



Handler: Production Operation Profile

Electronic versions available at agrorganic@mt.gov

Section

A

Handler Name(s):

Date:

Detailed directions to the handling/processing facilities:



Section A: Production Operation Profile

NOP § 205.201

The National Organic Program Standards require all operations seeking certification to develop an organic system plan that is agreed to by the certified operation and an accredited certifying agent. A certified operation must update this system plan on an annual basis in order to verify continued compliance.

You may change or update your plan throughout the year. Changes must be submitted the Department prior to implementation. Plan updates may be submitted by phone, fax, email or letter.

1. Check the box(s) that apply to your operation:

Organic

Organic and Non-Organic

2. Provide a brief description of your business:

3. A flow chart of the handling facility & product(s) must be submitted as an attachment. (May be hand drawn)

Flow Chart Included? Yes No

4. Does your business maintain applicable State and county licenses?

Yes

No

5. Do you have a copy of the National Organic Standards?

Yes

No, visit <http://agr.mt.gov>



Handler: Production Operation Profile

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**Section
A**

Handler Name(s):

Date:

Department Use Only	<input type="checkbox"/> Initial Reviewer	<input type="checkbox"/> Inspector	<input type="checkbox"/> Final Reviewer
Is it Complete?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Verified & Accurate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Observation/Comment:			



Handler: Production Operation Profile New Applicant

Section A1

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Handler Name(s):	License Number (Office Use Only):
Business Name:	Location (County/State):
Section A1: New Applicant Section	

1. Are you a new applicant?
 Yes No, **go to Section B**

2. Have you previously applied for organic certification with another certifier?
 Yes No, **go to Section B**
If Yes, please list the certification agency, the year the application was made, and the outcome of the application.
 Accredited Certifier: _____ Year: _____ Certified? Yes No

3. If currently or previously certified by another certifier, did you receive a notice of noncompliance.
 Yes No
If Yes, please list the non-compliance(s), and state how the issues were resolved:

4. Have you ever been denied certification or had your certification suspended or revoked?
 Yes No
If Yes, please describe the circumstances:



Handler: Production Operation Profile New Applicant

Section
A1

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Handler Name(s):

Date:

Department Use Only	<input type="checkbox"/> Initial Reviewer	<input type="checkbox"/> Inspector	<input type="checkbox"/> Final Reviewer
Is it Complete?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Verified & Accurate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Observation/Comment:			



Handler: International Market Requirements

**Section
B**

Electronic versions available at agroorganic@mt.gov

Handler Name(s):

Date:

Section B: International Market Requirements

NOP §205.103

1. Do you plan to Export to Canada, Europe, Korea, Switzerland or Taiwan?

- Yes, please complete this form as applicable No, go to Section C

2. If Yes, which countries?

- Europe Canada Japan Korea Switzerland Taiwan

U.S. NOP and Export Market Differences

Management Practice/Concern	Answer	Restrictions
3. Do you plan to export raw or unprocessed products?	<input type="checkbox"/> No, I do not plan to export raw or unprocessed products	Prohibited in Korea
	<input type="checkbox"/> Yes, all of the products I plan to export are raw or unprocessed products	
	<input type="checkbox"/> Some of the products I plan to export are raw or unprocessed products Describe:	
4. Do you export wine to the EU or Switzerland or produce wine that may be exported to the EU or Switzerland?	<input type="checkbox"/> No, I do not produce wine	Required for EU and Switzerland
	<input type="checkbox"/> Yes, I produce wine	



Handler: International Market Requirements

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Section B

Handler Name(s):

Date:

Department Use Only	<input type="checkbox"/> Initial Reviewer	<input type="checkbox"/> Inspector	<input type="checkbox"/> Final Reviewer
Is it Complete?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Verified & Accurate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Observation/Comment:			



Handler: Organic System Plan and General Requirements for Certification

Section
C

Electronic versions available at agroorganic@mt.gov

Handler Name(s):

Date:

Section C: Company Description

NOP §205.201,205.270 205.401

1. Check which processing categories apply to the facility:

- | | |
|-----------------------------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> Packer of Raw agricultural products | <input type="checkbox"/> Re-packer of previously packaged products |
| <input type="checkbox"/> Processor of Raw agricultural products | <input type="checkbox"/> Handler, no re-packing |
| <input type="checkbox"/> Processor of multi-ingredient products | <input type="checkbox"/> Other: |

