



Wild Harvest Organic System Plan

Please complete this form in its entirety if you are new applicant. Sign this form and attach collection area maps and history sheets and all other supporting documents (soil, tissue or water tests, rented or recently purchased land histories, etc.) outlined in Section 9 with name on each page. Use additional sheets if necessary. Mark any sections that do not apply to your operation as "Not Applicable." Contact your Chapter Administrator or the Humboldt 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 use any.**

Contact Person's Name:

Secondary Contact Person's Name (if applicable):
--

PHYSICAL INSPECTION LOCATION INFORMATION	OPERATION'S CONTACT INFORMATION <input type="checkbox"/> 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:

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

1. Have you ever previously applied for organic certification by TCO Cert or another Certification Body? If <u>yes</u> , please list the name(s) of the Certification Body, year(s) of application, outcome of application.	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are you currently certified and transferring to TCO Cert from another Certification Body?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Do you have a copy of the current standards for all programs for which you are applying?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Do you understand the current organic standards for each program for which you are applying?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Applicant Initials: _____ Date: _____

SECTION 2: Wild Crop Management

1. Please describe the management practices that you are using to preserve wild species and avoid disturbance of the environment.	
2. Do any diseases affect your harvestable crops? <u>If yes</u> , please identify the disease(s) and your strategies to deal with them.	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Do insects/pests attack your harvestable crop? <u>If yes</u> , please describe the strategies being used to control insects/pests.	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Do you have any water containment issues in your harvest area? <u>If yes</u> , please describe.	<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION 3: Collection Area

1. Please describe how the boundaries of organic and non-organic collection areas are marked or otherwise indicated to collectors (unique geographic features, streams, signs, etc.).	
2. What measures are taken to ensure that the collection area is not adversely affected by collection and that growth of the wild crop and the surrounding environment can be sustained?	
3. How do harvesting or gathering methods affect the yield of the ecosystem? <input type="checkbox"/> exceed sustainable yields <input type="checkbox"/> maintain sustainable yields <input type="checkbox"/> have negligible effect on sustainable yields <input type="checkbox"/> other (specify):	
4. Are any sources of contamination (large conventional farms, industrial complexes, sewage discharge areas, large commercial docks, golf courses, etc.) close to the collection area? <u>If yes</u> , please describe and indicate distance from collection area.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Applicant Initials: _____ Date: _____

<p>3. a. What types of containers are used for harvesting?</p> <p>b. Is food grade documentation in place for the containers?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>4. Are the containers new or used?</p> <p><u>If used:</u></p> <p>a. Have the containers been cleaned prior to use?</p> <p>b. Is the cleaning documented?</p>	<p><input type="checkbox"/> New <input type="checkbox"/> Used</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>D. POST-HARVEST HANDLING: <i>Standards require that post-harvest handling procedures do not contaminate organic products with non-organic crops or prohibited materials.</i></p>	
<p>1. Please describe your post-harvest handling procedures and equipment.</p>	
<p>2. Is the post-harvest area and/or equipment used for organic production?</p> <p><u>If no:</u></p> <p>a. Describe measures taken to prevent commingling and contamination.</p> <p>b. Are these measures documented?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>3. Do you use water for washing your harvested crop, or for any other purpose?</p> <p><u>If yes</u>, what is the source of water used for washing harvested crops?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p><i>If using land source water to wash the harvested crop, please provide a current water test at time of inspection.</i></p>	
<p>E. PACKAGING:</p>	
<p>1. Check types of packaging material used:</p> <p><input type="checkbox"/> bulk <input type="checkbox"/> paper <input type="checkbox"/> cardboard <input type="checkbox"/> wood <input type="checkbox"/> PVC plastics <input type="checkbox"/> metal <input type="checkbox"/> foil</p> <p><input type="checkbox"/> plastic <input type="checkbox"/> waxed paper <input type="checkbox"/> aseptic <input type="checkbox"/> natural fiber <input type="checkbox"/> synthetic fiber <input type="checkbox"/> glass</p> <p><input type="checkbox"/> other (specify):</p>	
<p>2. Is packaging food-grade and documented as such? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>3. In what form are finished products shipped?</p>	
<p>4. Has packaging been treated with any substance that could lead to contamination problems for your organic products?</p> <p><u>If yes</u>, please list full product names of substances used.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

Applicant Initials: _____ Date: _____

F. PRODUCT STORAGE: Operators must keep organic and non-organic products in separate storage areas and prevent commingling and contamination. Storage records must be maintained and kept current. No organic product stored

Identify all storage locations (including any rented space not under your control). Please add rows (for fillable form) or attach additional sheets if necessary.

Storage ID	On-Site or Off-Site (if off-site, please note location)	Stored Products (specific product in storage)	Type of Storage (bin, cooler, etc.)	Capacity	Organic Only (OO) or Not Dedicated (ND)

1. Do you use the same storage areas for organic and non-organic products? Yes No
 If yes:
 a. Please describe how you segregate and identify.

 b. Are the storage units clearly labeled for organic use? Yes No

2. How do you ensure storage units are free from non-organic residues/prohibited material prior to storage of organic crops?

