

2024 ORGANIC SYSTEM PLAN (OSP) FOR MUSHROOM PRODUCTION

Instructions

- Complete this Organic System Plan (OSP) to request or renew certification for indoor organic mushroom production.
- Complete OSPs are required prior to inspection of each requested scope.
- Crops must be managed in full compliance with NOP §205.200.
- After the submitted OSP has been reviewed, an agricultural inspector will contact you to schedule an inspection.
- OSPs submitted and received late may result in a Notice of Noncompliance.

Top section for office use only:

OSP Received On: _____ Entered Into Database On: _____ By (Initials): _____

Assigned To: Reviewer _____ Primary Review Completed On: _____

Inspector _____ Inspector's Review Completed On: _____

Inspection Completed On: _____ Director Reviewed On: _____ Initials: _____

Request Form # _____ Documents Received On: _____ Initials: _____ ☐ NA

Database Updated On: _____ Initials: _____ Certificate Mailed On: _____ Initials: _____

Date payment received: _____ Check #: _____ Amount: _____ Cash ☐

SECTION 1: General Information §205.201 and §205.401

Farm Name:		Certificate #:
Name of person authorized to act on behalf of the company:		
Mailing Address:		
Physical Address <input type="checkbox"/> Same as mailing		
Preferred Phone Number:	Email address:	Website:
Preferred method of correspondence: <input type="checkbox"/> Phone <input type="checkbox"/> Email		
Identify your organizational structure/legal status: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Trust or non-profit <input type="checkbox"/> Cooperative <input type="checkbox"/> LLC		
<input type="checkbox"/> Legal Partnership(federal form 1065) Corporation: _____ Other-specify _____		
Check those products for which you are seeking organic certification: <input type="checkbox"/> Harvested Mushrooms <input type="checkbox"/> Growing Blocks		
List the varieties of mushrooms to be certified:		
Inspectors Change; Please provide detailed directions to your production site from Concord, NH		

Affirmation §205.400-§205.405

- ❖ I have a copy of the NHDAMF organic regulations and the USDA National Organic Program (NOP) regulations, with which I have read, understand and agree to follow for organic certification.
- ❖ This Organic System Plan has been completed to the best of my ability, with accurate and forthcoming information.
- ❖ I understand that acceptance of this Organic System Plan in no way implies granting of certification by NHDAMF.
- ❖ I will immediately notify NHDAMF of any change in my certified operation or portion of it that may affect its compliance with NHDAMF organic Rules and the USDA National Organic Program (NOP) Regulations
- ❖ I understand that the operation may be subject to unannounced inspections and/or sampling for residues at any time.
- ❖ I agree to submit applicable fees charged according to the fee schedule by NHDAMF.

My signature confirms that I have read, understand, and agree to the aforementioned statements

Applicant's Signature _____ Date _____

Organic Certification History §205.662

Name(s) of any certifying agent(s) **other than** NHDAMF to which an application has been previously made, and date(s) of application: NA

Outcome of submission(s): _____

If you have received any notices of non-compliance or denial of certification, from a previous certifying agent, please attach these with a description of actions taken to correct the non-compliances, including evidence of correction.

☐ Attached ☐ NA

Non-Compliances

Did you receive a *Conditions for Continued Certification* (CCC) from NHDAMF last year? ☐ Yes ☐ No

Did you receive a *Notice of Non-compliance* (NNC) from NHDAMF last year? ☐ Yes ☐ No

If yes, please describe the CCC and/or NNC and the corrective actions implemented:

Note: Corrective actions along with any supporting documentation will be reviewed during your next inspection.

Recordkeeping § 205.103

Check those records that are maintained and will be available for review during the inspection

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Documentation of substrate & other similar materials | <input type="checkbox"/> Documentation of spawn source(s) | | |
| <input type="checkbox"/> Harvest records | <input type="checkbox"/> Storage records | <input type="checkbox"/> Equipment cleaning record | <input type="checkbox"/> Shipping records |
| <input type="checkbox"/> Sales records | | | |