



Trader Organic System Plan

Please complete this form in its entirety if you are a new applicant. Please also ensure that you attach the Trader Organic System Plan Annual Update. Sign this form and attach all supporting documentation as specified in Section 7. Any incomplete information may lead to a delay in certification. Use additional sheets if necessary. Mark any sections that do not apply to your operation as "Not Applicable". Please contact the TCO Cert office, if you have any questions regarding the completion of this form. This form is confidential when completed.

SECTION 1: General Information

Operation Name:

Operator Number:

↑ **The Operation Name must be a person and a person means an individual, a corporation, an association, or an organization recognized as a legal entity. This name goes on the certificate.**

Other Name(s):

↑ **Other Name(s) may be another name by which the certificate holder is commonly known in the marketplace or the name the holder commonly does business under. This name may be added on the certificate but must clearly be referred to as "doing business as" or "DBA." Leave blank if you don't have any.**

Contact Person's Name:

Secondary Contact Person's Name (if applicable):

PHYSICAL INSPECTION LOCATION INFORMATION

OPERATION'S CONTACT INFORMATION

Same information as inspection location

Address:

Mailing Address:

City:

Province:

Postal Code:

City:

Province:

Postal Code:

Phone 1:

Phone 2:

Phone 1:

Phone 2:

Cell:

Fax:

Cell:

Fax:

E-mail Address:

E-mail Address:

Web Site:

Web Site:

SECOND INSPECTION LOCATION ADDRESS (if applicable):

Please provide directions to the inspection location(s) and indicate when you are available to contact:

1. Please list previous organic certification applications to other agencies (name, year(s) of application, outcome of application).

2. Trading:

Organic products only
 Organic/non-organic – different products
 Organic/non-organic - same products

Estimated annual total business: % organic; % non-organic

3. a. Do you take ownership (buying and selling) of the organic products you are trading? Yes No*

b. Please list products traded. Attach a list, if necessary.

c. Please list documentation obtained by your operation to verify organic status of products traded.

d. To what markets are you selling (i.e., Canada, US, Europe)?

*If no, please explain:

***Please note that if you do not own (buying and selling) the organic products you are trading, you are eligible for "Attestation of Compliance" instead of "Certification" to the COR.**

4. a. Are the organic products being traded changed in any way (i.e., transformed, repackaged and/or relabeled), either by your own employees or by a contracted third party? Yes* No

b. Are there any changes to the form in which organic products are purchased and sold (from bulk to tote bags, from tote bags to wholesale or retail bags, etc.), either by your own employees or by a contracted third party? Yes* No

Comments:

*** If yes to any of the questions above, please note that you need to apply to TCO Cert for *Certificate for PROCESSOR, NOT for TRADER.***

*** Also please complete and submit the TCO Cert "*Processor Organic System Plan*".**

5. Please identify any local, state, provincial, federal, or third-party certifications that you have, or inspections that have occurred at your operation. Include any certificates or inspections from local, provincial, or federal health departments. Not Applicable

SECTION 2: Product Storage

A. PRODUCTS

1. List all organic products your company is trading that are also traded in a non-organic form. Not Applicable

B. PRODUCT STORAGE Not Applicable

1. Do you maintain your own storage facility for the organic products you trade? Yes No

If yes, please also complete the questions below to provide full information concerning your storage area.

2. In what form is the product received? Be specific for each product.

dry bulk metal drums tote bags

cardboard drums foil bags liquid bulk other (specify):

3. Type of storage unit/area (Bins, Warehouse, Freezer, etc.)

Applicant Initials: _____ Date: _____

<p>4. a. Are cleaning or sanitizing materials used and stored? <u>If yes</u>, list the product name(s) and explain use:</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>b. Are any fungicides, fumigants, or pest control products used in the storage area? <u>If yes</u>, list product name(s) and describe use:</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>Please provide Labels, MSDS or technical information to TCO Cert for review and approval of the product(s) prior to use.</p>	
<p>5. If traps are used, please attach a facility map, showing the location of traps.</p>	<input type="checkbox"/> Not Applicable
<p>6. Who is responsible for pest control in the operation?</p> <p><input type="checkbox"/> In house <input type="checkbox"/> Contract pest control service*. Name the service provider:</p>	
<p>7. Are records kept of all pest management practices, and the use of pest control substances, and the storage and disposal of unlisted pest control substances (whether in house or contracted)?</p> <p><i>*Pest management must be under the control of the certified operator, even if pest control is contracted.</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>8. Are organic products and non-organic products stored in the same facility?</p> <p><u>If yes</u>, what measures are in place:</p> <p>a. to avoid commingling of the organic products with the non-organic products</p> <p>b. to ensure that organic products are clearly identifiable from the non-organic products</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>9. Does your operation contract any <u>Custom Service Provider(s) for Storage</u> of the organic products being traded?</p> <p><u>If yes</u>,</p> <p>a. Please list the names of the custom service provider(s):</p> <p>b. Please describe in detail the custom services these entities provide:</p> <p>c. Is the following documentation in place for the custom service provider(s):</p> <p>“Attestation of Compliance”?</p> <p>Is the documentation for the custom service provider(s) attached?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
<p>*Please note: If you are planning on using the custom services of a Contractual Service Provider which <i>does not hold an “Attestation of Compliance”, the service provider’s facility and activities need to be included in the annual inspection of your operation.</i></p>	

Applicant Initials: _____ Date: _____

SECTION 3: Maintaining Organic Integrity

All operations that handle, store and transport organic products are to maintain the inherent organic qualities of the product through strict adherence to the procedures and principles of the organic standards.

