



Initial Organic Process/Handling Plan Questionnaire  
 Midwest Organic Services Association

PO Box 821 - Viroqua, WI 54665 – Phone: (608) 637-2526 - Fax: (608) 637-7032  
 Email: [mosa@mosaorganic.org](mailto:mosa@mosaorganic.org) – Website: <http://www.mosaorganic.org>

MOSA provides this form in order for the operator to document his/her plan for management in compliance with the National Organic Standards (NOS) and MOSA certification requirements. Complete all sections of this questionnaire if you are requesting organic process/handling certification. We can only process complete application forms, which include Organic Product Profile sheets for all products requested for certification, current schematic product flow chart or other written description of process, facility map, pest management map, and appropriate MSDS. Copy sections or use additional sheets as necessary. Any additional attachments you submit with your organic plan should be noted in appropriate section(s) of this questionnaire. Contact MOSA if you have any questions.

**SECTION 1: General Information**

<b>Applicant/Company Name</b>		<b>Legal Status:</b> <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Trust or non-profit <input type="checkbox"/> Corporation <input type="checkbox"/> Legal Partnership (federal form 1065) <input type="checkbox"/> Other (specify):			
<b>Owner/Manager</b>			<b>Primary Contact/Organic Production Manager</b>		
<b>Authorized Person(s) for signatures</b>				<b>For Office Use Only</b>	
<b>Business Address</b>		<b>City</b>	Received	Entered	
<b>State</b>	<b>Zip Code</b>	<b>County</b>	Certification	Inspection	
<b>Phone</b>	<b>Fax</b>	<b>Email</b>	Other	Initials	
<b>Would you like us to add a link to your website from the MOSA website?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide the web address:					
<b>Give a brief description of your process/handling experience, and reason(s) for choosing organic management practices:</b>					
<b>Year company began</b>	<b>List previous organic certification by other agencies</b>	<b>List current organic certification by other agencies</b>	<b>List other organic certification agencies you intend to certify with this year</b>	<b>Year first certified</b>	
<b>Have you ever received a notice of requirements or non-compliances, or had certification denied, suspended, revoked, withdrawn, or had a previous inspection?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, you must attach copies of all written notifications of requirements, non-compliances, denial, suspension or revocation. You must also attach a description of actions taken to correct the non-compliances and address requirements.</i>					
<b>Do you understand the current National Organic Standards (NOS) and requirements for certification as described in the MOSA Program Manual?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No (specify):		<b>What version of the MOSA Program Manual do you have for reference?</b>  <b>What version of the National Organic Standards (NOS) do you have for reference?</b>  <b>What version of the OMRI Materials lists do you have for reference?</b> (Note dates on front covers. Please dispose of or archive older versions of these.)			
<b>List or attach a list of all products produced by your company:</b>					
<b>List all products requested for organic certification. Attach an Organic Product Profile for each individual product.</b>			<b>When do you anticipate having your operation ready for inspection?</b>		

**Type of processing/handling:**  Primary Processor  Contract vendor  Other (specify):

**If you are the primary processor, list your contract vendors below:**  No contract vendors  
*Additional facilities may require additional organic plan forms, fees and inspections. Please contact MOSA for help determining this.*

CONTRACT VENDOR	ADDRESS	PHONE NUMBER	CERTIFIED BY	PROCESS/HANDLING SERVICE PROVIDED

**Estimated annual total production (volume):**      **Estimated annual total organic production (%):**      **Estimated annual total conventional production (%):**

**What additions or changes do you anticipate in your product line?**  
 None

**Give directions to your operation for the inspector. Include a map if you feel this may be helpful.**

**When are you available to contact?**       morning     afternoon     evening  
**When are you available for the inspection?**       morning     afternoon     evening