2. What specific types of organic and non-organic processing and handling occurs at this facility?

- | | | | |
|-----------------------------------|-------------------------------------|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Milling | <input type="checkbox"/> Fermenting | <input type="checkbox"/> Separation | <input type="checkbox"/> Frying |
| <input type="checkbox"/> Roasting | <input type="checkbox"/> Cooking | <input type="checkbox"/> Distilling | <input type="checkbox"/> Slaughtering |
| <input type="checkbox"/> Heating | <input type="checkbox"/> Baking | <input type="checkbox"/> Cutting | <input type="checkbox"/> Grinding |
| <input type="checkbox"/> Freezing | <input type="checkbox"/> Curing | <input type="checkbox"/> Extracting | <input type="checkbox"/> Churning |
| <input type="checkbox"/> Mixing | | <input type="checkbox"/> Jarring | |
| <input type="checkbox"/> Other: | | | |

3. Indicate how the organic products will be marketed:

- Wholesale Retail Other:

4. During what time period do you estimate you will be processing or handling organic products during the upcoming year?

- Daily Monthly Seasonally Annually Other:

5. Indicate the estimated percent of annual production:

Percent Organic	Percent Non-Organic
-----------------	---------------------

6. Does the company handle the same product in both an organic and a non-organic form?

- Yes No

If Yes, please list the product(s):

7. Does the company own the organic products handled and processed at this facility?

- Yes No



Handler: Organic System Plan and General Requirements for Certification

Section C

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Handler Name(s):

Date:

Department Use Only	<input type="checkbox"/> Initial Reviewer	<input type="checkbox"/> Inspector	<input type="checkbox"/> Final Reviewer
Is it Complete?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Verified & Accurate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Observation/Comment:			



Handler: Organic Handling Requirements

Electronic versions available at agroorganic@mt.gov

Section D

Handler Name(s):

Date:

Section D: Organic Handling Requirements **NOP §205.103, 205.601, 205.605, 205.270, 205.272,**
205.103 – Recordkeeping by certified operations
205.270 – Handling Requirements
205.272 – Comingling & contents with prohibited substance prevention
205.601 – Synthetic substances
205.605 – Non Agricultural organic substances allowed as ingredients

1. Is the company responsible for any portion of harvest of an organic product?

- Yes No **If no go to #4**

1a. If Yes, how is commingling and contamination prevented and documented?

- Equipment is used for organic crops only Clean truck/equipment affidavits
 Equipment is cleaned prior to harvest Clean out records
 Other:

2. Does the company provide harvest containers to farms for organic products that are handled or processed?

- Yes No, **Go to #4**

2a. If Yes, check all that apply regarding containers:

- Only new containers or those that have not been in contact with prohibited substances are used for organic crops.
 Containers were used for nonorganic products in the past. Cleaned and now dedicated to organic only.
 Containers are used for both nonorganic and organic crops and are cleaned prior to each organic use.
 Containers are used for both nonorganic and organic crops and are lined prior to each organic use.

2b. Containers are:

Wood Plastic Other:

3. Describe how organic harvest containers are distinguished from any nonorganic containers that you may also provide.

N/A

3a. If applicable, how are organic harvest containers distinguished from any nonorganic containers that you may also provide?

4. Is the company responsible for the transportation of organic products?

- Yes No, **Go to #5**

4a. If Yes, how is commingling and contamination prevented and documented?

- Containers is used for organic crops only Clean truck/equipment affidavits
 Containers is cleaned prior to harvest Clean out records
 Other:



Handler: Organic Handling Requirements

Electronic versions available at agroorganic@mt.gov

Section

D

Handler Name(s):

Date:

Receiving:

5. How are organic crops, products, and ingredients received at your facility?

- | | | |
|---------------------------------------|--------------------------------------|------------------------------------------|
| <input type="checkbox"/> Bins | <input type="checkbox"/> Burlap Bags | <input type="checkbox"/> Wholesale Boxes |
| <input type="checkbox"/> Bulk Trailer | <input type="checkbox"/> Totes | <input type="checkbox"/> Retail Packages |
| <input type="checkbox"/> Drums | <input type="checkbox"/> Other: | |

