



Organic Private Label Plan Questionnaire

**Midwest Organic Services Association**

PO Box 821 - Viroqua, WI 54665 – Phone: (608) 637-2526 - Fax: (608) 637-7032

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*This form enables a MOSA-certified operator to document his/her private label arrangement details, allowing use of MOSA representation in the marketplace by another operator that is not independently MOSA-certified and that does not identify the MOSA-certified operation on labels and other marketplace information. Complete all sections of this questionnaire if you are providing private label services subject to private label arrangement approval as described in the MOSA Program Manual. We can only process complete application forms which include all required attachments. Any attachments you submit with this plan should be noted in appropriate section(s) of this questionnaire. Please use additional sheets as necessary. Contact MOSA if you have any questions.*

**SECTION 1: General Information for the Primary MOSA-Certified Operation**

*This information will generally be consistent with the information provided on the original Organic Process/Handling Plan Questionnaire for the MOSA-certified operation. The MOSA-certified company must initiate and be responsible for all aspects of the private label situation, including label claims, certification communications, payment of related certification and inspection fees, and maintenance of organic integrity until release of the finished product(s) to the private label company.*

<b>Your 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>Business Address</b>		<b>City</b>	<b>State</b>
<b>Phone</b>	<b>Fax</b>	<b>Email</b>	<b>For Office Use Only</b>
<b>Primary contact person for organic certification</b>		Received	Entered
<b>Person responsible for private label communications &amp; representations</b>		Certification	Inspection
<b>Authorized person(s) for signatures</b>		Other	Initials

**SECTION 2: General Information for the Company Identified on the Private Label Product(s)**

*This information is related to the private label company - the company that appears on the label. This operator is legally responsible for the finished product. Upon private label arrangement approval by MOSA, this non-MOSA-certified company will be allowed to use MOSA representation on label(s) with their brand.*

<b>Private Label 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>Business Address</b>		<b>City</b>	<b>State</b>
<b>Phone</b>	<b>Fax</b>	<b>Email</b> <input type="checkbox"/> None	<b>Primary contact person</b>
<b>Please provide contact information for any other persons or companies authorized to receive communications or answer inquiries regarding this private label arrangement:</b>			<input type="checkbox"/> Not applicable
Please describe the role of any other involved parties: <input type="checkbox"/> product formulation <input type="checkbox"/> marketing <input type="checkbox"/> other (specify):			

*The MOSA Program Manual Private Label Policy requires a clear statement of the details of the private label arrangement. Please describe the product(s) that will be produced for the private label company, and how production of these compares to the current scope of certified products/services for the MOSA-certified operation. New product types require a description of applicable organic plan changes and completion of an organic plan update questionnaire. Significant changes may require an additional inspection.*

**A. Please provide a general description of the private label arrangement. Please clarify each company's responsibilities for product formulation, label compliance, and handling at various points in production and distribution:**

**B. In the spaces below, please list all products that will use MOSA representation under the private label arrangement.**

*For each product, attach a completed Product Profile, showing projected quantities of the product that will carry the MOSA representation under the private label arrangement, and ingredient information as applicable (organic certification verification, source information, non-GMO statements, etc). Use additional sheets as necessary.*

**Private Label Product name:**

- same composition as currently certified product (specify name of the currently-certified product):  
 same basic type of product and handling as that currently certified, but with new or varied composition  
 new product type (see above for additional information required)

**Private Label Product name:**

- same composition as currently certified product (specify name of the currently-certified product):  
 same basic type of product and handling as that currently certified, but with new or varied composition  
 new product type (see above for additional information required)

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 same basic type of product and handling as that currently certified, but with new or varied composition  
 new product type (see above for additional information required)

**C. Please describe the projected quantity of the product(s) to be produced under this arrangement, and the timeframe in which the production is expected to occur:**

*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 at inspections as described in the MOSA Program Manual.*

**Number, in the order of use, the types of documents which you use to track private label products:**

**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):		

**Number, in the order of use, the types of documents which you use to track private label products:**

**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 the lot numbering system for the private label product(s):**

**Please describe any recordkeeping procedures or documents that are only used for private label products:**

**Can your recordkeeping system...**

...track the *finished private label product on a retail shelf* back to all ingredients?  Yes  No

... balance organic product in and organic product out?  Yes  No

... verify prevention of contact with prohibited substances?  Yes  No

If you answered no to any of the above, please explain, and describe any plans to improve recordkeeping in these areas:

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

**SECTION 5: Packaging and Labeling Plan**

NOS §§205.201, .272, .303 - .311

*Packaging materials must be free of prohibited substances and must not contaminate the organic product(s). 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.** 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 for 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))". Please contact MOSA as needed for clarification.*

**A. PACKAGING:**

**Please describe the package type(s) and size(s) planned for the private label product(s):**

**Please review the packaging information provided on your organic plan questionnaire(s) and describe any changes related to the private label product(s):**

**B. LABELING:**

**Please submit sample labels, or proofs, mock-ups, etc., for all private label products.**

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

## SECTION 6: Affirmation

I affirm that all statements made on this questionnaire are true and correct. 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 agree to follow the NOS and MOSA certification requirements as described in the MOSA Program Manual.

Authorized signature for the primary MOSA-certified operation \_\_\_\_\_ Date \_\_\_\_\_

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

**I have attached the following documents:**

- Product flow chart or written description
- Organic Product Profiles
- Product labels/specification sheets, as applicable, for all ingredients/processing aids used in the private label product(s).
- Other (specify):

Private label arrangement fees are based on the time needed for review of the arrangement details and related documentation created by MOSA. See administrative and private label arrangement fees as described in the fee schedule in the MOSA Program Manual. We prefer that the deposit for private label arrangement fees is paid at the time this questionnaire is submitted. User fees for private label arrangements are based on sales of finished product/service from the primary MOSA-certified company to the private label company. See the fee schedule for user fee calculation details. The primary MOSA-certified company is *responsible* for all fees related to the private label arrangement, but such fees may be paid by the private label company or any other involved party.

**Did you remember to...**

**...sign this questionnaire?**

**...include all required fees?**

**... put your name on all supporting documents?**

**... make copies of this questionnaire 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**

