**Oregon Tilth Certified Organic**

2525 SE 3rd Street • Corvallis OR 97333 • Phone (503) 378-0690 Fax (541) 753-4924

Email: organic@tilth.org Web Site: www.tilth.org

CANADA ORGANIC REGIME

Organic System Plan – Handling (Class OP, OH, OM)

**To apply for certification please send a completed**

**Organic System Plan, contract\* and certification fees to:**

(\*contracts are only required for new applicants)

**Oregon Tilth, 2525 SE 3rd Street, Corvallis, OR 97333**

* **This Application is for clients located in Canada only. Certification is to the Canada Organic Standard.** Operators in third countries may certify to either the National Organic Program or be evaluated under the US/Canada Equivalency Agreement
* **As you fill out this form, keep in mind you are creating a legal document.** No information will be supplied to any third party without prior permission of the operator, with the exception of accreditation agents or government authorities. Compiled data for statistical summaries may be distributed.
* **Please submit a payment for all applicable certification fees with this Organic System Plan**. Please refer to the *OTCO Fee Schedule* to determine the certification fee due for your operation. Organic System Plans will not be processed without payment or an approved financial agreement.
* **If you are not currently certified, please submit a complete Contract and Trademark Use Agreement with your Organic System Plan**. Blank contracts are available for download from our website ([www.tilth.org](http://www.tilth.org)) or please contact the Oregon Tilth office and one will be sent to you..
* **All Organic System Plans must be submitted complete.** An additional fee of $25 will be charged for any application that must be returned for completion. Emailed or faxed applications are acceptable, however will not be processed until payment is received. Please see the checklist at the end of the Organic System Plan that details what is needed for a complete OSP.
* **OTCO recommends beginning the application process with sufficient time** before certification is required to allow for the necessary inspection and review process. While in some cases certification can be provided in a very short time frame, allowing up to twelve weeks is recommended.

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| **Fees:** | |
| **Renewing Operators:** | |
| Please enter your gross sales of organic product for the previous year: | $ |
| Please attach a completed OTCO Worksheet to Determine Certification Fees. This worksheet will automatically calculate your certification fee based on your organic sales under various categories | Attached |
| **New Operators:** | |
| Operators with no previous organic sales will need to pay $1075 with this application. This includes the $1000 minimum certification fee and a $75 new applicant fee. | |
| Operators with previous years sales (organic sales within previous 12 months), but new to OTCO certification will need to complete and attach a Worksheet to Determine Certification Fees. The fee will be based on previous years gross sales of organic products. In addition a $75 new applicant fee will apply | Attached |

**The Oregon Tilth Certified Organic Fee Schedule and Worksheet to Determine Certification Fee can be downloaded from the Oregon Tilth website,** [**www.tilth.org**](http://www.tilth.org) **or one can be requested by contacting the Oregon Tilth office.**

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| FOR OFFICE USE ONLY: | | | | | |
| Received: |  | Cleared Accounting: |  | Fee Estimate: |  |

**SECTION 1: General Information**

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| **Primary Business Information** | | | | | | |
| Please select the appropriate legal description of the applicant below and  provide the corresponding information as requested. | | | | | | |
| **Sole Proprietor**  **Partnership** | | | | | | |
| Legal Business Name: | | | | | | |
| DBA (if any): | | | | | | |
| Mailing Address:  (Street, City, State or  Province and zip code) |  | | | | | |
| Website: |  | | | | | |
| Proprietor / Partner Name: |  | | | | | |
| Phone Number(s): | Primary: | |  | | Office: |  |
| Mobile: | |  | | Fax: |  |
| \*please be sure to include any applicable extension numbers | | | | | |
| Email Address: |  | | | | | |
| Partner Name (if applicable): |  | | | | | |
| Phone Number(s): | Primary: | |  | | Office: |  |
| Mobile: | |  | | Fax: |  |
| \*please be sure to include any applicable extension numbers | | | | | |
| Email Address: |  | | | | | |
| **Limited Liability Corporation (LLC)**  **Corporation**  **Trust / Other Organization** | | | | | | |
| Legal Business Name: | | | | | | |
| DBA (if any): | | | | | | |
| Mailing Address:  (Street, City, State or Province and zip code) | |  | | | | |
| Website: | |  | | | | |
| CEO, COO, Executive Director, Managing Director, or Registered Agent: | |  | | | | |
| Phone Number(s): | | Primary: | |  | Office: |  |
| Mobile: | |  | Fax: |  |
| \*please be sure to include any applicable extension numbers | | | | |
| Email Address: | |  | | | | |
| ***Corporations/Trusts/Organizations: Please attach a listing of all officers/shareholders, office/shareholder contact information, and/or articles of incorporation*** | | | | | | |

