

## STELLAR CERTIFICATION SERVICES, INC.

# For Certification of Organic Agriculture PO Box 1390, Philomath, OR 97370 Phone: 541.929.7148

Email: admin@demeter-usa.org / Website: www.demeter-usa.org

### **ORGANIC SYSTEM PLAN/HANDLING PLAN UPDATE APPLICATION 2017**

Name of Organization:			Date:			
STEP 1: REQUEST RENE	WAL OF CERTIFIC	ATION (CHECKONE)				
☐ I wish to continue certific	ation with Stellar Asso	ociation, Inc. I am submitting	the following <u>required</u> renew	val forms:		
Fee Worksheet		Payment of Fees				
For California only: Submit a copy of organic registration with CDFA (crops) and/or CA Dept. of Health (processors).						
CDFA Organic R	Registration	ation CA Dept. of Health Organic REgistration				
I do not wish to continue certification program and sur label, or sell product as orgal licensing fees for the past cal the following:	render all certification nic. I understand that	in order to successfully without	at the organization or I may Iraw and not receive a Notice	no longer represent, e of Noncompliance,		
Fee Worksheet v	vith information on pa	st calendar year's sales	A check for lic	ensing fees		
STEP 2: GENERAL INFOR	pany:					
Type of legal entity (Sole prop	·	,				
Name of person responsible f	or organic certification	(be certain to include contac	t info below):			
List of people who are authori information can be shared:			· ·			
Name	Position	Email	Work Phone #	Cell Phone #		

Current physical add	dress of all land pa	arcels and facilities	(attach an additio	onal sheet if neces	sary):
Parcel / Facility	Parcel / Facility Street Address		City, State, Zip		County
Mailing address for a	all correspondence	e to persons respo	onsible for certifica	tion:	
Address/City/State/Z	/ip:				Country:
I am applying for the	following scopes	of organic certifica	ation:		
Crops	Handling	Livestock	Trader	Livestock	Wild Harvest
	o crop can be so	ld, labeled, or rep	resented as orgar	nic, or fed to orga	ap for land to be added. nic livestock, from new tion.
New Parcel:					
I wish to add new fa organic until an insp New Facility:	ection has been o	conducted and Ste			led, or represented as ification.
I will contact SCS – certification (e.g. ad				an additional scop	e to my current
STEP 3: SYSTEM PLAN	UPDATE (CHEC	K ONE)			
and accurate now. N	lo changes need s s to be conducted	to be made for the	OSP documents	to reflect current p	operation and they are complete ractices, and to the best of my s to <b>Stellar</b> if changes need to
	cluded a descript				ked below. For each checked nts are available for downloading
Crop Production Upd	ates*				
OSP Application OSP Crop Plan Maps (current year required)		ates	OSP Sanitation L	ist (current year cl	ar changes and updates required) hanges and updates required) 
_ivestock Production U	odates*				
OSP Livestock Applic OSP Livestock Mater OSP Livestock Sanit	rial Input List		DMI a	Pasture Plan (for rand pasture Works rock Facility Maps	•

OSP Livestock Feed and Materials List (livestock producers)

Other: \_\_\_\_\_

#### **Handling Production Updates**\*

OHP Organic Handling Plan
OHP Disclosure of Non-Organic Ingredients and Processing Aids
(handling producers)
SCS Trader Application
Facility Maps/Trap Maps

ndividual Product Profiles (IPPs)	
OHP Sanitation List	
Other:	

Description of Updates (attach separate sheet if necessary)			

#### STEP 4: PREVIOUS NONCOMPLIANCES, UPDATES AND REMINDERS:

I have reviewed the previous certification decision(s) (CER) and I did not have any noncompliance's, requests for information, or reminders after my last inspection.

I have reviewed the previous certification decision(s) (CER) and any requirements issued after my last inspection, and I confirm that the corrective actions I submitted to address the issues are in effect and have not changed. I confirm that any requested updates to all OSP/OHP plans have been made and updated documents are submitted with this renewal.

I have reviewed the previous certification decision(s) (CER) and any requirements issued after my last inspection, and I confirm that any changes to the implementation of corrective actions, or corrective actions that have not been implemented, are outlined on an attached separate sheet.

#### STEP 5: CONTINUATION OF CERTIFICATION AGREEMENT

By signing this form, you are stating that:

- I) You have read the above information and attest that it is true to the best of your knowledge.
- 2) You affirm that you have read, fully understand and agree to be bound by the standards, procedures, fees, policies, assessment, obligations, requirements, and Terms of Agreement as stated in the National Organic Program regulations, SCS Policy Manuals, and SCS Terms of Agreement. NOP Standarts: http://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&sid=3f34f4c22f9aa8e6d9864cc2683cea02&tpl=/ecfrbrowse/Title07/7cfr205\_main\_02.tpl
- 3) You will continue to operate in accordance with applicable standards and the policies of Stellar Certification Services.

Name:	
Signature:	Date:
STEP 6: SUBMIT YOUR RENEWAL	
Submit this signed renewal form, along with a completed Fee Worksheet and fees to	0:
<ol> <li>Stellar Certification Services, Inc, P.O. Box 1390, Philomath, OR 97370.</li> <li>Courier shipments may be addressed to 6735 SW Country Club Dr, Suite</li> <li>Updated OSP/OHP documents may be emailed to admin@demeter-usa.o</li> </ol>	
The Stellar certification staff is available if you have any questions on what is requir certification, or if you need a copy of your current OSP documents.	ed to complete your renewal or surrender your
Comments:	
FOR OFFICE USE ONLY:	