

Name _____



ORGANIC HANDLING PLAN

Note: Print or type all information legibly. Use blue ink. Applications will be returned if incomplete or illegible. There is an additional charge for resubmitted applications. Copies of the Practice Manual are available free on-line www.mofgacertification.org or for a nominal fee, from MOFGA Certification Services. If you download your application forms from the web, please be sure to download and read the Practice Manual and its Appendices. NOP numbers referenced in parenthesis (NOP 205....) of each section below refer to sections in Appendix 1 of the Practice Manual. It is a good idea to read each section before completing the form.

FILLING OUT THE APPLICATION: All questions must be answered. All requested attachments, labels and MSDS sheets must be included with your application. If a question does not apply to your operation enter N/A.

SECTION 1: APPLICANT, GENERAL AND MARKETING INFORMATION (NOP 205.201 and 205.401)

1.1. Operator name(s) (1) _____

Limit of 2 names on certificate. (2) _____

Person in charge of day-to-day operations should be one of the names above. **Name listed first will be the principal contact for this operation in our database. At least one of the individuals listed must be present and lead the annual inspections.**

1.2. Company name: _____

Mailing Address: _____

Town: _____ State/Province: _____ Zip/Postal Code: _____

County: _____ Country: _____

1.3. Phone number: _____

Phone number for publication if different from above: _____

Cell phone number (not for publication): _____

Fax Number _____

1.4. Email _____

1.5. Email for publication if different from above: _____

1.6. Web URL _____

1.7. Facility address (if different from mailing address)

Address _____

Town _____ State _____ Zip _____

1.7. Legal Status: Sole Proprietorship Trust/Non-Profit Corporation Cooperative
 Legal Partnership Other: _____

1.8. Owner's name (if not one of the operators seeking certification) _____

Phone _____

Address _____

Town _____ State _____ Zip _____

Name _____

1.9. Have you ever had any products certified organic before? Yes No.

If Yes, When was first year certified:

Certifying Agent:

1.10. Has this operation ever been certified under another organic producer? Yes No.

If Yes, Name of Producer:

1.11. List all previous organic certification by other agencies (include agency names):

1.12. List current organic certification by other agencies (include agency names):

1.13. Have you ever been **denied** certification or had you certification **suspended** or **revoked**?

Yes No.

If YES, what year(s)? _____ what agency? _____

You must enclose a copy of any notice of non-compliance or denial/revocation of certification and a description of the actions taken by you to correct any non-compliances.

1.14. Give directions to your processing facility for your inspector to follow. Inspectors have found that a photocopy of the Delorme Atlas or any other map marked with the facility's location can be very helpful.

SECTION 2. MARKET INFORMATION

2.1. Below is a list of some common types of markets where organic producers sell products. Please select the markets where you sell your products (or are planning to sell your products) and specify (name) these markets. This information will be published and used by MOFGA's marketing specialist. If you do not want this information to be published, please use the "do not publish" column.

<u>Market Type</u>	<u>Check all that apply</u>	<u>Please Specify (name)</u>	<u>Do not publish</u>
CSA	<input type="checkbox"/>		<input type="checkbox"/>
Senior Shares	<input type="checkbox"/>		<input type="checkbox"/>
Farm Shares	<input type="checkbox"/>		<input type="checkbox"/>
Fairs & Festivals	<input type="checkbox"/>		<input type="checkbox"/>
Farmers Cooperatives	<input type="checkbox"/>		<input type="checkbox"/>
Farmers Markets	<input type="checkbox"/>		<input type="checkbox"/>
Institutions (e.g., schools)	<input type="checkbox"/>		<input type="checkbox"/>
Mail Order/Phone/Web	<input type="checkbox"/>		<input type="checkbox"/>
Natural Food Stores	<input type="checkbox"/>		<input type="checkbox"/>
On-Farm (farm stand, farm store)	<input type="checkbox"/>		<input type="checkbox"/>
Other farmers	<input type="checkbox"/>		<input type="checkbox"/>
Processors	<input type="checkbox"/>		<input type="checkbox"/>
Restaurants	<input type="checkbox"/>		<input type="checkbox"/>
Specialty shops	<input type="checkbox"/>		<input type="checkbox"/>
Supermarkets	<input type="checkbox"/>		<input type="checkbox"/>
Trade or Barter	<input type="checkbox"/>		<input type="checkbox"/>
Wholesalers (e.g., Horizon Milk)	<input type="checkbox"/>		<input type="checkbox"/>
Distributors	<input type="checkbox"/>		<input type="checkbox"/>
Other: _____	<input type="checkbox"/>		<input type="checkbox"/>

2.2. Do you have a catalog or brochure? Yes No. If YES, please attach copies.

Name _____

2.3. If you process conventional (non-organic) products what is the percentage breakdown of organic vs non-organic production.

