CCOF CERTIFICATION CONTRACT

► Please keep a copy of all documents submitted to CCOF for your records.

► See **www.ccof.org/faq** or contact us with questions. Find all forms at **www.ccof.org/resources/resource-library**.

► **Complete and send the following to apply for certification:**

- CCOF Certification Contract (this 6-page form)
- Organic System Plan (OSP) forms and attachments:
  - Carefully review the Organic System Plan (OSP) Guides applicable to your operation, and complete all forms indicated:
    - **Guide to Grower OSP Forms**
    - **Guide to Handler OSP Forms**
    - **Guide to Livestock Producer OSP Forms**
    - **Guide to Retail Establishment OSP Forms**
- $350 nonrefundable fee due with application:

  ☐ My credit or debit card information is on page 6 ☐ I have included another form of payment

  ☐ I have a discount code: _____

Email to: inbox@ccof.org Or Mail to: CCOF, 877 Cedar Street, Suite 248, Santa Cruz, CA 95060

► How did you hear about CCOF? _____

A. Operation Information

Public information about certified operations is made available at www.ccof.org/resources/member-directory and print directories released by CCOF CS, as well as by the National Organic Program in the Organic Integrity Database (OID). For a complete list of the information provided, please read the "Confidentiality and Public Information, & Data Reporting" chapter in the CCOF Certification Services Program Manual.

1) Registered Legal Business Name: _____

Legal "Doing Business As" (DBA), if applicable): _____

Phone: _____ Website (Optional): _____

Public-Facing Email (Optional): _____

Your public-facing email will be displayed on the OID website and NOP organic certificate only. This email will not receive CCOF communication.

2) Registered Legal Business Address:

Address: _____ City: _____

State/Province: _____ Zip/Postal Code: _____ Country: _____

3) Explain whether the DBA listed above appears in your audit trail records and under what circumstances, e.g., DBA is only used for certain products or markets, or for all products and markets. *DBA names can only be included on your organic certificate if you are operating the same certified legal business entity under a different name. Describe whether the DBA is registered at the state or local level.*

☐ Description attached

_____

4) Legal Information:

Federal Tax ID#: _____

☐ Sole Proprietorship. Owner's Name: _____

☐ Partnership. Owner's Names: _____

☐ Corporation –OR– ☐ LLC. State of incorporation: _____

Name of owners, or officers and their titles: _____

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5) Physical Location of Your Operation *(required if different from your registered legal business address)*

Where organic production occurs, or records are kept (for importer/broker/trader/private label owners). Your physical location will be inspected and both your physical and mailing address will be listed on your NOP organic certificate. If you do not occupy, lease, or own this location, you are responsible for ensuring that CCOF, CDFA, or USDA can access the location during an unannounced inspection.

☐ Identical to registered legal business address above.

Address: _____ City: _____

State/Province: _____ Zip/Postal Code: _____ Country: _____

6) Mailing Address *(required if different from your registered legal business address or physical address)*

☐ Identical to registered legal business address above.

☐ Identical to physical location above

Address: _____ City: _____

State/Province: _____ Zip/Postal Code: _____ Country: _____

7) Billing Address *(optional)*

Address: _____ City: _____

State/Province: _____ Zip/Postal Code: _____ Country: _____

8) Preferred language: ☐ English ☐ Español (mayoría de los documentos de CCOF disponibles en español)

9) Preferred method of written communication: ☐ Email ☐ Postal Mail

B. Organic Operation Summary

1) Help us understand your organic operation. Describe or attach a summary description of your organic business or plans.

Your full details will be on the complete Organic System Plan you submit.

☐ Description attached

_____

2) How frequently do you review your entire Organic System Plan to verify it is effectively implemented, and ensure it accurately reflects all your practices and procedures?
You must provide CCOF with an adequate response to this question.

☐ Annually ☐ Quarterly ☐ Monthly

☐ Other (describe): _____

C. Contact Information

1) **Primary Contact**

Please designate one person as primary contact. This person's name will be listed in the CCOF online directory and in the National Organic Program Organic Integrity Database (OID). This person should be knowledgeable of your operation, your Organic System Plan, your operation's activities, applicable organic standards, and have the authority to act on behalf of the operation. **All communication will be sent to this contact.**

Name: _____ Title: _____

Phone: _____ Email: _____

2) **Additional Contacts**

Please list all people at your operation authorized to conduct inspections, meet with inspectors, modify the OSP, or otherwise act on behalf of the operation. Check the CC box for contacts that should receive all communication along with the Primary contact listed above. Attach an additional list if necessary.

