* Complete this form if you operate a retail establishment.
* Once certified, your CCOF Client Profile lists your locations, available on www.[www.MyCCOF.org](https://myccof.org/Login.aspx).org.
1. **General Information**
2. Retail establishment type:

[ ]  Retail Store [ ]  Regional or national retail chain [ ]  Food Truck / Farmers Market vendor

[ ]  Restaurant [ ]  Regional or national restaurant chain [ ]  Hotel restaurant / in room dining

[ ]  Stadium concession stand [ ]  School or Business cafeteria [ ]  Airport dining [ ]  Catering services

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| --- | --- |
| [ ]  Other: |       |

1. Describe your expansion plans for the next 1-5 years:

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List each retail location below. If you have more than 5 locations or anticipate growing beyond 5 locations, submit a separate spreadsheet with all requested information. Be prepared to update the spreadsheet to communicate additional locations and existing changes. *You are responsible for notifying CCOF at least 2 months in advance of new location opening to allow for adequate review and inspection scheduling. Add location fee will apply per* [***CCOF Certification Services Program Manual***](https://www.ccof.org/resource/ccof-certification-services-program-manual/?gad_source=1&gclid=Cj0KCQjw6auyBhDzARIsALIo6v9rJ9ImtX1A_2xImZArxxuGrBnhFsP38aPHYvB-9PteAsUieaocprMaAtpqEALw_wcB)*.*

[ ]  Locations spreadsheet attached

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Location Number / Code** | **Location Name** | **Street Address** | **City** | **State** | **Zip** | **Projected Open Date** |
|  |  |  |       |       |       |       |
|  |  |  |       |       |       |       |
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1. **Organizational Structure**

*If your operation only has one location, skip to section C.*

1. Attach a copy of your operations manual. Highlight areas that address organic integrity.

[ ]  Attached

1. Attach agreements made between central headquarters and individual locations that are managed outside your organization’s direct control (i.e. franchise locations, sports stadiums, airports). Highlight areas that address organic integrity.

[ ]  Not applicable. Do not operate as a franchise or sell organic products within a separately managed retail space.

[ ]  Attached

1. Attach a description of how your company is structured (central headquarters, franchises, regional offices, company owned stores, independently managed stores, etc.). Include your personnel and management structure (teams, management, etc.).

[ ]  Attached

1. Indicate which functions or decisions are managed centrally, regionally, locally, or any combination of those three:

|  |  |
| --- | --- |
| Organic System Plan [ ]  Centrally [ ]  Regionally [ ]  Locally [ ]  Other: |  |
| Organic supplier approval [ ]  Centrally [ ]  Regionally [ ]  Locally [ ]  Other:  |  |
| Organic ingredient purchasing [ ]  Centrally [ ]  Regionally [ ]  Locally [ ]  Other:  |  |
| Marketing, signage, display & labeling [ ]  Centrally [ ]  Regionally [ ]  Locally [ ]  Other: |  |
| New organic product development [ ]  Centrally [ ]  Regionally [ ]  Locally [ ]  Other:  |  |
| Sanitation procedures & materials [ ]  Centrally [ ]  Regionally [ ]  Locally [ ]  Other: |  |
| Pest control contractors & materials [ ]  Centrally [ ]  Regionally [ ]  Locally [ ]  Other: |  |
| Staff training [ ]  Centrally [ ]  Regionally [ ]  Locally [ ]  Other: |  |

1. When individual locations make independent decisions about organic products, how are those decisions made and communicated (e.g. notification of regional management, internal audits where system are unique, etc.)? For example: if a store decides to launch a new organic product line, how is that communicated internally and to CCOF? ***CCOF needs to preapprove changes to your organic program.***

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1. **Employee Training**

Your training program should include proper sanitation, pest control, record keeping, handling, and labeling of organic products to prevent potential contamination and commingling. *Be prepared to demonstrate employee understanding of organic practices at inspections. Training records may be requested at inspection.*

1. Attach a copy of your employee training program.

[ ]  Attached

1. How and when do you train individual locations or employees on organic compliance procedures and policies?

|  |
| --- |
|  |

1. How do you monitor whether procedures and policies are successful? *CCOF may request to view monitoring checklists.*

[ ]  Third party service provider

[ ]  Internal QA team

[ ]  Other (describe):

|  |
| --- |
|  |

1. How do you ensure employees are provided **ongoing** access to organic practices, procedures, and updates?

[ ]  Internal communication website/portal

[ ]  Other (describe):

|  |
| --- |
|  |