SECTION 8: International Import and Export Activity	
Note: This section must be completed	
For more information please visit https://www.ams.usda.gov/services/organic-certification/interview	rnational-trade
 I. Import 1. From which countries do you or do plan to import any ingredients to be used in your product (s): □ Canada □ European Union □ Japan □ Republic of Korea □ Taiwan □ Switzerland Other(s): 	□ NA
Attach a copy of your standard operating procedures (SOP) and applicable documentation to verify products comply with the USDA organic regulations. Attached	that imported organic
List each product or substance intended to be imported, the source, and indicate the frequency of in	mport:
II. Export	□ NA
Ta collègia de contriba de como esta en elemeta de come esta encome el cota.	
To which countries do you export or plan to export any products: □Canada □European Union □Japan □Republic of Korea □Taiwan □Switzerland Other(s):	
□Canada □European Union □Japan □Republic of Korea □Taiwan □Switzerland	
□Canada □European Union □Japan □Republic of Korea □Taiwan □Switzerland Other(s): Attach a copy of your standard operating procedures (SOP) to verify compliance with the terms of the each applicable country to include, but not limited to, the required documentation with every shipments.	
□ Canada □ European Union □ Japan □ Republic of Korea □ Taiwan □ Switzerland Other(s): Attach a copy of your standard operating procedures (SOP) to verify compliance with the terms of the each applicable country to include, but not limited to, the required documentation with every shipmed Attached □ □ □ □	
□ Canada □ European Union □ Japan □ Republic of Korea □ Taiwan □ Switzerland Other(s): Attach a copy of your standard operating procedures (SOP) to verify compliance with the terms of the each applicable country to include, but not limited to, the required documentation with every shipmed Attached □ □ □ □	
□ Canada □ European Union □ Japan □ Republic of Korea □ Taiwan □ Switzerland Other(s): Attach a copy of your standard operating procedures (SOP) to verify compliance with the terms of the each applicable country to include, but not limited to, the required documentation with every shipmed Attached □ □ □ □	

SECTION 9: NHDAMF Materials Use Table §205.103, §205.203, 205.238, 205.600-606

Producers are responsible for using only products that meet NOP standards. During your inspection, be prepared to provide product labels, ingredient lists, invoices and other relevant documentation.

List all materials (inputs) you use or plan to use: soil amendments--fertilizers, minerals, micronutrients, compost, manure, growing media; inoculants and seed treatments; pest / disease / weed management substances and adjuvants; crop production aids, or any other materials applied to soil, crops, water, or stored products; as well as cleaners and sanitizers. Using products or inputs not listed on your materials list puts your certification at risk. Completely fill out each column or your OSP will be considered incomplete.

"OMRI" product verification shall only be used when the <u>specific brand name product</u> is on the <u>current</u> OMRI list. "OMRI" is not to be indicated for a generic category.

Intended Purpose of Material: fertilizer, pesticide, etc.	Complete Product Name	Company Name/ Manufacturer as listed on product	Indicate Verification of Use: National List, OMRI, WSDA, PCO, NHDAMF, etc.	Initial each product to indicate you understand any Restrictions regarding use	Plan to Use or Have On-Hand	For DAMF Review Only

*If additiona	al space is required for either	of the above tables, please	print additional sheets.	
Do you carry	y a current NHDAMF PESTICID	DE APPLICATORS LICENSE o	or GENERAL USE PERMIT?	☐ Yes ☐ No
If yes, pro	ovide your Pesticide License/Pe	ermit #:		
	For DAMF Use Only	Initial Reviewer	Inspector	
	For DAMF Use Only All materials reviewed?	Initial Reviewer	Inspector	
	,	Initial Reviewer	Inspector	
	All materials reviewed?	Initial Reviewer	Inspector	
	All materials reviewed? Is the table complete?	Initial Reviewer	Inspector	
	All materials reviewed? Is the table complete?	Initial Reviewer	Inspector	
	All materials reviewed? Is the table complete?	Initial Reviewer	Inspector	

ATTACHMENTS

Confirm you have attached the following required documents:
☐ Facility Map
☐ New or Revised Product Labels
☐ Other:

PAYMENT: §205.400

Certification Fee:	\$100.00	The certification fee is non-refundable. See Agr. 911.05(b)(3).
Inspection Fee <mark>*</mark> :	\$	Total square footage of production to be certified:
Total Fees Submitted:	\$	Make checks payable to: "TREASURER, STATE OF NH"

*Table 911-1

Production Type	Fee	Fee	Fee	Fee	Fee	Fee
	\$50	\$100	\$200	\$300	\$400	\$500
# Sq. Ft. controlled environment production	2000 or less	>2000-4000	>4000- 6000	>6000- 10,000	>10,000-20,000	>20,000

Mail completed organic system plan, attachments and payment to:

NH Department of Agriculture, Markets & Food

Attn: Division of Regulatory Services

PO Box 2042

Concord, NH 03302-2042

If you have any questions, please call Regulatory Services at (603) 271-3685.