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| 1. **OPERATION INFORMATION:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1.1 Operation Name and Primary Location** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Owner** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Legal Representative** | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **Full Address** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Zip** | | | |  | | | | | | | | | | |
| **City/State/ Dep.** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Country** | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **Phone** | | | | | | | |  | | | | | | | | | | | | | **Fax** | | | | | |  | | | | | | | | | | | | | | | | | | | | | | **E-mail** | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **1.2 Inspected operation address if different than the one specified above** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Full Address** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Zip** | | | |  | | | | | | | | | | |
| **City /State/ Dep.** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Country** | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
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| **1.3 Person in charge/Legally Responsible of the inspected operation** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Full name** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Current occupation** | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **Phone** | | | | | | | |  | | | | | | | | | | | | | **Cellphone** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | **E-mail** | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
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| **1.4 Type of Operation:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Individual Production** | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | **1.5 Certification Standards requested:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Cooperative/Group of producers** | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | **NOP-USDA (USA)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| **Number of men** | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | **MAYACERT-EU Equivalency** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| **Total number of producers** | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | **JAS (Japan)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| **Handler, Processor** | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | |  | | | **Other, Describe:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| **Trader, Exporter** | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | |  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Sub-Contractor** | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | |
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| **1.6 OPERATION HISTORY AND BACKGROUD INFORMATION**  **1.6.1 Type of inspection**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **First inspection** |  | | **Annual inspection** |  | | | **If it’s a first inspection, complete the following questions:** | | | | | | | **Operation’s first inspection** | |  | **Operation’s first inspection by Mayacert** | |  | | Justifications/ Evidences/ Explanations/ clarifications, describe: | | | | | |   **1.6.2 Certification History**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **a) Is the operation currently certified Organic?** | | **YES** |  | **NO** |  | |  | **Date** | **Certification Agency** | | | | | **b) If the operation was certified by Mayacert, since when?** |  |  | | | | | **c) If the operation was already certified by another agency, by which agency(s) was it certified and since when?** |  |  | | | | | **d) If the operation has ever been certified, under which organic international standards was it (NOP, UE, JAS, LPOMEX,Other)?** |  | | | | | | **e) If the operation was certified by another agency, please attach a copy of the report, the response to any finding and the decision of the certification and the last certificate.** |  | | | | | | **f) If such documents are not in your possession, do you authorize Mayacert to obtain further information from the other agency?** |  | | | | | | **g) When was performed the first inspection of the operation?** |  | | | | | | **h) When did the system conversion period start?** |  | | | | | | **i) When was the operation first organic certification and by which agency?** |  | | | | |   **1.6.3 Operation history and background information for the last 3 years**   |  | | --- | | **In sum, please describe the operation background, history, activities and every relevant information:** | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**1.6.4 List crops and amountsto be certified for the current cycle *(Please list crops as it should appear on the certificate)***

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| **Crops** | | | | **Organic** | | | | **Transitional** | | | | | | | | | | | | | | | | | | | | | | | |
| **ha\*** | | **MT\*\*** | | **1st year/** *(T1)* | | | | | | | **2nd year/***(T2)* | | | | | | | | | **3th year/***(T3)* | | | | | | | |
| **ha** | | | | **MT** | | | **ha** | | | **MT** | | | | | | **ha** | | | | | **MT** | | |
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| *\* Ha = Hectares. \*\*MT = Metric Tons of 1000 kg.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **1.6.5 IMPLEMENTATION OF PREVIOUS CORRECTIVE ACTIONS** | | | | | | | | | | | | | | | **There have been no corrective actions** | | | | | | | | | | | | | | | |  | |
