CCOF
Organic Certification Trade Association Education & Outreach Political Advocacy

WITHDRAWAL FORM

► **For your convenience, an E-form version of this section/document is available online at www.ccof.org/forms.php.**

OPERATION & WITHDRAWAL INFORMATION:

Operation Name: _____

To be Withdrawn (Please check one only):

☐ **ENTIRE PARCEL** ☐ **PORTION OF PARCEL (Complete parcel information below)**

☐ **ENTIRE OPERATION** Effective Date: _____

If entire operation, please list your reason for withdrawal: _____

SIGN & DATE (Must be signed by an authorized contact of the operation):

_____

Name Signature: Date

PARCEL INFORMATION

Please fill out the following for each parcel or portion of a parcel being withdrawn.
If you are withdrawing only a portion of the parcel, a detailed map showing borders and acreage remaining in the program must be submitted.

Parcel Name or code: _____

Parcel Location _____

Withdrawal effective date: _____ Acres Withdrawn: _____

Are you withdrawing the ENTIRE PARCEL from CCOF? ☐ Yes ☐ No, acres remaining: _____

Reason for Withdrawal:
- ☐ No longer own/lease land
- ☐ Other (explain): _____
- ☐ Prohibited material application, date: M ____ D ____ Y ____

Material(s) applied:

Parcel Name or code: _____

Parcel Location _____

Withdrawal effective date: _____ Acres Withdrawn: _____

Are you withdrawing the ENTIRE PARCEL from CCOF? ☐ Yes ☐ No, acres remaining: _____

Reason for Withdrawal:
- ☐ No longer own/lease land
- ☐ Other (explain): _____
- ☐ Prohibited material application, date: M ____ D ____ Y ____

Material(s) applied:

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