**SECTION 2: Product Composition** NOS §§205.105, .301, .302

*The NOS require that all raw or processed agricultural products labeled as "100 percent organic", all processed products labeled as "organic" on the principal display panel, all agricultural products sold, labeled or represented as "made with organic (specified ingredients or food group(s))", and all organic ingredients in multi-ingredient agricultural products containing less than 70% organically-produced ingredients must be handled in compliance with all applicable organic standards. For processed products labeled as "organic" on the principal display panel, you need to show efforts to obtain certified organic ingredients whenever possible, and non-organic ingredients and processing aids used must be allowed on National List and must not comprise more than 5% of the total of the finished product (excluding water and salt). Products making "100% organic", "organic" or "made with..." claims may not contain ingredients or processing aids subject to ionizing radiation or genetically engineered organisms and their derivatives, nor ingredients produced using sewage sludge. Other prohibited ingredients specific to labeling claims are outlined in NOS §205.301.*

**A. INGREDIENTS: Attach completed Organic Product Profiles** for all organic products requested for certification. MSDS, product labels and/or specification sheets, as applicable, must also be provided for all ingredients/processing aids.

**What is your procedure for sourcing organic agricultural ingredients?**

**How do you verify certification of organic ingredients?**

**Do any non-organic ingredients you use have annotations/restrictions for their use on the National List?**  Yes  No  
If yes, describe how you comply with these annotations/restrictions:

**Are any non-organic ingredients designated on the National List as prohibited materials?**  Yes  No

**Check if any non-organic ingredients have been produced, processed with or exposed to the following:**  ionizing radiation

genetic engineering  sewage sludge  none of these  other (specify):

If none, do you have verification?  Yes  No

**B. PROCESSING AIDS:** *Note the definition of Processing Aid in NOS §205.2. Processing aids must also be noted on the Organic Product Profile submitted for each product requested for certification.*

**Please describe how listed processing aids are used, and reason(s) for their use:**

No processing aids used

**Do any processing aids you use have annotations/restrictions for their use on the National List?**  Yes  No  
If yes, describe how you comply with these annotations/restrictions:

**Are any processing aids designated on the National List as prohibited materials?**  Yes  No

**Check if any processing aids have been produced, processed with or exposed to the following:**  ionizing radiation

sewage sludge  genetic engineering  none of these  other (specify):

If none, do you have verification?  Yes  No

*Attach MSDS, product labels and/or specification sheets, as applicable.*

**C. WATER:** *Water used in processing/handling must meet potable water standards. For products that use culinary steam, boiler additives must not contaminate the organic products.*

**Check ways water is used in processing:**  None used  ingredient  processing aid  cooking  cooling  
 product transport  organic product cleaning  equipment cleaning  other (specify):

**Source(s) of water:**  municipal  on-site well  other (specify):

**List any known water contaminants:**

**What on-site water treatment processes are used?**  none used  softening  filtration (specify type):

chlorination (specify where used):  other (specify):

**Is culinary steam used in the processing of organic products?**  Yes  No

If steam has direct contact with organic products, do you use:  No direct contact  steam filters  condensate traps

testing of condensate  testing of finished products  other (specify):

**List products used as boiler additives.** *Attach MSDS, label information:*

**Do you use water conservation strategies?**  Yes  No

**How, and how often, do you monitor water quality?**

*Attach available water test results.*

*Certified organic processors and handlers must comply with all applicable Federal and State regulations, as well as additional requirements for protection of organic integrity. Good sanitation practices must be used throughout the facility and residues from cleaning materials must not contaminate organic products. Organic Handling Plan requirements include attachment of a complete written description or schematic product flow chart which shows the movement of all organic products, from incoming/receiving through production to outgoing/shipping. All equipment and storage areas must be identified. Off-site facilities may need to be inspected and separately certified.*

**A. REGULATORY COMPLIANCE:**

**What government permits/licenses/inspections are in effect for your operation?**

None required

**What other certifications are in effect (example: eco-label, kosher, etc.)?**

**B. FACILITY/EQUIPMENT/PRODUCT FLOW:**

**Please give a brief physical description of your facility(s) used for processing/handling:**

*Attach a schematic product flow chart or written description showing how and where ingredients/products are received, stored, processed, packaged, and warehoused, and identifying all pieces of equipment, storage areas and where ingredients are added or processing aids used. Also attach a facility map(s) showing location of all equipment and storage areas.*

**Describe all equipment used in processing, and cleaning methods (including sweeping, scraping, vacuuming, compressed air, manual washing, clean in place (CIP), steam cleaning, sanitizing etc.) used prior to organic production runs:**