CC: ☐

_____

Name/Title Phone number Email

ccof@ccof.org www.ccof.org (831) 423-2263 (831) 423-8528

CCOF CERTIFICATION CONTRACT

CC: ☐

Name/Title | Phone number | Email

CC: ☐

Name/Title | Phone number | Email

D. Certification Program Information

1) What types of products does this operation grow, produce, process, handle, or sell? Check one:
☐ Both organic and nonorganic product(s) ☐ Organic product(s) only ☐ Organic and transitional product(s)

2) Please indicate any markets you export or plan to export to, directly or indirectly (as an ingredient or through brokers/traders etc.).
☐ Canada ☐ Europe/UK ☐ Japan ☐ Korea ☐ Taiwan ☐ Switzerland ☐ Mexico
☐ Other: _____

3) By what date do you anticipate the need for certification? *Month/Day/Year:* _____

*The certification process could take 12 weeks or longer. If you need a shorter timeline you can enroll in the **Expedited Certification Service**.*

4) Is this operation currently certified organic?
☐ No ☐ Yes, attach certificate and completed **Certification Transfer Form**.

5) Has this operation or any responsibly connected person with this operation ever applied for, or been granted, organic certification (NOP only)? *NOP 205.2 "Responsibly connected" - Any person who is a partner, officer, director, holder, manager, or owner of 10 percent or more of the voting stock of an applicant or a recipient of certification or accreditation.*
☐ No. Skip to section E. ☐ Yes. Complete this section and provide name of certifier: _____

a) Was the operation's or any responsibly connected person with this operation's certification or the certification of fields or products ever suspended or revoked? ☐ Yes ☐ No
b) Did the operation surrender certification with outstanding non-compliances or conditions? ☐ Yes ☐ No
c) Was the operation's application for organic certification ever issued a denial? ☐ Yes ☐ No
d) Did the operation withdraw its application for certification with outstanding non-compliances? ☐ Yes ☐ No

6) If you answered yes to a, b, c, or d above, please list the years and organic certification agencies, attach a copy of all relevant letter(s) and a description of all corrective actions:
Year(s): _____ ☐ Letters Attached
Corrective actions taken: _____

E. California Organic Registration

☐ Not applicable, not based in California ☐ Not applicable, retail or restaurant

Operations engaged in production of organic products in California must register with the state prior to the first sale. Refer to the **CDFA Organic Program** webpage or contact your local County Agricultural Commissioner to determine which agency to register with; CDFA or CDPH. List your registration number below (you may only have one registration number). *California Organic Products Act of 2003*

1) CDFA California Organic Program Registration number (grower, post-harvest handling, produce broker). *Example: 12-123456*:

_____

2) CDPH Department of Health Services Organic Registration number (processing). *Example: 12345*:

_____

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F. Annual Certification Fee

CCOF will estimate and invoice your certification fee based on the information provided below and collected at your initial and subsequent inspections. Please refer to the **CCOF Certification Services Program Manual** for fee information. **If you do not provide the information requested below, you cannot move forward in the certification process, and your inspection will be delayed.** Certification **fees must be paid prior to issuance of certification.** Certification fees are confirmed upon application acceptance and may change. **Report all monetary amounts in U.S. dollars (USD).**

1) What is your current or expected total value of certified organic production/sales/services (gross, next 12 months).

_____

a) **If you are a Farm or Livestock operation:** What is your current or expected cost of certified organic product purchased, such as seed, feed, transplants (next 12 months) and service fees charged by certified organic co-processors, custom grazing, etc. This will be subtracted from the amount in line 1 to determine your annual certification fee.

_____

b) **If you are a Handler, Processor, Private Label Brand Owner, Broker, Importer or other non-farm business:** What is your current or expected cost of certified organic ingredients/products purchased (next 12 months) and service fees charged by certified organic co-processors. This will be subtracted from the amount in line 1 to determine your annual certification fee.

_____

c) **If you are a Retail or Restaurant operation:** What is your current or expected number of stores (next 12 months).

_____

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Operation Name: _____ **Date:** _____

G. Certification Contract and Agreement

► **The following must be signed by a legally authorized representative of an operation and by all applicants for certification by CCOF CS (CCOF).**

By signing this document, the applicant acknowledges that it has received, has read, fully understands, and agrees to be bound by the terms of the CCOF CS Certification Manuals and further agrees to:

