Organic Poultry Plan

Please complete this questionnaire if you are requesting organic certification for poultry and eggs. If you plan on certifying any other livestock, please complete the Organic Livestock Plan instead of this plan. If you want to certify any crops for sale, please complete the Organic Farm Plan. See the Application Checklist for Poultry for additional information to submit with this Plan.

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| **SECTION 1: General Information** | | | **205.201, 205.300-11, 205.401** | | |
| Farm name: | | Date: | | Organic certification number: | |
| Owner: | Phone: | | | Email: | |
| Primary contact for certification (if different than owner): | Primary contact phone: | | | Primary contact email: | |
| List other authorized contacts with their titles and contact information (email/phone number): | | | | | |
| ***If you have completed the Organic Farm Plan, skip to Section 2*** | | | | | |
| Physical Address (if different than main farm operation): | | City: | | State/province: | Postal/zip code: |
| Legal status:  Sole proprietorship  Corporation  Cooperative  Trust or non-profit  LLC  Legal partnership (federal form 1065)  Other (specify) | | | | | |
| * 1. **What are you requesting to certify as organic?** (check all that apply)   Chickens – Layers  Chickens – Broilers  Turkeys  Ducks  Geese  Eggs  Other (specify):  *If you wish to certify any crops for sale, please complete the Organic Farm Plan.*  *If you wish to certify any livestock in addition to poultry, please complete the Organic Livestock Plan.* | | | | | |
| * 1. **List all non-organic livestock on farm:**  N/A | | | | | |
| * 1. **Has this operation, or a responsible party (owner) connected to this operation, ever previously held organic**   **certification?**  Yes No  List previous years certified organic and name of accredited certifying agency:  List current organic certification by other accredited certifying agencies:   * 1. **Has organic certification ever been denied, suspended, or revoked?**  Yes  No  n/a   If yes, describe the circumstances and attach all noncompliance noted by the certifying agent issuing the decision and  corrective actions you took to address the noncompliance:  I have attached noncompliance and corrective actions.  *If previously certified by another certifying agency, or currently certified by another agency, submit your last certificate issued, the last post-inspection letter received, and any noncompliance cited and corrective actions you took to fix the noncompliance.*  I have attached noncompliance and corrective actions.  I have attached current certification certificate and last post-inspection letter. | | | | | |
| * 1. **Do you have access to the current Organic Standards?**  Yes No   2. **Do you have access to the current OMRI Materials List?**  Yes No   3. **Are you certifying any processed poultry products (products other than the birds and meat products)?**  Yes No   If yes, have you completed the On-Farm Handling Plan?  Yes No | | | | | |
| * 1. **Preferred time for inspection visit:**  Morning  Afternoon   2. **The NOP requires that Baystate Organic Certifiers perform unannounced inspections. You may choose two weekdays that you are not available for unannounced inspections. List them here:** | | | | | |

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| **SECTION 2: General Poultry Information** | | **205.201, 205.236** | | | | | |
| *Note the number of all poultry on farm currently, including the number anticipated to be purchased or raised this year. List them as follows: for organic certification (O) and conventional (C).*  **2-1. Complete the table below with all poultry on-farm for this year.** | | | | | | | |
| **Type of Poultry** | **Laying Hens/Ducks**  **O C** | | | **Broiler/Slaughter Stock**  **O C** | | **Males**  **O C** | |
| New chicks hatched on-farm |  | |  |  |  |  |  |
| Chickens |  | |  |  |  |  |  |
| New poults hatched on-farm |  | |  |  |  |  |  |
| Turkeys |  | |  |  |  |  |  |
| New ducklings hatched on-farm |  | |  |  |  |  |  |
| Ducks |  | |  |  |  |  |  |
| New goslings hatched on-farm |  | |  |  |  |  |  |
| Geese |  | |  |  |  |  |  |
| Other poultry: |  | |  |  |  |  |  |
| **2-2. Do you raise the same type of poultry as both organic and non-organic?**  Yes  No  If yes, how do keep non-organic and organic birds segregated?  If yes, how do you easily distinguish between non-organic and organic flocks? | | | | | | | |