3. How do you prevent/control insect and/or rodent pests in storage areas? Not applicable

 If applicable, please list full product names of any substances used.

G. TRANSPORTATION: Not applicable

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

2. Describe how organic products are transported.

Applicant Initials: _____ Date: _____

<p>3. What steps are taken to protect the integrity of organic products during transport?</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"><input type="checkbox"/> dedicated organic only</td> <td style="width: 50%; border: none;"><input type="checkbox"/> inspecting transport units prior to loading</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> cleaning transport units prior to loading</td> <td style="border: none;"><input type="checkbox"/> use of Off-Farm Transportation Cleaning Affidavits</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> letters/contract with transport company stating organic requirements</td> <td style="border: none;"><input type="checkbox"/> other (specify):</td> </tr> </table>	<input type="checkbox"/> dedicated organic only	<input type="checkbox"/> inspecting transport units prior to loading	<input type="checkbox"/> cleaning transport units prior to loading	<input type="checkbox"/> use of Off-Farm Transportation Cleaning Affidavits	<input type="checkbox"/> letters/contract with transport company stating organic requirements	<input type="checkbox"/> other (specify):
<input type="checkbox"/> dedicated organic only	<input type="checkbox"/> inspecting transport units prior to loading					
<input type="checkbox"/> cleaning transport units prior to loading	<input type="checkbox"/> use of Off-Farm Transportation Cleaning Affidavits					
<input type="checkbox"/> letters/contract with transport company stating organic requirements	<input type="checkbox"/> other (specify):					
<p>4. Please list documents that are accompanying organic products in transport.</p>						

SECTION 5: Collector Infrastructure & Organization Not Applicable

Standards require that records disclose all activities and transactions of the operation, be maintained for 5 years, demonstrate compliance with the applicable Standards and be available for review. Certification standards also require that records be sufficient to allow for organic products to be tracked from sale to the field/location where they were produced/harvested.

<p>1. Who is the overall collection/harvester manager?</p>	
<p>2. What instructions are given to the collectors/harvesters regarding the collection area and organic standards? Please attach a copy of these instructions.</p>	
<p>3. Please describe how collectors/harvesters are supervised to follow instructions and how compliance with instructions is being enforced.</p>	
<p>4. Please describe the measures taken against hired collectors/harvesters that do not follow instructions documented?</p>	
<p>5. Do you maintain contracts with collectors /harvesters and supervisors? If yes, please attach a copy as an example.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>6. Do you maintain a complete and current list of all collectors/harvesters and their supervisors? Please attach a copy of the list.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION 6: Record Keeping System

*Standards require that records disclose all activities and transactions of the operation, be maintained for 5 years, and demonstrate compliance with the applicable Standards/regulations. Organic products must be tracked back to the field/location where they were produced/harvested. In addition, please reference the **Wild Plants Harvesting Certification Policy** for further information on required audit trail records for wild harvest operations. All records must be accessible to the Verification Officer.*

<p>1. How long do you keep your records?</p>	
<p>2. Do you maintain a Complaint Log?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No

Applicant Initials: _____ Date: _____

3. Which of the following records do you keep for organic production?	
<input type="checkbox"/> field/collection area maps <input type="checkbox"/> collection area activity log(s) <input type="checkbox"/> collection area history sheets (previous three years) <input type="checkbox"/> documentation of previous area use for rented and/or newly purchased area <input type="checkbox"/> equipment cleaning records <input type="checkbox"/> sales records (purchase order, contract, invoice, cash receipts, cash receipt journal, sales journal, etc.) <input type="checkbox"/> shipping records (invoice, bill of lading) <input type="checkbox"/> audit control summary/register	<input type="checkbox"/> Transaction Certificates <input type="checkbox"/> copy of Organic System Plan <input type="checkbox"/> harvest records that show field/collection area numbers or names, harvest date, harvest amounts, and names of collectors <input type="checkbox"/> clean transport records <input type="checkbox"/> storage records that show storage location, storage identification, area identification, amounts stored, and cleaning activities <input type="checkbox"/> monitoring records (soil tests, tissue tests, water tests, quality tests, observations) <input type="checkbox"/> paid labor records <input type="checkbox"/> complaint log <input type="checkbox"/> other (specify):
4. Type of marketing:	
<input type="checkbox"/> farmers market <input type="checkbox"/> direct to retail <input type="checkbox"/> CSA/subscription service <input type="checkbox"/> wholesale <input type="checkbox"/> on-farm retail <input type="checkbox"/> contract to buyer <input type="checkbox"/> bulk commodities to processor <input type="checkbox"/> other (specify):	
5. Are labels used on any of your products?	
<u>If yes, please submit samples for each type of label that is used</u>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
6. Please provide a sample of the lot number used in your operation and describe what each component means.	

SECTION 7: Affirmation

I affirm that all statements made in this application are true, correct, and complete.	
Signature of Operator	Date (M/D/Y)
Please maintain copies of this Organic System Plan and other supporting documents as part of your record keeping system.	
Submit completed form, including the Wild Harvest Organic System Plan Annual Update, fees and supporting documents to your Chapter Administrator for Chapter Members or your Certification Coordinator for Direct Associates.	

Applicant Initials: _____ Date: _____