EQUIPMENT IDENTIFICATION (As noted on facility map)	CAPACITY	CLEANING METHOD(S) AND FREQUENCY	CLEANING PRODUCTS USED	PRODUCT STATUS (ALLOWED OR PROHIBITED)	CLEANING DOCUMENTATION

**Describe compliance with any annotations/restrictions stated on the National List for materials noted above:**

**Describe purge procedures, quantities purged, and purging documentation:**

No equipment purging

**Are all surfaces that contact organic products food grade?**  Yes  No (specify):

**Is steam used in cleaning/sanitation procedures?**  Yes  No

**Indicate how you ensure cleanser/sanitizer residues do not contaminate organic products (check all that apply):**

residue testing on food contact surfaces  pH testing of rinsate  other (specify):

**C. GENERAL SANITATION:**

Describe all cleaning methods for all other facility areas not listed above:

AREA	CLEANING METHOD(S) AND FREQUENCY	EQUIPMENT USED	PRODUCTS USED	PRODUCT STATUS (ALLOWED OR PROHIBITED)	DOCUMENTATION
Receiving area					
Ingredient storage					
Product transfer					
Production area					
Packaging area					
Finished prod. storage					
Loading dock					
Building exterior					
Accidental spills					
Other:					
Other:					

Describe compliance with any annotations/restrictions stated on the National List for materials noted above:

What methods are used to maintain employee hygiene?

How, and how often, is general sanitation monitored?

Where are cleaning/sanitizing materials stored?

*Attach MSDS and/or label information for all cleansers/sanitizers used in facility and in production equipment, if applicable.***D. TRANSPORTATION OF ORGANIC PRODUCTS:****1. INCOMING**

In what forms are incoming products received?  dry bulk  liquid bulk  tote bags  tote boxes  metal drums  
 cardboard drums  paper bags  foil bags  other (specify):

How are incoming products transported?

Who arranges incoming product transportation?

How do you ensure that inbound transport units were cleaned prior to loading organic products?

Is this inspection/cleaning process documented?  Yes  No

Are incoming transport units used to carry any prohibited substances?  Yes  No

Have transport companies been notified of organic handling requirements?  Yes  No

Are organic products shipped at the same time as non-organic in the same transport units?  Yes  No

Check steps taken to segregate organic products:  dedicated organic only  use of pallets  pallet tags stating "organic"  
 organic product shrink-wrapped  separate area in transport unit  other (specify):

**2. IN-PROCESS**

How are in-process products transported?

How do you ensure that in-process transport units are cleaned prior to loading organic products?

Is this inspection/cleaning process documented?  Yes  No

**3. OUTGOING FINISHED PRODUCT**

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):

How are outgoing products transported?

Who arranges outgoing product transportation?

How do you ensure that outgoing transport units are clean prior to loading organic products?

Is this inspection/cleaning process documented?  Yes  No

Are outgoing transport units used to carry any prohibited materials?  Yes  No

Have transport companies been notified of organic handling requirements?  Yes  No

Are organic products shipped at the same time as non-organic in the same transport units?  Yes  No

Check steps taken to segregate organic products:  dedicated organic only  use of pallets  pallet tags stating "organic"  
 organic product shrink-wrapped  separate area in transport unit  other (specify):

**E. STORAGE INFORMATION:**

Please describe your storage areas in the table below: *Storage areas must be indicated on facility map(s).*

STORAGE USE	LOCATION AND NAME OR NUMBER ON MAP	TYPE/CAPACITY	DEDICATED ORGANIC? YES (Y) NO (N)	COMMENTS ON POTENTIAL FOR CONTAMINATION/COMMINGLING PROBLEMS
Ingredient storage				
Packaging Material storage				
In-process storage				
Finished Product storage				
*Off-site storage				
Other (specify):				

List products stored off-site, and contact information for off-site storage location:

No off-site storage

*Off-site storage must be certified organic, or must be excluded from a certification mandate, per NOS 205.101(b). Contact MOSA with any questions.*

**F. WASTE MANAGEMENT PLAN:**

Will any waste products from certified organic ingredients be sold as certified organic?  Yes  No

If yes, complete an Organic Product Profile for each product.

