

Organic Farm Plan

Please fill out this questionnaire if you are requesting organic farm/crop certification. Use additional sheets if necessary. Sign this form. You must submit farm maps and field history sheets with this form. Attach all other supporting documents (soil, tissue or water tests, rented or recently purchased land histories, etc.) outlined in section 9 of this questionnaire. This form or an update form may be used to update certification, according to certifying agent policies.

SECTION 1: General Information				NOP Rule 205.401
Name		Farm Name		Type of Farm/Crops
Address			City	For office use only
State			Zip code	Date received
Date			Date reviewed	
Phone			Reviewer initials	
Fax		Email		
Fees received		Inspector		
Legal status: <input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Trust or non-profit <input type="checkbox"/> Corporation <input type="checkbox"/> Cooperative <input type="checkbox"/> Legal partnership (federal form 1065) <input type="checkbox"/> Other (specify)				
Year first certified	List previous organic certification by other agencies	List current organic certification by other agencies	Year when complete Organic Farm Plan Questionnaire was last submitted	
List all crops or products requested for certification.				
Have you ever been denied certification? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, describe the circumstances:		
Do you understand the current organic standards? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you have a copy of current organic standards? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you have a copy of current OMRI Materials List? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Do you intend to certify any livestock (slaughter stock, dairy, or layers) this year?				<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, have you filled out an Organic Livestock Plan Questionnaire?				<input type="checkbox"/> Yes <input type="checkbox"/> No
Please note that you must have an Organic Livestock Plan Questionnaire on file to certify any livestock. Contact the certifying agent to obtain an Organic Livestock Plan Questionnaire.				
Do you have any off-farm or on-farm processing done? (cleaning, bagging, bottling, etc.)				<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, have you filled out an Organic Handling Plan Questionnaire?				<input type="checkbox"/> Yes <input type="checkbox"/> No
Please note that you must have an Organic Handling Plan Questionnaire on file to certify the processing/handling portion of your operation. Contact the certifying agent with your questions or to obtain an Organic Handling Plan Questionnaire.				
Give directions to your farm for the inspector.				
When are you available to contact? <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening When are you available for the inspection? <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening				

SECTION 2: Farm Plan Information

NOP Rule 205.201(a) and 205.202(a) and (b)

Please complete the table below and attach updated field history sheets that show all fields [organic (O), in transition (T) or conventional (C)], field numbers, acres, crops planted, projected yields and inputs applied. The acreages listed in this table must equal field histories and maps. Pastures are considered a crop and must be listed on each form. At least 36 months of histories are required for all fields.

CROPS REQUESTED FOR CERTIFICATION	FIELD NUMBERS	TOTAL ACRES PER CROP	PROJECTED YIELDS (VOLUME)

Have you managed all fields for 3 or more years? Yes No
 If no, you must submit signed statements from the previous manager stating the use and all inputs applied during the previous 3 years on all newly rented or purchased fields.

Are all fields requested for certification located at the main address listed in Section 1? Yes No

Complete this information for main farm address and each parcel that is in a separate location from the main farm address.

FIELD NUMBERS	PARCEL ADDRESS/ LEGAL DESCRIPTION	NUMBER OF ACRES: ORGANIC (O), TRANSITIONAL (T), CONVENTIONAL (C)			RENTED (R) OR OWNED (O)
		O	T	C	

SECTION 3: Seeds and Seed Treatments

NOP Rule 205.204

NOP Rule requires the use of organically grown seeds, unless the variety is not commercially available. If using non-organic seeds, you must have records of your attempts to source organic seed. Synthetic seed treatments are prohibited unless included on the National List. Genetically engineered/modified (GMO) seeds and inoculants are prohibited in organic production. NOP Rule uses the phrase "excluded methods" to refer to GMO products. Please save all seed and inoculant labels, and documentation of commercial unavailability of organic seeds to show the inspector.

List all seeds used or planned for use in the current season. Check the appropriate boxes and provide other information as needed. Attach additional sheets if necessary.

