



ORGANIC SYSTEM PLAN UPDATE - PRODUCER

Note: Operations with gross agricultural income from organic sales of less than \$5,000 US are exempt in the USA.

FOR OFFICE USE ONLY
Received: / / Reg. #
Retainer Fee: \$ _____

This document is a record of updates to your Organic System Plan. **After completion, make a copy of the document for your records and future use.** If you wish to update your Organic System Plan electronically, it can be downloaded at www.pro-cert.org/producer-documents Applicants must maintain all records pertaining to organic operations for a minimum 5 year period.

Please ensure you have identified **all certification programs** and **equivalency arrangements** requested for certification in the Application & Contract (Doc #5.2). If there is a **change** to the name of the **Applicant (Legal Entity)** from the original Organic System Plan, please contact our office to confirm how to manage the change.

1.0 APPLICANT INFORMATION [NSC .310, 4; NOP 205.401(b)]

Applicant (Legal Entity)¹: _____ **Year:** _____
Phone: () _____ **Fax:** () _____ **Cell:** () _____
Email: _____

¹ Legal Entities may include Sole Proprietors, Partnership (Marital or Legal), or Corporations. Please contact our office if you have questions.

SCOPE OF OPERATION

Please indicate if your Organic System Plan includes production in the categories below. Please complete the indicated Appendix¹ to your Organic System Plan.

- | | |
|---|--|
| <input type="checkbox"/> Livestock, Herds & Flocks – Appendix A | <input type="checkbox"/> Wild Crops – Appendix D |
| <input type="checkbox"/> On-Farm Processing ² - Appendix B | <input type="checkbox"/> Apiculture – Appendix E |
| <input type="checkbox"/> Greenhouse & Growth Chambers – Appendix C | <input type="checkbox"/> Off-Farm Processing ^{2,3} – Appendix F |
| <input type="checkbox"/> Field Crops Only | |

¹ Appendices are available for download at www.pro-cert.org/producer-documents or on request from our office

² Includes Packaging & Labelling Activities & Maple Syrup Processing. Operators with more than 10 products are considered Processing, please request a Processor/Handler Application & Contract

³ COR Applicant's Only.

Is the farm currently operated 100% organically? Yes No

If **No**, provide an update on your conversion plan, include activity planned to bring additional portions of the farm under organic management in the current year.

| | | | |
|-------------------|--|-----------------------------------|---------------------------|
| Valid 12/20/19 | Organic System Plan Update - Producer Doc # 5.2.1.1 | Author: BJSB Reviewer: JWH, DL | Page 1 of 7 Version 17 |
|-------------------|--|-----------------------------------|---------------------------|

Provide the following information regarding the scale and nature of the farming operation:

| <u>Cultivated Land:</u> (includes hayland) | <u>Acres</u> | <u>Pasture Land:</u> | <u>Acres</u> |
|---|----------------------|----------------------|--------------|
| Organic | _____ | Organic | _____ |
| Transitional | _____ | Transitional | _____ |
| Conventional | _____ | Conventional | _____ |
| Total | _____ | Total | _____ |
| Ecological Reserve | _____ | | |
| Total Land Area Operated | <input type="text"/> | Acres | |

2.0 ORGANIC SYSTEM PLAN UPDATE [NSC .310, 4.2; NOP 205.202(b)]

If you have added any new land or storage facilities (eg. bins) to the operation, you are required to provide updated maps reflecting the same.

Have there been any changes to your Farm, Field and/or Yard Maps? Yes No
 If **Yes**, please attach updated Farm, Field and/or Yard Maps hereto.

Have there been any changes, or are there any planned changes, to the following aspects of your organic system plan:

- | | | | | |
|---------------------------------------|--------------------------|-----|--------------------------|----|
| Buffer/Boundary Management Practices? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| Cropping Management Practices | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| Post Harvest Handling/Storage? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| Soil Management & Monitoring? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| Water Management & Monitoring? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| Sanitation Practices? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| Facility Pest Management? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| Waste Management Practices? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| Record Keeping Systems? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |

Note: failure to report changes to your organic system plan is a non-compliance and a violation of SFCR Section 346(1) and NOP 205.406.

