

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



SECTION ONE: General Information
Organic Standard 3.4
NOP RULE 205.401

1) Owner FIRST NAME:		SURNAME:	
2) Manager FIRST NAME:		SURNAME:	
3) 2 nd in charge of management FIRST NAME:		SURNAME:	
TRADING NAME:		TYPE OF BUSINESS:	
PROPERTY NAME:		CERTIFICATION NUMBER:	
Year first certified:			
List previous organic certification by other bodies:			
List current organic certification by other bodies:			
Have you ever been denied/suspended certification?			
If yes, describe the circumstances:			
List all crops or products requested for certification:			
Year when complete Organic Farm Plan/Organic Management Plan questionnaire was last submitted:			
Do you understand the current relevant organic standards?			<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you have a copy of the current relevant organic standards?			<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you have any other QA program or Food safety certification?			<input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, please specify: (i.e. Fresh Care, HACCP, Cattlecare)			
Do you intend to certify any livestock (slaughter stock, dairy, or layers) this year?			<input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, have you filled out an Organic Livestock Plan Questionnaire?			<input type="checkbox"/> YES <input type="checkbox"/> NO
<p><i>Please note that you must have an Organic Livestock Plan Questionnaire on file to certify any livestock. Contact ACO to obtain an Organic Livestock Plan Questionnaire.</i></p>			

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



ON-FARM HANDLING/PROCESSING	
Do you have any off-farm or on-farm processing done? (cleaning, bagging, bottling, etc.)	<input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, have you filled out an Organic Handling Plan Or equivalent plan in place? <i>(Please note that you must have an Organic Handling Plan on file to certify the processing/handling portion of your operation.)</i>	<input type="checkbox"/> YES <input type="checkbox"/> NO
Has the off-farm or on-farm processing facility been certified under ACO?	<input type="checkbox"/> YES <input type="checkbox"/> NO

SECTION TWO: Farm Plan Information
Organic Standard 3.4
NOP Rule 205.201 (a) and 205.202 (a) and (b)

Please complete the table below and attach updated paddock history sheets that show all paddocks Organic (O), In Conversion (IC) or Conventional (C)], paddock numbers, hectares, crops planted, projected yields and inputs applied. The areas listed in this table must equal field histories and maps. Pastures are considered a crop and must be listed on each form. At least 36 months of history is required for all paddocks.

CROPS REQUESTED FOR CERTIFICATION	PADDOCK NUMBERS	TOTAL HECTARES PER CROP	PROJECTED YIELDS (VOLUME)

Have you managed all paddocks for 3 or more years? YES NO

If no, you must submit signed Stat Dec from the previous manager stating the use and all inputs (i.e. fertilizers, pesticides) applied during the previous 3 years on all paddocks included in this application.

Are all areas requested for certification located at the main address listed in Section 1? YES NO

Complete this information for main farm address and each area that is in a separate location from the main farm address.

PADDOCK NUMBERS	AREA ADDRESSES / LEGAL DESCRIPTION (i.e. Lot3, Maguire Rd)	NUMBER OF HA:			L=Leased, OR O=Owned
		O=Organic	IC=In Conversion	C=Conventional	

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



SECTION THREE: Natural Resources
Organic Standard 4.7
NOP Rule: 205.200 and 205.203a

Organic Standards require that production practices maintain or improve the natural resources of the operation, including soil and water quality. Practices must minimize erosion. Irrigation water should not contaminate organic crops with prohibited materials. Methods to conserve water usage should be part of the irrigation plan. *Testing may be required if risks are present.*

