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| **Instructions for completing this form:**1. **Please complete this form and submit back to the ACO Office on or before the USDA Anniversary Date listed on your ACO Certificate or 30 days prior to annual audit.**
2. **If the question is not relevant – please indicate N/A – do not leave blank.**
3. **For livestock operations, please submit your Livestock Inventory and any supporting documentation with this form to the ACO Office.**
4. **This document is a declaration of changes made to your existing Organic Farm or Livestock Management Plan; it does not replace that plan. If changes are made, please submit your updated OFP or OLMP along with the summary.**
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| **SECTION 1 – CONTACT DETAILS** |
| First Name |  | Last Name |  |
| Trading Name |  |
| Certification Number |  | Operation Type | E.g. Livestock / cropping |
| Main Operation Address | Other Certified Properties – refer to Section 4 |
| Contact Address |  |
| Email |  |
| Phone |  |
| **SECTION 2 – CHANGES TO OPERATION IN THE LAST 12 MONTHS** |
| Please provide a description of any changes to your operation and organic management plan that have occurred in the last year or are planned for the upcoming year:*Please provide supporting evidence for changes (e.g., maps, SDSs for inputs, supplier certificates)*Please ensure your Organic Management Plan been reviewed and updated to include these changes |
| New Land | [ ]  Yes [ ]  No | If Yes, have you submitted an Extension to Area application to ACO (charged as per fee schedule) |
| New Crop/s – (charged as per fee schedule) | [ ]  Yes [ ]  No | List: |
| Have seeds/seedlings been brought in? | [ ]  Yes [ ]  No |  |
| Crop Rotation | [ ]  Yes [ ]  No |  |
| Soil Management | [ ]  Yes [ ]  No |  |
| Soil Inputs – (indicate name, supplier, and brand) | [ ]  Yes [ ]  No |  |
| Compost – Provide details | [ ]  Yes [ ]  No |  |
| Weed Management | [ ]  Yes [ ]  No |  |
| Weed Control – (indicate name, supplier, and brand) | [ ]  Yes [ ]  No |  |
| Pest and Disease Control (indicate name, supplier, and brand) | [ ]  Yes [ ]  No |  |
| Water and Irrigation Management | [ ]  Yes [ ]  No |  |
| Feral Animal Control – (indicate method) | [ ]  Yes [ ]  No |  |
| Biodiversity | [ ]  Yes [ ]  No |  |
| Crop Harvest / Transport / Storage | [ ]  Yes [ ]  No |  |
| Buildings / Yards / Sheds | [ ]  Yes [ ]  No | If yes, please provide an updated farm map |
| Roads / Infrastructure | [ ]  Yes [ ]  No | If yes, please provide an updated farm map |
| Quarantine Paddock/s | [ ]  Yes [ ]  No | If yes, please provide an updated farm map |
| Livestock Management | [ ]  Yes [ ]  No |  |
| Livestock Grazing Management | [ ]  Yes [ ]  No |  |
| Livestock Feed Supplements (indicate name, supplier, brand, certification details) | [ ]  Yes [ ]  No | If yes, you need to update and submit your pasture rule form |
| Livestock Pest & Disease Control (indicate name, supplier, and brand) | [ ]  Yes [ ]  No |  |
| Livestock Transport | [ ]  Yes [ ]  No |  |
| Recordkeeping | [ ]  Yes [ ]  No |  |
| Recall/Complaints | [ ]  Yes [ ]  No |  |
| Other | [ ]  Yes [ ]  No |  |
| **SECTION 3 – NON-COMPLIANCES** |
| Do you have any outstanding non-compliances? | [ ]  Yes [ ]  No |
| If Yes, please provide an update on actions taken to address non-compliances issued at the last audit. |
| **Non-Compliance** | **Action Taken*****Any Documents required should be submitted with this form to the ACO Office.*** |
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| **SECTION 4 – ADDITIONAL PROPERTY DETAILS** |
| Additional Property Details 1 (if applicable) |  | Certified Land Area: |
| Additional Property Details 2 (if applicable) |  | Certified Land Area: |
| Additional Property Details 3 (if applicable) |  | Certified Land Area: |
| Additional Property Details 4 (if applicable) |  | Certified Land Area: |
| Additional Property Details 5 (if applicable) |  | Certified Land Area: |
| **SECTION 5 – PRODUCTION ESTIMATES** |
| For each product appearing in the annex of your last ACO certificate, provide a production estimate for the next 12 months. **[ ]** List attached |
| **Product** | **Production Estimate** |
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| **SECTION 6 – DECLARATION** |
| Please sign this Statement:* I/we have access to the relevant Standard(s) and have read the requirements for certification.
* I/we have access to the relevant Standard(s) and have understood the requirements for certification.
* I/we agree to farm to the relevant Standard(s) to the best of our ability.
* I/we are aware that we will be liable for penalties applicable to the relevant standard for any wilfully false statement.
* I/we hereby request ACO to renew our certification and agree to pay all relevant fees and charges associated with the renewal of certification as per the current fee schedule.
* This documents accurately represents any changes made to our existing Organic Farm or Livestock Management Plans, which must be submitted to ACO upon request.
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| **Name (print)** | **Signature** | **Date** |