- a) _____ % Organic Production _____ % Non-Organic Production
- b) List or attach a list of the general categories of non-organic products.

2.4. Is your operation a Primary operation or Contract Vendor?

2.5. If you use Contract Vendor's, complete the following:

Contract Vendor Name:	Address	Phone Number	Certifier

SECTION 3: Labeling and Product Composition (NOP 205.105, 205.270, 205.300-305, 205.307-311)

3.1. List (or attach a list of) products labeled as **100% Organic** (all ingredients including processing aids are 100% organic). For each named product you **must** enclose either a multi-ingredient product profile form or list the ingredient information on the single ingredient product profile form.

Product Name	Type of Processing	Expected Production

3.2. List (or attach a list of) products labeled as **Organic** (at least 95% organic ingredients, all other ingredients on National Lists NOP 205.605 or NOP 205.606). For each named product you **must** enclose either a multi-ingredient product profile form or list the ingredient information on the single ingredient product profile form

Product Name	Type of Processing	Expected Production

3.3. List (or attach a list of) products labeled as **Made with Organic ... (Specified ingredients or food groups)...** (at least 70% organic ingredients, all other non-agricultural ingredients on National Lists NOP 205.605). For each named product you **must** enclose either a multi-ingredient product profile form.

Product Name	Type of Processing	Expected Production

3.4. List (or attach a list of) products with less than 70% organic ingredients (No organic claim and organic ingredients are only listed as such in the ingredient statement on the Information Panel).

Product Name	Type of Processing	Expected Production

3.5. Organic products produced from Organic By-Products and sold as certified organic. For each named product you **must** enclose either a multi-ingredient product profile form or list the ingredient information on the single ingredient product profile form.

Product Name	Type of Processing	Expected Production

Both multi-ingredient and single ingredient product profile forms are available from MCS or on our website.

Section 4: Assurance of Organic Integrity (NOP 205.201(a), 205.270, 205.272)

4.1. **Attach a Facility Diagram** of all of your processing facilities both inside and out. If processing occurs at more than one facility include a diagram for each facility. You may use this same diagram to indicate any pest control stations at your facility (see 5.4 below).

4.2. **Attach a Flowchart** of each of your processes. If you use more than one process include a flowchart for each process.

4.3. Check if you sell products in National International markets Maine only

4.4. List all State and/or Federal Licenses your facility maintains and their expiration dates.

License:	Expiration Date:

4.5. What is the date of your last water test.

4.6. List source of water used in processing.

4.7. Explain how water is used in processing.

4.8. Explain any on-site water treatment.

4.9. Describe how you monitor water quality and how often.

4.10. Describe how steam is used in processing or packaging of organic products:

4.11. If steam is in direct contact with organic product explain how you ensure the organic integrity of the product.

4.12. List any boiler additives used and attach label and/or MSDS sheet.

- 4.13. If you have an organic integrity program in place, list specific control points you have identified, how you have addressed these point in order to protect organic integrity or attach a copy of your organic integrity program.
- 4.14. How often do you conduct a self audit of organic integrity.
- 4.15. How do you monitor Quality Assurance (ISO, HACCP, TQM...).
- 4.16. Name and address of any outside quality assessment company, if contracted.
- 4.17. List all product testing performed by you or an off-site contractor.
- 4.18. Explain how you prevent the use of ingredients produced using Excluded Methods (genetically engineered), Sewage Sludge, and Ionizing Radiation in your certified products. (You must address this question if you are using non-organic agricultural ingredients or using products on the national list that may be produced using GE (i.e enzymes and cultures) or contain non-organic agricultural ingredients (i.e. Baking Powder which contains cornstarch). A "Product Verification Form" is available at MCS that can be sent to the producer of the ingredient in lieu of a letter from the producer.
- 4.19. If ingredient samples are retained, how long are samples retained?
- 4.20. If finished product samples are retained, how long are sample retained?
- 4.21. List (or attach a list of) all equipment used in processing. Note which pieces of equipment are used for both organic and non-organic production. Describe all procedures used to prevent commingling of organic and non-organic product and how/where this is documented.

