



Checklist for JAS Organic Producer, Non-Processed Feed, Livestock Farmer and/or Abattoir

1. Do you have the JAS Standard and Technical Criteria on site? ☐ Yes ☐ No

Available to download from:

MAFF Website: [Organic JAS : MAFF](#)

ACO Website: [Japan Standards – ACO Certification](#)

2. Personnel in charge of Farm Products Management

a) Please complete the below list

Role	Name	Title	Qualification/experience	JAS training (Completed date)
Production Process Management Director (PPMD)				
Production Process Management staff (PPM) (optional)				

*PPMD must be appointed, however additional PPM staff are optional.

*JAS training is mandatory for PPMD. Please attach a copy of JAS training attendance certification.

b) Is the PPMD responsible for planning and running the farm operation? ☐ Yes ☐ No

c) Is the PPMD responsible for personnel safety in farm operation? ☐ Yes ☐ No

3. Do you have an existing internal operation manual? ☐ Yes ☐ No

4. Is this internally audited? ☐ Yes ☐ No

5. Are the records kept for at least five years? ☐ Yes ☐ No

6. Personnel in charge of Grading

Please complete the below list

Role	Name	Title	Qualification / Experience	JAS training (Completed date)
Grading Manager				
Grading staff				

*Please note that JAS training provided by ACO is mandatory for Grading manager and grading staff. Please attach a copy of JAS training attendance certification.

7. Please submit your grading procedure / manual.

8. Please make sure that you establish an annual production plan and notify ACO – This can be done by completing the Organic Integrity Plan (OIP) initially and Annual OIP update form thereafter.



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9. Are the inputs used in compliance with JAS standards? ☐ Yes ☐ No
10. Please make sure that you submit any requested documents to ACO for us to conduct services such as confirmation of the implementation of the management or control of the production process.

I, as a Production Process Management Director, declare the above information is genuine and correct, and our operation follows the above system.

Name:	
Signature:	
Date:	