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| **SECTION 3: Poultry Sources** | | | **205.236** | | | |
| *Organic Standards require poultry and edible poultry products must be from poultry that have been under continuous organic management beginning no later than the second day of life. Day-old chicks do not have to be from an organic source.* 3-1. Do you raise your own chicks/poults on-farm?  Yes  No **3-2. For chicks raised on-farm, describe how they are raised, including their housing, location, bedding, feed, and feed supplements provided:** 3-3. Do you purchase chicks/poults/ducklings/goslings this year?  Yes  No If yes, how old are they when they arrive on-farm?  If yes, do you have proof that they have been managed organically from the second day of life?  Yes  No  For purchased birds older than day old chicks, do you have the organic certification documentation on file? Yes  No  N/A  Complete the table on purchased poultry below, as applicable. Attach an additional sheet, if necessary. | | | | | | |
| **Poultry Type Purchased** | **Flock #** | **Purchase Dates** | | **Slaughter Date / Egg Laying Date** | **Source** | **Certified By?** |
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| **SECTION 4: Feed and Feed Supplements** | | **205.237** |
| *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, non-synthetic and synthetic substances allowed under 205.603 and 205.604 may be used as feed additives and supplements.*  **4A. Feed RATIONS:**  **4A-1. Complete the table for feed rations.** List each feed item, what % of the total ration it is, how much of this feed is fed per week or per month, and whether it is Organic (O), Transitional (T) or Conventional (C). If you’re using blends, list manufacturer, blend name and type of blend and submit an ingredients list with this Plan. For each new blend and for new applicants, submit an organic certificate for the blend manufacturer.  **EXAMPLE: Cracked corn, 40% (O), 50-lb fed per month** | | |
| **Bird Group** | **Feed Ration %, Amount Fed Per Week/Month** | |
| Chicks: |  | |
| Pullets: |  | |
| Layers: |  | |
| Broilers: |  | |
| Turkeys: |  | |
| Ducks: |  | |
| Geese: |  | |
| Other: |  | |
| **4A-2. Feed inventory records are required at least once a year so that rations are auditable at inspection. List the current quantities of all feed that is on-farm (include all purchased and grown amounts and note whether the feed is organic or non-organic). Please note the date inventory was taken, and if zero feed is on hand, report those quantities as zero:** | | |

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| **4B. PURCHASED FEED:**  **4B-1.** **Did you purchase or do you plan on purchasing any feed this year?**  Yes  No  If yes, fill out the table below. | | | | |
| **Type of Purchased Feed** | **Sources** | **Certified By?** | **Quantities** | **Dates Purchased** |
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| 4B-2. Do you process feed (mix, grind, roast, extrude, etc.) on-farm?   Yes  No  If yes, is the equipment also used to process conventional products?  Yes  No  If yes, how is equipment cleaned prior to processing organic feed to prevent contamination?  4B-3. What is your plan for emergency feed supplies?    4B-4. Do you feed non-organic feed to any other animals on the farm?   Yes  No  If yes, where is the non-organic feed stored?  If yes, how do you prevent your organic poultry from consuming the non-organic feed? | | | | |

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| 4C. ON-FARM FEED  4C-1. Growing feed:  I grow organic crops on-farm for sale and have filled out the Organic Farm Plan.  I grow organic crops and/or feed scraps from my garden on-farm for my poultry but do not sell organic crops.  I do not grow crops (skip to next section.)  4C-2. If you grow crops to be fed to your poultry or feed scraps/waste from your garden, describe your growing system for raising these crops:  N/A    4C-3. List all fertilizers, pest and disease control materials and other inputs used on your crops to be fed to your poultry. All inputs must be compliant with the Organic Standards for the crops to be fed to organic poultry.  N/A |

