



## Maharishi Vedic Organic Agriculture Institute

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### National Organic Program Compliant USDA Organic Farm Plan Questionnaire

This Questionnaire is meant to accompany the Maharishi Vedic Organic Agriculture Institute Application for Certification. Please complete the application first, giving all your general information on the application. Then use this form to present your complete farm plan information. The questions and charts are given to you as an aid in providing the necessary information. You should provide any additional information you feel is necessary or useful to MVOAI in making the certification decision. In addition to this, you will need to send us aerial or survey maps of your farm with each of the fields marked with a field identification number. (Please note that the field numbers you assign to each field should then be used for any and all references to that field.) Complete charts and maps are to be returned with this application.

| <b>SECTION 1: General Information</b>       |          |         |      |                    |                            |
|---|----------|---------|------|--------------------|----------------------------|
| Name  |          | Farm    |      | Type of Farm/Crops |                            |
| Address                                     |          |         | City |                    | <b>For Office Use Only</b> |
|   |          |         |      |                    | Received                   |
| State or Province                           | Zip code | Country |      | Reviewed           | Initials                   |
| Phone                                       |          | Fax     |      | Inspection         | Fee Submitted              |
|   |          | E-mail  |      |                    |                            |
| Total Annual Organic Sales from all sources |          |         |      | Late Fee           | Other                      |

| <b>SECTION 2: Farm Plan Information</b> | <b>NOP Rule 205.201(a) and 205.202(a) and (b)</b> |
|---|---|
|---|---|

*Please complete the table below indicating all crops for which certification is requested, field numbers where they are grown, including acreage. The acreages 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 histories are required for all fields. Please also attach updated MVOAI field history forms (available from MVOAI) that show all fields, [organic (O), or in transition (T) field numbers, acres, crops planted, yields and inputs applied.*

| CROPS REQUESTED FOR CERTIFICATION | FIELD NUMBERS | TOTAL ACRES PER CROP | PROJECTED YIELDS (VOLUME) |
|-----------------------------------|---------------|----------------------|---------------------------|
|                                   |               |                      |                           |
|                                   |               |                      |                           |
|                                   |               |                      |                           |
|                                   |               |                      |                           |

| CROPS REQUESTED FOR CERTIFICATION | FIELD NUMBERS | TOTAL ACRES PER CROP | PROJECTED YIELDS (VOLUME) |
|-----------------------------------|---------------|----------------------|---------------------------|
|                                   |               |                      |                           |
|                                   |               |                      |                           |
|                                   |               |                      |                           |
|                                   |               |                      |                           |
|                                   |               |                      |                           |
|                                   |               |                      |                           |

Have you managed all fields for 3 or more years?  yes  no If no, you must submit signed statements from the previous manager stating the use and all inputs applied for the previous three years on all newly rented or purchased fields.

Are all fields requested for certification located at the main farm address listed in section 1?  yes  no

Complete this information for main farm address and each parcel that is in a separate location from the main farm address. *If you are applying for wild crop harvest or apiary certification, describe the areas from which the crops will be harvested.*

| FIELD NOS. | PARCEL ADDRESS/<br>LEGAL DESCRIPTION  | NO. ACRES ORGANIC/<br>TRANSITIONAL/CONVENTIONAL |   |   | RENTED (R)/<br>OWNED (O) |
|------------|---------------------------------------|---|---|---|--------------------------|
|            |                                       | O   | T | C |                          |
|            | <i>main farm address listed above</i> |   |   |   |                          |
|            |                                       |   |   |   |                          |
|            |                                       |   |   |   |                          |
|            |                                       |   |   |   |                          |

**SECTION 3: Seeds and Seed Treatments** **NOP Rule 205.204**

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

List all seeds used or planned for use in the current season, including seeds planted previously on proposed organic fields. Check the appropriate boxes and provide other information as needed. Attach additional sheet if necessary.

No seeds used  All seeds are organic  Some untreated seed used  No GMO seeds purchased/planted

| SEED/VARIETY/BRAND | ORGANIC                  | UNTREATED                | TREATED                  | GMO                      | TYPE/BRAND OF TREATMENT<br>FUNGICIDE | INOCULANT | WHAT ATTEMPTS DID YOU MAKE<br>TO USE ORGANIC/UNTREATED<br>SEED? |
|--------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------------------|-----------|---|
|                    | <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"/> |                                      |           |   |



C. IF YOU GROW BOTH ORGANIC AND NON-ORGANIC PLANTS IN YOUR GREENHOUSE:  Not applicable

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?