What are your general soil types?																	
What are your soil/nutrient deficiencies?																	
What soil conservation practices are used? <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> terraces</td> <td><input type="checkbox"/> contour farming</td> <td><input type="checkbox"/> strip cropping</td> <td><input type="checkbox"/> winter cover crops</td> </tr> <tr> <td><input type="checkbox"/> undersowing / interplanting</td> <td><input type="checkbox"/> conservation tillage</td> <td><input type="checkbox"/> permanent waterways</td> <td><input type="checkbox"/> windbreaks</td> </tr> <tr> <td><input type="checkbox"/> firebreaks</td> <td><input type="checkbox"/> tree lines</td> <td><input type="checkbox"/> retention ponds</td> <td><input type="checkbox"/> riparian (Creek/ river bank) management</td> </tr> <tr> <td><input type="checkbox"/> maintain wildlife habitat</td> <td><input type="checkbox"/> maintain pasture ground cover</td> <td><input type="checkbox"/> other (specify)</td> <td></td> </tr> </table>		<input type="checkbox"/> terraces	<input type="checkbox"/> contour farming	<input type="checkbox"/> strip cropping	<input type="checkbox"/> winter cover crops	<input type="checkbox"/> undersowing / interplanting	<input type="checkbox"/> conservation tillage	<input type="checkbox"/> permanent waterways	<input type="checkbox"/> windbreaks	<input type="checkbox"/> firebreaks	<input type="checkbox"/> tree lines	<input type="checkbox"/> retention ponds	<input type="checkbox"/> riparian (Creek/ river bank) management	<input type="checkbox"/> maintain wildlife habitat	<input type="checkbox"/> maintain pasture ground cover	<input type="checkbox"/> other (specify)	
<input type="checkbox"/> terraces	<input type="checkbox"/> contour farming	<input type="checkbox"/> strip cropping	<input type="checkbox"/> winter cover crops														
<input type="checkbox"/> undersowing / interplanting	<input type="checkbox"/> conservation tillage	<input type="checkbox"/> permanent waterways	<input type="checkbox"/> windbreaks														
<input type="checkbox"/> firebreaks	<input type="checkbox"/> tree lines	<input type="checkbox"/> retention ponds	<input type="checkbox"/> riparian (Creek/ river bank) management														
<input type="checkbox"/> maintain wildlife habitat	<input type="checkbox"/> maintain pasture ground cover	<input type="checkbox"/> other (specify)															
What soil erosion problems do you experience (why and on which fields)?																	
Describe your efforts to minimize soil erosion problems listed above.																	
Describe how you monitor the effectiveness of your soil conservation program.																	
How often do you conduct conservation monitoring? <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> weekly</td> <td><input type="checkbox"/> monthly</td> <td><input type="checkbox"/> annually</td> <td><input type="checkbox"/> as needed</td> </tr> <tr> <td colspan="4"><input type="checkbox"/> other (specify)</td> </tr> </table>		<input type="checkbox"/> weekly	<input type="checkbox"/> monthly	<input type="checkbox"/> annually	<input type="checkbox"/> as needed	<input type="checkbox"/> other (specify)											
<input type="checkbox"/> weekly	<input type="checkbox"/> monthly	<input type="checkbox"/> annually	<input type="checkbox"/> as needed														
<input type="checkbox"/> other (specify)																	

Biodiversity

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



What Biodiversity measures do you have in place?

protected remnant native vegetation native pasture/grassland
 (native) shelter belt wild life corridor wetland / riparian(creek bank) areas
 habitat zones rare ecosystem protection sustainable rangeland management
 other (please specify):

What is the estimated percentage of your farm managed for Biodiversity?
%

Please outline how you intend to maintain / enhance Biodiversity?
(This may include catchment management / regional projects)

protecting native vegetation protecting creeks / wetland using native pastures
 environmental rangeland management biodiversity / wildlife corridor plantings
 other (please specify):

(Please note where less than 5% of your own farm is set aside as a non intensive production area (i.e. Biodiversity areas), you will need written permission from the ACO office- see the Organic Standard 4.7.2)

SECTION FOUR: Farm Systems
Organic Standard 4.1
 NOP Rule: 205.203 and 205.205

4A. SOIL AND CROP:

How do you monitor the effectiveness of your fertility management program? *Attach copies of available test results, if applicable.*

microbiological testing soil testing tissue testing crop quality testing
 observation of crop health comparison of crop yields observation of soil other (specify):

How often do you conduct fertility monitoring?
 Weekly monthly annually as needed other (specify):

Rate the effectiveness of your fertility management program.
 excellent satisfactory needs improvement

What changes/improvements do you anticipate making over the coming year?

What are the major components of your soil and crop fertility plan?

crop rotation green manure interplanting incorporation of crop issues
 subsoiling plowdown / cover crops compost on-farm manure
 off-farm manure side dressing

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



<input type="checkbox"/> biodynamic preparations	<input type="checkbox"/> summer fallow	<input type="checkbox"/> other (specify) _____	<input type="checkbox"/> foliar fertilisers
	<input type="checkbox"/> soil amendments	_____	
	<input type="checkbox"/> soil inoculants	_____	

<p>List all fertility inputs used or intended for use in the current season on proposed organic and transitional paddocks. All inputs used during the current year and previous three years must be listed on the Paddock History Sheet.</p>	<input type="checkbox"/> N/A
--	------------------------------

PRODUCT	BRAND NAME OR SOURCE	STATUS: APPROVED (A), RESTRICTED (R), PROHIBITED (P)	NUMBER OF APPLICATIONS PER YEAR	REASONS FOR USE

If you use or plan to use restricted (R) fertility inputs, how do you comply with the "annotation"? Please explain.	<input type="checkbox"/> N/A
---	------------------------------

