

PRIOR LAND USE AFFIDAVIT

ECOCERT ICO

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This first section should be filled out by the ECOCERT ICO operator.

ECOCERT ICO certified operation's name:

ECOCERT ICO Operator's name:

This form must be completed by the previous owner/manager of the land requested for certification provided you, the new operator, have not managed this land for the past 36 months.

I, (previous owner/manager) , declare, that the parcel of land described below were managed by me during the crop year(s) of to .

Field # and Location:

Total Acreage:

List all materials (including fertilizer, genetically modified seeds, seed treatments and materials used on conventional annual transplants) that have been applied to this land within **the last three years**. Attach additional sheets if necessary:

Field #	Acres	Crop	List All Inputs applied	Application Date

I verify that **there were no NOP prohibited herbicides, pesticides, fungicides, fertilizers or chemicals, genetically modified seeds, or treated seeds used, applied or planted to this land in the last 36 months**. Therefore, I attest that this property meets the organic land requirements per NOP Rule § 205.202.

By my signature below, I declare, under penalty of perjury and under law that the foregoing is true and correct and that this declaration was executed on (date), , at (town/city) , (county) , state .

Print name:

Signature:

Applicant's Initial	Date	Approval	Form's code	Last update
		CM	F18 (v5) (f)	12/2/11