List components of your waste management system (check all that apply):  on-site dumpster  material recycling  
 water recycling  water filtering  smokestack filters  composting  daily pickup of waste  sediment ponds  
 field application of waste  other (specify):

Do you have records on your waste volume?  Yes  No

**SECTION 4: Plan for Assurance of Organic Integrity**

NOS §§205.201, .272

The NOS require that procedures, processes, storage and equipment present no contamination risk to organic products from commingling with similar non-organic products, sanitation products or pest management products. Procedures used to maintain organic integrity must be documented. All personnel working with organic product should receive appropriate training such that food safety and organic integrity are maintained.

**A. ORGANIC CONTROL POINTS:** (OCP'S), similar to Hazard Analysis Critical Control Points (HACCP), are points in the production system where the integrity of the organic product may be compromised. Factors to consider include physical proximity, inadequate storage, equipment labeling, and employee training. Examples of compromised integrity include commingling with non-organic products, contamination by sanitizers or pesticides, and improper cleaning of equipment prior to running organic products.

Do you have an Organic Control Point program in place to address areas of potential contamination?  Yes  No

If yes, list Organic Control Points you have identified in your process, and means of protecting organic integrity, or submit a copy of your Organic Control Program:

If no, do you have plans to implement an Organic Control Point program?  Yes  No

If no, how do you ensure that organic integrity is maintained?

Please indicate any other means used to monitor organic integrity:

**B. EDUCATION AND TRAINING:**

How many persons are employed at your organic production facility(s)?

Please describe your procedures ensuring personnel have appropriate training in organic handling practices and general food handling/protection:

Is this training documented?  Yes  No

**C. QUALITY ASSURANCE:**

Do you have a QA program in place?  Yes  No

If yes, what program do you use?  HACCP  TQM  other (specify):

Are any outside quality assessment services used (e.g., AIB)?  Yes  No

If yes, give name of assessment company:

Indicate type(s) of product testing used (check all applicable types):  ingredients prior to purchase  finished product  
 product during production  ingredients upon receipt  other (specify):

How do you ensure ingredients have not been produced using genetic engineering, sewage sludge, or ionizing radiation?

(Check all that apply):  GE/GMO testing  verification letters from producers  other (specify):

Are ingredient samples retained?  Yes  No If yes, how long?

Are finished product samples retained?  Yes  No If yes, how long?

**Specify any type(s) of environmental testing conducted:**

none

**Please indicate any other means used to monitor product quality:**

**Please describe your product recall system:**

**Do you anticipate any changes to your quality assurance system?**  No  Yes (specify):

**SECTION 5: Pest Management Plan**

**NOS §§205.201, .271, .272**

*The NOS require that pest management is primarily handled by preventative methods as noted in NOS §205.271. When these are not effective, non-synthetic or synthetic substances consistent with allowed materials for organic processing and handling may be used. If prevention and allowed materials are not effective, any substance may be used for pest management, provided it is used in compliance with legal restrictions, and provided the operator and MOSA agree on the substance used, methods of application, and measures taken to maintain organic integrity. Substances must be applied in a manner that prevents contamination of ingredients or finished products to be sold, labeled or represented as organic. All treatments used must be justified. A pest management plan must be in place for each facility operated, and a program of regular preventative inspection must be a part of this plan.*

**A. GENERAL INFORMATION:**

**What type(s) of pest management system do you use?**

in-house (give name of person responsible):

contract pest control service (give name, address, phone number.):

**Check all pest problems you generally have:**  flying insects  crawling insects  spiders  birds  rats  mice

other (specify):

**B. CHECK ALL PEST MANAGEMENT PRACTICES USED:**

good sanitation  removal of exterior habitat/food sources  cleanup of spilled product  sealed doors and/or windows

exclusion  repair of holes, cracks, etc.  screened windows, vents, etc.  sheet metal on sides of building exterior

physical barriers  mowing  air curtains  air showers  positive air pressure in facility  monitoring

ingredient inspection for pests  inspection zones around interior perimeter  ultrasound/light devices  sticky traps

release of beneficials  electrocutors  pheromone traps  mechanical traps  scare eye balloons  nitrogen

freezing treatments  heat treatments  vacuum treatments  carbon dioxide  vitamin baits  pyrethrum

ryania  rotenone  boric acid  disodium octal tetrahydrate  diatomaceous earth  precipitated silica

fumigation  fogging  crack and crevice spray  other (specify):