If you use fertilizers with high salt content (potassium sulfate, etc.), how do you prevent salt build-up?	<input type="checkbox"/> N/A
--	------------------------------

Do you burn crop residues?	<input type="checkbox"/> YES <input type="checkbox"/> NO
----------------------------	--

If yes, please describe what materials are burned and why.	
--	--

Do you apply sewage sludge to fields?	<input type="checkbox"/> YES <input type="checkbox"/> NO
---------------------------------------	--

If yes, list fields where applied. <i>(note: restrictions- non feed use)</i>	
--	--

4B. COMPOST USE:

The Organic Standard 4.3 outlines requirements for composts. Also, where you are applying for NOP, NOP Rule 205.203(c)(2) requires that the composting process include a C:N ratio of between 25:1 and 40:1 and maintenance of temperatures between 131°F. and 170°F for a specific number of days, depending on the method of composting. Keep a compost production record to verify compliance. *(Please attach a copy of the record – NOP only)*

List all compost ingredients/additives.	<input type="checkbox"/> N/A
---	------------------------------

What composting method do you use?

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



static aerated pile
 windrows
 other (specify):

What is your C:N (Carbon to Nitrogen) ratio (NOP only)?	
Do you monitor temperature?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, what temperature is maintained	
How long is this temperature maintained?	
If compost is windrowed, how many times are materials turned?	

4C. MANURE USE:

The Organic Standard 4.2.5 and Annex1 and NOP Rule 205.203(c)(1) require that raw manure be fully composted.

Do you use manures? If no, go to 4D.

If yes, what forms of manure do you use?

none
 liquid
 semi-solid
 piled
 fully composted
 other (specify)

Do you sheet compost?	<input type="checkbox"/> YES <input type="checkbox"/> NO If yes, briefly describe your sheet composting process.
-----------------------	---

What is the source of the manure you use?	<input type="checkbox"/> on farm <input type="checkbox"/> off farm
---	--

List all sources of off-farm manure.	
--------------------------------------	--

List any other ingredients/additives to manure.	
---	--

If you use manure, what are the potential contaminants (feed additives, pesticides, antibiotics, heavy metals, etc.) from these sources? <i>Attach residue analysis/additive specifications for manure, if available.</i>	
---	--

4D. WATER USE:

irrigation
 livestock
 foliar sprays
 washing crops
 greenhouse
 other (specify)

Source of water:	<input type="checkbox"/> on-site bores(s) <input type="checkbox"/> river/creek/dam <input type="checkbox"/> spring <input type="checkbox"/> municipal/county
------------------	--

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



irrigation district other (specify) _____

What practices are used to protect water quality?

fencing livestock from waterways
 scheduled use of water to conserve its use
 tensiometer / monitoring
 laser levelling / land forming
 drip irrigation
 micro-spray
 other (specify) _____

List any known contaminants in water supplies in your area.

Describe your efforts to minimize water contamination problems listed above.

Describe how you monitor the effectiveness of your water quality program.

How often do you conduct water quality monitoring?

weekly
 monthly
 annually
 as needed
 other (specify) _____

#Attach current water tests for nitrates and coliform bacteria, if these are risks to Food Safety.

Type of irrigation system: _____ N/A
 If N/A go to Section 5.

drip
 flood
 centre pivot
 other (specify) _____

What input products are applied through the irrigation system? _____ N/A

What products do you use to clean irrigation lines/nozzles? _____ N/A

Is the system shared with another operator? _____ YES NO

If yes, what products do they use? _____

Is the system flushed and documented between conventional and organic use? _____ YES NO

SECTION FIVE: Crop Management
Organic Standard 4.1
NOP Rule 205.205 and 205.206

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



A crop rotation plan required that maximizes soil organic matter content, prevents weed, pest, and disease problems, and manages deficient or excess plant nutrients. Your crop rotation may include sod, cover crops, green manure crops, and catch crops. Producers need to utilize sanitation measures to remove disease vectors, weed seeds, and habitat for pests. Cultural practices, including selection of plant species and varieties adapted to site-specific conditions, must be used to enhance crop health. Approved materials may only be used when management practices are insufficient to prevent or control problems. All weed, pest, and disease inputs must be approved. A "restricted" input has specific restrictions for its use. If you use a "restricted" material, you must provide evidence of how you address restrictions for use for the material in either the Organic Standard or the NOP as relevant.

5A. CROP ROTATION PLANS: (Use one line for each rotation used)

CROP ROTATION PLAN	PADDOCK NUMBERS WHERE PLAN IS FOLLOWED	ANTICIPATED CHANGES OVER NEXT YEAR

5B. WEED MANAGEMENT PLAN:

What are your problem weeds?