If you answered **Yes** to any of the above, please describe the nature of the changes to your Organic System Plan below (attach additional pages if necessary):

3.0 SEED, SEEDLING AND TREATMENT [NSC .310, 5.3; NOP 205.204]

3.1 Seed Sources

For the crops to be established from seeds, seedlings or via plant tissue other than annual seedling (e.g. rhizomes, shorts, cuttings, roots or tubers) farm, provide the following information:

| Crop & Variety | Supplier | Organic Status (Organic, Non-Organic) | Supplier Certification |
|----------------|----------|--|---------------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

All seed treatments and inoculant substances must be included on **Table 4.2 Input Substance Summary**. You must collect and **attach** product labels and/or MSDS for all seed treatments and inoculants. A current **Non-GMO** statement must be provided for all inoculants and seed treatments

If Organic Seed is not being used has an **Organic Seed Search Summary** (Doc #5.3.4.1), been completed for each crop not commercially available in organic form? Yes No

Note: A record of the search completed for commercially available organic seed must be available at the time of inspection. If using non-organic seed, records showing the untreated and non-gmo status must be available.

3.2 Seed Handling & Storage

Are off-site (commercial or private) seed cleaning facilities used to prepare seed for sowing? Yes No
If **Yes**, is the facility used certified organic? Yes No. If **Yes**, identify the facility:

Seed Cleaning Facility: _____ Certified by: _____

Attach a copy of the organic certificate.

If **No**, a Plant Sanitation Affidavit (Doc #7.4.3b) must be completed by the operator prior to handling organic seed.

Note: Organic seed handled by a non-organic seed cleaning facility may still be used as ‘organically grown’ seed. Any remaining seed from these lots may not be stored or sold as organic.

Describe procedures to segregate non-organic seed stored on the farm N/A

3.3 Genetic Engineering/Modification [NSC .310, 1.4(a); NOP 205.2 & 205.105(e)]

Are the seeds, seedlings and perennial stock described above propagated without the use of prohibited genetic engineering/modification methods (“excluded methods” as defined in NOP)? Yes No

If **No**, explain:

4.0 COMPLAINTS & CORRECTIVE ACTIONS [ISO Guide 65]

Describe any complaints received regarding the quality of organic produce or products received in the last year.

Describe the corrective action(s) taken:

Have records available for review at the time of inspection.

5.0 RELEASE OF INFORMATION

I hereby authorize Pro-Cert to release the following information upon request:

- Crop specific organic production data to prospective buyers;
- My name and contact information to fellow organic producers;
- My name and contact information to agencies conducting research and/or surveys on organic agriculture.

6.0 CERTIFICATION FEE CALCULATION (See Fee Schedule Doc. #5.1.1.3)

The **Retainer Fee** which must accompany the Application and Contract is equivalent to 50% of the Total Fee payable as calculated below.

A. Canadian, USA, EEC & Quebec Programs

1.0 Certification Fees:

- 1.1 Basic Fee Initial (See Fee Schedule): \$ _____
- Cultivated Land Fee: (_____ ac x \$ _____/ac) \$ _____
- Pasture Land Fee: (_____ ac x \$ _____/ac) \$ _____
- 1.2 Livestock Additional Basic Fee (If Applicable): \$ _____
- Animal Unit Fee: (_____ AU x \$ _____/AU) \$ _____
- 1.3 On-Farm Processing Fee (If Applicable): \$ _____
- 1.4 Off-Farm Processing Inspection Fee (If Applicable): \$ _____
- 1.4 Greenhouse Fee (If Applicable): (_____ ft² x \$ _____/1,000 ft²) \$ _____
- 1.5 Wild Crop Fee (If Applicable): \$ _____
- 1.6 Apiary Fee (If Applicable): \$ _____

Sub-Total: \$ _____

2.0 Pro-Cert Accreditation Surcharge: (10% of Sub-Total \$ _____) = \$ _____

Sub-Sub Total: \$ _____

3.0 Quebec Accreditation Surcharge (Quebec Only): (15% of Sub-Sub-Total \$ _____) = \$ _____

B. Additional Organic Programs (If Applicable)

- Data Collection Only: Bio Suisse Brazil \$ _____

Total Fee: \$ _____

Retainer Fee: \$ _____ x 50% = \$ _____
(Total Fee)

