



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

- ▶ **Applicants for certification:** Complete this form to describe your parcels used for organic crop production and/or livestock grazing or outdoor access.
- ▶ **Certified operations:** Complete this form to add a new parcel to your certification (including land adjacent to existing parcels). **This form and supporting documents (map, land history) must be reviewed by CCOF prior to inspection of a new parcel. Submit this form and supporting documents to the CCOF office.** See our [Add Acreage Instructions](http://www.ccof.org/documents) available at [www.ccof.org/documents](http://www.ccof.org/documents) for fees and other details.
- ▶ To update crops for parcels that appear on your CCOF Client Profile, submit a [Crop Update](#) form, available at [www.ccof.org/documents](http://www.ccof.org/documents).

**A. Parcel Location and Crops**

- ▶ Complete a **separate copy** of this form for each:
  - Physically separate, non-adjacent area you wish to certify.
  - Area with a different organic eligibility date, even if adjacent.
  - *Operations in CCOF Mexico Compliance Program:* Area with a different crop production system (e.g. in-ground vs. in containers), even if adjacent.
- 1) Parcel name or code: \_\_\_\_\_
- 2) Block/lot numbers or greenhouse/shadehouse numbering, if applicable: \_\_\_\_\_
- 3) Street address: \_\_\_\_\_  
City: \_\_\_\_\_ County: \_\_\_\_\_  
State/Province: \_\_\_\_\_ Country: \_\_\_\_\_
- 4) County Assessor's parcel number (APN), Section/Township/Range, or other legal description: \_\_\_\_\_
- 5) Geographical coordinates or latitude/longitude (in decimal form), and/or additional location information, such as cross street/road: \_\_\_\_\_
- 6) At this parcel, when do you expect to begin harvesting crops that you wish to market as organic? \_\_\_\_\_  
*Crops harvested prior to inspection cannot be certified.* MM/DD/YY
- 7) Parcel acreage (total acres to be certified organic at this location): \_\_\_\_\_  
*Include all acreage that you plan to use for organic crop production. Exclude non-production areas (e.g. homes, parking areas, post-harvest handling/storage locations).*
- 8) List crops currently grown (or planned to be grown) on this parcel, and the acreage for each crop. Attach an additional list if necessary.

| Crop | # of Acres | Crop | # of Acres |
|------|------------|------|------------|
|      |            |      |            |
|      |            |      |            |
|      |            |      |            |
|      |            |      |            |
|      |            |      |            |

- 9) Is production at this parcel in containers (not in the ground)?  
☐ No ☐ Yes. Complete or update [G3.1 Container & Greenhouse/Shadehouse Production](#).





- 10) Are there existing installations of lumber treated with arsenate or other prohibited materials within the boundaries of this parcel?  
*Lumber treated with prohibited materials may not be used for **new installations or replacement purposes** in contact with soil or livestock.*

☐ No. Skip to section B.

☐ Yes. Identify all treated lumber on parcel map (see section E below) AND complete or update [G6.0 Production](#).

a) Describe existing treated lumber (e.g. endpost, trellis, stakes, etc.): \_\_\_\_\_

b) Date of installation: \_\_\_\_\_

## B. Transitional Status

Following inspection and review, "CCOF Certified Transitional status" will be granted to parcels that have undergone one year of documented organic management and comply with all aspects of the NOP organic standards except for completion of 3-year transition. See the [CCOF Certification Services Program Manual](#) for additional information and details on the reduced fee for certified operations adding new parcels during the first two years of the 3-year transition. (NOP only)

## C. Livestock Use

☐ Not used for organic livestock

*Complete this section if you plan to use this parcel for organic livestock production, pasture, etc. Note that products from organic animals grazed prior to inspection and certification may not be sold or represented as organic.*

1) Planned livestock grazing/outdoor access use ☐ Poultry ☐ Ruminants: Meat ☐ Ruminants: Dairy ☐ Non-ruminants

2) When do you plan to utilize this parcel for livestock grazing/access? M: \_\_\_\_\_ D: \_\_\_\_\_ Y: \_\_\_\_\_

3) When do you plan to remove animals from this parcel? M: \_\_\_\_\_ D: \_\_\_\_\_ Y: \_\_\_\_\_