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| **Primary Contact** | | | | | | |
| The person listed below has knowledge of organic operations and by being listed here will have access to any information contained in the Organic System Plan or OTCO files. The primary contact responsible for certification identified below will be the individual to receive all correspondence and act as the legally authorized representative. | | | | | | |
| Primary Contact Responsible for Certification: | | | | | | |
| **1** | Name: |  | | | | |
| Company: |  | | | | |
| Title: |  | | | | |
| Mailing Address: |  | | | | |
| Phone Number(s): | Primary: |  | Office: |  | |
| Mobile: |  | Fax: |  | |
| \*please be sure to include any applicable extension numbers | | | | |
| Email Address: |  | | | | |
| **Additional Contacts:** | | | | | | |
| Additional contacts may be named in order for OTCO to interact with them about this file (i.e. request copies of documents, certification status etc). These contacts may be consultants, managers, administrative assistants etc. Additional contacts can be authorized to make changes to this plan and act on behalf of the company by checking the “Authorize” box. If the contact should only be communicated with, but has no authority to make changes or act for this company do not check the box “Authorize” | | | | | | |
| **2** | Name: |  | | | | |
| Company: |  | | | | |
| Title: |  | | | | |
| Mailing Address: |  | | | | |
| Phone Number(s): | Primary: |  | Office: |  | |
| Mobile: |  | Fax: |  | |
| \*please be sure to include any applicable extension numbers | | | | |
| Email Address: |  | | | | |
| The person named above is authorized to act on behalf of this company: | | | | | | Authorize |
| **3** | Name: |  | | | | |
| Company: |  | | | | |
| Title: |  | | | | |
| Mailing Address: |  | | | | |
| Phone Number(s): | Primary: |  | Office: |  | |
| Mobile: |  | Fax: |  | |
| \*please be sure to include any applicable extension numbers | | | | |
| Email Address: |  | | | | |
| The person named above is authorized to act on behalf of this company: | | | | | | Authorize |

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| **Production Partnership (if applicable) – this is an OTCO Fee Schedule Arrangement** | | | | |
| A production partnership involves a collaborative effort among two or more **OTCO certified** independent companies marketing their products in common. An operation may have either farm/livestock or handling/processing production partners that are contracted to provide products, predominately to the primary operation, which contribute to, or are, a finished organic product sold by the primary operation. This production partnership arrangement allows the primary operation (Production Partner) to cover the production partner’s certification fees. *(Please see OTCO fee schedule for more information on the definition of Production Partnership)*  **\*\*Note this only applies if you qualify for a Production Partnership as per OTCO fee schedule and the Primary Production Partner is paying your certification fees.** | | | | |
|  | Production Partner: |  | | |
| Contact Person: |  | | |
| Title: |  | | |
| Mailing Address: |  | | |
| Phone Number(s): | Primary: |  | |
| Mobile: |  | |
| Office: |  | |
| Fax: |  | |
| Email Address: |  | | |
| **AUTHORIZATION REQUIRED:** In order to share information with the primary production partner, OTCO requires a signed release.  By signing below, I am hereby authorizing OTCO to release information about my certification, including files that I have submitted, to my primary production partner listed above. | | | | |
| Name: | | | | Date: |

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| Signature: |

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| **Site (Facility/Farm) Address(s) Requested for Certification:** | | |
| 1. | Site Address: (Street, City, State or Province and zip code) |  |
| 2. | Site Address: (Street, City, State or Province and zip code) |  |
| 3. | Site Address: (Street, City, State or Province and zip code) |  |
| 4. | Site Address: (Street, City, State or Province and zip code) |  |
| 5. | .Site Address: (Street, City, State or Province and zip code) |  |
| 6. | Site Address: (Street, City, State or Province and zip code) |  |
| 7. | Site Address: (Street, City, State or Province and zip code) |  |

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| **Background Information:** | |
| a) Please indicate all OTCO classes of certification that you are applying for: | |
| Handling (Class OH, OP, OM)  Class OR (Restaurant or Retail)  Attestation of Compliance for Custom Service Providers (see definition below) | |
| Please identify the company name this application or certification is under (if different than identified on page 2): | |
| b) Please check all certification services requested: | |
| United States/Canada Equivalency  EU/Canada (COR) Equivalency | |
| \* EU evaluation requires submission of EU Supplement and appropriate fees. Forms are available for download at [www.tilth.org](http://www.tilth.org) or by contacting the Oregon Tilth office. | |
| c) Have you reviewed the CAN/CGSB Standards, Operating Manual and any other applicable international standards or arrangements? (e.g. EU-COR Equivalency) | Yes  No |
| d) Have you reviewed the OTCO Procedures Manual? | Yes  No |
| e) Are both organic and non-organic products produced or managed by your company? | Yes  No |
| f) What percentage of total business does organic represent? | Less than 1%  1-10%  10-50%  50-99%  100% |
| g) Which, if any, other regulatory agencies inspect this facility/farm? Please list. | |
| h) Have you ever had a negatively scoring report from any other regulatory agency, including the Canada Food Inspection Agency (CFIA) or Provincial Health Department | Yes  No |
| If yes, please describe by submitting documentation regarding the issue.  Attached | |
| i) Certification year applying for: | |

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| **Attestation of Compliance Definition** |
| Under the COR, operators who do not produce certified product but do provide contractual services cannot be Certified but can be issued an Attestation of Compliance which will recognize the services as being in  accordance with CAN/CGSB32.310 and 32.311 to maintain the integrity of the organic product and eliminate the need for multiple inspections resulting from verification for the certification of the final product every time a different operator contracts the services.  An “Attestation of compliance” shall be applicable for the following types of custom services:  - The services identified as being exempt for certification in section 19 of the OPR, i.e. “The slaughtering of organic livestock, or the transportation and storage of organic livestock or an organic product”.  - Other custom services for bulk product such as seed cleaning where the ownership of the product remains with the primary producer. |