The **Remainder Fee** which is due upon receipt of an invoice is equivalent to the remaining 50% of the Total Fee plus pro-rated travel Costs, any other Costs and GST/HST (if applicable). An invoice will be forwarded after inspection and must be paid before evaluation and the certification decision. Unannounced inspection and audit costs (if applicable) will be invoiced according to the Fee Schedule (Doc #5.1.1.3).

| | | | |
|-------------------|--|------------------------------------|---------------------------|
| Valid 12/20/19 | Organic System Plan Update - Producer Doc # 5.2.1.1 | Author: BJSJH Reviewer: JWH, DL | Page 4 of 7 Version 17 |
|-------------------|--|------------------------------------|---------------------------|

Table 4.1.b Recent Field Management History & Current Plan
Extension Applicants – Crop Year 20__

This table is to be completed for **all** existing fields (organic, transitional and conventional) and organic pasture if applicable. Indicate the crop (and variety) and any substance use **planned** for **this** year. Include additional pages as necessary. You may make photocopies of this form for additional use or you may download this form in as an Excel spreadsheet from www.pro-cert.org/producer-documents

| Field No. | Legal Description/ Locataion | Field Area (ac) | Last Month and Year of Unpermitted Substance Use | Organic Status Code ¹ | Cropping & Substance Use History | | |
|-----------|------------------------------|-----------------|--|----------------------------------|--|------------------------|----------------------------|
| | | | | | Item | One Year Previous 20__ | Current Year's Plans: 20__ |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | |

1. This year's anticipated Organic Status: O = Organic T = Transitional C = Conventional
2. Pesticide includes: Herbicide, Insecticide, Fungicide, Rodenticide etc.
3. Other: All other Soil/Crop amendments and applications.

**Table 4.1.c New Land History & Current Plan
New Land Only – Crop Year 20__**

This table is to be completed for **new** fields and/or pasture managed by the farming operation this year (organic, transitional and conventional). For each field, indicate in the space provided: (a) the crop grown or to be grown; (b) the fertilizer used or to be used; (c) the pesticide used or to be used; (d) other substances used or to be used: (i) during the **three previous** years and; (ii) to be used in the **current year**; (iii) the last year in which a prohibited substance was used. Include additional pages as necessary. You may make photocopies of this form for additional use or you may download this form in as an Excel spreadsheet from www.pro-cert.org/producer-documents

| Field No. | Legal Description/ Location | Field Area (ac) | Last Month and Year of Unpermitted Substance Use | Organic Status Code ¹ | Cropping & Substance Use History & Plan | | | | |
|-----------|-----------------------------|-----------------|--|----------------------------------|--|---------------------------|-------------------------|------------------------|---------------------------|
| | | | | | Item | Three Years Previous 20__ | Two Years Previous 20__ | One Year Previous 20__ | Current Year's Plan: 20__ |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | | | |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | | | |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | | | |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | | | |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | | | |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | | | |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | | | |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | | | |
| | | | Month: Year: | | Crop & Variety Fertilizer Pesticide ² Other ³ | | | | |

1. This year's anticipated Organic Status: O = Organic T = Transitional C = Conventional
2. Pesticide includes: Herbicide, Insecticide, Fungicide, Rodenticide etc.
3. Other: All other Soil/Crop amendments and applications.

**Table 4.2.a Input Substance Summary
Crop Production**

Complete this table listing **all** inputs in use on the farm operating in the coming production year regardless of whether these are used for organic or non-organic production. You may exclude seed, seedlings and perennial planting stock. The list must include **all** seed treatments, inoculants, soil amendments (fertilizers, minerals, micro-nutrients, compost, manure, etc.), pest/disease/weed control substances, crop production aids and any other substances to be applied to the production operation. **Attach a label and/or MSDS for all substances intended for use in organic production.** A **current** non-gmo statement must be provided for all inoculants.

Note: All input substances used in organic production may be subject to annotations regarding origin or use as detailed in the applicable standards/regulations. You may be required to submit addition information to demonstrate compliance with the same.

| Product | Manufacturer | Ingredient List | Use | Organic ¹ | Pro-Cert ² |
|---------|--------------|-----------------|-----|--------------------------|--------------------------|
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

¹ – Mark each product used in organic production; Leave substances used in non-organic production unmarked.

² – For Pro-Cert Office Use only indicating substances have been reviewed.