Instruction

1 - Initial application

Please fill out all sections of this questionnaire if you are requesting organic certification for the first time. Periodically all clients will need to fill out all of this form.

2 – Renewal

NOP regulation section 205.406 requires an annual update of your OSP. The anniversary date (deadline) to update your file is April 15 of each year.

The following sections MUST BE FILLED OUT EVERY YEAR:

- Sectio	n 1: General information
- Sectio	n 2: Organic livestock operation Profile
	n 4: Livestock Feed and Feed Supplements – Ruminant producers only
- Sectio	n 7: Livestock pasture – Ruminant producers only
- Sectio	n 8: Inputs
- Sectio	n 11: Affirmation

Important: Applicable to Initial application and renewal

Attach all other supporting documents outlined in each section.

Write N/A for all questions that do not apply to your operation.

Any incomplete information may lead to a delay in certification.

No inspection will be performed until your OSP is complete, SIGNED and approved.

Fill out other sections when any changes occur. Once you start to update a section, please fill out that section <u>completely</u> to maintain a full set of records at all times.

MAKE SURE TO INITIAL AND DATE EACH PAGE AND TO SIGN THE FORM.

IF YOU ARE SUBMITTING YOUR APPLICATION ELECTRONICALLY (PDF or website version), MAKE SURE TO PRINT AND SIGN THE LAST PAGE AND SEND IT BACK TO US TO COMPLETE YOUR APPLICATION.

MAKE SURE TO SEND ECOCERT ICO ONE COPY AND KEEP A COPY IN YOUR FILES AT ALL TIMES!

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SECTION 1: General Information

Operation Name:	Operator(s) Name(s):
Contact person's name (if different from applicant):	Person/s to be named on Certificate:
Certified site	Mailing address (if different):
Address:	Address:
City:	City:
State:	State:
Zip:	Zip:
Phone/s:	E-mail:
Fax:	Web-Site:
Directions to the certified site:	What is the best way to contact you?
	Phone, Fax, Email, Post
	Availability: days:
	Morning, afternoon, evening
	Is email a reliable way to communicate important
	information to you? Yes No
Current status:	List any period of time when no inspection can be done
ECOCERT ICO certified	(facility closed, operator is away)?
Certified by another certifying agent	
Who?	
New applicant	
First year certified:	Have you ever been denied, suspended or had your
Have you ever been certified by another certifying	certification revoked? Yes No
agent in the past? Yes No	
Who?	If yes, please list the years and agencies; attach a copy of all
When?	relevant notice (s) and a description of all corrective actions
	taken.
Type of convice requested.	Do you have a undeted conv of the USDA Organia
Type of service requested:	Do you have a updated copy of the USDA Organic Standards?
⊠ NOP	Yes No
\Box JAS standard (Japan) Affidavit (F30)	Have you read the current USDA organic standards?
Canadian Organic Regulation (COR) equivalency	\square Yes \square No
Affidavit (F35)	Do you understand the current organic standards for the
European Union (EU) Equivalence	certification type you are requesting?
For office use only	NOPID:
Application fees:	Application forms entered/received:
Application fees entered/received:	Initial:

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SECTION 2L: Organic Livestock Operation Profile

Describe your livestock production system:			
Livestock type (dairy, poultry, hogs, beefincluding home use or work animals)	Quantity	Product(s) to be sold (milk, meat, eggs, live animals, fiber)	Category (organic (o), transitional (t), conventional (c))

Do you raise crops? Yes No If yes, complete the **Organic Farm System Plan F01**

Is there a simple on-farm handling activity for Livestock production (see Section 9 for definition of an on-farm handling activity)? Yes No

Describe how non organic livestock is managed separately from organic livestock (eg. separate housing, outdoor access areas...):

Not applicable

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<u>1-Poultry</u> Not applicable

List livestock that will be part of your organic operation. Provide an accurate number of animals as of the date this form is submitted to ECOCERT ICO.

Livestock type	Breed (s)	# of females	# of males	Hatch or purchase date
Chicken – layers			Xxxxxxxxxxxxxxx	
Chicken – broilers				
Turkeys				
Duck – layers			Xxxxxxxxxxxxxxx	
Duck – meat				
Geese				
Other (specify):				

NOP standards require flock identification for poultry. Separation and identification are required for those animals that have been treated with prohibited products.

Describe your identification system and attach the form <u>F06 Animal identification form:</u>

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ECOCERT ICO

<u>2-Non-Poultry</u> Not applicable

List livestock that will be part of your organic operation. Provide an accurate number of animals as of the date this form is submitted to ECOCERT ICO.