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| **4D. FEED SUPPLEMENTS & ADDITIVES**  *Organic Standards define a feed additive or supplement as nutrient(s) mixed with feed or offered free choice to improve the overall nutrient balance of the feed ration or fill a specific nutritional need. All agricultural ingredients in feed supplements and additives must be organic; certain synthetics are also allowed under NOP 205.603. Feed supplements and additives must not be fed in amounts above those needed for adequate nutrition and health maintenance for the species at its specific stage of life.*  **4D-1. Did you purchase or do you plan on purchasing any feed supplements or additives this year?**  Yes  No  If yes, fill out the table below, including oyster shell, grit, minerals, etc. | | | | |
| **Feed Supplement/Additive** | **Sources** | **Amounts Fed Per Week or Per Month** | **Restricted?**  **Yes or No** | **Reason for Use** |
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| **4D-2. Feed supplement inventory records are required at least once a year so that rations are auditable at inspection. List the current quantities of feed supplements on-farm (include the date inventory was taken, and if zero feed is on hand, report those quantities as zero):** | | | | |

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| **4E. FEED STORAGE:**  **4E-1. Do you have any feed storage?**  Yes  No  If yes, fill out the table below, including any storage not listed on the Organic Farm Plan for crop storage. | | | | |
| **Storage ID** | **Type of Storage (Silo, Bin, etc.)** | **Capacity** | **Type of Feed Stored**  **(Bulk/Bagged Grain, etc.)** | **Dedicated to Organic Feed?**  **Yes or No** |
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| 4E-2. How do you control pests (insects, rodents, etc.) in organic feed storage areas?  none  good sanitation  screened windows/vents  removal of habitat/food sources  crack/crevice spray  electrocutors  sticky traps  inspection zones around interior perimeter  physical barriers  sheet metal on building exterior  sealed doors/windows  ultrasound/light devices  repairs of holes/cracks, etc.  pheromone traps  mechanical traps  other (specify)  **4E-3. Do you keep records of your pest monitoring and management activities?**  Yes  No | | | | |

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| **SECTION 5: Water & Manure Management** | **205.239** |
| *Water used for organic poultry must be potable and readily accessible. Tests for coliform, nitrates and other contamination may be required based on risk factors. The Organic Standards requires manure to be managed so that it does not contribute to contamination of crops, soil, and water.*  **5A. WATER**  **5A-1. What are your sources of water for poultry use?**  on-site well municipal river/creek/pond spring other (specify):  **5A-2. Do you use additives in the water, such as cider vinegar?**  Yes  No If yes, are they organic?  Yes  No **5A-3.** **How do you manage water for the needs of the poultry, native species and/or riparian areas?**  N/A  water conservation  planting drought-tolerant natives  correct pond locations  use fish screens with pumps  scheduled irrigation  protect/improve natural function of riparian area  other (specify)  **5A-4. Known contaminants in water supplies in your area:** (*attach residue analysis and/or salinity test results, if applicable*)    **5A-5. How do you minimize water contamination problems?**  N/A  fencing poultry from waterway  fertilizer/compost stored away from water  prevent nutrient leaching from over-irrigation  grassy waterways/wetlands/riparian buffers to filter water  other (specify) | |
| **5B. MANURE MANAGEMENT**  5B-1. Check all methods of manure management with the manure from your flocks:  left on pasture/outdoor access areas  spread on fields  compost pile  bagged and sold  other (specify)  5B-2. Estimated quantity of manure generated per year:       tons | |

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| **SECTION 6: Housing, Pasture & Outdoor Access** | | | **205.239** | | | |
| *The Organic Standards requires poultry living conditions to accommodate their health & natural behaviors. Poultry must 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.*  **6A. HOUSING**  **6A-1. List all housing provided to each poultry group.**  N/A, no housing provided. | | | | | | |
| **Type of Housing**  **(shed, stationary coop, mobile coop or tractor)** | **Poultry Group Housed** | **Number of Birds Housed** | | **Dimensions or Square Footage** | **Linear Ft of Roosting Space** | **Number of Nesting Boxes** |
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| 6A-2. What types of bedding are you using in their housing and nesting boxes? (Check all that apply.)  Feed source types:  Grass  Hay  Straw  Other edible roughage  Non-feed source types:  Sawdust  Wood shaving  Other non-edible material  6A-3. If you are using straw, hay or other edible roughage as bedding, is it organic? Yes No  N/A  If yes, what are the sources?  If yes, do you have proof on file that the source is organic? Yes No  6A-4. How often is housing cleaned out?  6A-5. How is their housing cleaned? List any sanitation/cleaning materials used, including brand and manufacturer:    6A-6. What pest control measures are used in their housing? List any materials used, including brand and manufacturer:  No pest control materials used  **6A-7. What type of flooring is in each housing unit?**  None, open to the ground  Solid  Slatted/Perforated  Other (specify): | | | | | | |