How do you label organic and non-organic seedlings/plants?

List all soil mix ingredients, fertility products, foliar sprays, water system additives, pest and disease inputs used or planned for use in your non-organic greenhouse operation. *ATTACH LABELS OR HAVE LABELS AVAILABLE FOR INSPECTION, PER CERTIFYING AGENT POLICY.*

| PRODUCT | BRAND NAME OR SOURCE | STATUS: APPROVED (A)<br>RESTRICTED (R)<br>PROHIBITED (P) | IF RESTRICTED, DESCRIBE COMPLIANCE WITH<br>NOP RULE ANNOTATION | CHECK IF<br>GMO (✓)      |
|---------|----------------------|--|--|--------------------------|
|         |                      |  |  | <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"/> |

How do you prevent commingling 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 through ventilation and/or watering systems?

How do you clean seedling containers and equipment?

D. PLANTING STOCK: (Use additional sheets if necessary)  Not applicable

| TYPE | PLANTING STOCK SOURCE | CHECK IF ORGANIC         | CHECK IF NON-ORGANIC     | IF NON-ORGANIC, DATE PLANTED | IF NON-ORGANIC, EXPECTED HARVEST DATE | IF NON-ORGANIC, DESCRIBE ATTEMPTS TO OBTAIN ORGANIC PLANTING STOCK |
|------|-----------------------|--------------------------|--------------------------|------------------------------|---------------------------------------|--|
|      |                       | <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"/> |                              |                                       |  |

**SECTION 5: Soil and Crop Fertility Management**

**NOP Rule 205.203 and 205.205**

NOP Rule requires active management to build soil fertility, manage plant nutrients, protect natural resources, and prevent soil erosion. A diversified crop rotation is required. All fertility inputs must be approved. A "restricted" input refers to an approved material on the National List which has a specific annotation for its use (see NOP Rule 205.601(j)(1-8), (k) and 205.602(g) and (h). If you use a "restricted" material, you must provide evidence of how you address the material's annotation. Under NOP Rule 205.201(a)(3), the operator must monitor fertility practices and procedures to verify that the organic plan is effectively implemented.

Plant and animals materials (manure, compost, and uncomposted plant materials) must be managed so that they do not contribute to contamination of crops, soil, and water by plant nutrients, pathogenic organisms, heavy metals, or residues of prohibited substances.

**A. GENERAL INFORMATION**

What are your soil types?

What are your soil/nutrient deficiencies?

No deficiencies

How do you monitor the effectiveness of your fertility management program?  soil testing  microbiological testing  
 tissue testing  observation of soil  observation of crop health  comparison of crop yields  
 crop quality testing  other (specify)

Attach copies of available test results.

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 do you anticipate?

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

- crop rotation  green manure plowdown/cover crops  interplanting  incorporation of crop residues  subsoiling
- summer fallow  compost  on-farm manure  off-farm manure  soil amendments  side dressing
- foliar fertilizers  biodynamic preparations  soil inoculants  other (specify)

List all fertility inputs used or intended for use in the current season on proposed organic and transitional fields. *All inputs used during the current year and previous three years must be listed on your MVOAI Field History Form.*  Not applicable

| PRODUCT | BRAND NAME OR SOURCE | STATUS:<br>APPROVED (A)<br>RESTRICTED (R),<br>PROHIBITED (P) | NUMBER OF<br>APPLICATIONS<br>PER YEAR | REASON FOR USE |
|---------|----------------------|--|---------------------------------------|----------------|
|         |                      |  |                                       |                |
|         |                      |  |                                       |                |
|         |                      |  |                                       |                |
|         |                      |  |                                       |                |
|         |                      |  |                                       |                |
|         |                      |  |                                       |                |
|         |                      |  |                                       |                |
|         |                      |  |                                       |                |

If you use or plan to use restricted (R) fertility inputs, how do you comply with the points from the Federal Rule listed above in the introduction to this section"?  Not applicable

If you use fertilizers with high salt content (sodium nitrate, potassium sulfate, etc.), how do you prevent salt buildup?  Not applicable

Do you burn crop residues?  yes  no If yes, please describe what materials are burned and why.

Do you apply sewage sludge to fields?  yes  no If yes, list fields where applied.

**B. COMPOST USE.** NOP RULE 205.203(c)(2) requires that the composting process must 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.

List all compost ingredients/additives.