**Are your pest prevention methods and structural pest management system effective?**  Yes  No (specify):

**Are records kept of your monitoring activities?**  Yes  No

**How often do you inspect your pest prevention system?**

**What changes do you anticipate to your pest management system?**

**C. PESTICIDE USE INFORMATION FOR THE LAST 12 MONTHS:**

no pesticides used

SUBSTANCE	TARGET PEST	LOCATION WHERE USED (Include those used outdoors)	METHOD OF APPLICATION	DATE OF LAST APPLICATION

**Are any products used which are prohibited by the National List?**  Yes  No

If yes, did you contact MOSA for approval prior to product use?

**Indicate type of pesticide application records maintained:**

None

**Describe methods to prevent pesticide contamination of organic ingredients, finished products, or packaging materials:**

**Describe measures to reduce or prevent pest control product use in the future:**

**Where are pest control substances stored?**

Attach facility map showing location of traps and monitors. Attach MSDS and/or label information, if applicable.

**SECTION 6: Audit Trail and Inventory Control System**

NOS §§205.103, .201

*Audit trail and inventory control procedures must be adequate to trace all ingredients and products from the supplier(s) through the entire production system, including packaging and storage, and on through distribution, sales and transport, using lot numbers, date codes, or a similar product tracking system. Organic handlers must retain valid proof of certification for all organic ingredients. Amounts of organic finished products must balance with certified organic ingredients purchased. All relevant documents must identify products as "organic." Records must be maintained for five years and must demonstrate compliance with the NOS and MOSA certification requirements. Records must be accessible to inspector(s) at initial inspection as well as at additional inspections as described in the MOSA Program Manual.*

**Number, in the order of use, the types of documents which you use to track organic products at this operation:**

**Incoming:**

- Purchase orders       Contracts       Invoices       Receipts
- Bills of lading       Customs forms       Scale tickets       Quality test results
- Certificates of Analysis       Transaction Certificates       Organic Certificate copies       Receiving records
- Receiving summary log       Other (specify):

**In process:**

- Ingredient inspection forms       Blending reports       Production reports       Equipment cleanout logs
- Sanitation logs       Packaging reports       QA reports       Production summary records
- Other (specify):

**Storage:**

- Ingredient inventory reports       Finished product inventory report       Other (specify):

**Outgoing:**

- Shipping log       Transport unit inspection forms       Bills of lading       Scale tickets
- Purchase orders       Sales orders       Sales invoices       Phytosanitary certificates
- Export declaration forms       Transaction Certificates       Organic Certificate copies
- Shipping summary log       Sales summary log       Audit control register
- Lot # on final package       Other (specify):

**Describe your lot numbering system:**

**Indicate other records you maintain (check all that apply):**

- Labels and/or full ingredients and source information for all ingredients, processing aids, sanitizers used  
 Material Safety Data Sheets    Equipment maintenance records    Labor records    Pest control log  
 Complaint Log (required for MOSA's ISO 65 accreditation)    Verification of ingredient non-GMO compliance  
 Verification of ingredients produced w/o sewage sludge use    Residue analyses (specify):  
 Verification of ingredients produced/handled w/o ionizing radiation    Documentation showing lack of commercial availability  
 Other (specify):

**Can your record keeping system track the *finished product on a retail shelf back to all ingredients?***    Yes    No

**Can your record keeping system balance organic product in and organic product out?**    Yes    No

**Can your record keeping system verify prevention of contact with prohibited substances?**    Yes    No

If you answered no to any of the above, what changes will you make to ensure these areas can be tracked / verified?