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| 6A. HOUSING (cont.)  6A-8. How is ventilation provided?  **6A-9. Is day length regulated using artificial light?**  Yes  No  If yes, how many hours of total light are given?  6A-10. Is treated lumber used on farm in contact with soil or poultry?  Yes  No  If yes, describe the areas where treated lumber is used: |

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| **6B. PASTURE & OUTDOOR ACCESS**  **6B-1. How many hours per day are poultry confined (i.e., not given any outdoor access)?**  Spring:       Summer:       Fall:       Winter:  6B-2. Have you confined poultry for a full day or longer at any time during the past year?  Yes  No  If yes, do you record the days poultry are confined?  Yes  No  If yes, what kind of record are you maintaining?  Calendar  Notebook  Spreadsheet  Other (specify):  If yes, describe every situation in which poultry were confined:    **6B-3. List all pastures and outdoor access areas used for poultry.**  No outdoor access given | | | |
| **Pasture / Area ID** | **Acres / Square Feet** | **Type of Poultry and Maximum Number of Poultry on Pasture** | **Seasons When Poultry Has Access** |
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| 6B-4. Do the doors to their outdoor access areas allow for the birds to go outside “on-demand” all day?  Yes  No  6B-5. Does each area have sufficient shade, dust baths, shelter and direct sunlight for all birds using it?  Yes  No  If no, list which areas do not and why:  **6B-6. If you are using smaller outdoor access areas for your poultry, how do you make sure that the poultry do not wear out the area and take the area down to bare dirt?** | | | |

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| **SECTION 7: Health Management** | | **205.238, 205.603, 205.604** | | | |
| *Organic Standards require preventive poultry health care practices be used when needed. When preventives and veterinary biologics are insufficient, synthetic medications may be used, provided the medications are allowed under 205.238.*  **7-1. How do you manage poultry health?** *Check all that apply.*  selective breeding raise own replacement stock isolation for purchased/diseased birds culling vaccinations  good sanitation access to outdoors dry bedding good ventilation in housing good quality feed  pasture rotation nutritional supplements probiotics  other (specify):  **7-2. Do you withhold conventional treatment from an ill bird after organic methods have failed in order to maintain its organic status?** Yes  No | | | | | |
| **7A. HEALTHCARE MATERIALS:**  Not Applicable, skip to next section  **7A-1. List all healthcare materials and treatments used or planned for use (include vaccinations, hormones, antibiotics, and parasiticides).** | | | | | |
| **Material Brand Name & Manufacturer** | **Birds Used On** | | **Reason for Use** | **When Used** | **Approved? (Y or N)** |
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| **7B. PHYSICAL ALTERATIONS:**  Not Applicable, skip to next section  *Organic Standards require physical alterations needed to promote animal welfare be performed in ways to minimize pain and stress.*  **7B-1. Fill out the table below, including any administered by a veterinarian.** | | |
| **Surgical Procedure** | **Method and Tools Used** | **Reason for Procedure** |
| Beak Trimming |  |  |
| Toe Clipping or Punching |  |  |
| Other (specify): |  |  |