- 4.22. Do you test food contact surfaces or rinse water for cleaner/sanitizer residues? Is this testing part of your SSOP? Are results of residue tests recorded?
- 4.23. **Attach a copy** of your Sanitation Standard Operating Procedure (SSOP).
- 4.24. **Attach a copy** of Labels and MSDS sheets for all cleaners and sanitizers used.
- 4.25. Where do you store your cleaning and sanitizing products and cleaning equipment?
- 4.26. List all packaging and storage container materials used during production (i.e. paper, glass, plastic etc)
- 4.27. Where are packaging materials stored?
- 4.28. List any other products stored in the same area.
- 4.29. If any fungicides, fumigants or pest control products are used in the storage area, list the specific products used and steps taken to prevent contamination of packaging material. Attach labels and MSDS sheets.
- 4.30. If any packaging or containers are reused describe how materials or containers are cleaned prior to reuse. Note if materials/containers are dedicated organic or not and how you distinguish between reused organic and reused conventional materials/containers.
- 4.31. If there are any off-site storage areas give name of facility, type of product stored, address, name of contact person and contact information.
- 4.32. Explain how **incoming** ingredients are transported and received.
- 4.33. Explain all measures taken to ensure the organic integrity of **incoming** ingredients.

- 4.34. If **incoming** ingredient transport units transporting raw unpackaged ingredients (i.e. grain hauling) are used to carry both organic and conventional product how do you insure units are cleaned/purged prior to loading of organic products. Also note if cleaning/purging of units is documented.
- 4.35. If **incoming** transport units ship both organic and non organic product at the same time describe measures taken to protect commingling/contamination of organic product.
- 4.36. If **in-process** products are transported, explain the in-process transport process. Note if transport units are dedicated organic or how organic and non-organic transport units are distinguished and explain the cleaning process of the transport units and whether or not cleaning is documented.
- 4.37. Explain how **outgoing** products are shipped.
- 4.38. Explain all measures taken to ensure the organic integrity of **outgoing** products.
- 4.39. If **outgoing** transport units are used to carry both organic and conventional product how do you insure units are cleaned/purged prior to loading of organic products. How is cleaning/purging of units documented?
- 4.40. If **outgoing** transport units ship both organic and non organic product at the same time describe measures taken to protect commingling/contamination of organic product.

Section 5: Pest Management (NOP 205.271)

- 5.1. List all pest problems you have encountered in the past.

Name _____

- 5.2. List all pest management practices you currently have in place.
- 5.3. Explain your waste control system and all management steps taken to prevent waste from attracting and harboring pests.
- 5.4. List all pest control substances used. Include full brand names and **attach** labels and MSDS sheets. Note whether products are listed on the NOP National List of approved substances (NOP Subpart G).
- 5.5. If pest control substances are used list all measures taken to prevent contact with organic products, ingredients or packaging materials. Who is responsible for facility pest management?
- 5.6. If you contract with a pest control service give name, address and phone number.
- 5.7. Has the pest control service acknowledged that they know you handle organic product? Attach letter of acknowledgement.
- 5.8. **Attach** a facility diagram showing type and location of all pest monitoring stations.
- 5.9. What is the frequency of visitation of pest monitoring stations and how are the visits documented.

Section 6: Record Keeping (NOP 205.103)

- 6.1. List all documents used to track incoming ingredients.
- 6.2. List all documents used to track in process ingredients/products including all production and inventory storage records.

Name _____

6.3. List all documents used to track finished product from production through finished product storage to final shipping.

6.4. Describe your lot numbering system (give an example).

6.5. How long do you keep records (NOP 205.103 requires all organic records be kept a minimum of 5 years).

6.6. Do you maintain current Organic Certification documents for all organic ingredients used in products.

6.7. List records you maintain to audit each organic ingredient lot from reception to use in final product.

6.8. List records you maintain to balance each incoming ingredient lot with amount of organic product sold.

Signature of Producer _____ Date _____

Signature of Producer _____ Date _____