| **Corrective actions** | | | | | | | | | | **Had to be met before** | | | | | **Were the corrective actions met?** | | | | | | | | | | | | | | | | | |
| **YES** | | | **NO** | | | **Partially** (%) | | | | | | | | | | | |
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| **2. AGRICULTURAL PRODUCTION DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **2.1 The operation area is detailed as follows:** | | | | | | | | | | | | **Acreage (ha)** | | | | | | | | | | | | | | | | | | | | | |
| **Organic Crop** | | | | | | **Transitional Crop** | | | | | | | | | **Conventional Crop** | | | | | | |
| **a. Annual crops** | | | | | | | | | | | |  | | | | | |  | | | | | | | | |  | | | | | | |
| **b. Perennial crops** | | | | | | | | | | | |  | | | | | |  | | | | | | | | |  | | | | | | |
| **c. Intercropping** | | | | | | | | | | | |  | | | | | |  | | | | | | | | |  | | | | | | |
| **d. Forest** | | | | | | | | | | | |  | | | | | |  | | | | | | | | |  | | | | | | |
| **e. Pasture** | | | | | | | | | | | |  | | | | | |  | | | | | | | | |  | | | | | | |
| **f. Greenhouses** | | | | | | | | | | | |  | | | | | |  | | | | | | | | |  | | | | | | |
| **g. Seedling/ Plant nurseries** | | | | | | | | | | | |  | | | | | |  | | | | | | | | |  | | | | | | |
| **h. Other areas (office, Warehouses, etc.)** | | | | | | | | | | | |  | | | | | |  | | | | | | | | |  | | | | | | |
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| **3. FERTILITY MANAGEMENT** | | | | | | | | | | | | | | | | | | | | | **YES** | | **NO** | | | | | | **ORIGIN** | | | | |
| **3.1 What material are you using to maintain and improve soil fertility and organic activity?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Leguminous crops** | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | |  | | | | |
| 1. **Green manure** | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | |  | | | | |
| 1. **Crop Rotation** | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | |  | | | | |
| 1. **Compost (describe in the comments below the materials used)** | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | |  | | | | |
| 1. **Uncomposted animal manure** | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | |  | | | | |
| 1. **Poultry manure** | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | |  | | | | |
| 1. **Vermicompost** | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | |  | | | | |
| 1. **Uncomposted Plant material** | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | |  | | | | |
| 1. **Sewage Sludge (biosolids) / Drainage/ LASF toilets materials** | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | |  | | | | |
| 1. **Human waste and urine** | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | |  | | | | |
| 1. **Others (Methods and products to increase fertility)** | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | |  | | | | |
| **Describe the monitoring methods and / or procedures; monitoring frequency and documented monitoring records**: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **3.2 INCORPORATED INPUTS (MANURE, COMPOST AND CHEMICAL INPUTS)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| **PRODUCT** | | | | **Active Ingredients** | **Inert Ingredients** | | | | **TON / Ha / Year** | | | | **TYPE** | | | | | | | | | | | | **Origin** | | | | | | | | |  | |
| **Org\*** | | **Conv.\*\*** | | | **Undefined** | | | | | | | **Own** | | | | | **Purchased** | | | |  | |
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| \* Org. = Organic, \*\* Conv. = Conventional | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| **3.3 If fertilizer is made (example: compost, Bokashi, etc.), please fill in the following table:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Final product** | | | | | | **Ingredients/ Used materials** | | | | | | | **%** | | **Origin of the ingredients** | | | | | | | | | | **Preparation process** | | | | | | | | |
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| **3.4 If uncomposted manure is used, is it applied to crops that are intended for human consumption?** | | | | | | | | | | | | | | | | | | | | | | | | YES | | | |  | | NO | | |  |
| **3.5 If uncomposted raw manure is used, is it incorporated to the soil at least 120 days before harvest of crops whose edible part contacts soil or its particles?** | | | | | | | | | | | | | | | | | | | | | | | | YES | | | |  | | NO | | |  | |
| **3.6 If uncomposted raw manure is used, is it incorporated to the soil at least 90 days before harvest of crops whose edible part doesn’t contact soil or its particles?** | | | | | | | | | | | | | | | | | | | | | | | | YES | | | |  | | NO | | |  |
| **Are records kept of the fertilizer production?** | | | | | | | | | | | | | | | | | | | | | | | | YES | | | |  | | NO | | |  |
| 1. **If compost is elaborated:** | | | | | | | | | | | | | | | | | | | | | | | | YES | | | |  | | NO | | |  |
| 1. **Was an initial C: N proportion between 25:1 and 40:1 established?** | | | | | | | | | | | | | | | | | | | | | | | | YES | | | |  | | NO | | |  |
| 1. **Was the temperature maintained between 55°C and 77°C for 3 days, using a static or in-vessel system, be it aerated or on pile?** | | | | | | | | | | | | | | | | | | | | | | | | YES | | | |  | | NO | | |  |
| **3.7 If compost is elaborated, is temperature maintained between 55°C and 77°C for 15 days, using an In windrows system and turn the compost at least 5 times?** | | | | | | | | | | | | | | | | | | | | | | | | YES | | | |  | | NO | | |  |
| **3.8 For inputs used as nutritional, is there an analysis demonstrating the absence of prohibited substances?** | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | |  | | |  |