No seeds used All seeds are organic Some untreated seed used No GMO seeds purchased/planted

SEED/VARIETY/BRAND	ORGANIC	UNTREATED	TREATED	GMO	TYPE/BRAND OF TREATMENT		WHAT ATTEMPTS DID YOU MAKE TO USE ORGANIC/UNTREATED SEED?
	(✓)	(✓)	(✓)	(✓)	FUNGICIDE	INOCULANT	

A. GENERAL INFORMATION AND EVALUATION:

What are your general soil types?

What are your soil/nutrient deficiencies?

No deficiencies

How do you monitor the effectiveness of your fertility management program? soil testing

- microbiological testing tissue testing observation of soil observation of crop health
- comparison of crop yields crop quality testing other (specify)

Attach copies of available test results.

How often do you conduct fertility monitoring? weekly monthly annually as needed

other (specify)

Rate the effectiveness of your fertility management program. excellent satisfactory needs improvement

What changes do you anticipate?

What are the major components of your soil and crop fertility plan?

- crop rotation green manure plowdown/cover crops interplanting incorporation of crop residues
- subsoiling summer fallow compost on-farm manure off-farm manure soil amendments
- side dressing foliar fertilizers biodynamic preparations soil inoculants other (specify)

List all fertility inputs used or intended for use in the current season on proposed organic and transitional fields. All inputs used during the current year and previous three years must be listed on the Field History Sheet. Not applicable

PRODUCT	BRAND NAME OR SOURCE	STATUS: APPROVED (A) RESTRICTED (R) PROHIBITED (P)	NUMBER OF APPLICATIONS PER YEAR	REASON FOR USE

If you use or plan to use restricted (R) fertility inputs, how do you comply with the "annotation"? Not applicable

If you use fertilizers with high salt content (sodium nitrate, potassium sulfate, etc.), how do you prevent salt build-up? Not applicable

Do you burn crop residues? Yes No

If yes, please describe what materials are burned and why.

Do you apply sewage sludge to fields? Yes No

If yes, list fields where applied.

B. COMPOST USE:

NOP Rule 205.203(c)(2) requires that the composting process include a C:N ration of between 25:1 and 40:1 and maintenance of temperatures between 131°F. and 170°F for a specific number of days, depending on the method of composting. Keep a compost production record to verify compliance.

List all compost ingredients/additives. Not applicable

What composting method do you use? in-vessel static aerated pile windrows other (specify)

What is your C:N ratio?

Do you monitor temperature? Yes No

If yes, what temperature is maintained.

How long is this temperature maintained?

If compost is windrowed, how many times are materials turned?

C. MANURE USE:

NOP Rule 205.203(c)(1) requires that raw manure be fully composted unless applied to fields with crops not for human consumption or incorporated into the soil 120 days prior to harvest for crops whose edible portions has direct contact with the soil, or 90 days prior to harvest for all other crops for human consumption.

What forms of manure do you use? none liquid semi-solid piled fully composted
 other (specify)

What types of crops do you grow? Check all boxes that apply.

- crops not used for human consumption
- crops for human consumption whose edible portion has direct contact with the soil or soil particles
- crops for human consumption whose edible portion does not have direct contact with the soil or soil particles

If you grow crops for human consumption and use raw manure, complete the following table. If composting manure, please fill out Section B above.

CROP(S)	FIELD NUMBERS	DATE MANURE IS APPLIED	EXPECTED DATE OF HARVEST

What is the source of the manure you use? on-farm off-farm Not applicable

List all sources of off-farm manure.

List all manure ingredients/additives.

If you use manure, what are the potential contaminants (pit additives, feed additives, pesticides, antibiotics, heavy metals, etc.) from these sources? Attach residue analysis/additive specifications for manure, if available.

D. NATURAL RESOURCES:

NOP Rule 205.200 and 205.203(a) requires that production practices maintain or improve the natural resources of the operation, including soil and water quality. Practices must minimize erosion. Depending on certifying agent policy, water tests may be required for nitrate and coliform bacteria if water is used for washing/processing organic products or for organic livestock. Irrigation water should not contaminate organic crops with prohibited materials. Methods to conserve water usage should be part of the irrigation plan.