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| **7C. PEST AND PREDATOR CONTROLS:**  **7C-1. Check all pest and predators that you monitor your animals for:**  none  flies  parasites  raptor predators  reptilian predators  small and large mammalian predators  **7C-2. What strategies do you use to coexist with and reduce conflicts with predators?**  N/A  use guard animals  predator lights  restrict grazing when predator pressure is high  night corrals  electric fencing  shooting predators  livestock bred for protective instincts  small and large animals grazed together  other (specify)  **7C-3. Do you keep records of pest and/or predator material use?**  Yes  No  **7C-4. List all pest and predator control materials (including any poison baits) used or planned for use:**  N/A | | | |
| **Pest or Predator** | **Material Used** | **Brand Name / Manufacturer** | **Approved?**  **Yes or No** |
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| **SECTION 8: Slaughter** | **205.100, 205.239, 205.272** |
| *The Organic Standards require humane methods of loading, unloading, holding and slaughter. Slaughter facilities must be certified.*  **8A. SLAUGHTER**  Not Applicable, skip to next section  **8A-1. How do you slaughter your poultry?**  on-farm slaughter with own equipment  off-farm certified organic slaughter facility  on-farm rented organic mobile processing unit (MPPU)  off-farm non-organic slaughter facility  **8A-2. If birds are slaughtered off-farm, provide the facility’s organic status, name and contact information:**  N/A    *You must maintain organic certificates on file for any off-farm certified organic slaughter facilities.*  **8A-3. For on-farm slaughter, I have submitted the On-Farm Handling Plan:**  Yes  No  N/A, slaughter is off-farm  *If you want to certify any on-farm slaughter, multi-ingredient poultry products, or if you want to be certified to slaughter anyone else's organic poultry, you must submit an On-Farm Handling Plan.*  **8A-4. For on-farm slaughter, what regulatory permit(s) do you hold for poultry slaughter?**  N/A, none required in my state    **8A-5. How many birds or lbs. of parts do you anticipate harvesting this year?**  **8A-6. Meat inventory records are required at least once a year so that amounts are auditable at inspection. List the current quantities of slaughtered birds or lbs. of parts in storage (include the date inventory was taken, and if zero is on hand, report those quantities as zero):** | |

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| 8B. TRANSPORT  Not Applicable  8B-1. I ship my poultry:  Live for sale  For organic slaughter  For non-organic slaughter (skip to next section)  8B-2. How are birds caught and loaded onto transport?  8B-3. What form of transportation is used?  8B-4. How many hours from loading until point of sale or time of slaughter?  8B-5. Any provisions provided in transit?  Food  Water  Both food and water  None |

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| **SECTION 9: Egg Production** | **205.100, 205.270** |
| *The Organic Standards require facilities handling organic eggs to be certified and inspected to verify organic integrity is maintained.*  **9-1. How are your eggs cleaned and inspected?**  N/A, skip to the next section  on-farm facility  off-farm facility  **9-2. If you are using an on-farm facility, list any egg washes or additives to the water such as chlorine used:**  N/A    **9-3. If you are using an off-farm facility, provide the facility’s organic status, name and contact information:**  N/A    *You must maintain organic certificates on file for any off-farm certified egg facilities.*  **9-4. How many eggs do you anticipate harvesting this year?**  **9-5. Egg inventory records are required at least once a year so that amounts are auditable at inspection. List the current quantities of eggs in storage (include the date inventory was taken, and if zero is on hand, report those quantities as zero):** | |

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| **SECTION 10: Poultry Identification** | **205.236, 205.272** |
| *The Organic Standards require flock identification. Separation and identification are required for those birds that have been treated with prohibited products.*  **10-1. What methods do you use to identify your organic flocks?** (check all that apply)  none, flocks are commingled  different species  different breeds  separate housing  separate by hatch/arrival date  other (specify):  **10-2. If an individual bird required conventional treatment, how would they be identified and/or segregated?** | |

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| **SECTION 11: Monitoring and Recordkeeping** | **205.103** |
| *The Organic Standards require that records disclose all activities and transactions of the operation, be maintained for 5 years, and demonstrate compliance with the NOP Rule. All records must be accessible to the inspector.*  **11A. MONITORING:**  11A-1. How do you monitor the implementation of your organic system plan, including recording the frequency of your monitoring? *(Check off all that apply*.)  Updating of the Organic Poultry Plan and accompanying documents  annually  other (specify)  Auditing your own recordkeeping  annually  monthly  other (specify)  Do you keep records of your internal audits?  Yes  No  Verification that material label instructions are followed?  daily  weekly  monthly  other (specify)  Do you keep records of these verifications?  Yes  No  Other monitoring (specify):        annually  monthly  other (specify) | |

