

**NHDAMF ORGANIC CERTIFICATION PROGRAM**

**OFF-FARM MANURE AFFIDAVIT**

This document must be filled out when manure is sourced off site for use in an organic operation certified by New Hampshire Department of Agriculture, Markets & Food. It shall be submitted with the annual Organic System Plan (OSP) or when the manure is purchased during the growing season. It must be completed by a knowledgeable person affiliated with the source facility or farm. A new form is required annually and when practices of the source of manure change.

Name of NHDAMF Certified Operation: \_\_\_\_\_

Address: \_\_\_\_\_

Material Sourced: ☐ Manure ☐ Manure with animal bedding

Source of Material: \_\_\_\_\_

Address: \_\_\_\_\_

Type of Livestock Manure: \_\_\_\_\_

Type of Bedding: \_\_\_\_\_ ☐ NA  
(wood chips, straw, hay, etc.)

Have any materials been applied to the manure or bedding? ☐ Yes ☐ No ☐ NA

If yes to the above question, please indicate what has been applied:

\_\_\_\_\_

I, (name of authorized person) \_\_\_\_\_, representing the  
supplier/source of the above material, attests that the above information is true and correct.

Authorized Person's Signature: \_\_\_\_\_

Date: \_\_\_\_\_