

# Ocal Affidavit of Land History

- ▶ This document is your attestation of materials applied to the land during your management control and is necessary to determine the parcel's eligibility for OCal certification. If you have a special situation regarding verification of land use, contact CCOF to discuss it.
- ▶ Where more than one party must attest to activities, use additional copies of this [Ocal Affidavit of Land History](#).
- ▶ To establish land history, CCOF may require additional verification from government agencies (e.g. Pesticide Use Reporting) or other sources (e.g. contract materials applicators). **Making a false statement to a certifying agent may result in denial of certification pursuant to 3 CCR §10505.**

**A. This Affidavit of Land History pertains to the following parcel:**

Parcel name: \_\_\_\_\_

Block/lot numbers or greenhouse/shadehouse numbering, if applicable: \_\_\_\_\_

Parcel Acreage: \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

Geographical coordinates or latitude/longitude; County Assessor's Parcel Number (APN), Section/Township/Range (S/T/R), or other parcel location description: \_\_\_\_\_

**B. I have direct and comprehensive knowledge of the activities and materials applied to the parcel named above from:**

\_\_\_\_\_ through \_\_\_\_\_  
MM/DD/YY MM/DD/YY

**I have this knowledge because:**

- I owned the parcel and controlled activities taking place there during this time period.
- I managed the parcel and controlled activities taking place there during this time period.
- Other (describe): \_\_\_\_\_

**C. Attestation of Material Use:**

- ▶ *The CDFA OCal standards require that land used for OCal production complete a three-year transition free of applications of prohibited materials.*
- ▶ *Complete this section to attest to **all materials used** during the time period you have listed in part B above, **including the current crop cycle** if your operation currently manages the parcel, but **excluding any materials used more than 3 years ago**.*
- ▶ *List the full product brand name, manufacturer name, and application date for **all materials** applied to this parcel during the relevant time period, including, but not limited to: fertilizers, pest or disease control materials, herbicides, compost and manure, seed treatments (including coatings, pelleting materials, and inoculants), growing media (e.g. substrate, planting mix, potting soil), adjuvants, etc.*

**During the time period listed in part B above (excluding dates more than 3 years ago, if applicable), I attest the following:**

- No materials of any kind were used (including during the current crop cycle, if applicable).
- All materials used (including during the current crop cycle, if applicable) are listed in the Table of Materials Used on the following page.
- All materials used (including during the current crop cycle, if applicable) are listed on attached pages, including full product/manufacturer names and application dates.

**I attest that the information above is complete and correct to the best of my knowledge. I understand that making a false statement to a certifying agent may result in denial of certification pursuant to 3 CCR §10505.**

Name (Print): \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_

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

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