6. What receiving/shipping documents accompany incoming organic products?

- | | | |
|----------------------------------------------|---------------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Organic Certificate | <input type="checkbox"/> Certificates of Analysis | <input type="checkbox"/> Transaction Certificate |
| <input type="checkbox"/> Invoice | <input type="checkbox"/> Contracts | <input type="checkbox"/> Clean truck/equipment affidavits |
| <input type="checkbox"/> Bill of Lading | <input type="checkbox"/> Purchase Order | <input type="checkbox"/> Field Ticket |
| <input type="checkbox"/> Scale Ticket | <input type="checkbox"/> Other: | |

7. How are organic crops, products, and ingredients distinguished from non-organic products on receiving documents, if applicable?

N/A

8. Is an internal lot code assigned at the time of receipt of organic crops, products, or ingredients?

- Yes No

8a. If Yes, describe the lot code system:

9. Are incoming organic products or ingredients stored before processing or packaging?

- Yes No N/A Go to #10

9a. If Yes, check all that apply:

- | | | |
|------------------------------------|----------------------------------|-----------------------------------|
| <input type="checkbox"/> Warehouse | <input type="checkbox"/> Pallets | <input type="checkbox"/> Shelving |
| <input type="checkbox"/> Rail Car | <input type="checkbox"/> Bins | <input type="checkbox"/> Tanks |
| <input type="checkbox"/> Boxed | <input type="checkbox"/> Other: | |

Water:

10. How is water used at the facility?

- | | | |
|-----------------------------------------------------|---------------------------------------------|-------------------------------------------------------------|
| <input type="checkbox"/> Not used, Go to #19 | <input type="checkbox"/> Cleaning Equipment | <input type="checkbox"/> Product Transport (Fruit Floating) |
| <input type="checkbox"/> Ingredient | <input type="checkbox"/> Cooking | <input type="checkbox"/> Cleaning organic products |
| <input type="checkbox"/> Cooling | <input type="checkbox"/> Other: | |

11. Source of water:

- Municipal On-site well Other:

12. Is water treated/filtered on-site?

- Yes No



Handler: Organic Handling Requirements

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Section

D

Handler Name(s):

Date:

12a. If Yes, indicated what water treatment process and/or type of filter:

13. Describe how water quality is monitored at the facility:

14. Is chlorine, calcium hypochlorite, chlorine dioxide, or sodium hypochlorite used in wash water (not diluted spray bottles or buckets) or flume water at your facility?

- Yes
- No, **Go to # 15**

14a If Yes, how do you monitor or test that the residual chlorine level is at or below 4ppm for final rinse water in contact with Organic products?

14b. How often do you monitor or test?

- Daily
- Weekly
- Monthly
- Annually
- Other:

14c. Please describe how you document the results of your monitoring or testing:

Steam:

15. Is boiler steam used in the processing or packaging of food products?

- Yes
- No, **Go to #19**

15a If Yes, does the steam have direct contact with organic products?

- Yes
- No, **Go to #19**

16. Are boiler water additives used during food handling or processing?

- Yes
- No

16a If Yes, please list all products used as boiler additives at your facility in the table below. Indicated which boiler water additives will be used during handling and processing of organic food products.

Name of Boiler Water Additive	Used During Organic Handling or Processing?	Source Name and Phone #

Attach MSDS and/or label information for boiler additives you plan to use during organic handling or processing.

17. If Yes, boiler additives are in use, are there any the following? Check all that apply

- Steam Filters
- Testing of finished products
- Testing of condensate
- Other:
- Condensate traps



Handler: Organic Handling Requirements

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Section D

Handler Name(s):

Date:

18. If boiler water additives are used during organic processing, describe how you prevent prohibited volatile boiler additives from contaminating organic ingredients or products:

Production:

19. How is organic production designated on production documents?

20. Are the packing or processing lines and/or equipment dedicated for use with organic products only?

Yes No

20a. If No, describe how you ensure separation of organic and nonorganic processing:

21. Is equipment purged with organic product prior to processing?

Yes No

21a. If Yes, complete the table below:

Equipment	Capacity of Equipment	Quantity of Purge	Where does the purged product go?	Name of document purge is recorded on
			<input type="checkbox"/> Sold as Non-Organic <input type="checkbox"/> Waste Stream	
			<input type="checkbox"/> Sold as Non-Organic <input type="checkbox"/> Waste Stream	
			<input type="checkbox"/> Sold as Non-Organic <input type="checkbox"/> Waste Stream	
			<input type="checkbox"/> Sold as Non-Organic <input type="checkbox"/> Waste Stream	

22. How are partial pallets/boxes/drums of organic products handled?

23. How are organic products protected from commingling with non-organic products during production, processing? Include details regarding storage of partial containers.