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| **Certification History** | | |
| **New Applicants to Oregon Tilth Only** | | |
| Has this operation ever: | | |
| a) Been certified organic? | Yes  No | |
| If yes: | | |
| Please include a copy of the most recent certificate | Attached | |
| With which agencies were you certified? |  | |
| Please define the scope of this certification with previous agent  Crop production, Livestock production, Grain production, Maple syrup production,  Specialized production (Bee-keeping etc),  Food Processing, Subsequent packaging  International (EU etc.) | | |
| What were the dates of maintaining certification? |  | |
| Are you still currently certified? | Yes  No | |
| Will you be maintaining this certification? | Yes  No | |
| Are there any outstanding noncompliances with the agencies mentioned above? | Yes  No | |
| b) Been denied organic certification? | Yes  No | |
| c) Had your certification suspended or cancelled? | Yes  No | |
| d) Withdrawn from certification with outstanding points of non-compliance or conditions? | Yes  No | |
| e) Withdrawn your application for certification with outstanding points of non-compliance? | Yes  No | |
| If yes was chosen on b, c, d, e above, please attach a copy of all relevant letter(s) and a description of any/all corrective actions: | Attached | |
| f) Are you changing Certifiers? | Yes  No | |
| If yes, have you notified the current Certifier of your intent to change Certification Bodies? | Yes  No | |
| **Renewing Operations Only** | | |
| f) List your current certification number issued by OTCO |  | |
| g) Were there any points of noncompliance issued after last year’s inspection? | Yes  No | |
| If yes, please confirm that corrective actions are still in effect: | Yes  No  Comment: | |
| h) Were there any reminders for continuous improvement noted in your Notification of Certification Decision following last year’s inspection? | Yes  No | |
| If yes, please confirm that reminders have been acknowledged: | Yes  No  Comment: | |
| **Inspection (New and Renewing Operations)** | |
| Your annual inspection must occur during the production season. Please provide OTCO with your planned organic production schedule and frequency for the upcoming months to aid in inspection planning: |  |

**Instructions for completing this form:**

OTCO has established this one master application template to cover very diverse operation types. OTCO currently has 3 different classes of certification all under “handling”. We have established these different classes of certification in order to group different types of handling operations and obtain the required information for certification for each. Below is a description of the different classes of certification and examples of types of operations that fit into each.

**Class OP – Organic Processing**: Covers the production of processed organic foods and/or feed by processors and co-packers. Cooking, mixing, blending, drying, extracting, slaughtering, freezing or otherwise enclosing food in a container are all types of processing covered by this class.

**Class OH - Organic Handlers**: Covers businesses participating in the distribution chain for organic foods such as packers, wholesalers and distributors. Operations which take physical possession of a product and do basic repacking of single products (without processing). Note: if you are blending ingredients a class OP will be necessary.

**Class OM - Organic Marketers**: Covers the formulation and marketing of organic products, which are processed or co-packed at other facilities. Marketing operations do not take physical possession of product and are typically operations that either have products produced for them at certified co-packers or are distributors, which buy and sell non-retail products.

**The remaining sections of this application form will outline each class of certification requested to fill out the section. Refer to the header of each section for the list of applicable certification classes. If the section is not applicable to your operation or your class (as above), then please indicate that by checking the box in the heading, indicating it is not applicable.**

**Definitions and Forms:** The following forms are tools for you to use, and will be referenced in the Product Formulation Sheet (Form PFS-02) and the Master Product and Ingredient Lists (From MPL-01 and MIL-03). Below is a description of these forms. Please note that they are not required if the manufacturer of the ingredient is able to supply the same verification information by another method (i.e. signed statement, your own ingredient affidavit etc.)

Organic Certificate: The most current organic certificates are required to be attached to this application form for all organic ingredients used. The organic certificates should be issued by a CFIA approved Certification Verification Body and should confirm compliance with the COR Regulations or certified to the terms of a Third Country Equivalency Agreement (certificate or attestation of equivalence from a recognized certification agent). Note that documentation of imported NOP certified products must contain the statement “Certified to the terms of the US-Canada Organic equivalence arrangement.”

Non-Organic Ingredient Declaration: This form is used for non-organic agricultural ingredients and provides confirmation that the ingredient is produced in compliance with the COR Regulations which prohibits the use of excluded methods (GMO’s), ionizing radiation and sewage sludge. This confirmation is required for any non-organic ingredient or processing aids and should be signed by the manufacturer of the ingredient.

Natural Flavor Questionaire: This form is used for non-synthetic flavors used in certified products It confirms not only that the ingredient meets the annotation for Flavours in CAN/CGSB 32.311 6.4 of the Permitted Substances List, but also that it has not been produced using excluded methods, ionizing radiation and sewage sludge. This form should be signed by the manufacturer of the flavor.

Commercial Availability Documentation: This form is for non-organic agricultural ingredients used in an “Organic” product. It is designed to help you provide the information necessary in order to deem an agricultural input unavailable in an organic form. **SECTION 2: Organic System Plan**

**CAN/CGSB 32.310 Section 4** The operator of an enterprise shall prepare an organic plan outlining the details of transition, production, preparation, handling and management practices, in accordance with this standard. The organic plan shall be updated annually to address changes to the plan or management systems, problems encountered in executing the plan and measures taken to overcome such problems.