What soil conservation practices are used? terraces contour farming strip cropping winter cover crops
 undersowing/interplanting conservation tillage permanent waterways windbreaks firebreaks
 tree lines retention ponds riparian management maintain wildlife habitat other (specify)

What soil erosion problems do you experience (why and on which fields)? none

Describe your efforts to minimize soil erosion problems listed above.

Describe how you monitor the effectiveness of your soil conservation program.

How often do you conduct conservation monitoring? weekly monthly annually as needed
 other (specify)

WATER USE:

irrigation livestock foliar sprays washing crops greenhouse other (specify)

none

Source of water: on-site well(s) river/creek/pond spring municipal/county irrigation district
 other (specify)

Attach current water tests for nitrates and coliform bacteria, per certifying agent policy.

Type of irrigation system: none

drip flood center pivot other (specify)

What input products are applied through the irrigation system? none

What products do you use to clean irrigation lines/nozzles? none

Is the system shared with another operator? Yes

No

If yes, what products do they use?

Is the system flushed and documented between conventional and organic use? Yes No

What practices are used to protect water quality?

fencing livestock from waterways scheduled use of water to conserve its use tensiometer/monitoring
 laser leveling/land forming drip irrigation micro-spray other (specify)

List known contaminants in water supplies in your area. *Attach residue analysis and/or salinity test results, if applicable.*

Describe your efforts to minimize water contamination problems listed above. Not applicable

Describe how you monitor the effectiveness of your water quality program.

How often do you conduct water quality monitoring? weekly monthly annually as needed
 other (specify)

NOP Rule requires a crop rotation plan that maximizes soil organic matter content, prevents weed, pest, and disease problems, and manages deficient or excess plant nutrients. Your crop rotation may include sod, cover crops, green manure crops, and catch crops. Producers must utilize sanitation measures to remove disease vectors, weed seeds, and habitat for pests. Cultural practices, including selection of plant species and varieties adapted to site-specific conditions, must be used to enhance crop health.

Approved synthetic materials on the National List 205.601 may only be used when management practices are insufficient to prevent or control problems. All weed, pest, and disease inputs must be approved. A "restricted" input has specific annotations for its use. If you use a "restricted" material, you must provide evidence of how you address the materials' annotation.

A. CROP ROTATION PLANS: (Use one line for each rotation used)

CROP ROTATION PLAN	FIELD NUMBERS WHERE PLAN IS FOLLOWED	ANTICIPATED CHANGES

B. WEED MANAGEMENT PLAN: No weed problems

What are your problem weeds?

- What weed control methods do you use?** crop rotation field preparation prevention of weed seed set
 delayed seeding monitoring soil temperature soil sterilization use of fast emerging varieties
 mechanical cultivation use of hand tools hand weeding mowing livestock grazing
 flame weeding steam weeding electrical smother crops black fallow non-synthetic mulch
 synthetic mulch corn gluten soap-based herbicides other (specify)

Do you keep a record of how often you utilize these weed control methods, i.e., dates and fields when you cultivate or flame weed? Yes No

All inputs used or intended for use during the current year and used in the previous three years must be listed on your Field History Sheet.

USE OF RESTRICTED WEED MANAGEMENT STRATEGIES: none used

If you use plastic or other synthetic mulches, is the mulch removed at the end of the growing or harvest season? Yes No

If no, why not?

If you use corn gluten, is the corn genetically modified? Yes No

If no, what verification do you have?

If you use soap-based herbicides, list all areas where used.

If you use newspaper or other recycled paper for mulch, do you use paper with glossy or colored inks? Yes No

EVALUATION:

Rate the effectiveness of your weed management program: excellent satisfactory needs improvement

What changes do you anticipate?

How do you monitor the effectiveness of your weed management program? weed counts

- observation of weed types comparison of crop yields records kept of observations/counts
 other (specify)

How often do you conduct weed monitoring? weekly monthly annually as needed

other (specify)

C. PEST MANAGEMENT PLAN:

No pest problems

What are your problem pests? insects (list)

rodents gophers birds other animals (specify)

Do you work with a pest control advisor?

Yes No

If yes, give name and contact information.