Handler: Organic Handling Requirements

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Section D

Handler Name(s):

Date:

Storage:

24. Are processed and packed organic products stored before shipping?

- Yes No

24a. If Yes, complete the table below:

Processed Organic Product	Location and Name of Storage Area	Type and Capacity of Storage	Is the area dedicated to only organic products?
<i>Example: Cheese Rounds</i>	<i>Curing Shed</i>	<i>100ft of shelving</i>	<i>Yes</i>

Sanitation:

25. Check all cleaning methods used prior to handling or processing organic products:

- Sweeping Soap and Water Steam Cleaning Scraping
 Manual Washing Vacuuming Clean in place (CIP) Purging of equipment
 Compressed Air Sanitizing Other:

26. List cleaning and/or sanitation materials that come into contact with the equipment used to process and/or package organic products in the table below.

Provide information on your cleaning program and products used:

Area	Type of Cleaning	Cleaning Equipment Used	Frequency	Is Cleaning Documented? (Y/N)	Cleaning Products Used
Receiving					
Ingredient Storage					
Product Transfer					
Production					
Production Equipment					
Packaging					
Finished Product Storage					
Loading Dock					
Building Exterior					
Accidental Spills					
Other (specify):					

27. Describe what intervening steps are taken to ensure no residues from cleansers or sanitizers remain on equipment. (These steps may include, but are not limited to, use of non-residual materials, potable water rinses, evaporation, residue testing.)

N/A



Handler: Organic Handling Requirements

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Section

D

Handler Name(s):

Date:

28. Please provide labels, fact sheets, MD/or MSDS for cleaning products used. Identify if they are OMRI/WSDA approved or 205.605 approved.

I have attached all labels and fact sheets for cleaning products used. **N/A**

Please note that any material that is included on the National List may be used in direct contact with organic products without an intervening step. Examples include citric acid and peracetic acid.



Handler: Organic Handling Requirements

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Section D

Handler Name(s):

Date:

Department Use Only	<input type="checkbox"/> Initial Reviewer	<input type="checkbox"/> Inspector	<input type="checkbox"/> Final Reviewer
Is it Complete?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Verified & Accurate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Observation/Comment:			



Handler: Facility Pest Management

Electronic versions available at agrorganic@mt.gov

Section E

Handler Name(s):

Date:

Section E: Facility Pest Management

NOP §205.271

The producer or handler of an organic facility must use management practices to prevent pests.

Use of pest control products must be documented and included as part of the organic system plan.

1. What type of pest management system does the facility use? N/A

- In house. Name of responsible person: _____
- Contract pest control service. Business name: _____
- Other: _____

2. Check all pest problems that are applicable at the facility:

- No pest problems
- Flying insects
- Birds
- Crawling insects
- Rodents
- Other: _____

3. Describe your system for monitoring pest populations, including frequency and monitoring documentation maintained:

4. Check all pest management practices used at the facility:

Preventative:

- Sanitation and clean up
- Monitoring
- Air Curtains
- Physical Barriers
- Clean up spilled products
- Screened windows/vents
- Air Shower
- Positive Air Pressure System
- Sealed doors and/or windows
- Incoming ingredient inspections
- Removal of exterior habitat/food sources
- Other: _____

Mechanical:

- Mechanical Traps
- Sticky Traps
- Heat Treatments
- Nitrogen
- Ultrasound/light devices
- Electrocutors
- Vacuum Treatments
- Release of beneficials
- Freezing Treatments
- CO2

Pest Control Materials – On National List

- Pheromone Traps
- Pyrethrum
- Vitamin Baits
- Rotenone
- Diatomaceous earth
- Boric Acid

Pest Control Materials – Not on National List*

- Crack and Crevice Spray
- Other: _____
- Fumigation
- Fogging

5*If you noted use of any pest control material not on the National List, explain why this material must be used and include details about why preventative and allowed methods are not proving effective (Please note that approval is required, prior to synthetic substance use): None Used