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| **11B. RECORDKEEPING:**  **11B-1. Which of the following records do you keep for organic poultry production?** (*Check all that apply*)  maps of all pastures and outdoor access areas  pasture and outdoor access records  purchase records for new birds  purchase records for feed/feed supplements  organic certificates for purchased feed and/or organic birds  feed storage records  health records (mortalities, parasite issues, excessive pecking, injuries, etc.)  egg production records  monitoring records (soil tests, water tests, quality tests, recorded observations)  samples of labels in use  slaughter/processing records  sales records (purchase order, contract, invoice, cash receipts, cash receipt journal, sales journal, etc.)  shipping records (scale ticket, bill of lading)  other (specify)  **11B. RECORDKEEPING** (cont.)  **11B-2. Describe your overall recordkeeping system:**  paper  digital  both paper and digital  field notebooks  daily record sheets  monthly spreadsheets  phone apps  other (specify)  **11B-3. Does your recordkeeping system disclose all activities from purchase or birth of poultry through egg/meat production and/or sale of products?**  Yes  No  **11B-4. How long do you keep your records?** *The Organic Standards require 5 years minimum*.  1 year  2 years  3 years  4 years  5 years  other (specify) |

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| **11C. MARKETING:**  **11C-1. Types of marketing:**  farmers market  direct to retail  CSA/subscription service  wholesale  on-farm retail  internet/website  bulk to processor  contract to buyer  other (specify)  **11C-2. Do you sell live birds?**  Yes  No  **11C-3. Are you using any labels to market your organic produce or products?**  Yes  No  If yes, have you submitted all labels for review and approval prior to use?  Yes  No  **11C-4. Do you import organic ingredients for processed products or poultry feed for your farm from Canada or any other foreign country?**  Yes No  *If yes, then you must fill out the Baystate Crop/Livestock Import/Export Addendum*.  **11C-5. Do you export organic poultry products to Canada or any foreign country?**  Yes No  *If yes, then you must fill out the Baystate Crop/Livestock Import/Export Addendum*. |

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| **SECTION 12: Affirmation** |
| I affirm that all statements made in this application are true and correct. I understand my facility may be subject to inspection and/or residues sampling at any time deemed appropriate to ensure compliance with the Organic Foods Production Act of 1990 and NOP Rules and Regulations. I understand acceptance of my application for organic certification in no way implies granting of certification by Baystate Organic Certifiers. I agree to provide further information as required by Baystate Organic Certifiers. Furthermore, I agree to abide by the following general requirements for certification as specified in section 205.400 of the National Organic Standards. A person seeking to receive or maintain organic certification must:   1. Comply with the Organic Food Productions Act and all applicable regulations specified in the National Organic Standards and with all Baystate Organic Certifiers certification requirements as outlined in the Program Manual. 2. Establish, implement, and update annually an organic production or handling system plan that is submitted to Baystate Organic Certifiers. 3. Permit on-site inspections by Baystate Organic Certifiers with complete access to the production or handling operation, including noncertified production and handling areas, structures, and offices. 4. Maintain all records applicable to the organic operation for not less than 5 years beyond their creation and allow authorized representatives of the Secretary of Agriculture, and Baystate Organic Certifiers access to such records during normal business hours for review and copying to determine compliance with the Organic Food Productions Act and all applicable regulations specified in the National Organic Standards. 5. Submit applicable fees according to the Baystate Organic Certifiers’ Fee Schedule. 6. Immediately notify Baystate Organic Certifiers concerning any application, including drift, of a prohibited substance to any field, production unit, site, facility, livestock, or product that is part of an operation; and notify Baystate of any change in a certified operation or any portion of a certified operation that may affect its compliance with the Act and the regulations in this part. 7. Submit all labels used to market organic produce, meat, or products to Baystate Organic Certifiers for review and approval prior to using these labels to market the produce, meat, or products.   Signature of Owner/Manager:       Date  I have made copies of this Organic Handling Plan and other supporting documents for my own records.  Application forms may be emailed to: [applications@baystateorganic.org](mailto:applications@baystateorganic.org).  Submit hardcopy application packets, copies, fees, and supporting documents to:  Baystate Organic Certifiers, c/o Don Franczyk, 1220 Cedarwood Circle, N. Dighton, MA 02764 |