



## Excluded Handler Organic Plan Questionnaire Midwest Organic Services Association

PO Box 821 - Viroqua, WI 54665 - (608)637-2526 Fax: -7032 email: mosa@mosaorganic.org

*Per NOS § 205.101(b)(1), handling operations which only sell organic products which "(i) Are packaged or otherwise enclosed in a container prior to being received or acquired by the operation; and (ii) Remain in the same package or container and are not otherwise processed while in the control of the handling operation" are excluded from organic certification requirements, except for prevention of commingling and contact with prohibited substances requirements as set forth in NOS § 205.272. This form enables required organic integrity verification for such handlers that provide storage or other handling services for packaged/contained organic products for MOSA-certified operators. Completed form must accompany annual organic plan information for the MOSA operator. Copy sections or use additional sheets as necessary. Please contact the MOSA office if you have any questions.*

SECTION 1: General Information		
<b>MOSA Operator Name:</b>		
<b>Excluded Handling Facility Name:</b>		<b>Facility Address:</b>
<b>Facility Contact Person:</b>		
<b>Facility Phone:</b>	<b>Facility Fax:</b>	<b>Facility Email:</b>
<b>List the organic packaged/contained items to be handled at this facility for the MOSA operator:</b>		
ITEM	PACKAGE/CONTAINER TYPE/VOLUME	HANDLING LOCATION

SECTION 2: Materials Used			NOS § 205.272
<b>List all materials used in this facility, including cleansers, sanitizers, pest control materials, etc.</b> <i>Product data sheets or labels must be available upon MOSA's request. Samples of cleaning and/or pest management records and/or facility map(s) may be attached for reference or clarification.</i>			
<input type="checkbox"/> no materials used in this facility			
GENERIC MATERIAL	BRAND OR TRADE NAME	LOCATION OF USE	TIME/FREQUENCY OF USE
<b>What type(s) of pest management is used at this facility?</b> <input type="checkbox"/> in-house (give name of responsible person):  <input type="checkbox"/> contract pest control service (give name, address, phone no.):  <input type="checkbox"/> none			

**Describe the types of documents which are used at this facility to track organic products listed in section 2:**

*Incoming:*

*Movement through facility:*

*Outgoing:*

**Describe your product identification/lot numbering system and how it relates to identification system on incoming packaged/contained organic products:**  no alteration of incoming product ID

*Attach sample documents as necessary to clarify the above.*

**Can your record keeping system track the organic product shipped from your facility back to its being received at your facility?**  Yes  No

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

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

#### SECTION 4: Affirmation

I affirm that all statements made in this application are true and correct. I understand that the facility may be subject to inspection and/or organic products sampled for residues as deemed appropriate to ensure compliance with applicable sections of the National Organic Standards (NOS). I hereby affirm that facility personnel will manage the organic products listed above in a manner consistent with NOS § 205.101(b)(1)(i)-(ii), NOS § 205.201(a)(4) and NOS § 205.272.

<b>Facility Contact Signature:</b>	<b>Date:</b>
<b>Name:</b>	<b>Title:</b>

#### FOR OFFICE USE ONLY - Initial Review Checklist

*I attest that I have no direct commercial, financial, consulting, family or personal interest that may affect my ability to review this operation in an impartial manner.*

**Reviewer  
Signature**

**Date**

CRITERIA	FOLLOW-UP NEEDED (√)	USUAL LETTER SECTION FOR FOLLOW-UP	COMMENT/DETAILS	SA RESOLVED (√)
All sections must be <b>complete</b> or appropriately indicated n/a.	<input type="checkbox"/>	<b>A/B</b>		<input type="checkbox"/>
Products must meet handler NOS <b>exclusion requirements</b> .	<input type="checkbox"/>	<b>A</b>		<input type="checkbox"/>
<b>Records must be adequate</b> to ensure maintenance of product organic integrity.	<input type="checkbox"/>	<b>A</b>		<input type="checkbox"/>
Form must be <b>signed and dated</b> by facility contact.	<input type="checkbox"/>	<b>A/B</b>		<input type="checkbox"/>

# ELECTRONIC SIGNATURE AUTHORIZATION



Complete and return this form to MOSA so that electronically submitted documents without a handwritten signature will be considered valid. Fill out separate forms for each email address and/or each authorized signatory.