What weed control methods do you use?

<input type="checkbox"/> crop rotation	<input type="checkbox"/> field preparation	<input type="checkbox"/> prevention of weed seed set	<input type="checkbox"/> delayed seeding
<input type="checkbox"/> monitoring soil temperature	<input type="checkbox"/> soil sterilization	<input type="checkbox"/> use of fast emerging varieties	<input type="checkbox"/> mechanical cultivation
<input type="checkbox"/> use of hand tools	<input type="checkbox"/> hand weeding	<input type="checkbox"/> mowing	<input type="checkbox"/> livestock grazing
<input type="checkbox"/> flame weeding	<input type="checkbox"/> steam weeding	<input type="checkbox"/> synthetic mulch	<input type="checkbox"/> smother crops
<input type="checkbox"/> black fallow	<input type="checkbox"/> non-synthetic mulch	<input type="checkbox"/> other (specify):	

Do you keep a record of how often you utilize these weed control methods, i.e., dates and fields when you cultivate or flame weed? YES NO

All inputs used or intended for use during the current year and used in the previous three years must be listed on your Paddock History Sheet / diary.

USE OF RESTRICTED WEED MANAGEMENT STRATEGIES: No weed problems

Do you use plastic or other synthetic mulches YES NO

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



Is the mulch removed at the end of the growing or harvest season?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If no, why not?	
If you use approved herbicides, list all areas where used.	
If you use newspaper or other recycled paper for mulch, do you use paper with glossy or coloured inks? <i>(coloured inks are not allowed)</i>	
<input type="checkbox"/> YES <input type="checkbox"/> NO	
EVALUATION:	
Rate the effectiveness of your weed management program:	<input type="checkbox"/> excellent <input type="checkbox"/> satisfactory <input type="checkbox"/> needs improvement
What changes do you anticipate?	
How do you monitor the effectiveness of your weed management program?	
<input type="checkbox"/> weed counts <input type="checkbox"/> observation of weed types <input type="checkbox"/> comparison of crop yields <input type="checkbox"/> records kept of observations/counts <input type="checkbox"/> other (specify)	
How often do you conduct weed monitoring?	
<input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> annually <input type="checkbox"/> as needed <input type="checkbox"/> other (specify)	
5C. PEST MANAGEMENT PLAN:	
<input type="checkbox"/> No pest problems	
What are your problem pests?	
<input type="checkbox"/> insects (list) <input type="checkbox"/> rodents <input type="checkbox"/> birds <input type="checkbox"/> other animals (specify): + + + + +	
Do you work with a pest control advisor?	
<input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, give name and contact information.	
What strategies do you use to control pest damage to crops?	
<input type="checkbox"/> None used	
<input type="checkbox"/> crop rotation <input type="checkbox"/> selection for plant species/varieties <input type="checkbox"/> development of habitat for natural enemies <input type="checkbox"/> timing of planting <input type="checkbox"/> companion planting <input type="checkbox"/> frog ponds <input type="checkbox"/> bat houses <input type="checkbox"/> bird houses <input type="checkbox"/> hand picking <input type="checkbox"/> monitoring <input type="checkbox"/> trap crops <input type="checkbox"/> physical barriers <input type="checkbox"/> physical removal <input type="checkbox"/> traps <input type="checkbox"/> lures <input type="checkbox"/> IPM	

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



- insect repellents animal repellents release of predators/parasites of pest species use of approved products
 use of restricted product other (specify):

Do you keep a record of how often you utilize these pest control methods, i.e., dates when you scout or apply inputs to a specific field or crop? YES NO

List all pest control products used or intended for use in the current season on Organic and In Conversion fields. All inputs used or intended for use during the current year and in the previous three years must be listed on your Paddock History Sheet / Diary.

None used

PEST PROBLEM	CONTROL PRODUCT	STATUS: APPROVED (A), RESTRICTED (R), PROHIBITED (P)	IF RESTRICTED, DESCRIBE COMPLIANCE WITH ACO / NOP RULE SPECIFICATION	CHECK NON GMO	MSDS kept in the file
				<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"/>
					<input type="checkbox"/> <input type="checkbox"/>
					<input type="checkbox"/> <input type="checkbox"/>

EVALUATION

Rate the effectiveness of your pest management program.

- excellent satisfactory needs improvement

What changes do you anticipate over the following year?

How do you monitor the effectiveness of your pest management program?

- insect monitoring with traps observation of crop health comparison of crop yields crop quality testing
 monitoring records kept other (specify):

#Attach copies of your test results, if applicable.

How often do you conduct pest monitoring?

