



# OCAL HANDLER OSP UPDATE GUIDE

Find all forms at [www.ccof.org/documents](http://www.ccof.org/documents). Send completed forms to [inbox@ccof.org](mailto:inbox@ccof.org).

- ▶ This guide outlines which OSP forms to update in common scenarios. Refer to the [CCOF Certification Services Program Manual](#) for fees that apply to certain updates.
- ▶ Send all associated documents to [inbox@ccof.org](mailto:inbox@ccof.org) with your operation name and client code in the subject line.
- ▶ Keep copies for your own OSP. Your approved OSP and current organic certificate can be accessed at [www.myccof.org](http://www.myccof.org).

Operation Name: \_\_\_\_\_ Client Code: \_\_\_\_\_

### My update is (more than one may apply):

### Fill out these forms or send the following:

- |  |   |
|--|---|
| <input type="checkbox"/> 1) New label for product(s) already listed on certificate:  | <input type="checkbox"/> Label(s) <i>Labeling guidelines are available at <a href="http://www.ccof.org/labeling">www.ccof.org/labeling</a></i>  |
| <input type="checkbox"/> 2) New product or change to current product formula:  | <input type="checkbox"/> <a href="#">OCal Product Application</a><br><input type="checkbox"/> <a href="#">OCal H2.0A Ingredient Suppliers</a> (not applicable for distributors who do not process, repack, roll, or relabel)<br><input type="checkbox"/> <a href="#">OCal H2.0B Product Formulation</a> (for multi-ingredient product, including pre-rolls that contain more than one cannabis ingredient or non-cannabis ingredients)<br><input type="checkbox"/> Label(s)<br><input type="checkbox"/> New Supplier Organic and/or OCal Certificates |
| <input type="checkbox"/> 3) New supplier(s) for ingredient(s):   | <input type="checkbox"/> <a href="#">OCal H2.0A Ingredient Suppliers</a> (not applicable for distributors who do not process, repack, roll, or relabel)<br><input type="checkbox"/> New Supplier Organic and/or OCal Certificates<br><input type="checkbox"/> <a href="#">OCal Uncertified Handler Affidavit</a> (for any uncertified OCal cannabis ingredient supplier)<br><input type="checkbox"/> <a href="#">Exempt Handler Affidavit</a> (for any uncertified organic non-cannabis ingredient supplier)  |
| <input type="checkbox"/> 4) I distribute already packaged OCal products and I have new suppliers. I do not process, roll, repack, or relabel products. | <input type="checkbox"/> <a href="#">OCal H2.6 Broker Suppliers</a><br><input type="checkbox"/> New Supplier Organic and/or OCal Certificates<br><input type="checkbox"/> <a href="#">OCal Uncertified Handler Affidavit</a> (for any uncertified supplier)   |
| <input type="checkbox"/> 5) I am a private label brand owner/marketer and I have a new copacker for my products.                                       | <input type="checkbox"/> <a href="#">OCal Product Application</a><br><input type="checkbox"/> Co-packer OCal Certificate<br><input type="checkbox"/> Ingredient statement from the co-packer  |
| <input type="checkbox"/> 6) New label I pack for someone else:   | <input type="checkbox"/> <a href="#">OCal Co-Packer Application</a> (for each brand not CCOF certified)<br><input type="checkbox"/> Label(s)<br><input type="checkbox"/> Label owner OCal certificate   |
| <input type="checkbox"/> 7) New nonorganic ingredient or processing aid  | <input type="checkbox"/> <a href="#">OCal Handler Materials Application (OSP Materials List)</a><br><input type="checkbox"/> <a href="#">OCal Product Nonorganic Material Affidavit</a> (if applicable)<br><input type="checkbox"/> <a href="#">OCal Natural Flavor Affidavit</a> (if applicable)   |
| <input type="checkbox"/> 8) New equipment/facility cleaners/sanitizers   | <input type="checkbox"/> <a href="#">OCal H4.0 OCal Practices</a><br><input type="checkbox"/> <a href="#">OCal Handler Materials Application (OSP Materials List)</a>   |
| <input type="checkbox"/> 9) New pest control material  | <input type="checkbox"/> <a href="#">OCal H4.0 OCal Practices</a><br><input type="checkbox"/> <a href="#">OCal Handler Materials Application (OSP Materials List)</a>   |
| <input type="checkbox"/> 10) I plan to move, add a new facility location, or add new equipment.  | <input type="checkbox"/> <a href="#">OCal Equipment, Facility, or Address Change Form</a>   |
| <input type="checkbox"/> 11) I have a new Tax ID, business structure or ownership change   | <input type="checkbox"/> <a href="#">CCOF OCal Business Change Contract</a>   |
| <input type="checkbox"/> 12) I need my update reviewed quickly (additional fees apply)   | <input type="checkbox"/> <a href="#">Rush Review Request</a><br><input type="checkbox"/> <a href="#">Expedited Program</a> (for new facility location or new equipment)   |

