



Restaurant Organic System Plan

Midwest Organic Services Association

PO Box 821 – Viroqua, WI 54665 – (608)637-2526 Fax: -7032, email: mosa@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 Organic System Plan if you are requesting organic restaurant certification. Attach appropriate support documents as noted throughout the form and a facility map, pest management map, and appropriate MSDS if required. Copy sections or use additional sheets as necessary. Contact MOSA if you have any questions. Please keep a copy of this completed Organic System Plan and all support documents for your reference. All information on this form is considered proprietary and confidential. No information will be supplied to any third party without prior permission of the client, with the exception of compiled data for statistical summaries, which may be distributed. Your operation name, address and certified products/services will be listed in the annual MOSA Associates Directory.

SECTION 1: General Information

Applicant/Company Name		Legal Status: <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)			
Owner/Manager		Primary Contact/Organic Production Manager		For Office Use Only	
Business Address		City		Received	Entered
State	Zip Code	County		Certification	Inspection
Phone	Fax	Email		Other	Initials
Contact information for billing purposes: <input type="checkbox"/> same as above				When do you anticipate having your operation ready for inspection?	
Would you like us to add a link to your website from the MOSA website? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide the web address:					
Give a brief description of your restaurant experience, and reason(s) for choosing organic management practices:					
Year company began	List previous organic certification by other agencies	List current organic certification by other agencies	List other organic certification agencies you intend to certify with this year	Year first certified	
Have you ever received a notice of requirements or non-compliances, or had certification denied, suspended or revoked, by another certification agency? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, you must attach copies of all written notifications of requirements, noncompliances, denial, suspension or revocation. You must also attach a description of actions taken to correct the noncompliances/address requirements.</i>					
Do you understand current National Organic Standards (NOS) and requirements for certification as described in the MOSA Program Manual? <input type="checkbox"/> Yes <input type="checkbox"/> No (specify)		What version of the MOSA Program Manual do you have for reference? What version of the National Organic Standards (NOS) do you have for reference? What version of the OMRI Materials lists do you have for reference? (Note dates on front covers. Please dispose of or archive older versions of these.)			
Briefly describe what aspects of the restaurant operation are requested for certification (ex: specific entrees, salad bar, entire restaurant, etc.):					
Please list locations and contact information for all restaurants, commissary, food processing facilities, and warehouse. Please list the name of the person at each location who is responsible for maintaining organic standards in that facility. Identify organic products produced or services provided off-premises in restaurant's own, or co-packers' facilities. Please indicate whether facility(s) are applying for certification separately (S) or as part of restaurant's own certification (O).					

FACILITY NAME	ADDRESS	PHONE #	CONTACT PERSON	PRODUCTS/SERVICE PROVIDED	CERTIFICATION "S" or "O"

What additions or changes do you anticipate in your certified products/services? None

Give directions to your facility(s) 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: Menu, Labeling and Product Sourcing

NOS §§205.105, .301, .302

The NOS require that all raw or processed agricultural products sold or represented as "100 percent organic", all processed products sold or represented as "organic" on the principal display panel, all agricultural products sold 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 sold or represented as "organic", 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 marketing claims are outlined in NOS §205.301.

A. MENU AND LABELING: Attach sample(s) of menu(s), or copies.

Indicate what percent of your total menu is in the following categories:

"100% Organic" _____ %

"Organic" (95% or more organic ingredients) _____ %

"Made with organic ingredients" (70% to 95% organic ingredients) _____ %

Other (less than 70% organic ingredients) _____ %

Describe policies/procedures for labeling of organic products on menus:

Describe policies/procedures to identify organic vs. conventional food items on menu, when both are carried:

B. ORGANIC INGREDIENT SOURCING:

What is your procedure for sourcing organic agricultural ingredients?

How do you verify certification of organic ingredients?

How do you identify organic ingredients from receiving through serving?

How would you improve this system of verifying organic integrity?

C. NON-ORGANIC INGREDIENTS AND PROCESSING AIDS: Note the definition of Processing Aid in NOS §205.2.

Do any non-organic ingredients or 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 non-organic ingredients/processing aids designated on the National List as prohibited materials? Yes No

Check if any non-organic ingredients/processing aids have been produced, processed with or exposed to the following:

ionizing radiation genetic engineering sewage sludge none of these

If none, do you have verification? Yes No

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

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

Check ways water is used in processing/handling: 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.