Handler: Facility Pest Management

Section
E

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Handler Name(s):

Date:

6. Submit details on fumigation, fogging, or sprays used at the facility in the table below:

None Used, **Skip to Section F**

Generic and Brand Name of Substance	Where is the Substance used?	Frequency of use	Method of application	Name of document use is recorded on

6a. Explain how organic products and packaging are protected from exposure to the above prohibited materials:



Handler: Facility Pest Management

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**Section
E**

Handler Name(s):

Date:

Department Use Only	<input type="checkbox"/> Initial Reviewer	<input type="checkbox"/> Inspector	<input type="checkbox"/> Final Reviewer
Is it Complete?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Verified & Accurate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Observation/Comment:			



Handler: Use of Term "Organic"/Product Composition

Section F

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Handler Name(s):

Date:

Section F: Use of Term "Organic" Product Composition

NOP §205.300 & 301

1. What category are the product(s) compositions(s) handled/processed under?

- 100% Organic Organic "Made With"
 (At least 70% of the product must be certified organic ingredients)

2. How are organic certificates obtained for ingredients? (check all that apply):

- With each incoming order Annually Semi Annually
 Other:

3. How do you verify that ingredients for "Organic" and "Made With" products have not been produced with excluded methods (GMOs), ionizing radiation, or sewage sludge?

- Obtain letter from source OMRI registered WSDA BNML
 N/A Other:

4. How is the above obtained for verification?

- Not applicable, all organic ingredients and processing aids.
 With each shipment of nonorganic ingredients or processing aids.
 With each shipment of nonorganic ingredients or processing aids from a new
 Other:

supplier.

5. Is salt an ingredient used in handling or processing?

- Yes No N/A, **Go to Section G**

6. If Yes, is there verification that it does not contain a prohibited flow or anticaking agent?

- Yes No



Handler: Use of Term "Organic"/Product Composition

**Section
F**

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Handler Name(s):

Date:

Department Use Only	<input type="checkbox"/> Initial Reviewer	<input type="checkbox"/> Inspector	<input type="checkbox"/> Final Reviewer
Is it Complete?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Verified & Accurate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Observation/Comment:			



Handler: Organically Produced Ingredients

Electronic versions available at agrorganic@mt.gov

Section
G

Handler Name(s):

Date:

Section G: Calculating the percentage of organically produced ingredients

NOP §205.302

“The percentage of all organically produced ingredients in an agricultural product sold, labeled, or represents as, “100% organic” “Organic” or “Made with organic” (Specified ingredients or food groups), or that include organic ingredients must be calculated by....”

1. A product profile is required for each product:

Form available at:

http://agr.mt.gov/Portals/168/Documents/OrganicProgram/Product_Profile_FormV15D1.pdf

- Product profiles attached
- No changes, product profiles current on file with MTDA
- Revised product profile attached
- New product profile attached
- N/A

Packaged Products

NOP §205.103, 205.300, 205.303,205.304,205.305

205.103 Recordkeeping by certified operations

205.300 Use of the term “Organic”

205.303 Packaged products labeled “100 percent organic or organic”

205.304 Packaged products labeled “made with organic”

205.305 Multi-ingredient packaged products with less than 70 percent organically produced ingredients

2. A product profile summary is required annually to ensure accuracy of your certificate:

- Product profile summary attached
- No changes, product profile summary current
- Revised product profile summary attached
- N/A



Handler:Organically Produced Ingredients

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Section G

Handler Name(s):

Date:

Department Use Only	<input type="checkbox"/> Initial Reviewer	<input type="checkbox"/> Inspector	<input type="checkbox"/> Final Reviewer
Is it Complete?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Verified & Accurate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Observation/Comment:			



Handler: Packaged Products

Electronic versions available at agrorganic@mt.gov

Section H

Handler Name(s):

Date:

Section H: Packaged Products

NOP §205.303 – 205.305

Labeled as "100percent organic", "organic", "made with organic", or multi-ingredient products with less than 70 percent organically produced ingredients.

1. What labeling categories are used?

N/A

- 100% Organic Organic "Made With" (At least 70% of the product must be certified organic ingredients)

2. A label review is required for each product?

- Label(s) attached
 Label(s) current and on file with MTDA
 Revised label attached
 New label attached
 N/A

Private Labels – Products manufactured or provided by one company for offer under another company's brand.