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| **Section 2.A. Products (OP, OH, OM)** | |
| This section is applicable to all classes of certification: OP, OH, OM. Please complete a *Master Product List Supplement (Form MPL-01)* listing each product you wish to have included under this certification. In addition, a *Master Ingredient List Supplement (Form MIL - 03)* and individual *Product Formulation Sheets (Form PFS-02)* must be completed as applicable. If you are applying as a class OM Marketer and you do not own the formulations of the processed product, you will only need to complete the Master Product List Supplement. | |
| **Required product information** | |
| 1) Master Product List Supplement Attached (Form MPL-01) | Yes  No |
| 2) Product Formulation Sheet Supplement(s) attached (Form PFS-02) | Yes  No  NA |
| a) Do you own the formulations for the products that are being requested for certification? | Yes  No |
| b) If no, please indicate who owns the formulations. |  |
| 3) Master Ingredient List Supplement attached (Form MIL-03) | Yes  No  NA |
| a) For ingredients listed in the Master Ingredient List Supplement, does your company source and procure these ingredients? | Yes  No |
| b) If no, please indicate who sources these ingredients. |  |
| 4) Labels for all finished retail items proposed under certification attached | Yes  No  NA |
| 5) Samples of nonretail labels of organic products under certification attached | Yes  No  NA |
| 6) Certificates for all organic ingredient suppliers attached | Yes  No  NA |
| **Product Description** | |
| 7) Explain in general the types of processing and handling done to products for which you are requesting organic certification. (example: coffee roasting, IQF, blending spices, brewing) | |
| 8) Describe your practice to verify and monitor **organic ingredient certificates** to ensure that they remain current, valid and in good standing; and are on file for all purchases: | |
| 9) Describe your practice to verify that **Non-organic Ingredient/Flavor Questionnaires** remain current, valid and on file for all purchases used in organic products: | |
| 10) Describe your practice to maintain and update your **Commercial Availability Documentation** for any non-organic agricultural ingredients: | |

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| **Section 2.B.**  **Co-packers (OP, OH, OM)** | **If you do not use any co-packers for organic products please check here and skip this section.** | | |
| CAN/CGSB 32.310 8.1 The major objective of an organic system is to maintain the organic integrity of the product from production, preparation, storage, handling and labeling to the point of sale. | | | |
| 1) Do you use co-packers to produce finished products for you? | | Yes  No | |
| If yes, please complete the OTCO Master Products Listing (form MPL) listing all products your are seeking certification for, the brand name, name of co-packer and certifier of the co-packer. | | | Attached |
| 2) Does your company co-pack for others? | | Yes  No | |
| a) If yes, for products co-packed by your company for others, do you own the formulations? | | Yes  No  Comments: | |
| b) If yes, for products co-packed by your company for others, do you source the ingredients? | | Yes  No  Comments: | |
| c) If yes, are the companies you co-pack for certified? | | Yes  No  Comments: | |

*Note: If the companies you co-pack for are not certified organic and the label will state “certified organic by Oregon Tilth”, a Private Label Agreement will be required to be submitted for approval.*

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| **Section 2.C.**  **Sanitation (OP, OH)** | | **If you do not physically handle products (applying as a marketer) please check here and skip this section** | | | | |
| CAN/CGSB 32.310 8.3.7 Only substances that appear in par 7.3 of the Permitted Substances List may be used to clean, disinfect or sanitize organic food or food-contact surfaces without a mandatory removal event. Substances not on the Permitted Substances List may be used if the requirements of 8.3.8 are met. In addition, it is required that records be maintained to demonstrate compliance with CAN/CGSB 32.310 4.4.1. | | | | | | |
| 1) Sanitation is handled: | | | | In-house  Outside company | | |
| a) If contracted with an outside company, please list the company name | | | | Company Name: | | |
| b) Are they aware that organic products are processed/handled? | | | | Yes  No | | |
| c) Are they aware of organic requirements? | | | | Yes  No | | |
| 2) How is cleaning and sanitation documented? | | | | Pre-op checklist  Sanitation log  Other: | | |
| 3) Describe what measures are in place to assure residues of cleaners or sanitizers not on the Permitted Substances List are absent from equipment prior to organic processing? | | | | | | |
| 4) What measures are in place to assure non-organic food matter does not remain on processing equipment and containers prior to organic processing? | | | | Thorough clean down and rinse  Purge  ATP swabbing  Pressurized air  Sweeping  Vacuuming  Other: | | |
| 5) If equipment is purged, how much material is flushed/purged through the system.  *Note: purge material cannot be sold as organic and cannot be used as ingredients in organic products* | | | | Amount: | | |
| a) What material is used for the purge? | | | | Material: | | |
| b) Where does purge material go? | | | | Sold as non-organic  Waste stream | | |
| c) Are purges documented? | | | | Yes  No | | |
| Please list all cleaning and sanitizing materials used on equipment, utensils, and containers. | | | | | | |
| **Equipment identification (i.e. scoops, mixers etc)** | **Active Ingredient**  **(Generic Material)** | | **Brand or Trade Name** | | **Frequency** | |
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| Please list any sanitizers directly applied to organic ingredients and/or products (i.e. carcass washes, flume water, spray bars etc.) Composition/specification sheets must be submitted for each material directly applied to organic ingredients and/or products. | | | | | | Composition sheets attached |
| **Product or Ingredient Used On** | **Application Method** | | **Active Ingredient (Generic Material)** | | **Brand or Trade Name** | |
|  |  | |  | |  | |
|  |  | |  | |  | |
|  |  | |  | |  | |
| 6) Describe any rinse procedures/practices of the organic products when direct food contact sanitizers are used: | | | | | | |
| 7) Describe your practice to verify that the sanitation program provided here is implemented on a day-to-day basis. | | | | | | SOP attached |