SECTION 3: Plan for Organic Handling Practices

NOS §§205.201, .272

Certified organic restaurants 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(s) and residues from cleaning materials must not contaminate organic products. Organic Restaurant Plan requirements include attachment of a complete written description or schematic product flow chart that shows the movement of all organic products, from incoming/receiving through preparation to serving. All equipment and preparation 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

B. FACILITY/EQUIPMENT/PRODUCT FLOW:

Please give a brief physical description, including square footage, of your facility(s) used for preparation/handling:

Attach a schematic product flow chart or written description showing how and where ingredients/products are received, stored, prepared, packaged, warehoused and served, as applicable, and identifying all pieces of equipment, storage areas and where food is prepared. Also attach a facility map(s) showing location of all equipment and preparation storage areas.

Describe all equipment used in preparation or other handling, and cleaning methods (ex: scraping, clean in place (CIP), compressed air, vacuuming, manual washing, steam cleaning, sanitizing etc.) used prior to contact with organic foods.

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

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

Describe any 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:

Attach MSDS and/or label information for all cleansers/sanitizers used in facility and in production equipment, if applicable.

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

AREA	CLEANING METHOD(S) AND FREQUENCY	CLEANING EQUIPMENT USED	PRODUCTS USED	PRODUCT STATUS (ALLOWED OR PROHIBITED)	DOCUMENTATION
Receiving area					
Ingredient storage					
Preparation areas					
Display areas					
Serving areas					
Building exterior					
Accidental spills					
Other:					
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?

How do you ensure that transport units delivering organic products/ingredients were cleaned prior to loading organic products?

Is this inspection/cleaning process documented? Yes No

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				
Cookware storage				
In-process storage				
Finished Product storage				
Tableware storage				
Other (specify):				
Other (specify):				

F. WASTE MANAGEMENT PLAN:

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 grease collection
 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 handling and preparation 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 contact with 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 Point 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)

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

Specify any type(s) of environmental testing conducted: none

Please indicate any other means used to monitor product quality:

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 prepared food 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 responsible person):

contract pest control service (give name, address, phone no.):

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 ingredient inspection for pests inspection zones around interior perimeter monitoring
- ultrasound/light devices sticky traps electrocutors pheromone traps mechanical traps freezing treatments
- heat treatments vacuum treatments carbon dioxide nitrogen vitamin baits boric acid crack and crevice spray
- fumigation fogging 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, prepared products, or materials or equipment coming into contact with food:

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 restaurant system, including preparation, storage, and serving. Organic handlers must retain valid proof of certification for all organic ingredients. Amounts of organic product sold 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.

Please indicate the types of records kept to track organic products at this restaurant operation (check all that apply):

Incoming:

- Organic Certificate copies Transaction Certificates purchase orders receiving records invoices receipts
 contracts bills of lading Customs forms scale tickets quality test results other (specify)

In process:

- ingredient inspection forms recipes production reports equipment cleaning logs sanitation logs QA reports
 production summary records other (specify)

Storage:

- ingredient inventory reports finished product inventory report other (specify)

Serving/Sales:

- purchase orders sales orders sales invoices sales summary log audit control register other (specify):

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
 records of written complaints verification of ingredient non-GMO compliance
 verification of ingredients produced w/o sewage sludge use verification of ingredients produced/handled w/o ionizing radiation
 documentation showing lack of commercial availability
 residue analyses (specify) other (specify)

Can your record keeping system track the *food being served* back to all ingredients at receiving? 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: Additional Information**NOS §§205.201**

The NOS require that organic production and handling system plans are sufficient to evaluate compliance with the regulations. This questionnaire is intended to be sufficient to document compliance of most, if not all areas of the restaurant establishment. NOS compliance information not sufficiently detailed elsewhere on this organic plan questionnaire must be provided by supplementary documentation.

Describe how your organic certificate will be displayed to the public:

Describe any educational materials made available to the public:

Please attach copies of any company policies regarding organic foods, and attach any additional information that you feel is pertinent to the certification of your establishment

SECTION 8: Additional Verification**MOSA Program Manual , Section V. M.**

In cases where clientele of an establishment require verification of requirements not covered by the NOS, MOSA, if duly notified, will provide such verification for presentation to the clientele.

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 _____

I have attached the following required documents:

- product flow chart or written description labels/specification sheets, as applicable, for all ingredients/processing aids.
 facility map pest management map of traps and monitors sample menu(s) appropriate MSDS, as applicable

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?

Submit completed form, fees, and supporting documents to:

MOSA
PO Box 821
Viroqua, WI 54665

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

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

EMAIL: mosa@mosaorganic.org PHONE: 608.637.2526 FAX: 608.637.7032

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Effective Date: 12.18.09

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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.