| **Describe the monitoring methods and / or procedures; monitoring frequency and documented monitoring records:**: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| **4. BIODIVERSITY MANAGEMENTAND SOIL CONSERVATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **YES** | | | | | | **NO** | | | | | | **N/A** | | | |
| 1. **Do you burn crop residues or other material in your field?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | | |  | | | |
| 1. **Do you maintain several canopy layers as a shade cover?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | | |  | | | |
| **Describe:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Do you maintain at least two canopy layers if there is presence of Native plants?**   **(For the Mexican ley)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | | |  | | | |
| 1. **Please describe activities realized to conserve biodiversity (ex. Tree plantings….)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | | |  | | | |
| **Describe:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Is there any type of plastic used in organic production? (Ex. Pipes, irrigation, soil cover, nursery material…)?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | | |  | | | |
| **Describe:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **4.1. SOIL EROSION AND COMPACTION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **4.1.1. What is the topography of the area to certify?** (Specify the percentage of slope) | | | | | | | | | | | | | | | | | | % slope | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | a) Flat | |  | |  |  |  | | |  | b) Inclined | | | | | |  |  | |  | | | | c) Very Inclined | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | |
| **4.1.2 Is there any evidence of erosion or compaction in the field?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **YES** | | | | | | | |  | | | | | | | | | | | **NO** | | | | | |  | | |
| * + 1. **How are the erosion and the compaction minimized?** | | | | | | | | | | | | | **YES** | **NO** | | **% used for this measure** | | | | | | **COMMENTS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **a. Live barriers** | | | | | | | | | | | | |  |  | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **b. Barriers** | | | | | | | | | | | | |  |  | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **c. Slash-and-burn** | | | | | | | | | | | | |  |  | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **c. Terraces** | | | | | | | | | | | | |  |  | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **d. Mulching** | | | | | | | | | | | | |  |  | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **e. Live cover crops that are not limiting crops** | | | | | | | | | | | | |  |  | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **f. Windbreakers curtains** | | | | | | | | | | | | |  |  | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **g. Minimum tillage practice** | | | | | | | | | | | | |  |  | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **h. Others** | | | | | | | | | | | | |  |  | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Describe the monitoring methods and / or procedures; monitoring frequency and documented monitoring records:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **5. SEEDS AND PLANTING STOCK** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **5.1 Origin of seeds** | | | | | | | | | | | | | | | | | | | | | | | **On-farm** | | | | |  | | | | | | | | **Purchased** | | | | | | | | | | | | | | | |  | | | | |
| **Seeds / Planting Stock** | | | | **Organic** | | | | | | **Untreated** | | | | | **Treated** | | | | | | | | **Treatment used** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **5.2 Are there organic seeds and planting stock available in the market?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | |  | | | | | | | | | | | NO | | | | | |  | |
| **5.3 If you are using non-organic seeds or planting stock,explain how you determine that organic seed or planting stock is not available in the market:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **5.4 If it’s your first planting, do you agreeto generate your own seeds and/or planting stock for the next cycle?** | | | | | | | | | | | | | | | | | | | N/A | | | | | |  | | | | | YES | | | | | | | |  | | | | | | | | | | | NO | | | | | |  | |
| **5.5 If you are using non-organic seeds or planting stock, was it managed under an Organic Management System for a period not less than 1 year?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | |  | | | | | | | | | | | NO | | | | | |  | |
| **5.6 Are you using genetically modified seeds or planting stock?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | |  | | | | | | | | | | | NO | | | | | |  | |
| **5.7 Are you using perennial seeds or planting stock?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | |  | | | | | | | | | | | NO | | | | | |  | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **6. PESTS, DISEASES AND WEEDS MANAGEMENT STRATEGIES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **6.1 What preventative Management practices are you using for pests, diseases and weeds?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **a)** | **Adequate Organic fertilization** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | |  | | | | | | | | NO | | | | | |  | | | |
| **b)** | **Selecting suitable varieties or proven resistance varieties** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | |  | | | | | | | | NO | | | | | |  | | | |
| **c)** | **Conservation of natural enemies of pests** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | |  | | | | | | | | NO | | | | | |  | | | |