A. MONITORING	
1. Do you have a product recall system in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<u>If yes</u> , please summarize the basic system that is in place and if mock recall exercises have been successful.	
B. TRANSPORTATION OF ORGANIC PRODUCTS:	
Every measure must be taken to ensure that the integrity of organic products is not compromised in transit. The following information must accompany organic product:	
<ul style="list-style-type: none"> a. the name and address of the person or organization responsible for the production, preparation or distribution of the product b. the name of the product c. the organic status of the product d. information that ensures traceability, for example, the lot number. 	
1. The above information accompanies the organic products in transit.	<input type="checkbox"/> Yes <input type="checkbox"/> No
<u>If no</u> , please explain:	
2. Do you arrange for product transportation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. a. How do you ensure that transport units are free from prohibited products/residues prior to loading organic products (documented cleaning, new units, etc.) and do not pose a risk to the organic integrity of the product (s)?	
b. Is documentation maintained that verifies that during transportation, the integrity of the organic product (s) is maintained, and the conditions meet all pertinent COR requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Please specify documentation:	
4. Check steps taken to segregate organic products from non-organic products:	
<input type="checkbox"/> dedicated organic-only transport units <input type="checkbox"/> organic product shrink wrapped <input type="checkbox"/> pallet tags identifying "organic"	<input type="checkbox"/> use of pallets <input type="checkbox"/> separate area in transport unit <input type="checkbox"/> other (specify):
5. In what form are products shipped?	
<input type="checkbox"/> dry bulk <input type="checkbox"/> liquid bulk <input type="checkbox"/> tote bags <input type="checkbox"/> tote boxes <input type="checkbox"/> paper bags <input type="checkbox"/> foil bags	<input type="checkbox"/> mesh bags <input type="checkbox"/> metal drums <input type="checkbox"/> cardboard drums <input type="checkbox"/> cardboard cases <input type="checkbox"/> plastic crates <input type="checkbox"/> cans
	<input type="checkbox"/> bottles <input type="checkbox"/> plastic containers <input type="checkbox"/> other (specify):

Applicant Initials: _____ Date: _____

SECTION 4: Record Keeping

Organic standards require operators to maintain records and relevant supporting documentation concerning details of their storage and transport of organic products. Operators shall fully record and disclose all activities and transaction in sufficient detail to be easily understood and sufficient to demonstrate compliance with the standards. Records must be maintained for 5 years and be available for review.

1. How long do you keep your records?	
2. Do you maintain a Complaint Log?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Which of the following records do you keep for trading organic products?	
<input type="checkbox"/> purchase orders <input type="checkbox"/> contracts <input type="checkbox"/> receiving records <input type="checkbox"/> invoices <input type="checkbox"/> receipts <input type="checkbox"/> sales orders <input type="checkbox"/> sales invoices <input type="checkbox"/> bills of lading <input type="checkbox"/> transport unit inspection/cleaning forms	<input type="checkbox"/> sales summary log <input type="checkbox"/> audit control register <input type="checkbox"/> transaction certificates <input type="checkbox"/> organic certificates and product addendum <input type="checkbox"/> scale ticket <input type="checkbox"/> other (specify):
4. a. Are you using a lot numbering system for each lot of incoming organic product? If yes, explain the lot numbering system:	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Please describe in detail how traded organic products are being identified and how the identification code functions in tracking the product through your trading operation:	

SECTION 5: Additional Comments

Please provide any additional comments or information pertinent to this Organic System Plan.

Applicant Initials: _____ Date: _____

SECTION 6: Affirmation

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

Signature of Owner/Manager

Date (M/D/Y)

Please maintain copies of the Organic System Plan and other supporting documents as part of your record keeping system.

I have attached the following required documents (with name on each page):

- *Completed, signed, and dated Operator Licensing Agreement (OLA)
- *Storage Facility map (if applicable)
- *Pest management map of traps (if applicable)
- List of organic products traded
- List of suppliers, including: name of the Certification Body of the supplier, Organic Programs/Equivalencies to which the organic products are certified/verified.
- Certificates and Product Addendum for organic products traded
- Labels/Tags applied
- *Sample of audit trail documents, illustrating traceability of organic product, and demonstrating compliance
- Other (specify):

***Note: Documents need to be submitted only for new applicants or for changes.**

Applicant Initials: _____ Date: _____