**I designate the e-mail address listed below as authorized to send and receive electronic information for my business transactions. I intend that documents e-mailed to and from this address shall have the same validity as documents transmitted on paper.**

E-mail address \_\_\_\_\_  
(Print very clearly)

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (print) \_\_\_\_\_

Operation Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax \_\_\_\_\_



# ORGANIC PRODUCT PROFILE



Complete a Product Profile sheet for each individual organic product for which certification is requested. Attach or be prepared with documents to show acceptability of ingredients, such as organic certificates, source and composition verification, or compliance statements. Use additional sheets as necessary. Contact MOSA with any questions.

Applicant/MOSA Associate name \_\_\_\_\_ Date \_\_\_\_\_

Finished product name as you would like it to appear on certificate \_\_\_\_\_

Company name(s) to be noted on label  None \_\_\_\_\_

**Product Composition:** Complete the table below for **all** inputs used in the production of this product, including processing aids, microorganisms or additives which may not appear on the label as an ingredient. The last two columns below will be used to verify organic content required for labeling claims or other marketplace representation of the product. Provide percentages and attach or be prepared with supporting documentation. Note: *Unless actual organic content is available for ingredients, those certified to the "organic" labeling category will be assumed to be 95% organic, and those certified to the "made with organic..." labeling category will be assumed to be 70% organic.*

Ingredient name (as shown on certificate or other records)	Organic status / Substance type (Check one. NOS §205.2 for definitions)	Supplier(s)	Supplier(s) certification agency	% in product at formulation	Organic % of ingredient
	<input type="checkbox"/> Organic agricultural <input type="checkbox"/> Non-organic agricultural <input type="checkbox"/> Non-agricultural synthetic <input type="checkbox"/> Non-agricultural non-synthetic				
	<input type="checkbox"/> Organic agricultural <input type="checkbox"/> Non-organic agricultural <input type="checkbox"/> Non-agricultural synthetic <input type="checkbox"/> Non-agricultural non-synthetic				
	<input type="checkbox"/> Organic agricultural <input type="checkbox"/> Non-organic agricultural <input type="checkbox"/> Non-agricultural synthetic <input type="checkbox"/> Non-agricultural non-synthetic				
	<input type="checkbox"/> Organic agricultural <input type="checkbox"/> Non-organic agricultural <input type="checkbox"/> Non-agricultural synthetic <input type="checkbox"/> Non-agricultural non-synthetic				
	<input type="checkbox"/> Organic agricultural <input type="checkbox"/> Non-organic agricultural <input type="checkbox"/> Non-agricultural synthetic <input type="checkbox"/> Non-agricultural non-synthetic				
	<input type="checkbox"/> Organic agricultural <input type="checkbox"/> Non-organic agricultural <input type="checkbox"/> Non-agricultural synthetic <input type="checkbox"/> Non-agricultural non-synthetic				

Ingredient name (as shown on certificate or other records)	Organic status / Substance type (Check one. NOS §205.2 for definitions)	Supplier(s)	Supplier(s) certification agency	% in product at formulation	Organic % of ingredient
	<input type="checkbox"/> Organic agricultural <input type="checkbox"/> Non-organic agricultural <input type="checkbox"/> Non-agricultural synthetic <input type="checkbox"/> Non-agricultural non-synthetic				
	<input type="checkbox"/> Organic agricultural <input type="checkbox"/> Non-organic agricultural <input type="checkbox"/> Non-agricultural synthetic <input type="checkbox"/> Non-agricultural non-synthetic				
	<input type="checkbox"/> Organic agricultural <input type="checkbox"/> Non-organic agricultural <input type="checkbox"/> Non-agricultural synthetic <input type="checkbox"/> Non-agricultural non-synthetic				
	<input type="checkbox"/> Organic agricultural <input type="checkbox"/> Non-organic agricultural <input type="checkbox"/> Non-agricultural synthetic <input type="checkbox"/> Non-agricultural non-synthetic				

