



Forms, Documents, and Sample Letters for Organic Producers

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By George Kuepper,
NCAT Agriculture
Specialist;
Jim Riddle and
Joyce Ford,
Organic
Independents;
Cissy Bowman,
Indiana Certified
Organic;
and Meg Moynihan,
Minnesota
Department of
Agriculture
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Organic farmers and ranchers must provide a wide range of documents to retain certification by the National Organic Program. This publication provides sample copies of some common forms, letters, maps, and other documents in current use.

The Purpose and Use of These Forms and Documents

This publication contains draft letters, forms, and other documents that can aid producers in obtaining organic certification and remaining in compliance with the National Organic Standard. We are grateful to Organic Independents, Indiana Certified Organic, and the Minnesota Department of Agriculture for granting per-

mission to reprint and adapt these materials. Feel free to copy or adapt any of these documents to meet your needs.

This set of forms and documents contains the following.

- A. Land Use History Verification. Use to verify that land has not received applications of prohibited substances in the previous 36 months. Also use this form when you have rented or owned the land for less than 36 months. In such cases, the landlord or previous owner must fill out and sign the form.
- B. Neighbor Notification Letter. Use in conjunction with the “verification of adjoining land use” form to establish the integrity of fields bordering low-risk conventional land. Depending on the circumstances, these documents can eliminate the need for buffer zones.
- C. Adjoining Land Use Verification. See “neighbor notification letter” above. Two options are presented.
- D. Clean Transport Affidavit. Required of producers and handlers who are responsible for transport of organic products.
- E. Complaint Log. This log is used to track complaints and show actions taken, as required under ISO 65.

Related ATTRA Publications

Organic Field Crops Documentation Forms
www.attra.ncat.org/attra-pub/cropforms.html

Organic Livestock Documentation Forms
www.attra.ncat.org/attra-pub/livestockforms.html

Organic Orchard, Vineyard, and Berry Crop Documentation Forms
www.attra.ncat.org/attra-pub/orchardforms.html

NCAT's Organic Crops Workbook
www.attra.ncat.org/attra-pub/PDF/cropsworkbook.pdf

NCAT's Organic Livestock Workbook
www.attra.ncat.org/attra-pub/PDF/livestockworkbook.pdf

Creating an Organic Production and Handling System Plan: A Guide to Organic Plan Templates
www.attra.ncat.org/attra-pub/handlingsys.html

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- F. **GMO-Free Affidavit–Production.** Used to verify non-use of genetically engineered materials on the farm.
- G. **GMO-Free Affidavit–Input Purchases.** Used to verify the absence of genetically modified organisms in purchased inputs.
- H. **Transaction Certificate (TC) Authorization.** Producers, certifiers, and buyers use TCs to track organic products from farm to final buyer. TCs are part of a good audit trail, though not all certifiers require them.
- I. **Sample Farm Inspection Report Form.** An example showing the kinds of information reported to certifiers following a farm or ranch inspection.
- J. **Sample Farm Map.** A farm or ranch map is required when applying for certification. This example shows the level of required detail.
- K. **Exempt Organic Farm Affidavit.** For use by farms that market \$5000 or less of organic products annually and do not choose to become certified. This document attests to exempt status.

These documents may be copied and distributed freely. They may be downloaded from the ATTRA Web site at www.attra.ncat.org. Additional hardcopies are also available by writing ATTRA at P.O. Box 3657, Fayetteville, AR 72702, or by calling 1-800-346-9140 toll-free.

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Land Use History Verification

Organic Producer Name: _____ **Crop Production Year:** _____

I, _____, declare that the parcel(s) of land described below were farmed by me or were under my control during the crop years of _____ to _____. I also declare that during this time, to the best of my knowledge, there were no herbicides, pesticides, fungicides, fungicide treated seed, synthetic fertilizers, or other prohibited materials applied to this land.

Description of land parcel(s) by field #, section #, township, and county (or other regulatory description):

Number of acres in parcel(s): _____

If any materials were applied to any of these fields, describe what was applied, the specific date of application, and field # or parcel.

Field # or Parcel	Material Applied	Date

I submit that the above is true and accurate on this date of

Name (printed): _____

Signature: _____ Date _____

NEIGHBOR NOTIFICATION LETTER

(Date)

(Name and address)

Dear (Name):

I am currently a certified organic farmer with _____ (name of your certifying agent), managing my fields consistent with the USDA National Organic Standard.

Since you are an adjoining property owner, I need to inform you of my plans and ask for your help. If you plan to use synthetic fertilizers, pesticides, and/or genetically engineered crops on land that adjoins my fields, please take precautions when transporting or spraying to prevent overspray, chemical or genetic drift, or run-off onto my farm. If chemical drift is found on my organic crops or fields, I may be required to wait up to three years before using these fields for organic production. This could also cause loss of my organic certification and/or loss of the organic premium for crops grown on affected fields.

