



Operation Name: _____ **Date:** _____

A. Please help us understand your organic operation. Describe or attach a description of your organic business or plans, including growing, crops ownership, marketing, and sales. Please provide details about your organic production such as type of farm, marketing plans, whether you are a contract or independent grower, etc. Description attached

B. Please complete the following table to identify the sections of the CCOF Organic System Plan (OSP) that apply to your operation. **Clearly mark each activity that matches your plans or current organic activities. For each applicable activity please complete the OSP section(s) indicated. You DO NOT need to complete OSP sections that are not applicable to your operation.** This form may need to be updated as your activities change.

Organic Activities (check all that apply)		Required OSP Section(s):
1	<input type="checkbox"/> I am applying for CCOF organic grower certification.	1.0: Operation Information G1.1: Activities Checklist (this form)
2	<input type="checkbox"/> I am enrolling in the CCOF Global Market Access Program and may export organic products.	GMA-G: Global Market Access Program - Grower
3	<input type="checkbox"/> I/We grow crops.	G2.0: Parcel Information (for each non-adjacent field) G4.2: Natural Resources G6.0: Production G5.0: Pest Management G7.0: Labeling G5.1: Input Materials G8.0: Record Keeping
4	<input type="checkbox"/> I/We grow crops in the ground.	G4.0: Soil Management
5	<input type="checkbox"/> I/We plant seed, annual, or perennial planting stock.	G3.0: Seeds & Planting Stock
6	<input type="checkbox"/> I/We grow seedlings or greenhouse crops.	G3.1: Seedlings, Transplants & Greenhouses
7	<input type="checkbox"/> I/We use manure or compost that contains manure.	G4.1: Compost & Manure
8	<input type="checkbox"/> I/We own the crop at harvest.	G6.1: Harvest & Transport
9	<input type="checkbox"/> I/We store crops.	G6.2: Storage
10	<input type="checkbox"/> I/We use synthetic herbicides, insecticides or rodenticides where organic crops are stored.	G6.3: Synthetic Pesticides in Storage
11	<input type="checkbox"/> I/We perform simple post-harvest handling of only our own organic crops at our own facility/location.	G6.4: Simple On-Farm Post Harvest Handling
12	<input type="checkbox"/> I/We sell non-organic and/or other operations' products directly to consumers (CSA, farm stand, farmers' market, u-pick, website sales, etc).	G 6.5: Direct Marketing
13	<input type="checkbox"/> I/We store crops at one or more non-certified facilities that does not open, re-label or process them.	"Storage Facility Affidavit" (for each facility)
14	<input type="checkbox"/> I/We act as a broker, trader, or purchase products for sale under our own brand or label (private label owner).	H2.5: Off-Site Handling Profile
15	<input type="checkbox"/> I/We process products or perform post-harvest handling at one or more non-certified facilities.	H1.1: Handler Checklist H2.0: Product Profile (for each product) H2.3: Facility Profile (for each facility) H4.0: Organic Practices (for each facility) H5.0: Audit Trail for Handlers (for each facility) V2.0 and 2.1: Wine Profile & Label approval
16	<input type="checkbox"/> I/We are applying for certification of livestock.	L2.0-L7.0: Livestock OSP