Do any ingredients appear by a different name on the finished product label?  No  Yes. Explain:

Are any of the organic ingredients from a supplier that is excluded from a certification mandate? (such as retailer, broker or distributor. NOS §205.101(b))  No  Yes. List ingredients and their excluded suppliers:

What method was used to calculate composition percentages? (NOS § 205.302)

- Net weight, per NOS § 205.302(a)(1)  
 Fluid volume, per NOS § 205.302(a)(2)  
 Combined weight, per NOS § 205.302(a)(3)

If water and/or salt are used as ingredients, indicate % in the finished product: \_\_\_\_\_ % water \_\_\_\_\_ % salt

Total percentage of organically produced ingredients: \_\_\_\_\_

Did you round this number down to the nearest whole number? (NOS § 205.302(b))  Yes  No

How will this finished organic product be labeled/represented in the marketplace? (Check one.)

- 100% organic (Note: all ingredients except for water and salt must be verified to be 100% organic.)  
 Organic  
 Made with organic (specified ingredients or food group(s))  
 Livestock feed product  
 Other (specify):

Will there be a statement on the label listing percentage of organic ingredients?  No  Yes, \_\_\_\_\_%

Do you intend to use the USDA organic seal or MOSA seal on labels or market information?

- No seals  USDA organic seal  MOSA seal  other (specify):

Note: All labels must be approved before use. Attach a copy of all labels used for this product.

Projected annual total volume of finished product \_\_\_\_\_, beginning date \_\_\_\_\_ and ending date \_\_\_\_\_.

WEBSITE: [www.mosaorganic.org](http://www.mosaorganic.org)

ADDRESS: P.O. Box 821, 122 West Jefferson Street, Viroqua, WI 54665

EMAIL: [mosa@mosaorganic.org](mailto:mosa@mosaorganic.org) PHONE: 608.637.2526 FAX: 608.637.7032

10PRODPROF1F.doc

Effective Date: 12.18.09

Page 2 of 2





# INSTRUCTIONS FOR USING THE INGREDIENTS MONITORING SPREADSHEET

Note that there are **4** worksheets in this file.

## **ORGANIC INGREDIENTS**

The first sheet is for keeping track of your organic ingredients.

Here is where you will list all organic ingredients and the supplier(s) of those ingredients.

List each ingredient and its supplier separately.

For each ingredient, enter the name of the agency that certified it.

For each ingredient, enter the date that your copy of the supplier's organic certificate was last revised.

If the organic certificate is more than a year old, enter "Yes" in the "Updated Certificate Needed?" column.

This lets you know that you need to obtain a current certificate for this ingredient.

## **NON-ORGANIC INGREDIENTS**

The second sheet is for keeping track of your non-organic ingredients.

Here is where you will list all non-organic ingredients and the supplier(s) of those ingredients.

List each ingredient and its supplier separately.

Each non-organic ingredient will require specific types of verifications.

*(Needed verifications will vary based on the type of non-organic ingredient. Refer to the National List and to your OMRI Generic Materials Listing for more information on specific verifications required.)*

For each ingredient, enter the date of the compliance verification document.

If the verification is more than 2 years old, enter "Yes" in the "Updated Verification Needed?" column.

This lets you know that you need to obtain a current verification for this ingredient.

## **ORGANIC INGREDIENTS EXAMPLE\***

This is an example of how to complete the organic ingredients sheet.

## **NON-ORGANIC INGREDIENTS EXAMPLE\***

This is an example of how to complete the non-organic ingredients sheet.

\* Needed updates in the examples are based on the "today's date" shown in the example.

This form is also available electronically. Contact MOSA about submitting information via email.













