**Section A: General Information**

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| **Business Name:** |  |
| **Trading As:** |  |
| **Physical Address(es):** |  |

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| **A.1 Please provide a brief, general description of your organic operation.** |
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| **A.2 Please answer the following questions regarding eligibility for wild harvest certification.** | |
| Is the harvest area an abandoned lot (i.e., not a natural area) or slated for clearing? | ☐ Yes.  ☐ No. |
| Do you irrigate within the harvest area? | ☐ Yes.  ☐ No. |
| Do you use any input materials within the harvest area (for soil fertility, pest and disease control, etc.)? | ☐ Yes.  ☐ No. |
| Do you plant brought-in seeds or planting stock within the harvest area (i.e., not from existing plants)? | ☐ Yes.  ☐ No. |
| Is soil within the harvest area cultivated or otherwise disturbed beyond what is necessary for harvest activities? | ☐ Yes.  ☐ No. |
| Do you use any practices within the harvest area which mimic a natural system, such as the use of shade cloth? | ☐ Yes.  ☐ No. |

**Note:** If you answered Yes to any of the above questions, the crop is considered a cultivated crop rather than a wild crop. Please complete the Organic Integrity Plan – Crops & Pasture instead.

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| **A.3 Do you do any post-harvest handling of your wild crop products (e.g., flotation, washing, sanitising, cooling, sorting/grading, bagging/packaging, removal of foreign objects or plant parts)?** |
| Yes. Please also complete the OIP Annex – Post-Harvest Handling.  No. |

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| **A.4 Do you do any more complex processing of wild crop products (processes that change the essential form of the product, e.g., cutting, cooking, etc.)?** |
| Yes. Please also complete an Organic Integrity Plan – Processing and Handling to include this activity in your certification.  No. |

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| **A.5 Do you use any contract processors or handlers (including external storage facilities) for your organic products?** |
| Yes.  No. |

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| **A.6 If yes, please list all contract processors or handlers (including external storage facilities) used by your operation in the table below.** | | |
| **Business Name and Address** | **Services Provided** | **Certified Organic? If yes, please provide name of certifier and certification number / ID** |
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Add lines if necessary.

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| **A.7 Do you hold organic certification with any certifying bodies other than ACO?** |
| Yes. Name of certifier and certification number / ID:  No. |

**Section B: Parallel / Split Production**

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| **B.1 Select the option that best describes your operation.** |
| All organic production.  Split production – organic and non-organic production of different, visually distinct varieties.  Parallel production – organic and non-organic production of the same or visually indistinct varieties. |

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| **B.2 If you have parallel production, which crops are harvested in parallel?** |
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| **B.3 Do you have a plan to convert your whole operation to organic production or otherwise eliminate parallel production?** |
| Yes.  No. Please refer to relevant organic standards for conversion requirements. |

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| **B.4 If yes, please describe your conversion plan below (include specific objectives, timelines, etc.).** |
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**Section C: Harvest Area and Crop Information**

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| **C.1 List all of your harvest areas – whether organic, in-conversion, or non-organic – in the table below.** | | | | |
| **Address / GEO Location** | **Harvest Area Number / ID** | **Size (Ha)** | **Organic Status (Organic, In-Conversion or Non-Organic)** | **Ownership Status (Owned, leased, or public land / waterway). If public, what license / authority do you have to harvest from this area?** |
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| **C.2 List all wild crops for which you are seeking organic certification.** | | | |
| **Crop** | **Harvest Area Numbers / IDs** | **Total Hectares per Crop** | **Expected Annual Yield** |
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| **C.3 How do you monitor and prevent contamination from adjoining land use or other potential sources of contamination?** |
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| **C.4 Do any livestock graze in the harvest areas** |
| Yes.  No. |

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| **C.5 If yes, are the livestock certified organic?** |
| Yes.  No. |

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| **C.6 Please describe livestock grazing activities within the harvest area.** |
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**Section D: Ecosystem Management and Harvest Practices**

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| **D.1 Describe the natural environment of the harvest area (e.g., scrub steppe, oak-chaparral woodland, deciduous hardwood forest, etc.).** |
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| **D.2 Describe any ecosystem management practices employed in the harvest area (re-seeding from or pruning of existing plants, removal of non-native species, etc.).** |
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| **D.3 Describe how wild crops are harvested.** |
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| **D.4 List all equipment and containers used for ecosystem management and harvesting in the table below.** | | | |
| **Equipment Name** | **Use** | **Leased, Owned or Contracted?** | **Is this equipment dedicated for organic use?** |
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| **D.5 If any equipment or containers are shared with non-organic production, how do you ensure that they are pre-cleaned of any non-organic products or prohibited substances prior to use in organic production? List all cleaners and sanitisers used or planned for use in your Input Register.** |
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| **D.6 Describe the measures implemented to ensure that harvesting activities do not negatively impact the health and long-term viability of the wild crop population and of the area’s ecosystem as a whole?** |
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| **D.7 How and when do you monitor the health of the wild crop population and the condition of the harvest environment (including soil and water quality)? What monitoring records do you keep?** |
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| **D.8 Are there other operators or peoples in the harvest area? If yes, how have you taken their activities into consideration when assessing the health and long-term viability of the ecosystem?** |
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| **D.9 List any rare, endangered or threatened terrestrial or aquatic plants or animals that occur in the harvest area. What practices do you employ to prevent negative impacts from harvesting activities upon these species, and how and when do you monitor to verify the lack of impact?** |
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| **D.10 Describe the training provided and monitoring procedures in place to ensure that all collectors harvest crops sustainably and in a manner that does not damage the environment.** |
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**Section E: Crop Storage**

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| **E.1 List all onsite storage areas or external storage facilities used in the table below.** | | | |
| **Storage Area Name / Location** | **Type of Storage (silo, cold room, etc.)** | **Crop(s) Stored** | **Is this storage area dedicated for organic use?** |
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| **E.2 Describe the measures taken to protect organic products from commingling with non-organic products or contamination with prohibited substances during storage.** |
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| **E.3 Do you use any post-harvest storage inputs (e.g., controlled atmosphere)?** |
| Yes. List all input materials used or planned for use in your Input Register.  No. |

**Section F: Storage and Post-Harvest Pest Control**

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| **F.1 What are the significant pest problems in your post-harvest storage and handling areas (flying / crawling insects, rodents, birds, etc.)?** |
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| **F.2 What preventative pest management practices do you employ in your post-harvest storage and handling areas?** |
| None used.  Good sanitation.  Removal of exterior habitat / food sources.  Cleaning up spilled product.  Temperature, humidity and light control.  Sealed doors and windows.  Screened windows and vents.  Crack, crevice and hole repair.  Air curtains.  Positive pressure.  Other. Please describe: |

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| **F.3 What physical or mechanical pest management practices do you employ in your post-harvest storage and handling areas?** |
| None used.  Mechanical traps.  Sticky traps.  Ultrasound / light devices.  Electrocutors / bug zappers.  Heat treatments.  Freezing treatments.  Other. Please describe: |

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| **F.4 What chemical pest management practices do you employ in your post-harvest storage and handling areas? List all pest control chemicals used or intended for use in your Input Register.** |
| None used.  Pheromone traps.  Vitamin baits.  Diatomaceous earth.  Pyrethrum.  Crack and crevice spray.  Rodent bait stations.  Fumigation / fogging.  Other. Please describe: |

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| **F.5 If chemical pest control measures are used, explain why preventative and physical/mechanical pest control measures alone are not sufficient to control pests.** |
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| **F.6 Describe the measures taken to ensure that pest control chemicals do not contaminate organic products or packaging materials.** |
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| **F.7 How and when (e.g., daily, weekly, as needed) do you monitor for pest activity in your post-harvest storage and handling areas? What monitoring records do you keep?** |
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**Section G: Packaging and Containers**

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| **G.1 What types of packaging materials / containers are used to store or ship organic products?** |
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| **G.2 How do you ensure that packaging materials / containers are fit for purpose (e.g., food grade) and free from non-authorised substances such as synthetic fungicides, preservatives, or fumigants?** |
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| **G.3 Are any packaging materials / containers reused?** |
| Yes.  No. |

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| **G.4 If yes, describe how packaging materials / containers are cleaned and sanitised prior to reuse. List all cleaners and sanitisers used or planned for use in your Input Register.** |
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**Section H: Labelling**

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| **H.1 What types of product labels do you use?** |
| No product labels used.  Retail labels, such as printed boxes or bags, produce stickers, rubber bands or twist ties.  Non-retail labels for storage or shipping containers, such as bin or pallet tags. |

**Note:** All product labels must be submitted to ACO for approval prior to use.

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| **H.2 How do non-retail labels identify the organic status of the product (‘Organic’ in the product name, ACO logo, etc.)?** |
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| **H.3 What unique identification is included on non-retail labels to link the product to audit trail documentation such as sales or shipping records (lot number, shipping identification, etc.)?** |
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| **H.4 Describe your lot numbering system (if applicable).** |
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**Section I: Outgoing Goods**

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| **I.1 Do you arrange transportation of outgoing organic products?** |
| Yes.  No. **Go to next section.** |

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| **I.2 If yes, describe how outgoing organic products are transported.** |
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| **I.3 Are outgoing organic products transported in the same vehicles / transport units as non-organic products?** |
| Yes.  No. |

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| **I.4 Describe the measures taken to protect outgoing organic products from commingling with non-organic products or contamination with prohibited substances during transport.** |
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**Section J: Recordkeeping**

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| **J.1 List all of the records that you keep in relation to your organic operation.** | |
| **Collectors**  *List of collectors, training records, etc.* |  |
| **Equipment and Harvest**  *Equipment cleaning records, harvest records, etc.* |  |
| **Post-Harvest Storage and Handling**  *Storage records, washing / grading / packing records, etc.* |  |
| **Sales and Transportation**  *Sales records, shipping records, etc.* |  |
| **Complaints and Noncompliances**  *Complaints log, etc.* |  |
| **Other** |  |

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| **J.2 Do you keep all records pertaining to your organic operation for at least five years after their creation?** |
| Yes.  No. |

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| **J.3 Describe your procedure for handling complaints and other instances of potential noncompliance relating to organic products?** |
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| **J.4 Do you have a procedure to notify ACO in the event of an organic product recall or any other instance of noncompliance relating to organic products (e.g., contamination)?** |
| Yes.  No. |

**Section K: Supplier Verification**

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| **K.1 Do you have an Approved Supplier Program to evaluate and approve new organic suppliers (seeds / planting stock, input materials, contract processors / handlers, etc.)?** |
| Yes.  No. |

**Note:** All new suppliers must be submitted to ACO for approval prior to use.

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| **K.2 What criteria do you use to evaluate new suppliers?** |
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| **K.3 How and when (e.g., annually, with each purchase) do you review approved suppliers to ensure that their certification is current and covers the products / services to be supplied?** |
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**Section L: Export**

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| **L.1 Do you export organic products or intend to export organic products in the future?** |
| Yes.  No. |

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| **L.2 If yes, which countries do you export to or intend to export to?** |
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| **L.3 What procedures do you have in place to ensure that all required export documents are obtained prior to departure (OGCs, EU COIs, NOP Import Certificates, etc.), and that exported products comply with any additional importing country requirements?** |
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**Signature**

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| **Name:** |  | **Position:** |  |
| **Signature:** |  | **Date:** |  |

**OIP Annex – Post-Harvest Handling**

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| **1. Please provide a description of your post-harvest handling activities.** |
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| **2. Do you use any post-harvest handling inputs (e.g., floating agents)?** |
| Yes. List all input materials used or planned for use in your Input Register.  No. |

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| **3. Describe the measures taken to protect organic products from commingling with non-organic products or contamination with prohibited substances during post-harvest handling.** |
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| **4. Describe the equipment and utensils used for post-harvest handling in the table below.** | | | | |
| **Equipment Name / Location** | **Use** | **Is this equipment dedicated for organic use?** | **Is this equipment cleaned prior to organic use?** | **Is this equipment purged prior to organic use?** |
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Add lines if necessary.

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| **5. If equipment is cleaned or purged prior to use, please provide a description of your cleaning / purging procedures. List all cleaners and sanitisers used or planned for use in your Input Register.** |
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| **6. How do you ensure that there are no residues from cleaners or sanitisers remaining on equipment at the end of the process?** |
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| **7. How is water used during post-harvest handling?** |
| Not used.  Cleaning produce.  Cleaning equipment.  Other. Please specify: |

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| **8. What is the source of water used during post-harvest handling?** |
| Municipal.  Other. Please specify: |

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| **9. Does the water used meet drinking water standards?** |
| Yes.  No. |

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| **10. Is water treated on-site?** |
| Yes.  No. |

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| **11. If yes, describe your water treatment process below. List all water additives used or planned for use (e.g., chlorine) in your Input Register.** |
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| **12. How and when (e.g., daily, weekly, monthly) do you monitor water quality? What monitoring records do you keep?** |
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**Signature**

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| **Name:** |  | **Position:** |  |
| **Signature:** |  | **Date:** |  |