- weekly monthly annually as needed
 other (specify)

5D. DISEASE MANAGEMENT PLAN:

No disease problems

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



What are your problem crop diseases?

What disease prevention strategies do you use?

crop rotation field sanitation plant spacing selection of plant species/varieties
 timing of planting/cultivating vector management soil balancing solarization
 companion planting compost/tea use use of approved materials use of restricted materials
 other (specify)

List all disease management inputs used or intended for use on your organic and In Conversion paddocks/crops. All inputs used or intended for use during the current year and used in the previous three years must be listed on your Paddock History Sheet.

PEST PROBLEM	CONTROL PRODUCT	STATUS: APPROVED (A), RESTRICTED (R), PROHIBITED (P)	IF RESTRICTED, DESCRIBE COMPLIANCE WITH ACO / NOP RULE ANNOTATION	CHECK NON GMO	MSDS kept in the file
				<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"/>

EVALUATION:

Rate the effectiveness of your disease management program?

excellent satisfactory needs improvement

What changes do you anticipate making over the following year?

How do you monitor the effectiveness of your disease management program?

soil testing microbiological testing observation of soil observation of crop health
 comparison of crop yields crop quality testing monitoring records kept other (specify)

#Attach copies of your test results, if applicable.

How often do you conduct disease monitoring?

weekly monthly annually as needed

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



other (specify) _____

5E(i). SEEDS

The Organic Standard requires the use of organically grown seeds/seedlings, unless the variety is not commercially available. If using non-organic seeds/seedlings, you must have records of your attempts to source organic seed and approval of using non-organic seeds/seedlings from ACO office. Synthetic seed treatments are prohibited unless included on the National List. Genetically engineered/modified (GMO) seeds/seedlings and inoculants are prohibited in organic production. (NOP Rule uses the phrase "excluded methods" to refer to GMO products.) Please save all seeds/seedlings and inoculant labels, and documentation of commercial unavailability of organic seeds/seedlings to show the auditor.

Who are your seed suppliers?	
If certified, by which agents?	
Do you purchase non-organic seedlings?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, state why and describe your attempts to purchase organic seedlings.	
<i>Did you obtain approval for using non organic seedlings from ACO office? (A template of Seed Declaration is available on ACO website.)</i>	<input type="checkbox"/> YES <input type="checkbox"/> NO

List all seeds/seedlings used or planned for use in the current season. Check the appropriate boxes and provide other information as needed. Attach additional sheets if necessary.

Please confirm

No Seed/Seedling Used
 All Seeds /Seedlings Organic
 Untreated seeds/seedlings used
 No GMO seeds/seedlings purchased and planted

SEED/ SEEDLING /VARIETY/ BRAND	ORGANIC	UNTREATED	TREATED	GMO	TYPE/BRAND OF TREATMENT		WHAT ATTEMPTS DID YOU MAKE TO USE ORGANIC/ UNTREATED SEED/SEEDLING
					FUNGICIDE	INNOCULANT	
	<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"/>	<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"/>			

5E(ii) IF YOU GROW ORGANIC N/A

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



SEEDLINGS ON-FARM:		If N/A go to 5E(ii)		
What type and size is your greenhouse?				
Do you raise potted plants or plant crops directly in the ground in the greenhouse?		<input type="checkbox"/> YES <input type="checkbox"/> NO Please describe briefly:		
If treated wood is used in any part of your greenhouse, where is it used?				
List all soil mix ingredients, fertility products, foliar sprays, and/or pest and disease inputs used or planned for use in your organic greenhouse operation. <i>Attach labels or have labels available for inspection, as applicable.</i>				
PRODUCT	BRAND NAME OR SOURCE	STATUS: APPROVED (A), RESTRICTED (R), PROHIBITED (P)	IF RESTRICTED, PLEASE EXPLAIN	CONFIRM NON-GMO STATUS OF STOCK (Tick if it's non-GMO)
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
What equipment do you use for irrigation? (i.e. drippers)				
How do you prevent seedling diseases and/or insect problems?				
5E(iii) IF YOU GROW BOTH ORGANIC AND NON-ORGANIC PLANTS IN YOUR GREENHOUSE:				<input type="checkbox"/> N/A
What organic and non-organic crops are grown? List varieties if the same organic and non-organic crops are grown (parallel production).				
How do you separate and identify organic and non-organic growing areas?				
List all soil mix ingredients, fertility products, foliar sprays, water system additives, and/or pest and disease inputs used or planned for use in your non-organic greenhouse operation. <i>Attach labels or have labels available for the auditor, as applicable.</i>				

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



PROD UCT	BRAND NAME OR SOURCE	STATUS: APPROVED (A), RESTRICTED (R), PROHIBITED (P)	IF RESTRICTED, PLEASE EXPLAIN	CONFIRM NON-GMO STATUS OF STOCK (Tick if it's non-GMO)
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
How do you prevent co-mingling of organic and non-organic soil mixes during mixing and storage?				
Where do you store inputs used for non-organic production?				
How do you prevent drift of prohibited materials?				
How do you clean seedling containers and equipment?				

