| A. Renewal Request |
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| Thank you for choosing Quality Certification Services as your organic certifier!To renew your organic certification please complete and submit this form along with the QCS Grower and Livestock Fee Payment Form and payment of fees. Name of Certified Operation:                                     QCS entity no.:                Date:                      Name and position of person completing this form:                                                    (NOTE: The name of the person completing this form must be an authorized representative of the operation listed in form OGP1 on file in the QCS office or as updated and attached to this form.) **Check One**[ ]  **I wish to continue organic certification with QCS.** [ ]  **Surrender Organic Certification:** I do not wish to continue organic certification with QCS and hereby withdraw my organic system plan and surrender my organic certification. By surrendering my organic certificate I am withdrawing from organic certification under the NOP with Quality Certification Services. I understand that, unless I become certified again with QCS or another UDSA accredited certifier, I cannot sell, label or represent product as certified organic as per NOP 205.100 (c) 1. This in no way prevents me from applying or receiving organic certification either from QCS or from another USDA accredited certifier now or in the future. I have enclosed the organic certificate issued to me by Quality Certification Services.*To surrender your certification, please sign the affirmation at the end of this document, and submit this form to QCS along with the operation’s organic certificate.* ***Renewing operations please complete the remainder of this form.***

|  |  |
| --- | --- |
| **CERTIFICATION CONTACT (Authorized Representative)**Certification contact address will appear on the organic certificate. | **BILLING CONTACT** Same as certification contact [ ]  |
| Contact person:       | Contact person:       |
| Address:        | Address:       |
| City:       | State:       | Zip:       | City:       | State:       | Zip:       |
| Country (if not located in United States):       | Country (if not located in United States):       |
| Phone:       | Fax:       | Phone:       | Fax:       |
| Email:       | Email:       |

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| B. Previous Noncompliance(s), Minor Noncompliances and Provisions |
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| 1. Were you issued a Noncompliance or Minor Noncompliance during the previous certification cycle? [ ]  Yes [ ]  No
2. If yes:

[ ]  Attach documentation of corrective action; OR [ ]  Confirm that corrective actions previously submitted to QCS have been implemented. Use the space below to provide comments/updates:       |

| C. Renewal Information |
| --- |
| Check one of the following options:[ ] There are no changes or anticipated changes for the coming year to the Organic Livestock Plan (OLP) currently on file with and approved by QCS, or I have already provided QCS with information regarding changes. ***Complete Section F. Affirmation.***[ ]  Changes have been made and/or are anticipated. The Organic Livestock Plan (OLP) needs to be updated. ***Completed the remainder of this form. List updated sections of the Organic Livestock Plan application and attach.***  |

| D. Changes to the Organic System Plan |
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| 1. Are you adding or removing any livestock production units that are not part of an Organic Grower Plan application? [ ]  Yes [ ]  No

If yes, please list below. Complete a separate Land Use Affirmation (OLP 8) for each livestock production unit and associated outside access area(s) where non-ruminant livestock will be managed.

|  |  |  |  |
| --- | --- | --- | --- |
| **Adding orRemoving** | **Livestock Production Unit Name or Number** | **Physical Location** (Physical address, GPS coordinates, legal description, etc.) | **Number of Permanent Housing Units** (i.e. barns)  |
| [ ]  Adding[ ]  Removing |       |       |       |
| [ ]  Adding[ ]  Removing |       |       |       |
| [ ]  Adding[ ]  Removing |       |       |       |
| [ ]  Adding[ ]  Removing |       |       |       |
| [ ]  Adding[ ]  Removing |       |       |       |

1. For each new livestock production unit that is not part of an Organic Grower Plan application, provide a map depicting all livestock production areas. Include buildings, roads, adjoining land uses, buffers, feed storage areas, and natural water sources. Please show the dimensions of all permanent housing (i.e. barns), outside access areas, yards/feeding pads, and buffer zones. [ ]  Attached.
2. Please check the most recent list of inputs approved for your plan and sent to you by QCS with your current organic certificate or updated when inputs were last added to your plan. Are you adding or removing any inputs from your plan? [ ]  Yes [ ]  No

***If yes, please list below.*** \*All inputs used by your operation must be disclosed to QCS, and that additional/new inputs must be submitted to QCS for review and approval **prior to use** to prevent unintended application of prohibited materials.