What strategies do you use to control pest damage to crops?

none used

- crop rotation selection for plant species/varieties development of habitat for natural enemies
- timing of planting companion planting frog ponds bat houses bird houses hand picking
- monitoring trap crops physical barriers physical removal traps lures IPM
- insect repellents animal repellents release of predators/parasites of pest species
- use of approved products use of restricted products limited use of prohibited products
- other (specify)

Do you keep a record of how often you utilize these pest control methods, i.e., dates when you scout or apply inputs to a specific field or crop? Yes No

List all pest control products used or intended for use in the current season on organic and transitional fields. All inputs used or intended for use during the current year and in the previous three years must be listed on your Field History Sheet. Not applicable

PEST PROBLEM	CONTROL PRODUCT	STATUS: APPROVED (A) RESTRICTED (R) PROHIBITED (P)	IF RESTRICTED, DESCRIBE COMPLIANCE WITH NOP RULE ANNOTATION	CHECK IF GMO (✓)

EVALUATION:

Rate the effectiveness of your pest management program? excellent satisfactory needs improvement

What changes do you anticipate?

How do you monitor the effectiveness of your pest management program? insect monitoring with traps

- observation of crop health comparison of crop yields crop quality testing monitoring records kept
- other (specify)

Attach copies of your test results, if applicable.

How often do you conduct pest monitoring? weekly monthly annually as needed

other (specify)

D. DISEASE MANAGEMENT PLAN:

No disease problems

What are your problem crop diseases?

- What disease prevention strategies do you use?** crop rotation field sanitation plant spacing
- selection of plant species/varieties timing of planting/cultivating vector management soil balancing
 - solarization companion planting compost/tea use use of approved materials
 - use of restricted materials limited use of prohibited materials other (specify)

D. DISEASE MANAGEMENT PLAN: (continued)

List all disease management inputs used or intended for use on your organic and transitional fields/crops. All inputs used or intended for use during the current year and used in the previous three years must be listed on your Field History Sheet.

Not applicable

DISEASE PROBLEM	CONTROL PRODUCT	STATUS: APPROVED (A) RESTRICTED (R) PROHIBITED (P)	IF RESTRICTED, DESCRIBE COMPLIANCE WITH NOP RULE ANNOTATION	CHECK IF GMO (✓)

EVALUATION:

Rate the effectiveness of your disease management program? excellent satisfactory needs improvement
 What changes do you anticipate?

How do you monitor the effectiveness of your pest management program? soil testing
 microbiological testing observation of soil observation of crop health comparison of crop yields
 crop quality testing monitoring records kept other (specify)

Attach copies of your test results, if applicable.

How often do you conduct pest monitoring? weekly monthly annually as needed
 other (specify)

SECTION 7: Maintenance of Organic Integrity

NOP Rule 205.201(a)(5) and 205.202(c)

A. ADJOINING LAND USE:

NOP RULE requires that organic production areas have distinct boundaries and buffer zones to prevent the unintended application of a prohibited substance or contact with a prohibited substance that is applied to adjoining land not under organic management. Adjoining land includes crop land, pastures, residential property, fallow land, etc. Buffer areas may change annually, depending on contamination potential from adjoining land uses. The width of the minimum buffer is dependent on certifying agent policy. The NOP Rule requires that the buffer must be sufficient in size or other features (windbreaks, diversion ditches) to prevent the unintended contact by prohibited substances applied to adjacent land areas. Crops within the required buffer must be left unharvested or harvested, stored, and disposed of as nonorganic crop, with records kept of crop disposition. Indicate buffer zones and show all adjoining land uses on your field maps.

List specific buffer areas you maintain. (Show all adjoining land uses on your field maps.)

Not applicable

LOCATION OR FIELD NUMBER	TYPE OF BUFFER (CROP LAND, TREELINE, HEDGEROW, WILDLIFE PLANTING, GRASS STRIP)	WIDTH OF BUFFER	ADJOINING LAND USE	IF CROP IS HARVESTED FROM BUFFER, DESCRIBE USE (SALE, NON-ORGANIC LIVESTOCK FEED, SEED, ETC.)

A. ADJOINING LAND USE: (continued)

If crops are harvested from the buffer zones with equipment used for harvesting organic crops, what safeguards do you use to protect organic crops from contact with buffer crops during harvest?