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| **Section 2.D.**  **Water (OP, OH)** | **If you do not use water as an ingredient during processing or for cleaning practices please check here and skip this section.** | |
| 1) What is your source of water? | | Well  Municipal system  Other: |
| 2) Water tests are conducted by: | | Municipal system  In-house  Third party  Other: |
| 3) Is water additionally treated or filtered at this facility? | | Yes  No |
| a) If yes, please describe what means or treatments are used. | | Chlorination  Filtration  Softening  Reverse osmosis  UV  Other: |
| 4) Water is used as: | | An ingredient  Processing aid  Cleaning  Cooking  Cooling  Product transport  Other: |
| 5) Does water comply with the applicable water regulations? | | Yes  No |
| 6) Describe how you monitor your water to ensure that it continually complies with applicable regulations. | | |

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| **Section 2.E.**  **Processing (OP)** | **If you do not process or manufacture products please check here and skip this section** | | | | |
| CAN/CGSB 32.310 8.3.1 Processing Methods shall be mechanical, physical or biological and shall minimize the use of non-agricultural ingredients, food additives and processing aids | | | | | |
| 1) Provide a **processing flow chart** for each production type included in the application. This should be a simple block diagram of all the processing steps and unit operations to which each product will be subjected.  If different products are processed in the same or a very similar fashion, they may be combined into one flow chart, but note the differences when the processes are not identical.  *\*Please identify organic critical control points or areas where contamination is most likely to occur and how contamination will be prevented in these areas. If a product purge is part of your organic plan, please indicate all purge points on this diagram.* | | | Attached:  Yes  No | | |
| 2) Provide a **Floor plan or diagram** illustrating the facilities and equipment that are to be used in organic processing, packaging or storage (i.e. elevators, grinders, sinks, equipment, storage areas) | | | Attached:  Yes  No | | |
| **Steam** | | | | | |
| 1) Is steam used in processing? | | | Yes  No | | |
| a) If yes, is there direct contact of steam with organic ingredients or products (including direct steam injection into water baths, blanchers, peelers, etc.) | | | Yes  No | | |
| b) If yes, is there direct contact of steam with packaging used for sterilization? | | | Yes  No | | |
| If there is direct contact of steam with organic ingredients, products or packaging please provide composition/specification sheets for each boiler additive and list each additive below. | | | | | |
| **Additive Brand Name** | | **Active Ingredient (Generic Material)** | | **Composition Sheet Attached** | |
|  | |  | | Yes  No | |
|  | |  | | Yes  No | |
|  | |  | | Yes  No | |
| 2) Are volatile boiler compounds used in steam that directly contacts organic products or ingredients? | | | Yes  No | | |
| a) If yes, please describe what measures are implemented in order to prevent contamination or contact of the volatile compound with organic products: | | | Filters  Shut off  Condensate traps  Other (describe): | | |
| 3) Are cooling systems used? | | | Yes  No | | |
| a) Are additives used in this cooling system? | | | Yes  No | | |
| b) If yes, please indicate any additives used in this cooling system and whether or not they come in direct contact with organic ingredients or products. If direct contact with organic ingredients or products you must attach composition/specification sheets on the materials. | | | | | Composition sheets attached |
| **Additive Brand Name** | | **Active Ingredient (Generic Material)** | | **Direct Contact** | |
|  | |  | | Yes  No | |
|  | |  | | Yes  No | |
|  | |  | | Yes  No | |
|  | |  | | Yes  No | |

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| **Section 2.F.**  **Packaging (OP, OH)** | **If you do not physically receive or ship organic products from your facility please check here and skip this section.** | | | |
| CAN/CGSB 32.310 8.3.5 and 8.3.6 requires that retail and bulk packaging/storage container must not compromise the organic integrity of the product. Packaging shall prevent commingling, contamination, and pest infestation and must be clean and of food grade quality. | | | | |
| 1) What types of packaging materials are used for finished products? (indicate all that apply) | | Boxes  Polyfilm/bags  Totes  Glass | Wax cartons  Paper  Aseptic  Foil | Other: |
| 2) What types of packaging materials come into direct contact with organic products?: (indicate all that apply) | | Boxes  Polyfilm/bags  Totes  Glass | Wax cartons  Paper  Aseptic  Foil | Other: |
| 3) Are all packaging materials food grade? | | Yes  No | | |
| 4) Packaging materials are stored: (indicate all that apply) | | On-site  Third party storage  Outside  Production area  Warehouse  Other: | | |
| 5) Have packaging materials been treated with any synthetic preservatives, fungicides or fumigants? | | Yes  No | | |
| 6) Do you reuse any bag or container that has previously been in contact with any prohibited substances? | | Yes  No | | |
| a) If yes, describe your system to prevent contact of these substances with organic products: | | | | |
| 7) Do you use any packaging aids or oxygen displacers (i.e C02, nitrogen gas, moisture absorbers)? | | Yes  No | | |
| a) If yes, describe the products used: | | | | |