|  |  |  |  |
| --- | --- | --- | --- |
| **Adding orRemoving** | **Product Name as it Appears On Label** | **Manufacturer** | **Function** |
| [ ]  Adding[ ]  Removing |       |       |       |
| [ ]  Adding[ ]  Removing |       |       |       |
| [ ]  Adding[ ]  Removing |       |       |       |
| [ ]  Adding[ ]  Removing |       |       |       |
| [ ]  Adding[ ]  Removing |       |       |       |
| [ ]  Adding[ ]  Removing |       |       |       |
| [ ]  Adding[ ]  Removing |       |       |       |
| [ ]  Adding[ ]  Removing |       |       |       |
| [ ]  Adding[ ]  Removing |       |       |       |
| [ ]  Adding[ ]  Removing |       |       |       |
| [ ]  Adding[ ]  Removing |       |       |       |
| [ ]  Adding[ ]  Removing |       |       |       |

1. Please describe any other deviations or amendments to the organic system plan made during the previous year and any other additions or deletions intended to be taken in the coming year pursuant to §205.200 that have not otherwise been disclosed to QCS or described above.
 |

| E. Feed Inventory |
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| Complete a separate feed inventory for each type of livestock requested for certification. List each feed and feed source on a separate row, including feed grown on-farm and roughages used as bedding. Make additional copies of this page if necessary. [ ]  Attach a label for all premixed feeds that shows all feed ingredients and the manufacturer. **Livestock Type (i.e. Poultry, dairy, beef, etc.)** [ ]  Broiler Chickens [ ]  Pullets [ ]  Layer Chickens [ ]  Ducks [ ]  Geese [ ]  Other poultry, specify:      [ ]  Dairy cattle [ ]  Beef Cattle [ ]  Other mammalian dairy animals:       [ ]  Other mammalian livestock for slaughter:        |
| **Feed or Crop** | **Amount Grown** | **Amount Purchased** | **Purchased from**[ ]  Attach a current certificate for each supplier of organic feed and roughage used as bedding.  | **Date Purchased/ Harvested** |
|       |       |       |       |       |
|       |       |       |       |       |
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|       |       |       |       |       |

| G. Ruminant Livestock [ ]  N/A - Not raising ruminant livestock |
| --- |
| 1. List the anticipated grazing dates for the current/coming grazing season. [ ]  N/A - Not raising ruminant livestock

|  |  |  |
| --- | --- | --- |
| **Start of Grazing Period (Date)** | **End of Grazing Period (Date)** | **Number of Days** |
|       |       |       |
|       |       |       |
| **Notes:**       |

1. Do ruminant livestock graze any pastures certified organic under a different operation, such as a grazing lease where you do not manage the land? [ ]  Yes [ ]  No If yes, please attach a copy of the current organic certificate and lease agreement for the leased pastures and complete the table below.

|  |  |  |
| --- | --- | --- |
| **Farm Name** | **Address of leased pasture** | **Acreage leased** |
|       |       |       |
|       |       |       |