What additional safeguards do you use to prevent accidental contamination? none

- Written notification to: highway departments electric companies aerial spray companies/airports
 adjoining landowners drainage commissions farm service office other (specify)

Have you posted "No Spray" signs along roadsides that adjoin organic fields? Yes No

Do any fields or portions of fields flood frequently? (more than once every ten years) Yes No

If yes, list field numbers

How do you monitor for crop contamination? visual observation residue analysis GMO testing

- photographs wind direction/speed data other (specify)

How often do you conduct crop contamination monitoring? weekly monthly annually as needed

- other (specify)

Do you grow the same crops organically, as well as in transition, and/or conventionally? Yes No

This is called 'parallel production'. If yes, list specific crop varieties in the next table for both organic and transitional/conventional crops.

If you grow any conventional or transitional crops, please fill out the following tables. Not applicable

SPECIFIC CROPS/VARIETIES	FIELD NUMBERS	TRANSITIONAL (T) OR CONVENTIONAL (C)	CHECK IF GMO (✓)	TOTAL ACREAGE	PLANNED USE OF CROP (SALE, SEED, NONORGANIC LIVESTOCK FEED, ETC.)	SAME AS ORGANIC CROP? Y OR N

Prohibited soil amendments used on conventional crops:

PRODUCT NAME	WHO APPLIES? SELF (S) OR CUSTOM (C)	FIELD NUMBERS WHERE APPLIED	WHERE STORED? (ON-FARM OR OFF-FARM; WHERE ON FARM?)

Prohibited herbicides/pesticides used on conventional crops:

PRODUCT NAME	WHO APPLIES? SELF (S) OR CUSTOM (C)	FIELD NUMBERS WHERE APPLIED	WHERE STORED? (ON-FARM OR OFF-FARM; WHERE ON FARM?)

C. EQUIPMENT:

To prevent commingling and contamination, all equipment used in organic crop production must be free of non-organic crops and prohibited materials, Equipment used for both organic and non-organic farming must be cleaned and flushed prior to use on organic fields or crops. Keep records of equipment clean and flush activities.

List equipment used for planting, tillage, spraying, and harvesting. Not applicable

EQUIPMENT NAME	OWNED (O), RENTED (R), OR CUSTOM (C)	CHECK IF USED ON BOTH ORGANIC AND CONVENTIONAL (✓)	HOW IS EQUIPMENT CLEANED BEFORE USE ON ORGANIC FIELDS?

Is your equipment maintained so that fuel, oil and hydraulic fluid do not leak? Yes No Not applicable

If you use a sprayer:

What type?

Did you purchase it new or used? new used

Other equipment:

Could any equipment you use have been contaminated by previous uses? Yes No

If yes, describe:

D. HARVEST:

NOP Rule 205.272(b)(1) and (2) requires that containers, bins, and packaging materials must not contain synthetic fungicides, preservatives, or fumigants. All reusable containers must be thoroughly cleaned and pose no risk of contamination prior to use.

How are your organic crops harvested? mechanical by hand

Are any organic crops custom harvested? Yes No

If yes, provide name and address of custom harvester.

Describe steps taken to protect organic crops from commingling and contamination during harvest.

What containers are used for harvesting? gravity wagons/boxes truck boxes cardboard/waxed boxes
 wooden totes plastic containers other (specify)

Are containers new or used? new used

If used, what did they contain prior to organic use?

Are the containers used for organic crops only? Yes No

Describe potential contamination or commingling problems you have with harvest of organic crops. none

E. POST-HARVEST HANDLING:

Not applicable

NOP Rule 205.201(a)(5) requires that post-harvest handling procedures do not contaminate organic products with non-organic crops or prohibited materials. *For on-farm processing, you may need to complete an Organic Handling Plan Questionnaire.*

Describe your post-harvest handling procedures and equipment.

Is the processing area and equipment used for both organic and non-organic products? Yes No

If yes, describe steps taken to prevent commingling and contamination.

Does packaging present any contamination problems for your organic products? Yes No

If yes, what are they?