| **d)** | **Crop rotation** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | |  | | | | | | | | NO | | | | | |  | | | |
| **e)** | **Removal of pest habitat** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | |  | | | | | | | | NO | | | | | |  | | | |
| **f)** | **Burning “weeds”** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | |  | | | | | | | | NO | | | | | |  | | | |
| **g)** | **Others (ex. Traps, removal ofcrop residues, weeding, pruning, etc.).** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | |  | | | | | | | | NO | | | | | |  | | | |
| **6.2 When your preventative Management is ineffective, what control method do you use?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| **PESTS, DISEASES, WEEDS** | | | | | | | | | **CONTROL** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **7. Organic, botanical or synthetic substances use for pests, weeds and/or diseases control** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **7.1 Organic, botanical or synthetic substances have been applied for pests, weeds and/or diseases control at local, regional and national levels** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | |  | | | | | | NO | | | | | |  | | | |
| **7.2 Do you use organic, botanical or synthetic substances for controlling pests, weeds and diseases? (If yes, please fill in the table below)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | |  | | | | | | NO | | | | | |  | | | |
| **Product Name** | | **Active Ingredients\*** | | | | | | | | | | **Inert Ingredients** | | | | | | | | | **Origin** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | |  | | | | | | | | | **Own** | | | | | | | | | | | | | | | | | | | **Purchased** | | | | | | | | | | | | | | | | |
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| *\* In the case of botanical and organic substances, indicate the material used.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **7.3 Do you have an organic production compatibility certificate of the substances you use for controlling pests, weeds and diseases? (attach as annex 15.18)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | | | NO | | | | | |  |
| **7.4 Have you consulted with MAYACERT about the used products and do you have the authorization to use it?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | | | NO | | | | | |  |
| **Describe the monitoring methods and / or procedures; monitoring frequency and documented monitoring records:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **8. WATER USE AND IRRIGATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **8.1 Do you use irrigation in the growing and/or the seedling nursery?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | ☐ | | NO | | | | | | ☐ | | | |
| **8.2 What percentage of cultivated area is irrigated?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| **8.3 What is the source of the water you are using for your crop production?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **a) Well** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | | | NO | | | | | |  |
| **b) River water** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | | | NO | | | | | |  |
| **c) Spring water** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | | | NO | | | | | |  |
| **d) Rainwater** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | | | NO | | | | | |  |
| **e) Other** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | | | NO | | | | | |  |
| **8.4 Is there any water quality analysis made?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | | | NO | | | | | |  |
| **8.5 How do you protect and conserve your water sources? (Infiltration pits/ sedimentation…)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | | | NO | | | | | |  |
| **Please indicate in annex 16.14 Plan, Map and / or Sketch the water sources and the wastewater discharge points** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Describe the methods and / or procedures to conserve water sources used for crop irrigation, strategies and practices to improve irrigation water resources ; monitoring methods and / or procedures; monitoring frequency and documented monitoring records:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **9. BUFFER ZONES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| * 1. **Type of adjoining land use:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Intensive farming (high use of de agrochemicals)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | |  | | | | | | | NO | | | | | |  | | | |
| **b)   Conventional system with minimal use of inputs (only an occasional use of synthetic fertilizers and herbicides)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | |  | | | | | | | NO | | | | | |  | | | |
| **c)    Natural (no use of external inputs but not certified as organic)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | |  | | | | | | | NO | | | | | |  | | | |
| **d)    Paddock/ Extensive grazing** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | |  | | | | | | | NO | | | | | |  | | | |
| **e)    Forest** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | |  | | | | | | | NO | | | | | |  | | | |
| **f) Certified organic** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | |  | | | | | | | NO | | | | | |  | | | |
| **9.2 Type of buffer between the area to certify and the adjoining land:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Live barriers** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | | NO | | | | | |  | | | |
| 1. **Ditches** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | | NO | | | | | |  | | | |
| 1. **Crop free area** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | | NO | | | | | |  | | | |