Do not include bulls or other nonorganic breeder stock that will not be included on your certificate.

Livestock class	Breed (s) or types(s)	# of females	# of males
Beef			
Dairy			
Hogs			
Goats			
Other:			

Describe your identification system and attach the form F06 Animal identification form:

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<u>1-Poultry</u> Not applicable

NOP requires that poultry or edible poultry products be from poultry that have been under continuous organic management beginning no later than the second day of life.

Do you raise your own chicks/replacement egg layers on-farm	? 🗌 Yes 🗌 No
Do you purchase your chicks/replacement egg layers?	🗌 Yes 🗌 No
If was complete the table below	

If yes, complete the table below.

Type of poultry purchased	Flock ID number	Date of purchase	Age at purchase	Projected slaughter/ egg production date	Source : address phone number	Certifier of source

##Please have all animal purchase and/or breeding/birth/hatch records available for inspection.##

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2-Non-Poultry

Not applicable

NOP standards require that all organic slaughter stock be sourced from certified sources unless breeding stock was purchased prior to the last third of the gestation period. Dairy stock must comply with \$205.236(a)(2).

Organic milk or milk products must be from animals that have been under continuous organic management for at least one year prior to production.

Do you raise all slaughter animals on farm?	Yes No
If no, describe:	
Do you raise dairy replacement animals on farm?	Yes No
If no, describe:	

Do you purchase or plan to purchase any livestock from off-farm sources? Yes No

If yes, complete the table below.

Group ID	Breed / species	Date acquisition	# of animals	Age of animals	Name of source	Certifier of source

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For dairy animals in transition to organic:

How did your farm convert to organic production?

Combined farm and herd conversion with consumption of crops/forage from land in 3rd year of conversion

12 months under continuous organic management

80/	20 feed pr	ovision (us	e of which	expired June	9, 2007; not a	in option to begin now)
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When did you begin organic management (mm/dd/yy)?

When will the transition be completed (mm/dd/yy)?

Please, complete the Form F20 Organic dairy conversion questionnaire

For non dairy animals:

When did you begin organic management of the breeder stock of the offspring (mm/dd/yy)?

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SECTION 4L: Livestock Feed and Feed Supplements

NOP Rule requires a total feed ration composed of agricultural products, including pasture and forage, that are organically produced and, if applicable, organically handled: Except, That, nonsynthetic substances(non-agricultural) and synthetic substances allowed under § 603 may be used as feed additives and supplements.

<u>1-Poultry</u>

Not applicable

Describe feed rations:

Livestock type	Season / time in the year	List feed ration ingredients, percent of ration, and whether organic (o)
Chicks		
Pullets		
Hens		
Roosters/toms		
Capons		
Other:		

Do you raise any feed on your farm? Yes No

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Describe purchased poultry feed:

Attached a certificate for each supplier

Type of purchased feed	Quantity purchased/ to be purchased	Dates purchased	Source(s)	Certified by what agency?

2-Non-Poultry

Not applicable

For <u>all ruminants</u> complete the additional forms <u>F10 Feeding groups and Pasture worksheet</u>.

Describe feed rations:

Livestock	Season / time in the year	List feed ration ingredients, percent of ration, and whether organic (o), transitional (t)
Females		
Males		
Castrated males		
Young stock		
Other:		
Other:		
Other:		

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Do you raise any feed on your farm? Yes No

Describe purchased feed:

Attached a current certificate for each supplier

Type of purchased feed	Quantity purchased/to be purchased	Dates purchased	Source(s)	Certified by what agency?

Do you pasture any livestock?

If yes, attach a <u>map of pastures/paddocks with ID No. and complete the form F07 Field History Sheet.</u>

If yes, what months are livestock pastured?	

What is your plan to provide feed supplies if there is an emergency shortage?

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3-Feed supplements and additives

Not applicable

Feed supplements and additives are anything you add to livestock feed for a specific nutritional need or to improve nutrient balance of the total ration. The agricultural ingredients incorporate in supplements or additives must be organic.

List <u>all</u> feed supplements and additives, including silage inoculants, preservatives, etc. in section 8: Inputs

4-Water

Water used for organic livestock must be potable and readily accessible. Documented proof of appropriate levels of coliform bacteria, nitrates and/or known contaminants may be required.

What are your sources of water for livestock use?

On-site well Municipal River/creek/pond Spring Other:		
What is the date of your last water test for coliform bacteria and nitrate?	,	
(Attach copy)		

Do you use additives in the water? Yes No

If yes, list them *in section 8: Inputs*

If livestock have access to a river, creek, or pond, how do you prevent bank erosion?

No access

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SECTION 5L: Living conditions

1-Housing

NOP Rule205.239 requires that the producer of an organic livestock operation must establish and maintain livestock living conditions which accommodate the health and natural behavior of animals.

What type of housing do you use?

Livestock type	When used / stage of life	Housing type	Sizes (length x width)	Type(s) of bedding	Outdoor access?
What source(s) of light is provided in the animal housing?					

Is day length regulated using artificial light?

Yes No

Lumber treated with arsenate or other prohibited materials. Identify any locations of existing (previously installed) treated lumber and its approximate age. Also list location were you have used treated lumber in new installations or for replacement purposes and describe how you prevent contact with soil or livestock (including crop and livestock feed)

Not applicable. No treated lumber

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2-Manure management

NOP requires that manure must be managed so that it does not contribute to contamination of crops, soil, and water.

How is the manure mana	ged in this operation?
How often is the housing	cleaned out?
How is housing cleaned?	
Describe any sanitation o	r cleaning products used:
<u>3-Temporary cor</u>	<u>ifinement</u>

Describe the period of temporary confinement:

Reason	Type of animals	How long?

How do you document periods of temporary confinement?

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4-Outdoor access

What outdoor areas other than pasture do animals use?

Describe outdoor access for each type and class of animal you manage

Animal type and class	Average number of hours per day animals are outdoors	Which season(s)?

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SECTION 6L: Health Management

NOP Rule requires 205.238 producer must establish and maintain preventive livestock health care practices. When preventive practices and veterinary biologics are inadequate to prevent sickness, a producer may administer synthetic medications: Provided, that, such medications are allowed under § 205.603.

Identify the general components of your animal health management program:

Selective breeding Raise own replacement stock	☐ Isolation for purchased/diseased animals	Culling Vaccinations
Good sanitation Access to outdoors	Dry bedding	Good ventilation in housing
Good quality feed Pasture rotation	Nutritional supplements	Appropriate shelter or housing
Exclude or manage pests/parasits	Probiotics	
Other:		

List all materials used for animal health in section 8: inputs

Describe problem pests that may affect your livestock (flies, internal and external parasites, predators, etc):

Pest type/species	Monitoring methods and frequency	Prevention/management strategies

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NOP requires the performance of physical alterations as needed be to promote the animal's welfare and be done in a manner that minimizes pain and stress.

Describe physical alteration you perform on your animal (castration, dehorning...)

Physical alteration	Type of animal / animals age	Method used	How do you minimize pain and stress?

If individual animals are treated with prohibited materials, how are they identified and/or segregated?

If the entire poultry flock is treated with prohibited materials, what changes do you make to insure that this flock or products from this flock are not sold as organic?

What kind of records do you keep describing your treatments of sick animals (age and timing of use, compliance with any annotation or restriction, disposition of nonorganic animals if treated with prohibited materials used...)?

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Section 7L: Livestock pasture

NOP rule §205.239(a)(1)&(2)requires that animals have access to the outdoors, shade, shelter, exercise areas, fresh air, and direct sunlight suitable to the species, its stage of production, the climate, and the environment and that ruminants have access to pasture. Please, ATTACH a map of the pastures, showing permanent fences, water source, buffer zones, shade ...

What types of pasture are provided (description of your pasture resources, in terms of predominant species, management, terrain ...)?

Describe your pasture management/monitoring strategies to minimize diseases and parasites.

What management practices are used to ensure pasture of suffici	ent quantity and quality	y throughout the grazing	g season(s) (for ruminants - not less
than 30% of the dry matter intake during the grazing season)?			

Mowing	Increasing the number of acres available for particular	basture Periodic re-seeding Use of hay fields as pasture	
Rotational grazing	Green forage grazing	Rest period MIG grazing	
Other:			

Describe your grazing seaso	on for the year:	
Expected start date:		
Expected stop date:		
Potential restart date:		
Closing date:		

What is your grazing method (size of paddocks, animal density, and frequency of movement...)?

Is irrigation available for any of your pastures? 🗌 Yes 🗌 No
Describe irrigation use and/or limitations
##Please have records available for your inspection that document livestock grazing and dry matter intake including pasture management grazing records

##Please have records available for your inspection that document livestock grazing and dry matter intake, including pasture management, grazing records, feeding record and, dry matter content analysis of feed.##

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Materials used must be reviewed and approved by ECOCERT ICO prior to use. For more information, please read the instruction <u>101 Instruction</u> for Material Review.

List ALL materials/inputs used including feed supplements, pest management materials, sanitizers, additives, health management materials, etc.

For inputs that have not been approved by ECOCERT ICO within the last year, also attach <u>the Form F09 Material Use Request Form and provide</u> <u>copies of labels, technical specifications, and/or manufacturer statements</u>.

The list you are providing below must be COMPLETE and you need to update ECOCERT ICO EVERYTIME you choose to use an additional input. Be accurate with product and brand names, if ECOCERT ICO cannot find the product or company ECOCERT ICO cannot approve the use of an input.

I have listed

All feed supplement and additives

All substances added to the livestock drinking water

All material used for animal health

All material used for pest and cleaning management in the on-farm handling facility(ies) (including substances added to the water)

Full Product Name/ Brand Name	Manufacturer	Type of material (vitamin, mineral, vaccine, homeopathic, parasiticide, additive, pesticide, sanitizer)	Where is it used (animal # / class of animal concerned, equipment, facility)	Reason for use

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Name/ Manufacturer vaccine, homeopathic, parasiticide, additive, pesticide, sanitizer) class of animal concerned, equipment, facility) Reason for use Name Image: Solution of the second of the	ll Product		Type of material (vitamin, mineral,	Where is it used (animal #/	rage
Image: Second		Manufacturer	vaccine, homeopathic, parasiticide, additive, pesticide, sanitizer)	class of animal concerned, equipment, facility)	Reason for use
Image: second					
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Section 9L: On-Farm handling of livestock production

Do you use a certified organic facility off -farm to process your livestock?

□ No, not applicable

Yes, but I transfer the ownership at delivery

Yes, and I retain ownership of the final product

If you are in the last case, complete the table below and Attach a valid certificate for the processing facility(ies) and current labels for each product

Type of product (ex: meat, eggs, fiber)	Organic label claim (100% organic, organic, made with organic)	Label or Brand name	Name of operation doing the processing	Processor's certifier

If yes, complete a copy of this section for each distinct handling/processing activity or location.

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Simple on-farm handling activity DEFINITION: Operations which handle or process only their own crops for their own use. For example: feed processing Operations which have a simple process with their own products but are selling the resulting product off farm. In that case, product must be kept in the same condition as it was before the process. For example : milking, cooling and storing milk, washing and packaging eggs, initial fiber processing to prepare product for use or sale. If you add any ingredients to your product, or if the property of the product is changing during the process, you must complete a handler OSP form, and you are not considered to be performing simple on-farm handling. For example, someone who is slaughtering, cheesemaking, etc must complete an OSP for Handlers. List the handling activity(ies) and product(s) covered by this OSP section Attach a map of the processing facility and a complete written description or schematic product flowchart that shows the movement of all organic products, from receiving through production to outgoing/shipping. All equipment and storage areas must be identified. List current or potential pest problems in and around your handling areas :

How do you prevent, manage or minimize pest problems while processing or handling your animals or animal products? List each material/input you use or you are planning/considering using for pest management in section 8: inputs.

Do you handle?

Organic products only

Different organic and nonorganic products

Identical organic and nonorganic product

What measures do you take to prevent organic product contamination and commingling (cleaning, identification, separation ...)?

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Are all packaging materials, storage containers, or bins free of synthetic fungicides, preservatives and fumigant? 🗌 Yes 🗌 No

How is the handling facility and equipment cleaned and /or sanitized?

List each material/Input you use or you are planning/considering using in section 8: inputs

Do you add chlorine to wash water, dump tank, flume or other water that has direct food contact?

🗌 Yes 🗌 No

If yes describe what rate and concentration you use, your rinse procedures and any testing or monitoring you do.

Do you add other substances to the water? Yes No If yes, list them in section 8: inputs

What monitoring application and management records do you keep for pest management, water additives and materials used?

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Section 10L: Recordkeeping

NOP rule 205.103 requires that records disclose all activities and transactions of the operation, be maintained for 5 years, and demonstrate compliance with the NOP Rule. Organic products must be tracked back to the field/location where they were produced/harvested. All records must be accessible to the inspector. NOP standards require documentation of purchased animals and/or breeding records; purchased feed and feed supplements; health records; and sales/shipping records. Other records include water tests and label information from purchased feed/feed supplements. Please have your records available for review by the inspector.

How many years do you keep or intend to keep your records?					
Do you maintain a Complaint Log?					
Which of the following records do you keep for organic production?					
Livestock purchase records Organic certificates for livestock purchased as organic					
Animal reproduction: breeding, birth and /or hatch records					
Herd conversion/Organic management records: living conditions, feeding and health care					
Outdoor access / temporary confinement records Bedding material source(s) documentation					
Housing maintenance of construction Yard / lane maintenance					
Erosion prevention and control Manure management records					
Activity and observation records (field logs, notes on calendar or maps, etc)					
Monitoring records (soil/tissue/water tests, pest/parasite monitoring, observation logs)					
Natural resource restoration, invasive species management, native/wildlife monitoring					
Feed purchase records (receipts, feed tags, labels, delivery/weight tags, etc)					
Feed production records (harvest, baling, etc)					
Feed additive and / or supplement records (labels, purchase receipts, use, etc)					
Feed storage/inventory records (location or facility, post-harvest activities, pest control, etc)					
Feed ration descriptions for each type and class of animal					
Feeding records: actual quantities of feed fed to each type and class of animal					
Pasture improvement and/or grazing management records					
Dry Matter content analysis of feed					
Health care substance/material purchase records and labels					
Monitoring records (pest/parasite monitoring or observation log)					
Health care records vaccinations, biologics, anesthetics, topicals, parasiticides use, etc.)					
Parasiticide use (parasite monitoring, treatment date)					
Breeding, gestation, pregnancy checks/birth and lactation records					
Mortality or cull records					
Custom processing Egg production records Milk production records					
On-farm handling records Processing and storage records shipping and sales records					
Please have these records available for the inspector. If you have a non- organic activity, also have these records					
available for the inspector.					
1					
Type of Marketing:					
Farmers market Direct to retail CSA/subscription service Wholesale On-farm retail					
Bulk commodities to processor Contract to buyer Other (specify):					
Do you Label products? Yes No .If yes, Attach <u>copies of all organic product labels prior to initial use.</u>					
Do you use or plan to use the USDA organic or ECOCERT ICO seal on product labels or marketing					
information? Yes No					

If yes note 205.303 (b) (2) On the information panel, <u>(directly)</u> below the information identifying the handler or distributor of the product and preceded by the statement, <u>"Certified organic by * * *"</u> or similar phrase, identify the name of the certifying agent that certified the handler of the finished product and may display the business address, Internet address, or telephone number of the certifying agent in such label.

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<u>IMPORTANT INFORMATION</u> : IF YOU ARE SUBMITTING YOUR VERSION IN PDF OR USING THE WEBSITE VERSION, PLEASE PRINT THIS PAGE AND SEND IT BACK TO US SIGNED (EMAIL, MAIL, FAX) TO FINALIZE YOUR APPLICATION.

SECTION 11: Affirmation

I affirm that all statements made in this application are true and correct.

I understand that acceptance of this questionnaire in no way implies granting of certification by the certifying agent.

I agree to comply completely with the following rules:

1. Produce/collect, process or trade organic products in conformity with the NOP.

2. Inform ECOCERT ICO about all important matters and all changes in production, processing or trade including transport details and subcontractor used. Inform ECOCERT ICO about all relevant results of internal quality management including product analysis results.

3. Not to buy or utilize, on or in my organic operation, any chemical products or raw materials except those authorized by the applicable regulations.

4. Prior to purchasing inputs, to provide labels and accompanying documents. I understand that these must be checked, prior to my using them, to ensure that they are in accordance with applicable regulations. I will not use products, nor proceed with marketing without ECOCERT ICO approving them as part of my Organic System Plan. In the case of producing, processing and trade of organic and non-organic produce on the same operation, to ensure separation on all levels of production, processing and trade including storage and transport.

5. The labeling must be in conformity with the applicable regulations as amended through all steps of handling, transport and marketing. Reference to the name and use of the logo of ECOCERT ICO on the label may be made on a certified organic product only in accordance with the rules of its use.

6. Accept at any time inspections according to the applicable inspection requirements, including unannounced inspection visits, sample taking and analysis at subcontracted laboratories. Give access to any relevant document and all fields and buildings.

7. Accept sanctions and improvement actions as determined by ECOCERT ICO in accordance with relevant articles of applicable regulations as amended. Accept to inform in writing the buyers of any delivered product sanctioned by ECOCERT ICO so that organic indications may be removed. Accept that ECOCERT ICO exchanges relevant information with other certification bodies or authorities if deemed necessary to comply with the inspection requirements of applicable regulations as amended.

8. Pay all fees associated with the service of certification processing.

I have attached all the additional documents required in this Organic system plan.

I have made copies of this questionnaire and other supporting documents for my own records.

perator	Date	

Signature of Owner / Operator

We encourage you to submit your completed form/s and supporting documents by email: <u>info.ecocertico@ecocert.com</u> If it is not possible, submit completed form/s, application fees and supporting documents to:

ECOCERT ICO

70 E. Main Street Suite B, Greenwood, IN 46143

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