What composting method do you use?  in-vessel  static aerated pile  windrows  other (specify)

What is your C:N ratio?

Do you monitor temperature?  yes  no If yes, what temperature is maintained?

How long is this temperature maintained?

If compost is windrowed, how many times are materials turned?

**C. MANURE USE.** NOP RULE 205.203(c)(1) requires that raw manure must be fully composted unless applied to fields with crops not for human consumption or incorporated into the soil 120 days prior to harvest for crops whose edible portion has direct contact with the soil, or 90 days prior to harvest for all other crops for human consumption.

What forms of manure do you use?  none  liquid  semi-solid  piled  fully composted  pelleted  
 other (specify)

What type of crops do you grow (check all that apply)?

- crops not used for human consumption
- crops for human consumption whose edible portion has direct contact with the soil
- crops for human consumption whose edible portion does not have direct contact with the soil

If you grow crops for human consumption and use raw manure, complete the following table. *If composting manure, please fill out Section B above.*

| CROPS (S) | FIELD NUMBERS | DATE MANURE IS APPLIED | EXPECTED DATE OF HARVEST |
|-----------|---------------|------------------------|--------------------------|
|           |               |                        |                          |
|           |               |                        |                          |
|           |               |                        |                          |
|           |               |                        |                          |
|           |               |                        |                          |
|           |               |                        |                          |
|           |               |                        |                          |

What is the source of the manure you use?  on-farm  off-farm

List all sources of off-farm manure.

List all manure ingredients/additives.

If you use off-farm sources of manure, what are the potential contaminants (pit additives, feed additives, heavy metals, etc.) from these sources? *Attach residue analysis/additive specifications of off-farm manure if available.*

**D. NATURAL RESOURCES.** NOP Rule 205.200 AND 205.203(a) requires that production practices must maintain or improve the natural resources of the operation, including soil and water quality. Practices must minimize erosion. Depending on certifying agent policy, water tests may be required for nitrate and coliform bacteria if water is used for washing/processing organic products or for organic livestock. Irrigation water should not contaminate organic crops with prohibited materials. Methods to conserve water usage should be part of the irrigation plan.

What conservation practices are used?  terraces  contour farming  strip cropping  under sowing/interplanting  
 winter cover crops  conservation tillage  permanent waterways  windbreaks  firebreaks  tree lines  
 retention ponds  riparian management  maintain wildlife habitat  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?  weekly  monthly  annually  as needed  other (specify)

WATER USE:  none  irrigation  livestock  foliar sprays  washing crops  greenhouse  other (specify)

Source of water:  on-site well(s)  river/creek/pond  spring  municipal/county  irrigation district  other (specify)

Name of municipal/irrigation district.

Attach current water tests for coliform bacteria and nitrates if required by certifying agent policy.

Type of irrigation system:  none  drip  flood  center pivot  other (specify)

What input products are applied through the irrigation system?  none

What products do you use to clean irrigation lines/nozzles?  none

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

What practices are used to protect water quality?

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

List known contaminants in water supplies in your area. Attach residue analysis and/or salinity test results if available.

What water contamination problems do you experience (why and where)?

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)

NOP Rule requires a crop rotation plan 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 must 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 synthetic materials on the National List 205.601 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 annotations for its use. If you use a "restricted" material, you must provide evidence of how you address the materials' annotation.

**A. CROP ROTATION PLANS** (use one line for each rotation used):

| CROP ROTATION PLAN | FIELD NOS. WHERE PLAN IS FOLLOWED | ANTICIPATED CHANGES |
|--------------------|-----------------------------------|---------------------|
|                    |                                   |                     |
|                    |                                   |                     |
|                    |                                   |                     |
|                    |                                   |                     |
|                    |                                   |                     |

**B. Weed Management Plan:**

No weed problems

What are your problem weeds?

What weed control methods do you use?

- crop rotation    field preparation    prevention of weed seed set    delayed seeding    monitoring soil temperature
- soil sterilization    use of fast emerging varieties    mechanical cultivation    use of hand tools    hand weeding
- mowing    livestock grazing    flame weeding    steam weeding    electrical    smother crops    black fallow
- non-synthetic mulch    synthetic mulch    corn gluten    soap-based herbicides    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 a specific field? 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 Field History Sheet.

If you use plastic or other synthetic mulches, is the mulch removed at the end of the growing or harvest season?

yes    no   If no, why not?

