



Organic Certification

Education & Outreach

Political Advocacy

Promotion

External Client Inquiry

- ► Please use this form if you are an agent of the US government or California state government, to request information regarding CCOF operations in the context of inspections, investigations, or other activities related to organic compliance.
- ► CCOF may only disclose information to US Federal employees or CA state employees. Other parties must request a release from our client. To ensure fairness in process and appropriate due process, CCOF cannot respond to email or phone inquiries or incomplete requests.
- ► Send completed requests via email: inbox@ccof.org or mail: CCOF, 2155 Delaware Ave., Suite 150, Santa Cruz, CA.
- ► CCOF will review the request and respond in writing within 30 days. If you need a response sooner or this is a time sensitive or critical issue, please indicate that below. CCOF will attempt to prioritize these requests.

CC	OF C	peration	Name(s):				
CCOF Code (XX###):					F	Request Date:	
A.	A. Primary and Secondary Inquiry Contact Please				identify yourself, your role, and departmental affiliation.		
Na	me a	nd titles o	f Primary and Secondary	investigative contacts:			
Age	ency	& Role:					
Phone:				Fax:			
Em	ail(s)	:					
Ма	iling	Address:					
State/Province:				City:	Cour	nty:	
В.	Or	Operation and Inquiry Information					
	☐ Farm ☐ Processor ☐ Livestock ☐ Retail ☐ Other (describe):						
1)	Ple	Please state the purpose of your request (attach additional pages as needed).					
	a) Your role in investigation/ inspection/ visit, etc.:						
	b)	Clearly	dentify the context, purpo	ose, of this inquiry/visit:			
2)	Cle	learly describe all concerns and specific information requested regarding this operation.					
3)	Identify potential non-compliances if there are any at issue.						
	a)	a) Include specific standards references and all available supporting information and/or documentation.					
4)	Is an on-site inspection involved? No Yes, please answer ALL questions below:						
Í	a) Who is the inspector? Include name and contact information if not listed above:						
	b)	b) Is this inspection for informational, compliance, or other purposes?					
	c)	When & where will the inspection occur, who do you plan to speak to? Please attach separate sheet and investigative checklist etc. if completed.					

CCOF USE ONLY- Cert Ops, email inquiry to director or put in director's mail box. Director will review and approve, then create a Cert Ops follow up action item to fulfill. Cert Ops uploads completed form and all associated documents ("Active for web" OSP and correspondence digest) to the Ecert record of the party requesting this information. Cert Ops email or mail to the party requesting.

ALLH06, V1, R3, 10/01/2018 Page 1 of 1