Check types of packaging material used: bulk paper cardboard wood glass metal
 foil plastic waxed paper aseptic natural fiber synthetic fiber other (specify)

In what form are finished products shipped? dry bulk liquid bulk tote bags tote boxes paper bags
 foil bags metal drums mesh bags cardboard drums cardboard cases plastic crates
 other (specify)

F. CROP STORAGE:

No organic crop storage

Operators must keep organic and non-organic crops in separate storage areas and prevent commingling and contamination. Storage records must be maintained.

Describe your storage locations.

STORAGE ID #	TYPE OF CROPS STORED	TYPE OF STORAGE	CAPACITY/SIZE	ORGANIC (O), TRANSITIONAL (T), BUFFER (B), CONVENTIONAL (C)

Do you use the same storage areas for organic, transitional, buffer, and/or conventional crops. Yes No

If yes, how do you segregate organic crops from non-organic crops?

How do you clean storage units prior to storage of organic crops?

How do you prevent/control insect pests in crop storage areas? No insect problems

How do you control rodents in crop storage areas? No rodent problems

What stored crop inputs have you used in the last three years? none

synthetic fumigants rodenticides sprouting inhibitors ripeners growth regulators
 preservatives oils coloring agents waxes other (specify)

Are any stored crop inputs used or planned for use on organic crops? Yes No

If yes, specify input and retain labels.

G. TRANSPORTATION:

Not applicable

Who is responsible for arranging transportation of organic products? self buyer other (specify)

Describe how organic products are transported.

What potential contamination or commingling problems do you have with the transport of organic crops? none

What steps are taken to protect the integrity of organic products during transport?

- dedicated organic only
- inspecting transport units prior to loading
- cleaning transport units prior to loading
- use of Clean Truck Affidavits
- letter/contract with transport company stating organic requirements
- other (specify)

SECTION 8: Record Keeping System

NOP Rule 205.103

NOP Rule 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.

A. RECORDS: *Please have these records available for the inspector.*

Which of the following records do you keep for organic production?

- field maps
- field activity log(s)
- field history sheets (previous three years)
- documentation of previous land use for rented and/or newly purchased land
- input records for soil amendments, seeds, manure, foliar sprays, and pest control products (keep all labels)
- documentation of attempts to source organic seeds and/or planting stock
- documentation of organic seedlings
- residue analyses of inputs (i.e., manure sourced off-farm)
- compost production records
- monitoring records (soil tests, tissue tests, water tests, quality tests, observations)
- equipment cleaning records
- harvest records that show field numbers, date of harvest, and harvest amounts (including custom harvest records)
- label records
- storage records that show storage location, storage identification, field numbers, amounts stored, and cleaning activities
- clean transport records
- sales records (purchase order, contract, invoice, cash receipts, cash receipt journal, sales journal, etc.)
- shipping records (scale ticket, dump station ticket, bill of lading)
- Transaction Certificates
- audit control summary
- complaint log
- other (please specify)

How long do you keep your records?

Which of the following records do you keep for conventional production?

Not applicable

- field maps
- field history sheets
- input records
- harvest records
- other (specify)
- labor records
- storage records
- sales records
- shipping records

B. MARKETING:

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 use or plan to use the USDA organic seal on product labels or market information? Yes No

Do you use or plan to use the seal of the certifying agent on product labels or market information? Yes No

Attach copies of all organic product labels.

SECTION 9: Affirmation

I affirm that all statements made in this application are true and correct. No prohibited products have been applied to any of my organically managed fields during the three-year period prior to projected harvest. I understand that the operation may be subject to unannounced inspection and/or sampling for residues at any time as deemed appropriate to ensure compliance with the Organic Foods Production Act of 1990 and National Organic Program Rules and Regulations. I understand that acceptance of this questionnaire in no way implies granting of certification by the certifying agent. I agree to provide further information as required by the certifying agent.

Signature of Operator _____ Date

I have attached the following documents:

- Maps of all parcels/fields (showing adjoining land use and field identification)
- Field history sheets
- Documentation for fields owned or rented for less than three years, if applicable
- Water test, if applicable
- Soil and/or plant tissue tests, if applicable
- Residue analyses, if applicable
- Input product labels, if applicable
- Organic product labels, if applicable

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

Submit completed form, fees, and supporting documents to: