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| **SECTION ONE: General Information NOP RULE 205.201 and 401** | | | | | | |
|  | | | | | | |
| 1)Owner  FIRST NAME |  | | SURNAME |  | | |
| 2) Manager  FIRST NAME |  | | SURNAME |  | | |
| 3) 2nd in charge of management  FIRST NAME |  | | SURNAME: |  | | |
| TRADING NAME: |  | | TYPE OF BUSINESS |  | | |
| Year first registered: | | |  | | | |
| List previous certification by other bodies: | | |  | | | |
| List current certification by other agencies: | | |  | | | |
| **List all products requested for Registration:**  **Total number of the products: .** | | |  | | | |
| Have you ever been denied/suspended certification? | | | **YES  NO** | | | |
| a) If yes, describe the circumstance | | |  | | | |
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| Do you have a copy of the current Organic standard? | | | | | | YES  NO |
| Do you have any other QA programs in place? | | | | | | YES  NO |
| a) If yes, please specify: (i.e. ISO, HACCP) | | | | | |  |
| Type of processing/handling operation, i.e. blending, repacking, re-labelling | | |  | | | |
| Estimated annual total production | | | % registered % non-registered | | | |
| Is your operation | | Primary Processor  Contract Processor  Wholesaler /LP (Name you are processing for : ) | | | | |
| **OFF-SITE FACILITY/CONTRACT PROCESSING** | | | | | | |
| Do you use any off-site facility or contract processor? | | | | | YES  NO | |
| a) If you use off-site facility or contract processor, please fill out the following: | | | | | | |
| |  |  |  |  | | --- | --- | --- | --- | | Name of contract processor/ off-site facility | address | Phone number | Registered with: | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | | | | | | | |

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| **SECTION TWO: Labelling and Product Composition** | | |
| List all products labelled or planned to be labelled as Registered Farm Input/Garden Product/ Production Input (previously Allowed Inputs) | |  |
| List all products labelled or planned to be labelled as Approved Products (salt, water) | |  |
| Are sulfites, nitrates, or nitrites added during the production or handling process? | | YES  NO |
| a) If yes, please list all registered products produced with sulfites, nitrates, or nitrites. | |  |
| **By-products** | | |
| Will any by-products from registered products be sold as registered/approved product? | | YES  NO |
| a) If yes, list all registered products manufactured from by-products. | |  |
| ***#Attached Ingredient Declaration sheet must be filled out for each product above.*** | | |
| **Water** | | |
| Tick ways water is used in processing;  ingredient  processing aid  cooking cooling  product transport  cleaning  cleaning equipment  boiler other, specify: | | |
| Source of water  municipal on-site well other, specify: | | |
| Does the water meet the standard of drinking water?  *(attach copy of water test, if applicable)* | YES  NO | |
| What on-site water treatment processes are used? |  | |
| Is steam used in the processing or packaging of products? | YES  NO | |
| a) If yes, please describe how steam is used |  | |
| Does steam have direct contact with products? | YES  NO | |
| a) If yes, do you use:  steam filters  condensate traps  testing of condensate  testing of finished products  others, specify: | | |
| List products used as boiler additives  *(Attach MSDS and/or label information for boiler additives)* | |  |
| Describe how you monitor water quality. | |  |
| How often do you conduct water quality monitoring?  weekly  monthly annually  other, specify: | | |

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| **SECTION THREE: Assurance of Registered integrity** | | | | | | | | | | | | | | |
| ACO and NOP standard require that handling practices and procedures present no contamination risk to registered products from commingling with nonregistered products or contact with prohibited substances. Packaging materials, bins, and storage containers must not have contained synthetic fungicides, preservatives, or fumigants. Recycle bags or containers must be clean and pose no risk to the integrity of registered products. Procedures used to maintain registered integrity must be documented. | | | | | | | | | | | | | | |
| **Product flow-flow chart and floor plan** | | | | | | | | | | | | | | |
| *Attach a complete written description or schematic product flow chart which shows the movement of all products, from incoming/receiving through production to outgoing/shipping. Indicate where ingredients are added and/or processing aids are used. All equipment and storage areas must be identified.* | | | | | | | | | | | | | | |
| **Product Integrity** | | | | | | | | | | | | | | |
| What sort of documents you have in place to address areas of potential commingling and/or contamination? (i.e. Quality Assurance Manual/Registered integrity program) | | | | | | | | |  | | | | | |
| list specific control points you have identified in your process and state how you have address*. (or attach a copy of your QA manual/registered integrity program)* | | | | | | | | |  | | | | | |
| **Monitoring** | | | | | | | | | | | | | | |
| Do you have a Quality Assurance Program in place? | | | | | | | | | YES  NO | | | | | |
| a) If yes, what program do you use?  ISO HACCP  others, specify: | | | | | | | | | | | | | | |
| Are any external quality assessment services used? | | | | | | | | | YES  NO | | | | | |
| a) If yes, name of company: | | | | | | | | | | | | | | |
| Product testing (tick all that apply):  ingredients tested prior to purchase ingredients tested upon receipt  products tested during production finished products tested  others, specify: | | | | | | | | | | | | | | |
| How do you prevent the use of ingredients produced using excluded methods (Genetic Engineering)or ionizing radiation? (tick all that apply):  GE testing verification letters from suppliers other, specify: | | | | | | | | | | | | | | |
| Are ingredient samples retained? | | | | | | | | | YES  NO | | | | | |
| a) If yes, how long? | | | | | | | | |  | | | | | |
| Are finished product samples retained? | | | | | | | | | YES  NO | | | | | |
| If yes, how long? | | | | | | | | |  | | | | | |
| Do you have a product recall system in place? | | | | | | | | | YES  NO | | | | | |
| **Equipment** | | | | | | | | | | | | | | |
| List all equipment used in processing: | | | | | | | | | | | | | | |
| Equipment name | | Capacity | | Tick if equipment is cleaned prior to registered production | | | Tick if cleaning is documented | | | | | Tick if the equipment is purged prior to registered production | | |
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| If equipment is purged, list and describe purge procedures, quantities purged and documentation. | | | | | | | | | | | | | | |
| **Sanitation** – *attach MSDS and/or label information for cleaning and sanitizing products*. | | | | | | | | | | | | | | |
| Tick all cleaning methods used:  sweeping scraping vacuuming compressed air manual washing steam cleaning sanitizing (list below) other, specify | | | | | | | | | | | | | | |
| Provide information on your cleaning program and products used | | | | | | | | | | | | | | |
| Area | Type of cleaning | | Cleaning  equipment used | | | Products used | | | | | Tick if AQIS acceptable product | | | Tick if cleaning is documented |
| Receiving area |  | |  | | |  | | | | |  | | |  |
| Ingredient storage |  | |  | | |  | | | | |  | | |  |
| Product transfer |  | |  | | |  | | | | |  | | |  |
| Production area |  | |  | | |  | | | | |  | | |  |
| Production equipment |  | |  | | |  | | | | |  | | |  |
| Packaging area |  | |  | | |  | | | | |  | | |  |
| Finished product storage |  | |  | | |  | | | | |  | | |  |
| Loading dock |  | |  | | |  | | | | |  | | |  |
| Building exterior |  | |  | | |  | | | | |  | | |  |
| Accidental spills |  | |  | | |  | | | | |  | | |  |
| Other, specify |  | |  | | |  | | | | |  | | |  |
| Are all surfaces which contact products food grade? | | | | | | | | YES  NO | | | | | | |
| Do you test food contact surfaces or rinse for cleaner/sanitizer residues? | | | | | | | | YES  NO | | | | | | |
| Where are cleaning sanitizing materials stored? | | | | | | | |  | | | | | | |
| Do you have Cleaning Procedure/Manual in place? | | | | | | | | YES  NO | | | | | | |
| **Packaging** | | | | | | | | | | | | | | |
| Tick types of packaging material used  paper cardboard wood glass metal foil plastic waxed paper  aseptic natural fibres synthetic fibres other, specify: | | | | | | | | | | | | | | |
| Where are packaging materials stored? | | | | | | | |  | | | | | | |
| Are any fungicides, fumigants, or pest control products used in this storage area? | | | | | | | | YES  NO | | | | | | |
| a) If yes, describe use and list specific products | | | | | | | |  | | | | | | |
| Have any packaging materials been exposed to synthetic fungicides, preservatives, or fumigants? | | | | | | | | YES  NO | | | | | | |
| a) If yes, describe exposure, including name of products used. | | | | | | | |  | | | | | | |
| Are packaging materials reused? | | | | | | | | YES  NO | | | | | | |
| a) If yes, describe how reusable packaging materials are cleaned to prevent contamination prior to use. | | | | | | | |  | | | | | | |
| **Storage** | | | | | | | | | | | | | | |
| Provide information on your storage areas by completing the following table. | | | | | | | | | | | | | | |
| Use | Location | | Type/capacity | | ID name or number | | | | | Tick if dedicated registered | | | Potential contamination or commingling problem | |
| Ingredient storage |  | |  | |  | | | | |  | | |  | |
| Packaging material storage |  | |  | |  | | | | |  | | |  | |
| In-process storage |  | |  | |  | | | | |  | | |  | |
| Finished product storage |  | |  | |  | | | | |  | | |  | |
| Off-site storage\* |  | |  | |  | | | | |  | | |  | |
| Other, specify: |  | |  | |  | | | | |  | | |  | |

\*if there is off-site storage, please fill out Section One, Off-site storage/facility table.

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| **Transportation of Registered Product** | | |
| **1) Incoming (source from within Australia):** | | |
| In what forms are incoming products received?  dry bulk liquid bulk tote bags tote boxes  metal drums cardboard drums  paper bags foil bags other, specify: | | |
| How are incoming products transported? |  | |
| Do you arrange incoming product transport? | | YES  NO |
| a) If yes, do you use contract transport companies? | | YES  NO |
| b) If yes, do you have contract agreement in place to inform them registered handling requirement? | | YES  NO |
| Are transport units used to carry nonregistered products or prohibited substances? | | YES  NO |
| a) If yes, how do you insure that inbound transport units are cleaned prior to loading registered products? | |  |
| b) Is the inspection/cleaning process documented? | | YES  NO |
| Are registered products shipped at the same time as nonregistered in the same transport units? | | YES  NO |
| 1. if yes, check all steps taken to segregate registered products   use of separate pallets pallet tags identifying ‘registered’ registered product shrink wrapped separate area in transport unit registered product sealed in impermeable containers other, specify | | |
| **2) Incoming (source from out of Australia)** | | |
| In what forms are incoming products received?  dry bulk liquid bulk tote bags tote boxes metal drums cardboard drums  paper bags foil bags other, specify: | | |
| How are incoming products transported? |  | |
| Do you have verification of non fumigation in place? | | YES  NO |
| a) if no, please describe how you assure the registered product are not fumigated. | |  |
| **2)Outgoing finished product** | | |
| In what forms are finished products shipped?  dry bulk liquid bulk tote bags tote boxes metal drums cardboard drums  paper bags mesh bags  plastic crates cardboard boxes  other, specify: | | |
| How are outgoing products transported? |  | |
| Do you arrange outgoing product transport? | | YES  NO |
| a) If yes, do you use contract transport companies? | | YES  NO |
| b) If yes, do you have contract agreement in place to inform them handling requirement? | | YES  NO |
| Are transport units used to carry nonregistered products or prohibited substances? | | YES  NO |
| a) If yes, how do you insure that outbound transport units are cleaned prior to loading registered products? | |  |
| b) Is the inspection/cleaning process documented? | | YES  NO |
| Are registered products shipped at the same time as nonregistered in the same transport units? | | YES  NO |
| 1. if yes, check all steps taken to segregate registered product   use of separate pallets pallet tags identifying ‘registered’ registered product shrink wrapped separate area in transport unit registered product sealed in impermeable containers other, specify | | |

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| **SECTION FOUR: Pest Management** | | | | | | | | |
| The registered standard requires management practices to prevent pests, such as removal of pest habitat, food sources, and breeding areas, and prevention of access to handling facilities. Environmental factors, such as temperature light, humidity, atmosphere, and air circulation, may be used to prevent pests. Pests may be controlled using mechanical or physical means, such as traps, light or sound. Lures and repellents may be used if they do not contain prohibited substances or products produced using excluded methods (GE). | | | | | | | | |
| ***#Attach a facility map showing the location of traps and monitors, and submit MSDS and/or label information for substances used for pest control.*** | | | | | | | | |
| What type of pest management system do you use?  In-house: name of responsible person:  Contract pest control service: name, address, phone number: | | | | | | | | |
| Tick all pest problems you generally have:  flying insects crawling insects rats mice spiders birds  other, specify: | | | | | | | | |
| Tick all pest management practices you use:  good sanitation removal of exterior habitat/food sources clean up spilled product  sealed doors and/windows repair of holes, cracks, etc screened windows, vents etc.  physical barriers sheet metal on sides of building exterior mowing air curtains  air showers positive air pressure in facility monitoring  incoming ingredient inspection for pests inspection zones around interior perimeter  ultrasound /light devices release of beneficial sticky traps electrocutors  pheromone traps mechanical traps scare eye balloons freezing treatments  heat treatments vacuum treatments carbon dioxide nitrogen vitamin baits  pyrethrum precipitated silica fumigation\* fogging\* crack and crevice spray  other, specify:  \*fumigation and fogging requires adequate handling for registered products. Registered products for registered use must be removed from the fumigated/fogging area minimum 48 hours. | | | | | | | | |
| Are records kept of your pest monitoring activities? | | | | | YES  NO | | | |
| Check all aspects of your waste management system that apply:  On-site dumpster material recycling daily pick-up waste composting  field application of waste other, specify: | | | | | | | | |
| Does your waste management system provide habitat and/or food sources for pests? | | | | | YES  NO | | | |
| a) If yes, please describe: | | | | | | | | |
| **Pesticide use information for the last 12 months:** | | | | | | | | |
| Substance | Target pest | Location where used | Method of  application | | | Date of last application | | Tick if allowed under the Registered Standard |
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| Are records kept of all pesticide application? | | | | YES  NO | | | | |
| If a pest control substance is used, list all measures taken to prevent contact with registered products, ingredients or packaging materials: | | | | | | | | |
| Are there any substances intended for use which are not listed above? | | | | | YES  NO | | | |
| a) If yes, list substances intended for use: | | | | | | | | |
| Substance | Target pest | Location where will be used | Method of application | | | | Reason for use | Tick if allowed under the Registered Standard |
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| **SECTION FIVE: Record Keeping** | |
| The organic standards require that records disclose all activities and transactions of the operation, be maintained for 5 years (at least 1 year for JAS) and demonstrate compliance with the standard. Registered products must be tracked from receipt of incoming ingredients to sale of finished products. Amounts of registered finished products must balance with registered ingredients purchased. All relevant documents must identify products as ‘registered’- if NOP or JAS, must be identified as ‘NOP registered’ or ‘JAS registered’. All records must be accessible to the inspector. | |
| Which or the following records do you keep for registered processing/handling?  ***Incoming:***  Purchase orders contracts/agreements invoices  receipts bills of lading  customs forms scale tickets quality test results certificates of analysis  copies of registered certificates transaction certificates  verification of non-GMO ingredients verification of ingredients produced not using sewage sludge  verification of ingredients produced/handled without ionizing radiation  receiving records receiving summary log(12month)  other, specify:  ***In-Process:***  Ingredient inspection forms blending reports production reports  equipment clean-out logs sanitation logs packaging reports QA reports  Production summary records (12months)  other, specify:  ***Storage***  Ingredient inventory reports finished product inventory reports  other, specify  ***Outgoing:***  Shipping log transport unit inspection/cleaning forms bills of lading scale tickets  purchase orders sales orders sales invoices phytosanitary certificates  export declaration forms transaction certificates shipping summary log sales summary log audit control register complaint log  other, specify: | |
| Describe your lot numbering system: | |
| Can your record keeping system track the finished product back to all ingredients? | YES  NO |
| Can your record keeping system balance ingredients in and registered products out? | YES  NO |
| How long do you keep your records? |  |

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| **SECTION SIX: Affirmation** |
| I affirm that all statements made in this BFA Handling Plan are true and correct. I agree to comply with the APVMA and the ACOS. I understand that the facility may be subject to unannounced audit and/or registered products may be sampled and tested for residues at any time. I agree to provide further information as required by ACO.  Name: . Title: .  Signature: . Date: .  ***The following documents must be attached with the Registered Handling Plan upon initial application.***  Product flow chart (outline Registered Control Points)  Facility map  Ingredient Declaration sheet for each product  Pest management map of traps and monitors  Water test (if applicable)  MSDS for sanitizer and pest control substance (if applicable)  if there is any other additional attachment, please list below (i.e. cleaning manual, labels): |