If you use corn gluten, is the corn genetically modified? yes    no   If no, what verification do you have?

If you use newspaper or other recycled paper for mulch, do you use paper with glossy or colored inks? yes    no

Rate the effectiveness of your weed management program:  excellent  satisfactory  needs improvement

What changes do you anticipate?

How do you monitor the effectiveness of your weed management program?  weed counts  observation of weed types

observation of crop health  comparison of crop yields  records kept of observations/counts

other (specify)

How often do you conduct weed monitoring?  weekly  monthly  annually  as needed  other (specify)

**C. Pest Management Plan:**

No pest problems

What are your problem pests?  insects (list)

rodents  gophers  birds  other animals:

Do you work with a pest control advisor?  yes  no If yes, give name and contact information.

What strategies do you use to control pest damage to crops?

None

crop rotation  selection of plant species/varieties  development of habitat for natural enemies  timing of planting

companion planting  frog ponds  bat houses  bird houses  hand picking  monitoring

trap crops  physical barriers  physical removal  traps  lures  IPM  insect repellents

animal repellents  release of predators/parasites of pest species  use of approved products

use of restricted products  limited use of prohibited products  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 transitional fields. All inputs used or intended for use during the current year and in the previous three years must be listed on your Field History Sheet.

Not applicable

| PEST PROBLEM | CONTROL PRODUCT | STATUS:<br>APPROVED (A)<br>RESTRICTED (R)<br>PROHIBITED (P) | IF RESTRICTED, DESCRIBE COMPLIANCE WITH NOP RULE ANNOTATION | CHECK IF GMO             |
|--------------|-----------------|---|---|--------------------------|
|              |                 |   |   | <input type="checkbox"/> |
|              |                 |   |   | <input type="checkbox"/> |
|              |                 |   |   | <input type="checkbox"/> |
|              |                 |   |   | <input type="checkbox"/> |
|              |                 |   |   | <input type="checkbox"/> |

Rate the effectiveness of your pest management program:  excellent  satisfactory  needs improvement

What changes do you anticipate?

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.

How often do you conduct pest monitoring?  weekly  monthly  annually  as needed  other (specify)

**D. Disease Management Plan:** \_\_\_\_\_  No disease problems

What are your problem crop diseases?

What disease prevention strategies do you use?  None

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

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

Not applicable

| DISEASE PROBLEM | CONTROL PRODUCT | STATUS:<br>APPROVED (A)<br>RESTRICTED (R)<br>PROHIBITED (P) | IF RESTRICTED, DESCRIBE COMPLIANCE WITH NOP<br>RULE ANNOTATION | CHECK<br>IF GMO<br>(✓)   |
|-----------------|-----------------|---|--|--------------------------|
|                 |                 |   |  | <input type="checkbox"/> |
|                 |                 |   |  | <input type="checkbox"/> |
|                 |                 |   |  | <input type="checkbox"/> |
|                 |                 |   |  | <input type="checkbox"/> |

Rate the effectiveness of your disease management program:  excellent  satisfactory  needs improvement

What changes do you anticipate?

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

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

Attach copies of any test results.

How often do you conduct disease monitoring?  weekly  monthly  annually  as needed  other (specify)

**A. ADJOINING LAND USE:**

NOP RULE requires that organic production areas have distinct boundaries and buffer zones to prevent the unintended application of a prohibited substance or contact with a prohibited substance that is applied to adjoining land not under organic management. Adjoining land includes crop land, pastures, residential property, fallow land, etc. Buffer areas may change annually, depending on contamination potential from adjoining land uses. The width of the minimum buffer is dependent on certifying agent policy. The NOP Rule requires that the buffer must be sufficient in size or other features (windbreaks, diversion ditches) to prevent the unintended contact by prohibited substances applied to adjacent land areas. Crops within the required buffer must be left unharvested or harvested, stored, and disposed of as non-certified crop, with records kept of crop disposition. Indicate buffer zones and show all adjoining land uses on your field maps.

List specific buffer areas you maintain: *(Show all adjoining land uses on your field maps.)*  Not applicable

| LOCATION/FIELD NUMBERS | TYPE OF BUFFER (CROP LAND, TREELINE, HEDGEROW, 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.) |
|------------------------|--|-----------------|--------------------|---|
|                        |  |                 |                    |   |
|                        |  |                 |                    |   |
|                        |  |                 |                    |   |
|                        |  |                 |                    |   |
|                        |  |                 |                    |   |

If crops are harvested from the buffer zones with equipment used for harvesting organic crops, what safeguards do you use to protect organic crops from contact with buffer crops?