SECTION SIX: Organic Risk Management
Organic Standard 4.8.21-24
NOP Rule 205.201(a)(5) and 205.202(c)

6A. ADJOINING LAND USE:

Risks from neighbouring properties must be managed. Buffer areas may change annually, depending on contamination potential from adjoining land uses. The width of the minimum buffer is depending on the situation. The OS and NOP Rule requires that the buffer must be sufficient in size (*OS 4.8.22 as a guide: no less than 15m*) or other features (windbreaks, diversion ditches) to prevent the unintended contact by prohibited substances applied to adjacent land areas.

What is your neighbouring land used for (eg. Intensive horticulture, grazing, bushland):

North:	
South:	
East:	
West:	

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



List specific buffer areas you maintain. (Show all adjoining land uses on your farm maps.)

LOCATION OR PADDOCK NUMBER	TYPE OF BUFFER (CROP LAND, TREELINE, WILDLIFE PLANTING, GRASS STRIP)	WIDTH OF BUFFER	ADJOINING LAND USE	IF CROP IS HARVESTED FROM BUFFER, DESCRIBE USE (SALE, NON-ORGANIC LIVESTOCK FEED, SEED, ETC.)

Do you harvest crops from buffer zones with equipment used for harvesting organic crops, what safeguards do you use to protect organic crops from contact with buffer crops during harvest? YES NO

If YES, how do you protect organic crops from contact with buffer crops during harvest (ie. segregation)?

Have you posted "No Spray" signs (or similar) along roadsides that adjoin organic paddocks? YES NO

Do any paddocks or portions of paddocks flood frequently? (more than once every ten years) YES NO

If yes, list paddock numbers

Are there any other contamination risks to your products / property?

Road and council authorities
 Utilities companies (eg. electricity)
 Aerial spray companies/ airports
 Adjoining landowners

Chemical residues in soil
 On farm contaminated sites
 Runoff from neighbours

Drainage commissions
 Department of Agriculture
 other (specify)

How do you manage these risks?

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



How do you monitor for crop contamination?

visual observation
 residue analysis
 GMO testing
 photographs
 wind direction/speed data
 other (specify)

How often do you conduct crop contamination monitoring?

weekly
 monthly
 annually
 as needed
 other (specify)

6B. Parallel production

Do you grow the same crops organically, as well as In Conversion, and/or conventionally? (*Organic Standard 3.6*)

YES NO
If No go to 6C.

This is called 'parallel production'. If yes, list specific crop varieties in the next table for both organic and In Conversion/Non-Organic crops.

If you grow any conventional or In Conversion crops, please fill out the following tables.

SPECIFIC CROPS/VARIETIES	PADDOCK NUMBERS	TRANSITIONAL (T) OR CONVENTIONAL (C)	CHECK NON GMO	TOTAL ACREAGE	PLANNED USE OF CROP (SALE, SEED, NONORGANIC LIVESTOCK FEED, ETC.)	SAME AS ORGANIC CROP? Y OR N
			<input type="checkbox"/>			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/>			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/>			<input type="checkbox"/> YES <input type="checkbox"/> NO

Prohibited soil amendments used on Non-Organic crops:

PRODUCT NAME	WHO APPLIES? SELF (S) OR CONTRACTOR (C)	PADDOCK NUMBERS WHERE APPLIED	WHERE STORED? (ON-FARM OR OFF-FARM; WHERE ON FARM?)

Prohibited herbicides/pesticides used on conventional crops:

PRODUCT NAME	WHO APPLIES? SELF (S) OR CONTRACTOR (C)	PADDOCK NUMBERS WHERE APPLIED	WHERE STORED? (ON-FARM OR OFF-FARM; WHERE ON FARM?)

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



6C. EQUIPMENT:

To prevent co-mingling and contamination, all equipment used in organic crop production must be free of non-organic crops and prohibited materials. Equipment used for both organic and non-organic farming must be cleaned and flushed prior to use on organic fields or crops. Keep records of equipment clean and flush activities.

List equipment used for planting, tillage, spraying, and harvesting.