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| **Section 2.G.**  **Receiving and Shipping (OP, OH, OM)** | **If you do not physically receive or ship organic products from your facility please check here and skip this section.** | |
| CAN/CGSB 32.310 8.5 Every measure shall be taken to ensure that the integrity of organic product is not compromised during transportation. Products shall be physically segregated or protected to avoid possible commingling or substitution of contents with non-organic products. | | |
| 1) Ingredients | | |
| a) Ingredients arrive in: (indicate all that apply) | | Bags  Drums  Totes  Pails  Trailers  Tankers  Other: |
| b) Ingredients arrive by: (indicate all that apply) | | Common carrier Rail company  Bulk trailer  Courier  Farmer direct  Other: |
| c) Do you maintain a receiving log? | | Yes  No |
| d) How are organic ingredients distinguished from non-organic ingredients (indicate all that apply)? | | Organic ID tags  Segregated Storage  Barcoding Other: |
| e) What documentation/procedure’s are used to ensure incoming ingredients do not come in contact with prohibited substances? | | Clean truck affidavits  Inspection  Receiving checklist  Quarantine  Other: |
| 2) Finished Goods | | |
| a) Finished goods are shipped from the facility in: (indicate all that apply) | | Bags  Drums  Totes  Pails  Trailers  Tankers  Other: |
| b) Finished goods are shipped by: (indicate all that apply) | | Common carrier  Rail company  Bulk trailer  Courier  Farmer direct  Other: |
| c) How are finished goods distinguished from non-organic finished goods (indicate all that apply)? | | Organic ID tags  Segregated Storage  Barcoding Other: |
| d) What documentation/procedure is used to ensure outgoing finished goods do not come in contact with prohibited substances? | | Clean truck affidavits  Truck inspection  Loading checklist  Other: |
| 3) Do the documents accompanying organic product during tranport include the name and address of the person or organization responsible for preparation, production and/or distribution of the product, name of the product, organic status, lot number (or similar)? | | Yes  No |

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| **Section 2.H.**  **Storage & Distribution (OP, OH, OM)** | **If you do not physically store organic products on-site or use storage facilities please check here and skip this section.** | | |
| CAN/CGSB 32.310 8.3.9 and 8.3.11 Organic products shall be segregated or otherwise protected at all times from non-organic products, to prevent commingling. Storage sties and transport containers for organic products shall be maintained and cleaned using methods appropriate for the organic products being stored and with materials in accordance with this standard. | | | |
| 1) Ingredients | | | |
| a) Ingredients are stored: (indicate all that apply) | | On-site  Off-site (see Section 2.J. below)  Other: | |
| i) If stored on-site please identify where: (indicate all that apply) | | Outside  In warehouse  Cold storage  Other: | |
| b) Describe how organic ingredients are distinguished from non-organic ingredients and protected from prohibited substances: | | | |
| c) Describe how any work in process is identified as organic and protected from prohibited substances: | | | |
| 2) Finished Goods | | | |
| a) Finished goods are stored: (indicate all that apply) | | On-site  Off-site (see Section 2.J. below)  Other: | |
| i) If stored on-site please identify where: (indicate all that apply) | | Outside  In warehouse  Cold storage  Other: | |
| b) Describe how organic finished goods are distinguished from non-organic finished goods and protected from contact with prohibited substances. | | | |
| 3) Describe how you verify that the storage practices identified here are effectively implemented on a day-to-day basis and that organic integrity is always preserved while products are being stored. | | | |
| 4) Are finished products brought to a distribution center or warehouse while they are still under your ownership/title? | | | Yes  No |
| a) If yes, please list which products are sent there: | | | All |
| **Product Name/ Product Line Name** | | | **Distribution Center/Warehouse Name** |
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| b) Do they provide shipping, inventory and sales records? | | | Yes  No  NA |

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| **Section 2.J. Independent Storage and Distribution (OP,OH,OM)** | | **If you do not use a storage facility or distribution center please check here and skip this section.** | | |
| If ingredients or finished goods are stored off-site please note that OTCO will need to determine if the facility is certified and will require a copy of the certificate. If the facility is not certified please submit a completed Independent Storage Information Sheet (ISIS Form). Note that ISIS Forms will only be needed for facilites where product is stored while it is still under your ownership. If the product is sold, and then enters Independent distributors or storage facilities you will not need to complete this listing. | | | | |
| **Storage/Distribution facility name** | **Certified organic?** | | **Certificate Attached** | **ISIS Attached** |
|  | Yes  No | | Yes | Yes |
|  | Yes  No | | Yes | Yes |
|  | Yes  No | | Yes | Yes |
|  | Yes  No | | Yes | Yes |
|  | Yes  No | | Yes | Yes |
|  | Yes  No | | Yes | Yes |
|  | Yes  No | | Yes | Yes |
|  | Yes  No | | Yes | Yes |
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|  | Yes  No | | Yes | Yes |
|  | Yes  No | | Yes | Yes |
|  | Yes  No | | Yes | Yes |

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| **Section 2.K.**  **Pest Management (OP, OH)** | | **If you do not physically handle products (applying as a marketer) please check here and skip this section** | | | | |
| CAN/CGSB 32.310 8. Good manufacturing practices shall be adopted to prevent pests. Practices shall first include removal of pest habitat and food, second, the prevention of access and environmental management and third mechanical and physical methods. If these practices are ineffective the operator may use pest control substances listed on the Permitted Substances Lists. If substances on the Permitted Substances Lists are not effective, substances not on the Permitted Substances Lists may be used. Provided, that they do not come in contact with organic products during any stage of production, transit, storage or border crossing. | | | | | | |
| 1) Pest management is handled: | | | | In-house  Outside company | | |
| a) If contracted with an outside company, please list the company name | | | | Company Name: | | |
| b) Are they aware that organic products are processed/handled? | | | | Yes  No | | |
| c) Are they aware of organic requirements? | | | | Yes  No | | |
| 2) In general, describe the immediate surroundings of the facility: | | | | | | |
| 3) What specific preventative pest management measures are used on the *exterior perimeter* of the building? | | | | Weed control  Gravel/barrier  Removal of food source  Mowing  Mulching Other: | | |
| 4) What management practices and/or devices do you use to prevent pests? | | | | Sanitation  Building maintenance  Mechanical traps  Glueboards  Light  Exclusion  Pheromone traps  Electrocutors  Other: | | |
| 5) What materials that have been or are currently being used are consistent with the Permitted Substances List? | | | | Ammonium Carbonate  Boric acid  Carbon dioxide  Vitamin D3  Neem Oil  Diatomaceous Earth  Pyrethrins  Soaps, Ammonium  Other: | | |
| 6) Check all pest problems you generally have: | | | | Flying insects  Crawling insects  Spiders  Birds  Rats  Mice  Other: | | |
| 7) Describe your system for monitoring pest populations: | | | | | | |
| 8) Describe the measures that are taken to prevent contact of organically produced goods, equipment or packaging with pest management materials | | | | | | |
| a) How is this documented? | | | | | | |
| Please list all current pest management materials that will be used in this facility: | | | | | | |
| **Active Ingredient (Generic Material)** | **Brand or Trade Name** | | **Target Pest** | | **Where used** | **Method of Application** |
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| 9) Describe the methods used to verify that the pest management program described here is implemented on a day-to-day basis. | | | | | | SOP attached |