What additional safeguards do you use to prevent accidental contamination?  None

Written notification to:  highway departments  electric companies  aerial spray companies/airports  
 adjoining landowners  drainage commissions  farm service office  other (specify)

Have you posted signs along roadsides that adjoin organic fields?  yes  no

Do any fields or portions of fields flood frequently (more than once every ten years)?  yes  no  
 If yes, list field numbers.

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)

Do you grow the same crops organically, as well as in transition, and/or conventionally (parallel production)?  
 yes  no If yes, list specific crop varieties in the next table for both organic and transitional/conventional crops.

If you grow any conventional or transitional crops, please fill out the following table.

Not applicable

| SPECIFIC CROPS/VARIETIES | FIELD NUMBERS | TRANSITIONAL (T) OR CONVENTIONAL (C) | ORGANIC CROP VARIETY | CHECK IF GMO (✓)         | TOTAL ACREAGE | PLANNED USE OF CROP (SALE, SEED, NON-ORGANIC LIVESTOCK FEED, ETC.) |
|--------------------------|---------------|--------------------------------------|----------------------|--------------------------|---------------|--|
|                          |               |                                      |                      | <input type="checkbox"/> |               |  |
|                          |               |                                      |                      | <input type="checkbox"/> |               |  |
|                          |               |                                      |                      | <input type="checkbox"/> |               |  |

Prohibited soil amendments used on conventional crops:

| PRODUCT NAME | WHO APPLIES? SELF (S) CUSTOM (C) | FIELD NOS. 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) CUSTOM (C) | FIELD NOS. WHERE APPLIED | WHERE STORED? (ON-FARM OR OFF-FARM; WHERE ON FARM?) |
|--------------|----------------------------------|--------------------------|---|
|              |                                  |                          |   |
|              |                                  |                          |   |

**C. Equipment:** To prevent commingling 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, cultivation, spraying, and harvesting.

Not applicable

| EQUIPMENT NAME | OWNED (O), RENTED (R), CUSTOM(C) | CHECK (✓) IF USED ON BOTH ORGANIC & CONVENTIONAL | HOW IS EQUIPMENT CLEANED BEFORE USE ON ORGANIC FIELDS? |
|----------------|----------------------------------|--|--|
|                |                                  |  |  |
|                |                                  |  |  |
|                |                                  |  |  |
|                |                                  |  |  |
|                |                                  |  |  |

Is your equipment maintained so that fuel, oil and hydraulic fluid do not leak?  yes  no  Not applicable

If you use a sprayer:

What type?

Did you purchase it new or used?

Other equipment: Could any equipment you use have been contaminated by previous uses?  yes  no

If yes, describe:

**D. HARVEST:** 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 custom harvested?  yes  no If yes, provide name and address of custom harvester.

Describe steps taken to protect organic crops from commingling and contamination during harvest.

What containers are used for harvesting?  gravity wagons/boxes  truck boxes  cardboard/waxed boxes  
 wooden totes  plastic containers  other

Are containers new or used?  new  used If used, what did they contain prior to organic use?

Are the containers used for organic crops only?  yes  no

Describe potential contamination or commingling problems do you have with harvest of organic crops.  None

**E. POST-HARVEST HANDLING:**  Not applicable

NOP Rule 205.201(a)(5) requires 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 Processing/Handling Plan Questionnaire.

Describe your post-harvest handling procedures and equipment:

Is the processing area and equipment used for both organic and non-organic products?  yes  no If yes, describe steps taken to prevent commingling and contamination.

Does packaging present any contamination problems for your organic products?  yes  no If yes, what are they?

Check types of packaging material used:  bulk  paper  cardboard  wood  glass  metal  foil  plastic  
 waxed paper  aseptic  natural fiber  synthetic fiber  other (specify)

In what form are finished products shipped?  dry bulk  liquid bulk  tote bags  tote boxes  paper bags  
 foil bags  metal drums  mesh bags  cardboard drums  cardboard cases  plastic crates  
 other (specify)

**F. CROP STORAGE:** Operators must keep organic and non-organic crops in separate storage areas and prevent commingling and contamination. Storage records must be maintained.  No organic crop storage

**Describe your storage locations.**

| STORAGE ID# | TYPE OF CROPS STORED | TYPE OF STORAGE | CAPACITY | ORGANIC (O), TRANSITIONAL (T), BUFFER (B, CONVENTIONAL (C)) |
|-------------|----------------------|-----------------|----------|---|
|             |                      |                 |          |   |
|             |                      |                 |          |   |

|  |  |  |  |  |
|--|--|--|--|--|
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Do you use the same storage areas for organic, transitional, buffer, and/or conventional crops?  yes  no

If yes, how do you segregate organic crops from non-organic crops?