EQUIPMENT NAME	LEASED(L), RENTED (R), OR CONTRACT (C)	CHECK IF USED ON BOTH ORGANIC AND CONVENTIONAL	HOW IS EQUIPMENT CLEANED BEFORE USE ON ORGANIC FIELDS?
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	

Is your equipment maintained so that fuel, oil and hydraulic fluids do not leak? YES NO N/A

If you use a sprayer:

What type? NEW USED

Did you purchase it new or used? NEW USED

Other equipment:

Could any equipment you use have been contaminated by previous uses? YES NO

If yes, describe:

6D. HARVEST:

The Organic Standard 4.8.12-15 rule and NOP Rule 205.272(b)(1) and (2) requires that containers, bins, and packaging materials must not contain synthetic fungicides, preservatives, or fumigants. All reusable containers must be thoroughly cleaned and pose no risk of contamination prior to use.

How are your organic crops harvested? Mechanical By Hand

Are any organic crops contract harvested? YES NO

If yes, detail what records and / or contractor declarations are kept.

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



Describe steps taken to protect organic crops from co-mingling and contamination during harvest.	
What containers are used for harvesting?	
<input type="checkbox"/> bags <input type="checkbox"/> truck boxes <input type="checkbox"/> cardboard/waxed boxes <input type="checkbox"/> wooden container <input type="checkbox"/> plastic containers <input type="checkbox"/> field bins <input type="checkbox"/> other (specify)	
Are containers new or used?	
<input type="checkbox"/> NEW <input type="checkbox"/> USED	
If used, what did they contain prior to organic use?	
Are the containers used for organic crops only?	
<input type="checkbox"/> YES <input type="checkbox"/> NO	
Describe potential contamination or co-mingling problems you have with harvest of organic crops.	
6E. POST-HARVEST HANDLING:	
<input type="checkbox"/> N/A	
The Organic Standard 3.4.1(2)(e) and NOP Rule 205.201(a)(5) require that post-harvest handling procedures do not contaminate organic products with non-organic crops or prohibited materials. For on-farm processing, you may need to complete an Organic Handling Plan.	
Describe your post-harvest handling procedures and equipment.	
Is the processing area and equipment used for both organic and non-organic products?	
<input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, describe steps taken to prevent co-mingling and contamination.	
Does packaging present any contamination problems for your organic products?	
<input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, what are they?	
Please tick types of packaging material used:	
<input type="checkbox"/> bulk <input type="checkbox"/> paper <input type="checkbox"/> cardboard <input type="checkbox"/> wood <input type="checkbox"/> glass <input type="checkbox"/> metal <input type="checkbox"/> foil <input type="checkbox"/> plastic <input type="checkbox"/> waxed paper <input type="checkbox"/> aseptic <input type="checkbox"/> natural fibre <input type="checkbox"/> synthetic fibre <input type="checkbox"/> other (specify):	
In what form are finished products shipped?	
<input type="checkbox"/> dry bulk <input type="checkbox"/> liquid bulk <input type="checkbox"/> tote bags <input type="checkbox"/> tote boxes	

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



- paper bags foil bags metal drums mesh bags
 cardboard drums cardboard cases plastic crates other (specify)

6F. CROP STORAGE:

N/A

Operators must keep organic and non-organic crops in separate storage areas and prevent co-mingling and contamination. Storage records must be maintained.

Describe your storage locations.

STORAGE ID #	TYPE OF CROPS STORED	TYPE OF STORAGE	CAPACITY/SIZE	ORGANIC (O), IN CONVERSION(IC), BUFFER(B), CONVENTIONAL(C)

Do you use the same storage areas for organic, In Conversion, buffer, and/or non-organic crops?

YES NO

If yes, how do you segregate organic crops from non-organic crops? **If you are applying for NOP or already NOP certified, please also describe how you segregate NOP organic crops from ACO organic crops on documentation due to trace NOP product.**

How do you clean storage units prior to storage of organic crops?

Please describe how do you prevent/control insect pests in crop storage areas?

No insect problems

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



Please describe how do you control rodents in crop storage areas?	<input type="checkbox"/> No rodent problems
Do you have any Post-Harvest practices? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, detail:	
<input type="checkbox"/> sanitisers <input type="checkbox"/> grading <input type="checkbox"/> washing <input type="checkbox"/> ripeners <input type="checkbox"/> waxes <input type="checkbox"/> preservatives <input type="checkbox"/> oils <input type="checkbox"/> colouring agents <input type="checkbox"/> other (specify)	
6G. TRANSPORTATION:	<input type="checkbox"/> N/A
Who is responsible for arranging transportation of organic products? <input type="checkbox"/> self <input type="checkbox"/> buyer <input type="checkbox"/> other (specify)	
Describe how organic products are transported.	
What potential contamination or co-mingling problems do you have with the transport of organic crops?	<input type="checkbox"/> None
What steps are taken to protect the integrity of organic products during transport? <input type="checkbox"/> dedicated organic only <input type="checkbox"/> inspecting transport units prior to loading <input type="checkbox"/> cleaning transport units prior to loading <input type="checkbox"/> use of transport declarations <input type="checkbox"/> letter/contract with transport company stating organic requirements <input type="checkbox"/> other (specify)	
Do you keep records of transport used for organic products?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If Yes, please list what sorts of records you keep.	