3. Does your handling facility pack product for another company with that company's branded label?

- Yes No

3b. If Yes, please list the branded (private) labels and their organic certifier:

Contract farm or Company Name	Address	Certification Agency of the Contract Company	Service Provided

If you are handling organic product for another company you must submit the product information prior to distribution. If a contractor provides you with new or revised labels, those labels need to be approved prior to use.

4. Does the handling facility contract with any producers or handlers to produce, process, package, or store organic products.

- Yes No



Handler: Packaged Products

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Section H

Handler Name(s):

Date:

4b. If Yes, please complete the table below:

Contract farm or Company Name	Address	Certification Agency of the Contract Company	Service Provided

Organic Handling Requirements & comingling and contact with prohibited substance prevention
NOP §205.270 & 205.272
Packing materials, bins, and storage containers must not contain synthetic fungicides, preservatives, or fumigants. Reusable bags or containers that have been in contact with any prohibited substance in the past must be thoroughly cleaned before use. Procedures used to maintain the organic integrity of products must be documented.

5. What type(s) of packaging materials or storage/shipping containers are used? Check all that apply

- | | | | | |
|----------------------------------------|----------------------------------|--------------------------------|------------------------------------|-----|
| <input type="checkbox"/> Paper | <input type="checkbox"/> Foil | <input type="checkbox"/> Poly | <input type="checkbox"/> Cardboard | N/A |
| <input type="checkbox"/> Waxed Paper | <input type="checkbox"/> Aseptic | <input type="checkbox"/> Wood | <input type="checkbox"/> Glass | |
| <input type="checkbox"/> Natural Fiber | <input type="checkbox"/> Plastic | <input type="checkbox"/> Metal | <input type="checkbox"/> Other: | |

6. Are all packaging materials and/or storage and shipping containers food grade?

- Yes No Other:

7. Have any packaging and/or storage and shipping containers been exposed to synthetic fungicides, preservatives, or fumigants?

- Yes No

7a. If yes, please describe:

8. Are packaging materials and/or storage and shipping containers re-used?

- Yes No

9. If Yes, describe how organic products are protected from contamination when placed in the re-used container:



Handler: Packaged Products

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Section H

Handler Name(s):

Date:

10. Describe how packages or containers are identified as organic:

11. Is all organic packaging and labeling equipment cleared prior to subsequent non-organic runs?

Yes No N/A

12. Complete the table below with the details regarding storage of all packaging materials and containers.

Packing Materials	Location and Name of Storage Area	Is Area Dedicated to Organic Packaging Only?

13. Are any oxygen displacers (e.g. nitrogen gas) or moisture absorbers used in your packaging?

Yes No

14. If Yes, please list:

15. Are there additional locations where ingredients and products are stored?

Yes No

15a. If Yes, provide the address of other locations and use:



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Section H

Handler Name(s):

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Department Use Only	<input type="checkbox"/> Initial Reviewer	<input type="checkbox"/> Inspector	<input type="checkbox"/> Final Reviewer
Is it Complete?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Verified & Accurate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Observation/Comment:			



Handler: Labeling/USDA Seal

Electronic versions available at agrorganic@mt.gov

Section

I

Handler Name(s):

Date:

Section I: Labeling and USDA Seal of non-retail containers used only for shipping or storage

NOP §205.307 - 311

1. How do organic products leave the facility? Check all that apply

- | | | | |
|--------------------------------|------------------------------------------|------------------------------------------|---------------------------------------|
| <input type="checkbox"/> Bins | <input type="checkbox"/> Bulk bags | <input type="checkbox"/> Wholesale boxes | <input type="checkbox"/> Bulk trailer |
| <input type="checkbox"/> Totes | <input type="checkbox"/> Retail packages | <input type="checkbox"/> Drums | <input type="checkbox"/> Other: |

2. Indicate what shipping or sales documents are maintained by the company. Check all that apply

- | | | | |
|---------------------------------------------------|-----------------------------------------|---------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Certificates of Analysis | <input type="checkbox"/> Bill of lading | <input type="checkbox"/> Contracts | <input type="checkbox"/> Pallet/tote ticket |
| <input type="checkbox"/> Clean truck affidavit | <input type="checkbox"/> Sales Invoice | <input type="checkbox"/> Scale ticket | <input type="checkbox"/> Purchase order |

