

# PRIOR LAND USE DECLARATION (PLUD)



If you are requesting certification for crops growing on land that has not been under your management for the past 36 months, have the previous manager of the land complete and sign this form.

The land listed below was under my management from \_\_\_\_\_ to \_\_\_\_\_.  
month/year month/year

Field #	Acres	Section Number, Township and County	How land was used during this period

Check boxes below as applicable to your situation. Fill in the blanks and submit information as directed.

- This land was certified organic by \_\_\_\_\_ (name of certifier) from \_\_\_\_\_ to \_\_\_\_\_. *If not certified by MOSA, submit a copy of the most current organic certificate.*
- This land was woods, fallow or was in hay or pasture, and no seeds or inputs were used from \_\_\_\_\_ to \_\_\_\_\_.
- This land was farmed conventionally. The last planting of treated or GMO seed was on \_\_\_\_\_ and the last application of fertilizer or herbicide was on \_\_\_\_\_.
- The land was managed organically and to the best of my knowledge, acceptable inputs for organic production were used. *Provide a 3 Year Field History for the land, listing all crops and inputs, and provide original receipts for seeds and inputs listed.*
- Manure\* was either not applied or, if manure was applied, it contained no bedding or additives.
- The manure\* was applied and contained the following bedding\* or additives: \_\_\_\_\_

*\*If the manure applied did not come from your farm or if wood-based bedding was used, submit an Off-Farm Manure/Bedding Verification form to verify the source and information about this manure and/or bedding.*

Signed \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_  
(previous manager)

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

Email \_\_\_\_\_ Phone \_\_\_\_\_

MOSA producer seeking certification for this land \_\_\_\_\_