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| **Section 2.L.**  **Labeling (OP, OH, OM)** | |
| The Canadian Organic Products Regulation stipulate permitted labeling claims for organic products produced in accordance with this standard. There are three categories of products that can use the word “organic”. These are “organic” with more than 95% organic content; “X% organic ingredients” for percentages between 70% and 95%, and for contents with less than 70% organic ingredients, identification of the organic products may only be made in the ingredients statement.  Please be sure to attach copies of all retail labels used or packed in and samples of nonretail labels for verification and approval. | |
| 1) Are products sold, labeled or represented as retail or nonretail or both? | Retail  Nonretail (bulk) |
| 2) Are all labels attached to this application? | Yes  No |
| 3) Are your products labeled ”Organic”, “X% Organic Ingredients” or are they less than 70% Organic content (indicate all that apply) | Organic  X% Organic Ingredients  Less than 70% Organic |
| 4) Are the organic claims made by your labels bilingual in compliance with the *Official Languages* act? | Yes  No  Comments: |
| 5) For each product’s label are organic ingredients identified as such in the ingredient list by using the term organic or with some sort of identifier? | Yes  No  Comments: |
| 6) Do you private label for other companies?  *Note: a private label agreement may be required if the company you are manufacturing for is not certified by OTCO and the label states Oregon Tilth certified organic.* | Yes  No  Comments: |
| 7). Do you use or plan to use the organic legend (COR Logo) on product labels? | Yes  No |
| 9). Do you use or plan to use the Oregon Tilth seal on product labels or marketing information? | Yes  No |
| 10.). Do your labels indicate the product as “Certified Organic by Oregon Tilth” or another certifier who certifies the final handler of the product? | Yes  No  Comments: |
| 11.). Do you have a system in place to ensure that all labels are submitted to OTCO for review and approval prior to printing? | Yes  No  Comments: |

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| **Section 2.M.**  **Documentation and Record Keeping (OP, OH, OM)** | | | | |
| CAN/CGSB 32.310 4.4 Records and relevant supporting documents must be maintained concerning inputs and details of their use, production, preparation, handling and transport of products. Records shall be completely traceable and maintained for five years beyond their creation. In addition, for distinguishing organic and non-organic products an identification system should be provided. | | | | |
| 1) Please provide an example of your Lot Code and an explanation of its components. *Additional sheets can be attached as necessary.* | | | | Attached |
| Example: | Explanation: | | | |
| 2) Provide an AUDIT TRAIL FLOW CHART linking documents in your record system to the next in the chain.  *Describe your audit system from receiving through processing and final sales. Your audit trail must be able to link each document to those preceding and following it in the record system. If coding systems are used, please indicate the documents on which those codes occur.* | | | | |
| Description: | | | | Attached |
| 3) Will all records pertaining to organic production be maintained for no less than 5 years? | | Yes  No | | |
| 4) Are records capable of tracking ingredients from supplier through processing and sales? | | Yes  No | | |
| 5) How are waste, spoilage and/or damaged product losses documented? | | | | |
| 6) Describe your practice to verify that the record keeping system described here is implemented on a day-to-day basis. | | | SOP attached | |

**SECTION 3: International Programs**

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| **International Markets (OP, OH, OM)** | | | |
| Oregon Tilth provides several services for international market verifications. If you are shipping or selling organic products to international markets it is very important that you have the appropriate certification or verifications that each country requires in advance, and that you understand the organic regulations in that country. For ingredient suppliers, there may be buyers that will require your product/ingredients be certified or verified to certain international requirements. Please be sure to know of any of these requirements **in advance** of your inspection. Contact OTCO or visit our website for additional information. | | | |
| **European Union** | | | |
| 1) Will you be marketing your products to the European Union or selling to buyers who will be using your product as an ingredient in a product to be sold to the European Union? *Note: \*\* Products outside of the scope of the EU include fiber, body care products, nutritional supplements and cosmetics.* | | | Yes  No |
| 2) If yes, are the organic ingredients in the products 100% Canada grown? | | | Yes  No |
| b) If no to #2 above, then you must complete and submit an OTCO International Supplement, confirm attached | | | Attached |
| c) Labels must be submitted for all products, including any labels used for products marketed to EU. Please confirm all labels used for products marketed in EU are attached. | | | Attached |
| **US-Canada Equivalency** | | | |
| 1) Do you export any products to the United States under the US-Canada Organic Equivalency Arrangement? | | | Yes  No |
| 2) If yes list all items exported to the United States below: | | | |
| **Product Name** | **Product Name** | **Product Name** | |
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| 3) If products are shipped to United States customers, does documentation accompanying the product declare the product is certified in compliance with the terms of the US-Canada Organic Equivalency Arrangement | | | Yes  No |
| 4) Do you export any products containing COR certified dairy ingredients from Canada? | | | Yes  No |
| a) If yes, OTCO will require verification that the ingredients/products are not derived from animals treated with antibiotics. Please attach this documentation if applicable. | | | Attached |
| 5) Labels must be submitted for all products, including any labels used for products marketed to US. Please confirm all labels used for products marketed in the US are attached. | | | Attached |