| 1. **Other:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | | NO | | | | | |  | | | |
| **9.3 Please describe plots boundaries/ lots with neighboring plots (if there is a slope, living fences, filtration ditches, roads, size, effectiveness in case of drifts:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Describe the features of the buffer zones to prevent risk of pollution and its monitoring; monitoring methods and / or procedures; monitoring frequency and documented monitoring records:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **10. RECORD KEEPING** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **10.1 Which type of records do you maintain?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Receipts for external inputs** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | NO | | | | | |  | | | |
| 1. **Input application records (Date, Location, Amount, Rate, etc.)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | NO | | | | | |  | | | |
| 1. **Field records (including activity logs, dates, applications, dosage, responsible, etc.) / Book of agricultural production** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | NO | | | | | |  | | | |
| 1. **If there is a parallel production, organic and non-organic harvest records (Date, Location, Quantities harvested, Field number).** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | NO | | | | | |  | | | |
| 1. **Harvest/storage records (Date, Location, Quantities harvested, Field number, Organic identification).** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | NO | | | | | |  | | | |
| 1. **Cleaning logs of the transport** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | NO | | | | | |  | | | |
| 1. **Shipping records** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | NO | | | | | |  | | | |
| 1. **Sales records. Bills that include date, quantity, product and product condition** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | NO | | | | | |  | | | |
| 1. **Labelling of organic products (Stored, Transported, in bulk or finished products).** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | NO | | | | | |  | | | |
| 1. **Claims records** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | NO | | | | | |  | | | |
| 1. **Others, List:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | |  | | | NO | | | | | |  | | | |
| **10.2 In the case of absence of records, detail the reasons:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Describe the types of control records indicated in this point; monitoring methods and / or procedures; monitoring frequency and documented monitoring records**: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **11. PARALLEL PRODUCTION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **11.1 Do you have a parallel production in your production unit? (Farm, Organization)?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | |  | | | NO | | | | | |  | | | |
| **11.2 Do you use any equipment for both organic and non-organic production?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | |  | | | NO | | | | | |  | | | |
| **Describe**: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **12. HARVEST AND POST-HARVEST** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ACTIVITY** | | | | | | | | **DESCRIPTION (Describe the activity and detail the separation if there is a parallel production)** | | | | | | | | | | | | | | | | | | | **DOCUMENTATION (Documents of traceability)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Harvest** | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Post-harvest packing** | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Post-harvest storage** | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Post-harvest transport** | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **12.1 Describe the equipment used during the harvest process including its cleaning procedure:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **DESCRIBE the separation practices carried out between the conventional product and the organic product to avoid contamination risks at harvest and post-harvest**:  **Describe the monitoring methods and / or procedures; monitoring frequency and documented monitoring records**: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **13. MARKETING/ SALES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **13.1 Please indicate where organic and/or transitional products are sold and shipped (for example: local market, wholesalers, retailers, exporters, brokers, etc.).** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **DESCRIBE the procedure for the commercialization and sale of the organic and / or in conversion products; monitoring methods and / or procedures; monitoring frequency and documented monitoring records:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **14. CLAIMS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **14.1 Do you maintain a claim record?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | |  | | | | | NO | | | | |  |
| **14.2 Does the record allow you to identify the cause of the problem and the responsible person?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | |  | | | | | NO | | | | |  |
| **14.3 In response to claims that occurred, were appropriate measures taken?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | |  | | | | | NO | | | | |  |
| **DESCRIBE procedure and measures taken to evacuate claims; frequency of the monitoring and monitoring records**: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **15. DOCUMENTS THAT SHOULD BE ANNEXED TO THIS OSP** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Required Documents** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Yes** | | | | | **No** | | | | | | **NA** | | | |