4) Additional information about your plans: \_\_\_\_\_

## D. Adjacent Land Use and Buffer Zones

*Organic parcels must have distinct boundaries (borders). Buffer zones are areas between organic parcels and adjacent land not under organic management. They must be managed organically and must be sufficient to prevent contamination of organic land, crops, and/or livestock by prohibited materials applied to adjacent land, and/or by products produced by genetic engineering (e.g. GMO seed). **Notify CCOF immediately of any application or drift of a prohibited material to organic land, crops, and/or livestock.***

- 1) Describe all adjacent land uses and buffer zones surrounding this parcel.

| Border | Adjacent Land Use                        |                  | Buffer Zone Type<br>(farm road, grass strip, canal, etc.) | Buffer Width<br>(ft) | Is Crop Grown in Buffer Zone?<br>(Y/N) |
|--------|------------------------------------------|------------------|-----------------------------------------------------------|----------------------|----------------------------------------|
|        | (cropland, open land, residential, etc.) | Organic<br>(Y/N) |                                                           |                      |                                        |
| N      |                                          |                  |                                                           |                      |                                        |
| S      |                                          |                  |                                                           |                      |                                        |
| E      |                                          |                  |                                                           |                      |                                        |
| W      |                                          |                  |                                                           |                      |                                        |





## E. Maps

Our [Parcel Maps Guide](http://www.ccof.org/documents) is available at [www.ccof.org/documents](http://www.ccof.org/documents).

Attach an 8 1/2" x 11" (standard page size) map of the parcel listed above. **Maps utilizing satellite imagery are preferred;** however, acceptable maps also include Assessor's Parcel Maps or other maps **drawn to scale** that **clearly show the boundaries** of the parcel. **Include all of the following on your map:**

- ☐ Directional arrow (N/S/E/W).
- ☐ Parcel boundaries outlining the entire area intended for certification. *Include all acreage that you plan to use for organic crop production. Exclude non-production areas (e.g. homes, parking areas, post-harvest handling/storage locations).*
- ☐ Notation of total parcel acreage.
- ☐ Permanent identifiers (if applicable): numbering or names of blocks/lots, greenhouse/shadehouses, paddocks, etc.
- ☐ Nearest public roads and other landmarks used to navigate to the parcel (railroad tracks, buildings, etc.)
- ☐ Other areas associated with your organic operation (e.g. annual seedling production, storage areas for materials and/or crops, post-harvest handling locations, etc.)
- ☐ Adjacent land uses (for example: "nonorganic walnuts," "non-organic pasture," "residential," etc.).
- ☐ Location and width of buffer zones (areas between the organic parcel border and adjacent land not under organic management). *Indicate if crops will be grown in the buffer zone.*
- ☐ Natural resources (such as waterways, woodlands, riparian areas, windbreaks, beneficial habitat, conservation areas, wildlife corridors, etc.)
- ☐ Needs for certified organic livestock (if applicable): water, permanent fencing, shade and shelter.
- ☐ Existing installations of treated lumber.

## F. Land History & Activities

*To sell or represent crops as 'organic,' there must not have been any prohibited materials applied to the land or crop for at least 3 years preceding the date of harvest. For container systems built and maintained on land, this includes the land within the parcel boundaries and materials used within containers. **Failure to provide accurate information may result in CCOF being unable to recognize any of the land use history provided.***

- 1) When did you begin managing this parcel? M: \_\_\_\_\_ D: \_\_\_\_\_ Y: \_\_\_\_\_  
(The date you bought, began leasing, or otherwise became responsible for management of the land)
- 2) Is this parcel currently certified organic?  
☐ Yes. Skip to section G. ☐ No. Complete this section.
- 3) Is all production at this parcel in containers AND on permanent, solid, impermeable flooring (e.g. concrete)?  
☐ Yes. Skip to section G. ☐ No, all production is in-ground. Complete this section.  
☐ No, container production is in containers on land OR on a permeable or removable surface. Complete this section.
- 4) Date of the Last Prohibited Material application (DLPM): M: \_\_\_\_\_ D: \_\_\_\_\_ Y: \_\_\_\_\_  
(The most recent application of any prohibited material, including fertilizers, pesticides, and any other materials such as treated seed, adjuvants, etc.)
- 5) Material(s) applied on the DLPM: \_\_\_\_\_
- 6) If you have not managed the parcel for the entire past three years (or since the DLPM identified above, if < 3 years ago), identify the person(s) who had control of the parcel prior to your management. Attach additional pages if necessary.  
☐ N/A, my operation has had control of the parcel for the past three years (or since the DLPM if < 3 years).  
☐ Additional page(s) attached

| Owner or Manager<br>(check one)                                 | Name | Start Date<br>(MM/YY) | End Date<br>(MM/YY) |
|-----------------------------------------------------------------|------|-----------------------|---------------------|
| <input type="checkbox"/> owner <input type="checkbox"/> manager |      |                       |                     |
| <input type="checkbox"/> owner <input type="checkbox"/> manager |      |                       |                     |
| <input type="checkbox"/> owner <input type="checkbox"/> manager |      |                       |                     |