(Optional Paragraph) I understand that you are currently not using any synthetic fertilizers, pesticides, and/or genetically engineered crops on the (field or pasture) that borders my farm to the _____ (east, west, north or south) and adjoins my field # (_____). If you are willing to sign the enclosed Verification Of Neighboring Land Use form, I will not be required to maintain a buffer zone between your field and mine. Also indicate the location of your adjoining fields on the map enclosed. Please return the signed statement as soon as possible.

If you would like to know more about my organic certification or have any other questions, please call. Thanks for your help.

Sincerely

(Signature of organic farmer)

Enc.: Verification of adjoining Land Use form
Farm map

ADJOINING LAND USE VERIFICATION

(Optional Form A)

Name of Neighbor _____

Address _____

Phone # _____

I verify that the following fields/areas under my management have had no synthetic fertilizers, herbicides, insecticides, or genetically engineered crops applied in the last 12 months. I have no plans to use these synthetic products on these fields in the future 12 months. In the event that I do use any synthetic fertilizers, herbicides, insecticides, or genetically engineered crops, I will inform

(name of organic farmer) of my plans.

Specific Field Identification: (The organic farmer should indicate the organic field ID # that adjoins a neighbor's fields before sending this document to that neighbor and indicate fields on the accompanying field map).

Organic field ID #	Neighbor's field identification
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

I verify that the above information is true and accurate.

Signature of Neighbor

Date Signed

ADJOINING LAND USE VERIFICATION

(Optional Form B)

_____ I verify that I am the farmer of Location _____

_____ I am aware that my neighbor, _____ (name), whose land borders my farm(s) on the _____ (N,E,S, and/or W) side(s) is certified organic. I also understand that it is important to his or her business that organic crops and land be protected from contact with certain substances—such as synthetic fertilizers, herbicides, insecticides, fungicides, other pesticides and genetically modified organisms—that are not allowed in organic farming. Buffer zones are required to be sufficient to prevent contamination.

The following statements on this affidavit will help the organic certifier determine what type of buffer the organic farmer named above needs to maintain. Please check all that are true.

_____ I am an organic farmer, with current certification by _____(name of certifier).

The materials I routinely use on my farm include the following:

_____ synthetic fertilizers

_____ herbicides

_____ insecticides

_____ fungicides

_____ treated wood

_____ other (specify)

_____ I do not use any of the above materials on my farm

_____ I use the materials checked above, but not on the fields adjoining my neighbor's property.

_____ The distance between where I use the materials checked above and my organic neighbor's property is _____ feet.

_____ I agree to notify my organic neighbor when I plan to use these materials on adjacent land.

Signature of neighbor

Date

Farm Name _____

Address _____

Phone number _____

CLEAN TRANSPORT AFFIDAVIT

Grower/Business Name: _____

Date transport unit loaded: _____

1. Type of transport: farm wagons farm truck bulk semi trailer
 common carrier tanker other (specify) _____

2. The transportation was arranged by: grower buyer other _____

3. Is the form of transportation only used for organic products? yes no
 If no, state products transported prior to organic: _____

4. Transport unit was inspected and found to be free of:
 foreign odors residues conventional products
 other substances which may compromise organic integrity

5. List transport unit ID # with the following information:

Transport unit /vehicle identification	Organic crop and Lot #	Check (√) if vehicle was inspected prior to loading organic product	Cleaning method: Check (√) all that apply. If Other, describe method.				
			Swept	Vacuum	Air blown	Washed	Other

I hereby certify that the above transport units were inspected and cleaned thoroughly using the method indicated to protect the integrity of the organic products being transported.

Signature

Date

COMPLAINT LOG

Organic Producer Name: _____

Complaint	Date Received	Source of Complaint	Action Taken	Date of Action	Employee

GMO-Free Affidavit: Organic Production

I, _____, do hereby attest that I did not knowingly apply or use any genetically modified organisms (GMOs) or products derived from genetically modified organisms, such as GE seed, inoculants, or biopesticides, in any aspect of my organic production. I have taken precautions to prevent GMO contamination and commingling and have included a description of the documentation I will retain in my organic plan.

Signed: _____

Please Print Name: _____

Farm/Operation Name: _____ e-mail: _____

Certificate Number: _____ Date: _____

Address: _____

GMO-Free Affidavit: Agricultural Inputs

I, _____, do hereby attest that _____

_____ [product name] does not contain GMOs (AKA genetically manipulated organisms, genetically engineered products, or biotech products) nor has it been manufactured using genetically engineered organisms.