**How long do you plan to retain your records?**

*Please have all records available at your inspection(s) as noted above.*

## SECTION 7: Packaging and Labeling Plan

NOS §§205.201, .272, .303 - .311

*The NOS require that packaging materials be free of prohibited substances and must not contaminate the organic product. Organic product labels must meet State and Federal labeling requirements as well as requirements specifically outlined in NOS §205.303-.311. All labels making an organic claim must be approved prior to use. Production lot numbers are required on non-retail containers used to ship or store organic products. The certified handler or product distributor must be identified on the information panel, followed below by the statement "Certified Organic by Midwest Organic Services Association", or a similar phrase, for products labeled as "100% organic", "organic", "made with organic (specified ingredients or food group(s))", or livestock feed products. Organic ingredients must be identified as organic in ingredient listings on products labeled "100% organic", "organic" or "made with organic (specified ingredients or food group(s))". See the NOS for complete labeling requirements/options and contact MOSA as needed for clarification.*

### A. PACKAGING:

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

**Are all packaging materials food grade?**    Yes    No

**Where are packaging materials stored?**

**Have any packaging materials been exposed to fungicides, preservatives, fumigants or pest control products (in storage, contained in material, or otherwise)?**    Yes    No

If yes, describe exposure, including name of products used:

**Are packaging materials reused?**    Yes    No

If yes, describe how these are cleaned prior to use:

**What changes do you anticipate in your packaging?**

**B. LABELING:** All labels making an organic claim must be submitted to MOSA and approved prior to use.

For each product intended to be certified, indicate applicable label information and organic claims made at point of sale:

LABEL OR POINT OF SALE INFO	PRODUCT: ORGANIC %:	PRODUCT: ORGANIC %:	PRODUCT: ORGANIC %:	PRODUCT: ORGANIC %:
"100% Organic" (√ if applicable)				
"Organic" (√ if applicable)				
"Made With Organic..." (List all specifically-noted ingredients/groups)				
Organic Ingredients Identified as Organic in Ingredient List (√ if applicable)				
Specific % of Organic Ingredients (Indicate % noted at point of sale)				
Lot Number (√ if applicable)				
MOSA Logo (√ if applicable)				
USDA Seal (√ if applicable)				
Logo/Seal of another certifying agent(s) (Specify agent(s))				
The phrase "Certified Organic by Midwest Organic Services Association" below the information identifying the distributor (√ if applicable)				
Co-packer identified (√ if applicable)				
MOSA Contact Information (√ if applicable)				
Other (specify):				

**SECTION 8: Additional Verification**

MOSA Program Manual, Section V. O.

*In cases where a buyer requires verification of requirements not covered by the NOS (ex: for sale to international markets requiring an export certificate), MOSA, if duly notified, will provide such verification to the buyer on your behalf.*

**List all additional requirements you need verified for marketing purposes (use additional sheets as necessary):**

**SECTION 9: Affirmation**

I affirm that all statements made in this application are true and correct. I understand that the facility may be subject to unannounced inspection and/or organic products sampled for residues at any time as deemed appropriate to ensure compliance with the National Organic Standards (NOS) and MOSA certification requirements. I consent to the use of subcontracted inspectors as necessary to assess compliance of my operation. I consent to the use of subcontracted laboratory analysis services to test for residues of prohibited substances.

I understand that failure to follow the NOS and MOSA certification requirements or giving false information may result in the denial, suspension or revocation of certification of my operation. I understand that certification of my operation may depend on my ability to supply any and all information requested by MOSA that MOSA needs to evaluate the products and operation requested for certification. I understand that acceptance of this questionnaire in no way implies granting of certification by MOSA. I agree to follow the NOS and MOSA certification requirements as described in the MOSA Program Manual.

Signature of Owner/Manager \_\_\_\_\_ Date \_\_\_\_\_

Print your name \_\_\_\_\_

**I have attached the following required documents:**

- Product flow chart or written description
- Organic Product Profiles
- Facility map
- Pest management map of traps and monitors
- Appropriate MSDS, as applicable
- Organic product labels
- Product labels/specification sheets, as applicable, for all ingredients/processing aids.
- Other (specify):

**Did you remember to...**

- ...sign this questionnaire?**
- ...include all required fees?**
- ... put your name on all supporting documents?**
- ...sign and include the Associate Licensing Agreement?**
- ...make copies of this organic system plan and supporting documents for your records?**

Contact the MOSA office with any questions: (608) 637-2526.

Thank you for submitting completed forms, fees, and supporting documents to:

**MOSA**  
PO Box 821  
Viroqua, WI 54665

