



Operation Name: \_\_\_\_\_ Date: \_\_\_\_\_

- ▶ Complete this form if you process organic products or take physical possession of products you sell or distribute.
- ▶ Complete one form for each facility/location. Once certified, your CCOF Client Profile lists your facilities, available on [MyCCOF.org](http://MyCCOF.org).

**A. General Information**

- 1) Facility Name: \_\_\_\_\_  
Facility Tax ID: \_\_\_\_\_
- 2) Do you (check one):  
☐ Own this facility ☐ Lease this facility  
*Only facilities that you own or lease can be included in your certification. Facilities that you do not own or lease must apply for separate certification.*
- 3) Is all equipment used to process organic products in place on site?  
*Inspection cannot occur until the facility is ready for production.*  
☐ Yes, indicate date when you would like to begin organic production: \_\_\_\_\_  
☐ No, indicate date when facility will be ready for production: \_\_\_\_\_
- 4) Is facility information requested below in this section identical to the physical location address provided on your [CCOF Certification Contract](#)?  
☐ Yes. Skip to section B ☐ No
- 5) Site Address: \_\_\_\_\_ City: \_\_\_\_\_  
State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_
- 6) Each facility located in California must register with the state prior to first sale ☐ Not applicable, not located in California  
a) CDFA (grower and post-harvest handling) or CDPH (processing) registration number: \_\_\_\_\_
- 7) Contact (Name/Title): \_\_\_\_\_
- 8) Phone: \_\_\_\_\_ Fax: \_\_\_\_\_
- 9) Email(s): \_\_\_\_\_
- 10) Is this facility currently certified organic by another certifier?  
☐ No ☐ Yes, provide name of certifier: \_\_\_\_\_
- 11) Has this facility or any responsibly connected person with this facility ever previously applied for organic certification or been granted organic certification by any certification agency? *NOP 205.2 "Responsibly connected" - Any person who is a partner, officer, director, holder, manager, or owner of 10 percent or more of the voting stock of an applicant or a recipient of certification or accreditation.*  
☐ No. Skip to section B. ☐ Yes. Complete this section and provide name of certifier: \_\_\_\_\_
  - a) Was this facility's organic certification ever suspended or revoked? ☐ Yes ☐ No
  - b) Was any person responsibly connected to this facility ever suspended or revoked? ☐ Yes ☐ No
  - c) Did you surrender your certification with outstanding noncompliances or conditions? ☐ Yes ☐ No
  - d) Was your application for organic certification ever issued a denial? ☐ Yes ☐ No
  - e) Did you withdraw your application for certification with outstanding noncompliances? ☐ Yes ☐ No
- 12) If you answered yes to 11 a, b, c, d, or e above, please list the years and agencies, attach copies of all letter(s) describing noncompliances, denial, suspension, and/or revocation and a description of all corrective actions:  
Year(s): \_\_\_\_\_ ☐ Letters and corrective actions attached



**B. Facility Activities, Site Plan and Product Flow**

- 1) Processing or handling activities, ex: baking, cooling: \_\_\_\_\_
- 2) Attach 8.5 x 11" site map(s) showing all organic processing and storage areas (may be hand drawn). Identify all equipment, machinery, grading stations, and storage areas used for organic products. ☐ Map attached
- 3) Attach either a written description or a schematic product flow chart that describes or shows where and how ingredients or products are received, stored, processed, packaged, and warehoused. ☐ Attached
  - Submit a separate flow chart for each production type.
  - The flow chart(s) must include all organic production steps.
  - Include all equipment, machinery, grading stations, and storage areas used for organic products, and indicate where ingredients are added or processing aids are used.
  - If product moves through different facilities, describe the flow across different facilities and submit an organic certificate for any contracted facility. *You must request updated certificates at least annually.*