SECTION SEVEN: Record Keeping System
Organic Standard 3.4
NOP Rule 205.103

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



The Organic Standard 3.4 and NOP Rule require that records disclose all activities and transactions of the operation, be maintained for 5 years, and demonstrate compliance with the OS and/or NOP Rule. Organic products must be tracked back to the paddock/location where they were produced / harvested. All records must be accessible to the auditor.

7A. RECORDS:

Which of the following records do you keep for organic production? (Please have these records also available for the auditor.)

- Paddock/farm maps
- Paddock activity log(s)/ paddock diary
- Paddock history sheets (previous minimum three years)
- documentation of previous land use for leased and/or newly purchased land
- input records for soil amendments, manure, foliar sprays, and pest control products (keep all labels)
- Seed Declaration for non-organic seed/seedlings use, approved by ACO office
- residue analyses of inputs (i.e., manure sourced off-farm)
- compost production records
- monitoring records (soil tests, tissue tests, water tests, quality tests, observations)
- equipment cleaning records
- harvest records that show paddock numbers, date of harvest, and harvest amounts (including contract harvest records)
- label records
- storage records that show storage location, storage identification, paddock numbers, amounts stored, and cleaning activities
- clean transport records
- sales records (purchase order, contract, invoice, cash receipts, cash receipt journal, sales journal, etc.)
- shipping records (ie. weigh station ticket, bill of lading)
- Export Certificates, copies of suppliers' organic certificate
- audit control summary
- complaint log
- other (please specify)

How long do you keep your records?

Which of the following records do you keep for conventional production? N/A

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> paddock maps | <input type="checkbox"/> labour records | <input type="checkbox"/> field history sheets | <input type="checkbox"/> storage records |
| <input type="checkbox"/> input records | <input type="checkbox"/> sales records | <input type="checkbox"/> harvest records | <input type="checkbox"/> shipping records |
| <input type="checkbox"/> other (specify) | | | |

B. RETAILING/SALES

Type of retailing/sales:

- | | | | |
|---|--|--|------------------------------------|
| <input type="checkbox"/> farmers market | <input type="checkbox"/> direct to retail | <input type="checkbox"/> contract to buyer | <input type="checkbox"/> wholesale |
| <input type="checkbox"/> on-farm retail | <input type="checkbox"/> bulk commodities to | <input type="checkbox"/> other (specify) | |

ACO – ORGANIC FARM PLAN

(including specifications for USDA NOP Program if relevant)



processor	
Do you use or plan to use the ACO / USDA organic seal on product labels or market information? <i>Attach copies of all organic product labels.</i>	<input type="checkbox"/> YES <input type="checkbox"/> NO
Has label been approved by ACO office? <i>New label must be approved in writing by ACO prior to printing and use.</i>	<input type="checkbox"/> YES <input type="checkbox"/> NO

SECTION EIGHT: Affirmation

I affirm that all statements made in this application are true and correct. No prohibited products have been applied to any of my organically managed paddocks during the three-year period prior to projected harvest for certified organic status. I understand that the operation may be subject to unannounced audit and/or sampling for residues at any time as deemed appropriate to ensure compliance with the ACO Standard and the Organic Foods Production Act of 1990 and National Organic Program Rules and Regulations of USDA, if relevant. I understand that acceptance of this questionnaire in no way implies granting of certification by the ACO. I agree to provide further information as required by the ACO.

NAME of OPERATOR		TITLE /ROLE	
SIGNATURE OF OPERATOR		DATE	

The following documents must be submitted to ACO with this Organic Farm Plan (unless not applicable)

- I have attached the following documents:
- Maps of entire farm (showing adjoining land use and paddock identification)
 - Paddock history sheets or copy of Paddock diary for last 3years (for new client)
 - Documentation for paddocks owned or leased for less than three years, *if applicable*
 - Water test, *if applicable*
 - Soil tests and/or plant tissue tests, *if applicable*
 - MSDS for Inputs
 - Label/packaging using certifying agent logo
- I have made copies of this questionnaire and other supporting documents for my own records.
- Please submit completed form, fees, and supporting documents to:**

AUSTRALIAN CERTIFIED ORGANIC
PO Box 530
CHERMSIDE QLD 4032
AUSTRALIA