| **15.1** Service Contract(s), with signatures | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.2** Producer/ Processor’s Agreement (NA for LPOMEX, NOP), with signatures | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.3** Producer/ Processor’s letter of intent (NA for LPOMEX, NOP), with signatures | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.4** Production history table (Farms / Groups) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.5** Internal and External inspections’ control table (Groups) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.6** Producers’ list (Groups) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.7** Documents that support the product traceability | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.8** Original Label or a copy of the product original label (a color copy if it’s a color labeling). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.9** Used inputs labels | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.10** Copy of inputs compatibility certificate | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.11** Copy of the previous certificate | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.12**. Documents that support requests for reduction of the conversion period (If applicable) :   1. Affidavit of prior land use in the last three years and the production history of the production unit. 2. Records of previous activities management of the production unit. 3. Proofs of third parties that are related to organic production or to the performed activity (governments agencies, NGOs, etc.) to support crop history and/or management in the last three years. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.13** Documents that support producers certified organic by another certification body (If applicable):   1. Last organic certificate. 2. Last decision of certification 3. Inspection report | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.14** Documents that support producers from other groups that already had another organic certification (If applicable):  i. Proof or extended minutes from the group to which he belonged, which state the reason for the departure.  ii. Former group organic certificate and the approved producers list where the producer's name appears. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.15** Process flowchart | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15**.**16** Maps and/or sketches for individual units (Farm/Process Plant) and for Organizations, Geographic location Map. (**State Water Sources and wastewater discharge Points**.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.17** Copy of the internal inspection sheet (Groups), if it’s a first inspection or if there are changes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.18** Copy of the ICS technical opinion/decision (Groups) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.19** Copy of Organic Production Internal Regulation (Groups), if it’s a first inspection or if there are changes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.20** Copy of the contract or the agreement between the producers and the organization, and copy –if applicable – of the ICS decisions of sanctions or exclusion of members. (Groups) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Optional Documents** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **15.21** Management plan of plots (Groups) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.22** Soil analysis (Producer) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.23** Previous harvest’s sales pipeline (Producer / Processor) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.24** Organization chart of the Operation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.25** Final product physicochemical and microbiological analysis (Processor) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
| **15.26** Process water physicochemical and microbiological analysis (Processor) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |  | | | |
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| ***Affirmation of the producer:***  ***I further understand and accept that Mayacert shall take full responsibility for confidentiality of the information in this document. The information will be shared to a third party only if I give a verbal approbation or a writing notice.***  ***I affirm that everything in this document is correct and represents the operation.***    Name and Signature of the Legally Responsible or the Person in Charge Place and Date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**This section must be completed by Mayacert’s inspectors:**

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| **Point of the OSP** | **Description** | **Comments** |
| **1 (Ex.)** | **1.6 OPERATION HISTORY AND BACKGROUD INFORMATION** | **The operator did not indicate by which agency(s) he were certified** |
| **1** |  |  |
| **2** |  |  |
| **3** |  |  |
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| ***The results of MAYACERT’s verification:*** *The operation is:* |
| ***recommended to continue the certification process*** |
| ***NOT recommended to continue the certification process*** |
| ***recommended to continue the certification process under the conditions set below:*** |
| ***DATE:*** Haga clic aquí para escribir una fecha.  ***Signature of MAYACERT’s Representative that reviewed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** |