



## Organic System Plan - Application Form

Please complete form if you are looking to apply for organic certification with NFC for all scopes. This form applies for all types of operations (processors, warehouses, traders etc.).

1. General											
Applicant/Company Name:				DBA:							
Legal Status:	Sole Proprietorship Legal Partnership			Corporation/LLC Trust/Nonprofit.				State Incorporated:			
Year Company Began		Tax ID#		Number of Employees		Website					
Operation Physical Address (physical address is where operation process product and/or stores all records)											
Address:		City:		State:		Zip:	Country:				
Additional Physical Location:											
Address:		City:		State:		Zip:	Country:				
Additional Physical Location:											
Address:		City:		State:		Zip:	Country:				
Operation Legal and/or Mailing Address: Same as Physical Location											
Address:		City:		State:		Zip:	Country:				
Contact Information											
Primary Contact Person:			Phone:			Email:					
Additional Contact Person:			Phone:			Email:					
Additional Contact Person:			Phone:			Email:					
Accounting Contact Person:			Phone:			Email:					
Consultant Information. Only consultants identified below may communicate upon operation's behalf											
Consultant/Contact Name			Phone:			Email		N/A. Consultant is not used			
2. Certification Status											
Do you have a copy and understand the current Standards?				Yes			No				
Which scopes are you applying for:		Crops		Handling							
Please check off the ones that describe your operation:											
Crop:											
<input type="checkbox"/>	Farm	<input type="checkbox"/>	Greenhouse	<input type="checkbox"/>	Mushroom Grower	<input type="checkbox"/>	Other:				
Handling											
<input type="checkbox"/>	Processor for others (copacker)			<input type="checkbox"/>			Distributing		<input type="checkbox"/>	Relabeling	
<input type="checkbox"/>	Private label company (no facility)			<input type="checkbox"/>	Importer	<input type="checkbox"/>	Repacking	<input type="checkbox"/>	Brokering	<input type="checkbox"/>	Other:
Is the operation currently certified:				<input type="checkbox"/>	No	<input type="checkbox"/>	Yes. Please provide certifier name:				



# Natural Food Certifiers

Has your operation ever applied or been granted certification:

☐

No

Yes. Please complete the information below as applicable:

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

1. Operation has had certification suspended or revoked:
2. Operation received a denial of certification:
3. Operation surrendered certification with outstanding noncompliance's
4. Operation withdrew certification with outstanding noncompliance's
5. Operation withdrew or surrendered without any outstanding noncompliance's

If you answered yes to any of the questions above, please provide supporting documentation including corrections made to all open noncompliance's.

For operation revoked or suspended operation will need to request reinstatement including submitting reinstatement fee. Please complete the NFC reinstatement form.

## California Organic State Registration

Operations engaged in production of organic products in California must register with the state prior to the first sale. Operation must apply with the CDFA or CDPH depending on the type of activities and commodities handled. Visit the CDFA or CDPH Organic Program webpage for more information.

Have you applied with the California Organic Program?	<input type="checkbox"/>	Yes. Please list the Registration Number: <input type="text"/>	<input type="checkbox"/>	No N/A. Not a California Operation
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## 3. Organic System Plan (OSP)

Have you developed and implemented an organic system plan as described in the NOP regulations §205.201 & NFC handbook? ☐ Yes ☐ No

Organic Standards require organic operations to describe the monitoring practices and quality assurance steps they intend on taking to verify that the OSP is being effectively implemented and followed.

Does your OSP include practices and procedures to monitor that your OSP is being effectively implemented and followed? ☐ No ☐ Yes.

Please select the actions you take to monitor your plan, as well as the frequency with which you conduct these actions. Please check all that apply

1. Internal audit conducted by third party.	<input type="checkbox"/>	Quarterly	<input type="checkbox"/>	Annually	<input type="checkbox"/>	Other:	<input type="text"/>
How is the internal audit documented?	<input type="text"/>						
2. Review of the entire OSP, including all completed NFC forms.	<input type="checkbox"/>	Quarterly	<input type="checkbox"/>	Annually	<input type="checkbox"/>	Other:	<input type="text"/>
How is the review documented?	<input type="text"/>						
3. QA review of records	<input type="checkbox"/>	Weekly	<input type="checkbox"/>	Monthly	<input type="checkbox"/>	Quarterly	<input type="checkbox"/>
How is the QA review documented?	<input type="text"/>						
4. Other. Please provide a description of the actions taken as well as the frequency and method used for documentation:	<input type="text"/>						

Please provide a statement and description highlighting who you are (to be used on the NFC website) (optional):

<input type="text"/>
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# Natural Food Certifiers

## 4. Certification Agreement

The following must be signed by a legally authorized representative of any operation by all applicants for certification by Natural Food Certifiers Inc. (NFC).

By signing this document, the applicant acknowledges that it has received, has read, fully understands, and agrees to comply with all NFC requirements and directives, 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) including but not limited to the following:

1. Establishing, implementing, and updating annually an Organic System Plan that will be submitted to NFC.
2. Permitting on-site inspections with complete access to the production or handling aspects of the operation, including non-certified
3. production areas, structures, or offices by NFC. These inspections may be announced or unannounced at the discretion of NFC or as required by an accreditation authority, government entity with jurisdiction, or other governing body.
4. Authorize NFC inspectors/contractors to take pictures as required and collect information, documents or materials related to the certification of the operation.
5. I understand that Submission of an OSP does not guarantee or imply certification. Only with the approval of the Final Reviewer(s), or through the appeals process, can I be authorized to advertise and promote my operation, and to label and sell any of my products as Certified Organic by Natural Food Certifiers Inc.
6. I understand that Certification approval is contingent on responding to all conditions set by the Final Reviewer(s), including correction of any correctible non-compliance(s).
7. Maintaining all records applicable to the organic operation for not less than five (5) years beyond their creation.
8. Allowing authorized representatives of NFC, 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.
9. Understanding NFC may use subcontractors for inspecting, testing and other technical services, as necessary.
10. Submitting to NFC any applicable fees as described on the most current fee schedule.
11. Immediately notifying NFC 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.
12. Immediately notifying NFC of any change in your certified operation or portion of it that may affect its compliance with the applicable standards, regulations, or governing law.
13. Using the NFC name and seal(s) only in accordance with NFC standards and ceasing all use of NFC's name and seal upon notice by NFC. Any use of NFC's names or marks, without the express consent of NFC, is strictly prohibited and constitutes an infringement of NFC's rights. NFC 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.
14. Destroying or returning to NFC all packaging and certificate(s) upon notice from NFC.
15. Authorizing NFC to list certified parcel crops, products, services, and acreage on my certificate and in the NFC or USDA database.
16. Immediately ceasing all claims of NFC certification associated with this operation, and destroying or returning all certificates, labeling, and marketing material containing reference to NFC in the event that this operation withdraws, or its certification is suspended or revoked.

I, the owner, or legally authorized corporate representative, acknowledge the above General Requirements for NFC 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:

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Name

Signature

Date