- 7) What crop production or other activities have occurred on this parcel during the past three years (or since the DLPM if < 3years)?
- |                                                                              |          |          |    |          |          |
|------------------------------------------------------------------------------|----------|----------|----|----------|----------|
| <input type="checkbox"/> Fallow                                              | M: _____ | Y: _____ | TO | M: _____ | Y: _____ |
| <input type="checkbox"/> Cover cropping                                      | M: _____ | Y: _____ | TO | M: _____ | Y: _____ |
| <input type="checkbox"/> Pasture                                             | M: _____ | Y: _____ | TO | M: _____ | Y: _____ |
| <input type="checkbox"/> Production of crops (list crops grown in box below) | M: _____ | Y: _____ | TO | M: _____ | Y: _____ |
| <input type="checkbox"/> Other (describe in box below)                       | M: _____ | Y: _____ | TO | M: _____ | Y: _____ |
- a) Additional information regarding the activities listed above:

- 8) Since the DLPM, have prohibited materials of any kind been applied to any parcel borders or portions of the parcel not submitted for certification (e.g. herbicides or other prohibited materials applied to blocks or lots associated with the same APN, or to land contained under the same CA pesticide use reporting site ID)?
- ☐ No. Skip to section G. ☐ Yes. Complete this section.
- a) Describe below, including names of materials used and application dates, and attach a map clearly showing locations of use.
- ☐ Map attached

## G. Verification of Land History & Activities

*Your land cannot be certified organic until all land history documentation is complete, the parcel has been inspected, and the inspection report reviewed. To establish land history, CCOF may require additional verification from other sources such as Pesticide Use Reporting or contract materials applicators. **Making a false statement to an NOP-accredited certifying agent shall be subject to the provisions of section 1001 of title 18, United States Code. (NOP §205.100(c)(2)).***

- Provide one of the following to verify land history.
- If the field is **currently certified organic**, provide **both** of the following:
    - ☐ A copy of a current organic certificate listing that field/parcel
    - ☐ Verification there has been no lapse in organic management (for example, written confirmation from current certifier, completed Affidavit of Land History covering relevant time period, etc.)
  - If the field is **not currently certified organic**, provide **one** of the following:
    - ☐ One or more copies of the Affidavit of Land History, signed and dated by each person identified in question F6 above, OR
    - ☐ Alternative documents, signed and dated by each person identified in question F6 above, which contain all of the information requested in the Affidavit of Land History
- For **container systems**: Provide one of the following: ☐ Not applicable, all crops are grown in ground.
- The parcel will be evaluated for certification for future container production only.*
- If all production at the parcel is in a **container system built or maintained on land**, provide the appropriate land history as noted in one of the two bullet points above, **AND**:
    - ☐ A statement signed and dated by an authorized representative of your operation listing:
      - 1) The planting date for your current container-grown crops **and**
      - 2) The full names of all materials used or applied from that date through the present, including the growing media/substrate and all fertility, pest control, and other materials used to date.
  - If all production at the parcel is in a **container system on permanent, solid, impermeable flooring**, provide the following:
    - ☐ A statement signed and dated by an authorized representative of your operation listing:
      - 1) The planting date for your current container-grown crops **and**
      - 2) The full names of all materials used or applied from that date through the present, including the growing media/substrate and all fertility, pest control, and other materials used to date, **and**
      - 3) A description of the removal of potential contamination sources prior to transition to organic production.





## 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 organic 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 [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 an NOP-accredited certifying agent shall be subject to the provisions of section 1001 of title 18, United States Code. (NOP §205.100(c)(2)).**

### 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 organic standards require that land used for organic production complete a three-year transition free of applications of prohibited materials.*
- ▶ *Complete this section to attest to **all materials used** during 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), 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 an NOP-accredited certifying agent shall be subject to the provisions of section 1001 of title 18, United States Code, per NOP §205.100(c)(2).**

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

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

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

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