Signed: _____ Date: _____

Please Print Name: _____

Business Name: _____

Address: _____

Phone: _____ E-mail: _____

TRANSACTION CERTIFICATE AUTHORIZATION DOCUMENT

BUYER'S NAME: _____ DATE: _____

ADDRESS: _____

PHONE: _____ FAX: _____

PRODUCER/PROCESSOR #: _____ DATE OF TRANSACTION: _____

PRODUCT/ COMMODITY	CROP YEAR	QUANTITY	UNIT OF MEASURE	US \$ PAID (Optional)	LOT#	PRODUCER # (PROCESSORS ONLY)
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

OTHER PRODUCER NUMBER/TC NUMBER, IF THE SELLER IS A CORPORATE OPERATOR

SELLER NAME: _____

ADDRESS: _____

PHONE: _____ FAX: _____

PRODUCER #: _____ SELLER SIGNATURE: _____

ALL INFORMATION REQUESTED ON THIS DOCUMENT MUST BE COMPLETED. (This TC is not complete until it is returned to the certifier and signed by an authorized representative.)

Signature of Certifier Representative _____

Sample Farm Inspection Report Form

Certifier:

Farmer/Farm:

Address:

Phone:

Fax:

E-mail:

Producer #:

Date of Visit:

Start Time:

Stop Time:

Independent Inspector:

Inspector Number:

1) Verification of Questionnaire:

(Name) has requested (Certifier) certification of the following:

_____ acres of (crop)

The questionnaire _____ was _____ was not complete.

2) Situation and Management

Details of land ownership, rental, and equipment. Is equipment used on conventional acreage as well? Is farm 100% organic? (transitional?) (conventional?)

3) Soil Building Program/Crop Rotation/Fertility

Describe rotation. Do Field History sheets back up description? Are cover crops used? What is used to improve fertility?

4) Crop Condition/Seed Sources

Note condition of crops and details on undersowing. Is GMO seed used on the farm? Treated seed? Inoculation?

5) Pasture land

How much? What crops? Details on grazing, if applicable.

6) Woodlands/Wetlands

How do you protect natural resources and biodiversity?

7) Manure Management

Details

8) Weed Management

Describe

- 9) **Pest Management**
Describe
- 10) **Disease Management**
Describe
- 11) **Irrigation**
Details
- 12) **Harvest/Post-Harvest Handling/Storage**
Details on equipment cleaning, storage, bin numbering, and records
- 13) **Livestock**
How many? What kind? Is certification being sought? How and where is the livestock procured? What products are used? What are the living conditions?
- 14) **Audit Trail**
- A) **Field Records**—Details
 - B) **Purchased Inputs**—Comments on farm application’s enclosures and labels
 - C) **Bin and Lot Numbers**—Describe
 - D) **Transaction Certificates or other transaction records**—What is being used? Clean truck certificates?
 - E) **On-Farm Retail/Resale**—Details on records for on-farm and other sales records
 - F) **Tracing Product**—Inspector traces a harvested crop from certain fields in the past year through the farmers records. Comments on traceability and records.
 - G) **In/Out Audit or Production Verification Audit**
- 15) **Split/Parallel Production and Buffer Zones**
Describe how applicant segregates crops, uses buffer zones, and keeps records to ensure no contamination or commingling.
- 16) **On-Farm Processing**
Is it done? Is it for only this grower’s crops? Is any conventional crop processed? Is it certified organic?
- 17) **Conversion and Farm Goals**
Is organic production going to expand? How and when?
- 18) **Crop Improvement Needs**
Where is improvement needed?

19) Standards Adherence Are standards met? Are any prohibited substances used? Is there suspicion of use of prohibited substances and/or practices or other contamination that should be investigated?

20) Comments
Additional information.

21) Appendices
How many enclosures are with report?