**SECTION 4: Oregon Tilth Programs**

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| **MEMBERSHIP** |
| The Oregon Tilth Certified Organic Program is not a membership-based program – it provides certification services to both members and non-members of Oregon Tilth. A certified operator may choose to be a member of Oregon Tilth for no additional charge, but membership is not required for certification. The benefits of Oregon Tilth membership include the following:   * A subscription to the In Good Tilth (IGT) magazine * Free classified ads in the newsletter * Discounts to Oregon Tilth events |
| Please choose one of the options below indicating your interest in Oregon Tilth membership:  I wish to be a member of Oregon Tilth, Inc.  I do not wish to be a member of Oregon Tilth, Inc. |
| In Good Tilth (IGT) Magazine |
| I would like to receive my free In Good Tilth subscription:  Electronically-through my email  Mail  I do not wish to have a subscription at this time |
| **OREGON TILTH DIRECTORY** |
| The Oregon Tilth Directory is a complete listing of OTCO producers, processors, handlers, restaurants, and retailers posted on our website. In addition, it serves as a sourcebook of valuable resources and services ranging from produce distributors, restaurants and farmers’ markets to farm & garden suppliers, agricultural organizations and education centers. If you choose to be listed in the Oregon Tilth Directory, your company name, address, website, and products certified will be listed on the Oregon Tilth website. |
| I wish to be listed in the Oregon Tilth Directory (please note that if you are certified under the OTCO EU program it is required that your current certification status will be listed on our website directory).  \*Please note that OTCO will summarize your products (based on types of products identified in this application form). No brands will be listed.  I do not wish to be listed in the Oregon Tilth directory |
| I market my products/Services via the following venues or mechanisms:  Direct to consumers  Wholesale Co-packing services  Retail Other: |
| **CERTIFICATION SERVICES** |
| Oregon Tilth Certified Organic is committed to providing quality certification service. Visit our website at www.tilth.org for program updates. Please comment below on the areas where OTCO is succeeding in providing quality service as well as points you feel may still need improvement. Comments may also be submitted via email to organic@tilth.org |
| Comments: |

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| **ORGANIC SYSTEM PLAN COMPLETE? \*** An additional fee of $25 will be charged for returned applications.  **Please remember to submit the following to Oregon Tilth:**  **Completed Organic System Plan**  **Signed Affirmation Page (end of this form)**  **Completed Contract & Trade Use Agreement (new applicants only)**  **Certification Fees and Inspection Deposit (Renewing operators must submit the fee worksheet)**  **Other Attachments (see below)** | | | | |
| **Master Products List (Form MPL-01)** | **Product Formulation Sheets (Form PFS-02)** | **Master Ingredient List (Form MIS-03)** | **International Supplements and affirmations** | **Certificates** |
| **Floor Plan** | **Flow Chart** | **Audit Trail Flow Chart** | **Labels** | **Nonorganic ingredient documentation** |

**SECTION 5: Affirmations**

The undersigned agrees to the following:

* I/We affirm that all certification applications are an accurate account and full representation of all materials and methods used in the production or handling of certified organic products included in this or supplemental applications.
* I/We shall maintain copies of all applications as legal records.
* I/We understand and accept that any willful misrepresentation on any of the forms submitted to Oregon Tilth will require revocation of the relevant organic certification initiated by this application. Under these circumstances, I/we agree to return the original certificate to Oregon Tilth on request.
* I/We further understand and accept that any willful misrepresentation may give cause to Oregon Tilth to seek damages for any loss they may sustain as a result of any willful misrepresentations made.
* I/We agree to maintain records as required by Oregon Tilth.
* I/We have read the OTCO Program Manuals, and agree to report any significant changes pertaining to the information herein and to continue to manage any crop that is designated organic in accordance with the standards and procedures.
* I/We consent to Oregon Tilth’s decision to subcontract work related to certification (e.g. testing or inspection) to an external body or person and hereby understand Oregon Tilth shall take full responsibility for such subcontracted work, including confidentiality, and maintain its responsibility for granting, maintaining, suspending or revoking certification.
* I/We agree that all forms submitted in the future in connection with certification by Oregon Tilth shall be submitted subject to these same affirmations, and I/we hereby so affirm.
* I/We affirm that the undersigned is a duly appointed agent of the applicant and as such is empowered to make appropriate decisions relevant to this application and to act as the contact person for the organization, unless otherwise specified.
* I affirm I am 18 years of age or older.

The signee(s) agree that Oregon Tilth will have access to all facilities and records that provide information about the operation, and constitute compliance with organic standards. This application must be signed in order for OTCO to proceed with the certification process.

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| Signature(s) | Date |

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| Name(s) | Date |

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| Signature(s) | Date |

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