applicable, labels for livestock products (i.e. eggs) Other (please specify): Please have these records available for the inspector. Maintain all records for 5 years. SECTION 9: AFFIRMATION NOP 205.400 Infirm that all information in this organic systems plan (OSP) is true and accurate to the best of my knowledge Inaver reviewed the National Organic Standards (NOP) and will ask the certifying agent to clarify any standards that are not understood Ingree to implement the OSP, and will notify the certifier of any change in my certified operation that may affect its compliance with the NOP Ingree to maintain all records applicable to my organic operation for not less than 5 years beyond their creation and the certifier shall have access to all records maintained Ingree to submit applicable fees charged according to the fee schedule by the certifying agent In have made copies of this questionnaire and other supporting documents for my own records. | SECTION 8: RECORD KEEPING SYSTEM NOP Rule 205.103 |
|---|--|
| Field maps CDFA Registration NRCS plan Documentation of purchased animals Animal Health records (vaccines & medications) Purchased feed, feed supplements, feed labels Dry matter test results (feed) Input records (cleaners and sanitizers- keep all labels) Transportation records Equipment cleaning records Handling records that show location and activities Sales records (purchase order, contract, invoice, cash receipts, cash receipt journal, sales journal, etc.) Certified processor's certificate If applicable , labels for livestock products (i.e. eggs) Other (please specify): Please have these records available for the inspector. Maintain all records for 5 years. SECTION 9: AFFIRMATION I affirm that all information in this organic systems plan (OSP) is true and accurate to the best of my knowledge I have reviewed the National Organic Standards (NOP) and will ask the certifying agent to clarify any standards that are not understood I agree to implement the OSP, and will notify the certifier of any change in my certified operation that may affect its compliance with the NOP I agree to maintain all records applicable to my organic operation for not less than 5 years beyond their creation and the certifier shall have access to all records maintained I agree to submit applicable fees charged according to the fee schedule by the certifying agent | |
| NRCS plan Documentation of purchased animals Animal Health records (vaccines & medications) Purchased feed, feed supplements, feed labels Dry matter test results (feed) Input records (cleaners and sanitizers- keep all labels) Transportation records Equipment cleaning records Handling records that show location and activities Sales records (purchase order, contract, invoice, cash receipts, cash receipt journal, sales journal, etc.) Certified processor's certificate If applicable , labels for livestock products (i.e. eggs) Other (please specify): | |
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| Animal Health records (vaccines & medications) Purchased feed, feed supplements, feed labels Dry matter test results (feed) Input records (cleaners and sanitizers- keep all labels) Transportation records Equipment cleaning records Handling records that show location and activities Sales records (purchase order, contract, invoice, cash receipts, cash receipt journal, sales journal, etc.) Certified processor's certificate If applicable, labels for livestock products (i.e. eggs) Other (please specify): Please have these records available for the inspector. Maintain all records for 5 years. SECTION 9: AFFIRMATION NOP 205.400 I affirm that all information in this organic systems plan (OSP) is true and accurate to the best of my knowledge I have reviewed the National Organic Standards (NOP) and will ask the certifying agent to clarify any standards that are not understood J agree to implement the OSP, and will notify the certifier of any change in my certified operation that may affect its compliance with the NOP J agree to maintain all records applicable to my organic operation for not less than 5 years beyond their creation and the certifier shall have access to all records maintained | ☐ NRCS plan |
| □ Purchased feed, feed supplements, feed labels □ Dry matter test results (feed) □ Input records (cleaners and sanitizers- keep all labels) □ Transportation records □ Equipment cleaning records □ Handling records that show location and activities □ Sales records (purchase order, contract, invoice, cash receipts, cash receipt journal, sales journal, etc.) □ Certified processor's certificate □ If applicable , labels for livestock products (i.e. eggs) □ Other (please specify): | ☐ Documentation of purchased animals |
| Dry matter test results (feed) Input records (cleaners and sanitizers- keep all labels) Transportation records Equipment cleaning records Handling records that show location and activities Sales records (purchase order, contract, invoice, cash receipts, cash receipt journal, sales journal, etc.) Certified processor's certificate If applicable , labels for livestock products (i.e. eggs) Other (please specify): | ☐ Animal Health records (vaccines & medications) |
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| □ Equipment cleaning records □ Handling records that show location and activities □ Sales records (purchase order, contract, invoice, cash receipts, cash receipt journal, sales journal, etc.) □ Certified processor's certificate □ If applicable, labels for livestock products (i.e. eggs) □ Other (please specify): Please have these records available for the inspector. | ☐ Input records (cleaners and sanitizers- keep all labels) |
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| Sales records (purchase order, contract, invoice, cash receipts, cash receipt journal, sales journal, etc.) Certified processor's certificate If applicable, labels for livestock products (i.e. eggs) Other (please specify): Please have these records available for the inspector. Maintain all records for 5 years. SECTION 9: AFFIRMATION NOP 205.400 I affirm that all information in this organic systems plan (OSP) is true and accurate to the best of my knowledge I have reviewed the National Organic Standards (NOP) and will ask the certifying agent to clarify any standards that are not understood I agree to implement the OSP, and will notify the certifier of any change in my certified operation that may affect its compliance with the NOP I agree to maintain all records applicable to my organic operation for not less than 5 years beyond their creation and the certifier shall have access to all records maintained I agree to submit applicable fees charged according to the fee schedule by the certifying agent | ☐ Equipment cleaning records |
| □ Certified processor's certificate □ If applicable, labels for livestock products (i.e. eggs) □ Other (please specify): Please have these records available for the inspector. Maintain all records for 5 years. SECTION 9: AFFIRMATION NOP 205.400 □ I affirm that all information in this organic systems plan (OSP) is true and accurate to the best of my knowledge □ I have reviewed the National Organic Standards (NOP) and will ask the certifying agent to clarify any standards that are not understood □ I agree to implement the OSP, and will notify the certifier of any change in my certified operation that may affect its compliance with the NOP □ I agree to maintain all records applicable to my organic operation for not less than 5 years beyond their creation and the certifier shall have access to all records maintained □ I agree to submit applicable fees charged according to the fee schedule by the certifying agent | ☐ Handling records that show location and activities |
| ☐ If applicable, labels for livestock products (i.e. eggs) ☐ Other (please specify): **Please have these records available for the inspector.** **Maintain all records for 5 years.** **SECTION 9: AFFIRMATION** **NOP 205.400* ☐ I affirm that all information in this organic systems plan (OSP) is true and accurate to the best of my knowledge ☐ I have reviewed the National Organic Standards (NOP) and will ask the certifying agent to clarify any standards that are not understood ☐ I agree to implement the OSP, and will notify the certifier of any change in my certified operation that may affect its compliance with the NOP ☐ I agree to maintain all records applicable to my organic operation for not less than 5 years beyond their creation and the certifier shall have access to all records maintained ☐ I agree to submit applicable fees charged according to the fee schedule by the certifying agent | ☐ Sales records (purchase order, contract, invoice, cash receipts, cash receipt journal, sales journal, etc.) |
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| | |
| ☐ I have made copies of this questionnaire and other supporting documents for my own records. | ☐ I agree to submit applicable fees charged according to the fee schedule by the certifying agent |
| | ☐ I have made copies of this questionnaire and other supporting documents for my own records. |
| Signature of Operator | Signature of Operator |
| Date | Date |