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

How do you prevent/control insect pests in crop storage areas?  No insect problems

How do you control rodents in crop storage areas?  No rodent problems

What stored crop inputs have you used in the last three years?  None

- synthetic fumigants  rodenticides  sprouting inhibitors  ripeners  growth regulators  preservatives  oils
- coloring agents  waxes  other (specify)

Are any stored crop inputs used or planned for use on organic crops?  yes  no *if yes, specify input and retain labels.*

**G. TRANSPORTATION:**  Not applicable

Who is responsible for arranging transportation of organic products:

- self  buyer  other

Describe how organic products are transported.

What potential contamination or commingling problems do you have with the transport of organic crops?  None

What steps are taken to protect the integrity of organic products during transport?

- dedicated organic only  inspecting transport units prior to loading  cleaning transport units prior to loading
- use of Clean Truck Affidavits  letter/contract with transport company stating organic requirements
- other (specify)

**SECTION 8: Record Keeping System****NOP Rule 205.103**

**NOP Rule requires that records disclose all activities and transactions of the operation, be maintained for 5 years, and demonstrate compliance with the NOP Rule. Organic products must be tracked back to the field/location where they were produced/harvested. All records must be accessible to the inspector.**

Which of the following records do you keep for organic production?

- field maps or maps of wild harvest areas
- field activity log(s)
- field history sheets (previous three years)
- documentation of previous land use for rented and/or newly purchased land
- input records for soil amendments, seeds, manure, foliar sprays and pest control products (keep all labels)
- documentation of attempts to source organic seeds and/or planting stock
- documentation of organic seedlings
- residue analyses of inputs (i.e., manure sourced off-farm)
- compost production records
- monitoring records (soil tests, tissue tests, water tests, quality tests, observational)
- equipment cleaning records
- harvest records that show field numbers, date of harvest and harvest amounts (including custom harvest records)
- labor records
- storage records that show storage location, storage identification, field 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 (scale ticket, dump station ticket, bill of lading)
- Transaction Certificates
- audit control summary
- Complaints log (ISO 65 only NOT required for NOP certification)
- other (please specify)

How long do you keep your records?

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

Not applicable

- |   |   |
|---|---|
| <input type="checkbox"/> field maps           | <input type="checkbox"/> labor 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)      |   |

Type of Marketing:

- farmers market  
  direct to retail  
  CSA/subscription service  
  wholesale  
  on-farm retail  
 bulk commodities to processor  
 contract to buyer  
 other (specify)

Do you use or plan to use the USDA organic seal on product labels or market information?  yes  no

Do you use or plan to use the MVOAI seal on product labels or market information?  yes  no

*Attach copies of all organic product labels.*

## SECTION 9: 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 fields during the three-year period prior to projected harvest. I understand that the operation may be subject to unannounced inspection and/or sampling for residues at any time as deemed appropriate to ensure compliance with the NOP Rule. I understand that acceptance of this questionnaire in no way implies granting of certification by the certifying agent. I agree to follow the NOP Rule and to supply all needed and necessary information for the evaluation of products certified.

Signature of Operator

Date

I have attached the following documents:

- Maps of all parcels/fields or areas of wild crop harvest or apiary activity. (Showing adjoining land use and field identification)
- MVOAI Field history forms
- Documentation for fields owned or rented for less than three years, if applicable
- Water test, if applicable
- Soil and/or plant tissue tests, if applicable
- Residue analyses, if applicable
- Input product labels, if applicable
- Organic product labels, if applicable
- All required Maharishi Vedic Organic Certification forms and application materials
- I have made copies of this questionnaire and other supporting documents for my own records.

**Submit completed form, fees and supporting documents to:**

**Maharishi Vedic Organic Agriculture Institute**

1852 Crystal Springs Lane

Maharishi Vedic City, Iowa, 52556

Phone (641) 472-4442, fax (641) 472-2551

e-mail [vedicagriculture@maharishi.net](mailto:vedicagriculture@maharishi.net)

[www.mvoai.org](http://www.mvoai.org)