3. Do all documents clearly identify products as organic?

- Yes No

4. Does the company arrange outgoing product transport?

- Yes No

5. How does your company ensure outgoing transport units are cleaned prior to loading?

- | | |
|-----------------------------------------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Not applicable, only packaged products are shipped | <input type="checkbox"/> Clean out records |
| <input type="checkbox"/> Clean truck and equipment affidavits | <input type="checkbox"/> Other: |

6. Are organic products shipped in the same transport units as non-organic products?

- Yes No

7. If Yes, indicate what steps are taken to segregate organic products:

- | | |
|---------------------------------------------------------------------------|----------------------------------------------------|
| <input type="checkbox"/> Organic product sealed in impermeable containers | <input type="checkbox"/> Use of separate pallets |
| <input type="checkbox"/> Separate area in transport unit | <input type="checkbox"/> Sealed Bulk/Boxed Product |
| <input type="checkbox"/> Organic product shrink wrapped | <input type="checkbox"/> Other: |

7a. Is the USDA seal used?

- Yes No N/A



Handler: Labeling/USDA Seal

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Section

I

Handler Name(s):

Date:

Department Use Only	<input type="checkbox"/> Initial Reviewer	<input type="checkbox"/> Inspector	<input type="checkbox"/> Final Reviewer
Is it Complete?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Verified & Accurate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Observation/Comment:			



Handler: National List Allowed/ Prohibited Substances

**Section
J**

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Handler Name(s):

Date:

Department Use Only	<input type="checkbox"/> Initial Reviewer	<input type="checkbox"/> Inspector	<input type="checkbox"/> Final Reviewer
<u>Is it Complete?</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Verified & Accurate?</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Observation/Comment:</u>			



Handler: Record Keeping

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Section K

Handler Name(s):

Date:

Section K: Record Keeping by Certified Operations

NOP §205.103

- An audit of your production records and financial records will be conducted during your annual inspection.
- All records related to the processing and handling of organic products must be made available for review and copy if necessary.
- Organic system plan changes must be approved prior to implementation. Plan updates can be submitted by phone, fax, email or letter.
- You are required to maintain organic related records for 5 years and have them available during inspections.
- Failure to have documentation at your inspection may impact or delay your organic certification.
- Please retain a copy of this Organic System Plan for your records.

1. Does the facility have standard operating procedures for organic processing?

- Yes No

If Yes, these will be verified at inspection

2. Do you have a Quality Assurance program in place?

- Yes No N/A

3. If Yes, indicate what type of program:

- Total Quality Management ISO HACCP Other: N/A

4. Indicate the production & and handling records maintained by the facility: Check all that apply:

- | | | |
|----------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------------|
| <input type="checkbox"/> Purchase Orders | <input type="checkbox"/> Batch recipes | <input type="checkbox"/> Finished product inventory reports |
| <input type="checkbox"/> BOL | <input type="checkbox"/> Packaging log | <input type="checkbox"/> QC reports |
| <input type="checkbox"/> Load Tickets | <input type="checkbox"/> Equipment clean-out logs | <input type="checkbox"/> Shrinkage and/or Waste log |
| <input type="checkbox"/> Ingredient Receipts | <input type="checkbox"/> Shift production log | <input type="checkbox"/> Storage |
| <input type="checkbox"/> Organic Ingredient Certificates | <input type="checkbox"/> Production Inspection Forms | <input type="checkbox"/> Inventory |
| <input type="checkbox"/> Product specification sheet | <input type="checkbox"/> Ingredient inventory reports | <input type="checkbox"/> Sales invoices |
| <input type="checkbox"/> Equipment cleaning | <input type="checkbox"/> Other: | |

5. Describe how you conduct traceability of products:

6. Does the record keeping system track finished product back to all incoming products?

- Yes No

7. Does the record keeping system balance the value and volume of organic ingredients for products sold?

- Yes No



Handler: Record Keeping

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Section K

Handler Name(s):

Date:

Department Use Only	<input type="checkbox"/> Initial Reviewer	<input type="checkbox"/> Inspector	<input type="checkbox"/> Final Reviewer
Is it Complete?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Verified & Accurate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Observation/Comment:			