22) Results/notes from the Exit Interview

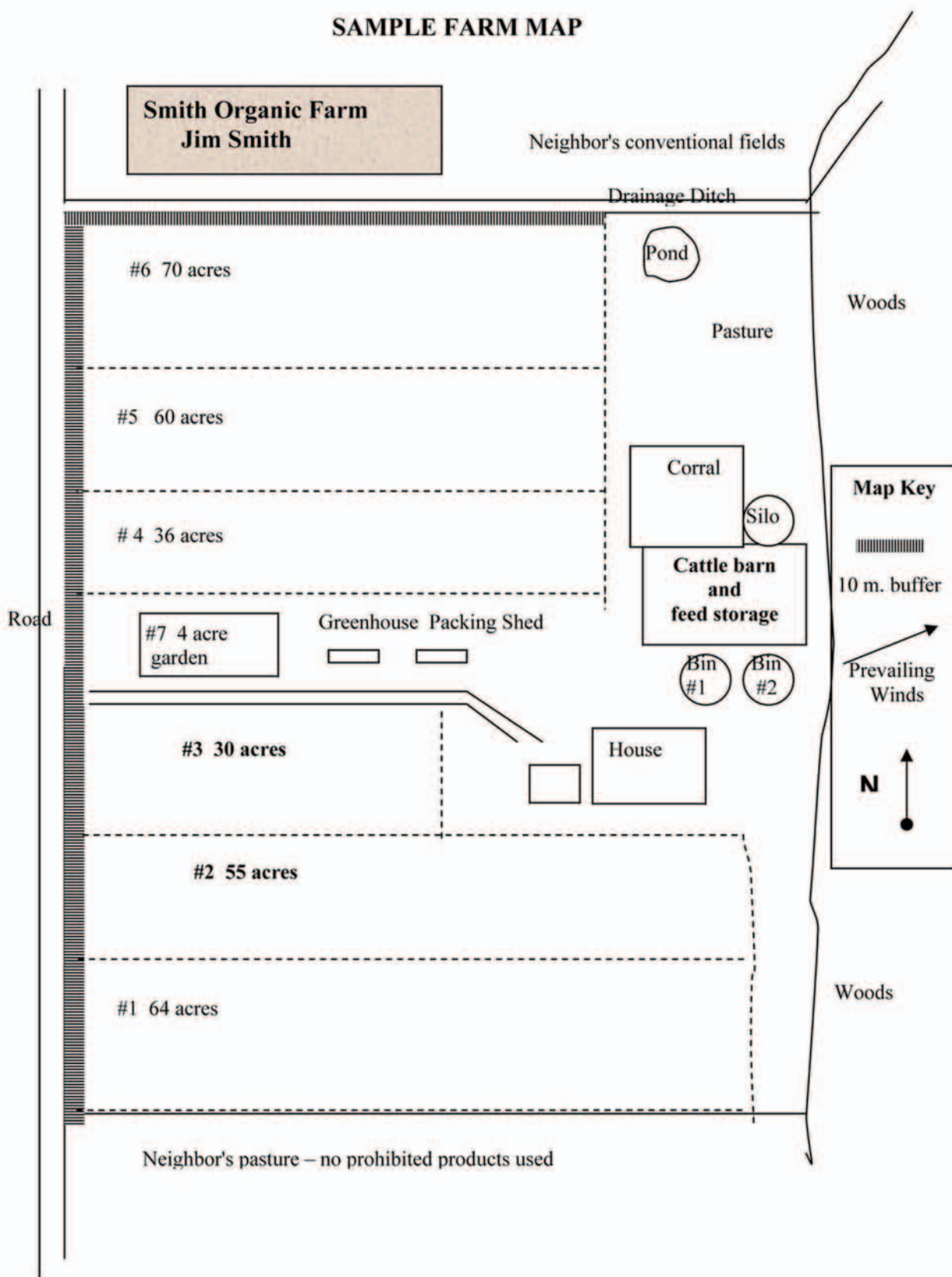
Signature _____ **Date** _____

Inspector # _____

Peer Evaluator: _____

Note: The information contained in this report is confidential and between the inspector, the inspected party, and AUTHORIZED personnel employed by the certifier. Information was gathered from provided documentation, direct observation, and directly from the inspected party. Any other use is unauthorized and may be subject to legal action.

SAMPLE FARM MAP



Exempt Organic Farm Affidavit

I, _____, sell no more than \$5000.00 of agricultural products labeled or represented as organic, annually.

I attest that all of my production and handling practices and inputs associated with these organic products are in compliance with the National Organic Standard, 7 C.F.R. Part 205. Therefore, my practices include but are not limited to the following.

- a complete prohibition on all synthetic fertilizers, pesticides, herbicides, and growth regulators, except for those approved by the National Organic Program and placed on the National List, §205.601
- a complete prohibition on the use of arsenic- and lead-based pesticides, nicotine- and strychnine-based pesticides and baits, and sewage sludge fertilizer
- use of seeds and planting stock that have not been genetically engineered or treated with prohibited pesticides
- preventing crop contamination from prohibited spray drift
- preventing commingling of organic with conventional production
- strategies that build soil, prevent erosion, and promote biodiversity
- keeping adequate records to demonstrate compliance with the National Organic Standard

I further attest that my organic products are not used as ingredients in certified organic processed products, nor are they used as feed for certified organic livestock.

Signature: _____ Date: _____

Print name: _____

Address: _____

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Paul Williams, Editor
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