1. Please attach an updated herd list. It should clearly identify which animals have been managed organically from the last 1/3 of gestation. [ ]  Attached
2. For each type and class of organic livestock produced by your operation, list the percentage of dry matter intake that comes from pasture averaged over the entire grazing season in the table below.
 |
| **Livestock Type - Class** | **Percentage of DMI from pasture averaged over the grazing season**  |
| Dairy – Lactating/Milking (cow or equivalent) |       |
| Dairy – Dry (cow or equivalent) |       |
| Dairy – Heifers (or equivalent) |       |
| Dairy – Weaned Calf (or equivalent)  |       |
| Beef/Meat Animals – Breeder Stock |       |
| Beef/Meat Animals – Slaughter Stock |       |
| Other (specify):       |       |
| 1. **On a separate page**, calculate the estimated percentage of dry matter intake that comes from pasture for each type and class of animal and attach calculations. QCS recommends using the addendum OLP 4.E:DMI Calculation Worksheet (at end of application) or the NOP’s DMI Worksheet.
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| H. Affirmation |
| This affirmation is submitted as part of the Organic Livestock Plan Update application to allow QCS to assess the ongoing compliance of the certified operation with the National Organic Program Final Rule contained in 7 CFR 205. I have reviewed the Organic System Plan (OSP) previously submitted to QCS and updated any and all sections in which the Organic System Plan has changed.I understand that knowingly submitting false information to QCS, including falsely attesting that there have been no change in the Organic System Plan, constitutes a false statement under §205.100 of the NOP Final Rule and §1001 of Title 18 of the United States Code, and may subject me and/or the certified operation to criminal and civil penalties. Further, I understand that certification under the NOP Final Rule and QCS policies creates a continuing obligation to inform QCS of all changes, additions, and deletions to the Organic System Plan. A failure to provide complete and truthful disclosure of changes to the OSP may lead to initiation of the noncompliance procedures in §205.662, and may culminate in the suspension or revocation of the operation’s organic certification and all persons responsibly connected with the operation. If subsequent inspection of the operation reveals that this application was incomplete or inaccurate, I understand that a Notice of Noncompliance may be issued. I also agree that any updated forms submitted by the operation to resolve the noncompliance will be reviewed by QCS staff at a charge to the operation of up to $100 per form. In addition, any subsequent inspection requested by QCS to verify the accuracy of such forms will be borne by the certified operation, even if the inspection is in addition to the regular annual inspection required by the NOP Final Rule. I agree that QCS has the right to request that the operation submit a complete OSP in any given year, or in all years, as QCS deems appropriate to assess compliance with the NOP Final Rule and QCS policies and procedures. I affirm that I am either the principal or an agent of the operation, and am authorized to conduct business, make representations, enter into contracts and otherwise conduct business on behalf of the operation for the purposes of organic certification. I consent and agree to the foregoing, and further affirm under penalty of law that the responses provided by me are true, correct, and complete:                 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature Date**(NOTE: The name of the signing party must be the same as the Certification Contact listed in form OLP1 on file in the QCS office or as updated on page 1.) |

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| Addendum: Dry Matter Intake (DMI) Calculation Worksheet (for ruminant livestock) |
| Complete this worksheet ***for each separate type (species) and class (stage of life or production)***of organic ruminant livestock. All animals in this group must be managed on the **same diet**. **Make additional copies as necessary**. **Livestock Type/Class (Check only one)**[ ]  Dairy Animal – Lactating/Milking [ ]  Dairy Animal – Dry [ ]  Dairy – Heifer/Yearling [ ]  Dairy – Weaned [ ]  Beef/Meat Animal – Breeder Stock [ ]  Beef/Meat Animal – Slaughter Stock[ ]  Other, specify:      If you do not conduct forage analysis to determine the exact percentage of dry matter, you may use the following assumptions:Grain = 89% dry matter; Grain Silage = 25-35% dry matter; Dry hay = 90% dry matter; Haylage/Baleage = 35-60% dry matterList the average pounds of feed provided on a DAILY basis PER ANIMAL during the Grazing Season and Non-Grazing Season in the tables below.

|  |
| --- |
| **Non-Grazing Season daily feed ration per animal** |
| **Feed Ration** | **Lbs fed****(daily average)** | **% Dry Matter** | **Lbs. dry matter fed (Multiply Lbs fed x % dry matter)** |
| Grain |       **x** |       **=** |       |
| Grain Silage |       **x** |       **=** |       |
| Hay |       **x** |       **=** |       |
| Haylage/Baleage |       **x** |       **=** |       |
| **DM Fed during Non-Grazing Season (Daily Average)**  |       **(A)** |

|  |
| --- |
| **Grazing Season daily feed ration per animal** |
| **Feed Ration** | **Lbs fed****(daily average)** | **% Dry Matter** | **Lbs. dry matter fed (Multiply Lbs fed x % dry matter)** |
| Grain |       **x** |       **=** |       |
| Grain Silage |       **x** |       **=** |       |
| Hay |       **x** |       **=** |       |
| Haylage/Baleage |       **x** |       **=** |       |
| **DM Fed during Grazing Season (Daily Average)**  |       **(B)** |

**Calculations (QCS will calculate if left blank):****Estimated DMI from Pasture (lbs) =** DM Fed during Non-Grazing Season **minus** DM Fed during Grazing Season(A)       - (B)       = (C)       Estimated DMI from Pasture (lbs)**% DMI from Pasture =**  Estimated DMI from pasture (lbs) ÷DM Fed during Non-Grazing Season (Daily Average)(C)       ÷ (A)       x 100 =       **% Dry Matter Intake from Pasture** |