1) **For operations and any responsibly connected person seeking NOP certification:** Comply with all State and applicable organic production and handling regulations as described in rules issued by the United States Department of Agriculture Agricultural Marketing Service (including those regulations in 7 CFR Part 205 and the NOP Handbook as published on the USDA AMS NOP website).
2) **For operations seeking COR certification:** Comply with all Province and applicable organic production and handling regulations as described in rules issued by the Canada Food Inspection Agency
3) **For operations seeking CCOF GMA:** Comply with the requirements set forth in the CCOF GMA Manual.
4) **For all operations:** Comply with and strictly adhere to all CCOF standards, procedures and policies set forth in the CCOF Manuals including but not limited to the following:
   a) Establishing, implementing, and updating annually an Organic System Plan that will be submitted to CCOF.
   b) Permitting on-site inspections at least once per calendar year with complete access to the production or handling aspects of the operation, including non-certified production areas, structures, or offices by CCOF. These inspections may be announced or unannounced at the discretion of CCOF or as required by an accreditation authority, government entity with jurisdiction, or other governing body.
   c) Maintaining all records applicable to the organic operation for not less than five (5) years beyond their creation.
   d) Allowing authorized representatives of CCOF, an accreditation authority, government entity with jurisdiction, or other governing body access to these records under normal business hours for review and copying to determine compliance with the applicable standards, regulations or governing law.
   e) Understanding CCOF may use subcontractors for inspecting, testing and other technical services, as necessary.
   f) Submitting to CCOF any applicable fees as described on the most current fee schedule. Failure to pay fees as described in the Certification Services Program Manual may result in termination of this contract and surrender of certification.
   g) Immediately notifying CCOF 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.
   h) Immediately notifying CCOF of any change in your certified operation or portion of it that may affect its compliance with the applicable standards, regulations or governing law.
   i) Using the CCOF name and seal(s) only in accordance with CCOF standards and ceasing all use of CCOF's name and seal upon notice by CCOF. Any use of CCOF's names or marks, without the express consent of CCOF, is strictly prohibited and constitutes an infringement of CCOF's rights. CCOF shall be entitled to its reasonable attorney's fees and costs incurred in bringing any civil action, arbitration, or mediation to enforce its rights to its names or marks.
   j) Destroying or returning to CCOF all packaging and certificate(s) upon notice from CCOF.
   k) Understanding that the use of the CCOF name and seal must be in accordance with the CCOF standards.
   l) Authorizing CCOF to list certified parcel crops, products, services, and acreage on my certificate and in the CCOF Directory.
   m) Immediately ceasing all claims of CCOF certification associated with this operation, and destroying or returning all certificates, labeling, and marketing material containing reference to CCOF in the event that this operation withdraws, or its certification is suspended or revoked.
   n) Agreeing to be legally bound by the terms of the paragraphs entitled “Consent to Electronic Transmission”, “Governing Law”, “Consent to Jurisdiction”, “Indemnification” and “Limit of Liability” as described in the CCOF Certification Services Program Manual.
   o) Agreeing to be legally bound by the “Standards of Behavior” detailed in the CCOF Certification Services Program Manual.

I, the owner or legally authorized representative of the operation, acknowledge the above General Requirements for CCOF certification and understand that any willful misrepresentation may be cause for denial of an application and sanctioning of certification. I authorize the person(s) listed above to act on behalf of my company in establishing or maintaining organic certification. I attest that all information in this application is true and accurate to the best of my knowledge. My handwritten signature or typed name entered in the signature field below constitutes my legal signature.

Name/Title **Signature (handwritten or typed)** **Date**

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Operation Name: _____ **Date:** _____

H. Credit or Debit Card Payment Information

Amount: $		
Card Billing Address:		
City:	State:	Zip code:
Name on Card:	Phone Number:	
Card Number: *CCOF accepts Visa, Master Card, Amex, Discover, or UnionPay credit or debit card types*		
Expiration Date (mm/yy): /	Security Number *(The three-digit code on the back of your card. For Amex, this is the four digits on the front)*:	
By providing credit or debit card information and signing the Certification Contract and Agreement, you authorize CCOF to charge the card provided for your application fee. A 3% surcharge will be added for credit card transactions. Debit card transactions are not subject to a surcharge.		

I. Public Profile Information (optional)

Use these options to describe your operation. This information will be used to populate your online directory profile and to help CCOF promote your unique operation.

1) Online Presence:

☐ Facebook: _____ ☐ Linkedin: _____

☐ Instagram: _____ ☐ Pinterest: _____

☐ X (formerly Twitter): _____ ☐ Youtube: _____

2) Sales Methods:

☐ Community Supported Agriculture: _____

☐ Copacking Services: _____

☐ Export/Import: _____

☐ Farmer's Market: _____

☐ Ingredients: _____

☐ Internet: _____

☐ Produce Stand: _____

☐ Retail: _____

☐ Tasting Room/Winery: _____

☐ U-Pick: _____

☐ Wholesale: _____

3) Apprenticeship Options:

☐ Apprenticeship Offered: _____

Terms: ☐ Board ☐ Internships ☐ Wage ☐ Other: _____

4) Company Statement (Promotional/sales/informational or public statement about your company):

_____

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