

Please fill out this questionnaire if you are requesting organic farm/crop certification or renewal. Use additional sheets if necessary. Attach current farm map(s) detailing all fields with field numbers. On the map(s), identify land use of adjoining fields (i.e., conventional crops, residential area, etc.). Other attachments include Inspection Appointment Form, field history sheets, applicable tests for water, soil, plant tissue and/or residue analyses, if required. Sign and send or fax to NOA together with as many of the attachments listed at the end of the document as you can.

Please fill in only white fields. Grey fields ("C/NC" and Assessor's Comment") will be filled out during the organic on site assessment.

SECTION 1: General Information

				C / NC	ASSESSOR'S COMMENT
Name	Farm	Type of Farm			
Address		Nearest Town			
Phone	Fax	E-mail			
Year first certified _____					
Do you understand current organic standards? <input type="checkbox"/> yes <input type="checkbox"/> no					
If you have been previously certified please give:					
Expiry date	Standard	Certifier			
List all crops or products requested for certification:					
Crop	Total area (state unit)	Projected yields (state unit)	Proposed status (organic, in transition, conventional)		
What is the total area of the farms(s) ? _____ ha					
What is the area that you wish to be certified organic (or in conversion)? _____ ha					
Are you intending to export your organic production? <input type="checkbox"/> yes <input type="checkbox"/> no					
Have you ever been denied certification? <input type="checkbox"/> yes <input type="checkbox"/> no	If yes, describe the circumstances:				

SECTION 2: Farm Plan Information

A. Please complete a field history sheet (please request template from NOA) that show all fields, [organic (O), in transition (T) or conventional (C)], field numbers, acres/hectares, crops planted, projected yields and inputs applied.

B. Organic standards require that all inputs for crop production shall be approved, whether brought onto the farm, or made on the farm. List all inputs, including propagating materials, composts, fertilizers, manure, biocontrols for weeds, fungus or pests, inoculants, chemicals, other plant and /or animal matter, etc. (Water is covered in Section 7 below.)

Input	Source	Does it have an organic certificate?	C / NC	ASSESSOR'S COMMENT

SECTION 3: Seed Treatments

Organic standards prohibit or restrict the use of synthetic seed treatments and prohibit genetically engineered products. Please save your seed labels to show the inspector.

					C / NC	ASSESSOR'S COMMENT
List all species cultivated on your farm and mark seed origin						
Crop	Own organic seeds	Purchased organic seeds	Conventional seeds untreated	Conventional seeds treated		
Do you use any seed that is chemically treated? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, please list crop and treatment substance						
Do you use any seed that is genetically engineered (GMO)? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, please list crop						

SECTION 4: Source of Seedlings and Perennial Stock

Annual seedlings must be produced according to organic standards while perennial plants must be managed organically for at least one year prior to harvest of crop or sale of the plant as a certified organic transplant.

LIST ANY ANNUAL SEEDLINGS THAT HAVE BEEN PURCHASED:	C / NC	ASSESSOR'S COMMENT
<input type="checkbox"/> No seedlings used		

CROP	SUPPLIER	CERTIFICATION OR TREATMENTS?		
DO YOU GROW ORGANIC SEEDLINGS ON-FARM <input type="checkbox"/> yes <input type="checkbox"/> no If yes:				
What type and size is your greenhouse/nursery?				
What ingredients are in your soil mix?				
What fertility products or foliar sprays do you use?				
What inputs are used in your watering system?				
How do you prevent seedling diseases?				
If treated wood is used in any part of your nursery, where is it used? What is it treated with?				
C. DO YOU GROW BOTH ORGANIC AND NON-ORGANIC PLANTS IN YOUR NURSERY <input type="checkbox"/> yes <input type="checkbox"/> no If yes please describe separation measures				

D. PERENNIAL STOCK: (Use additional sheets if necessary) <input type="checkbox"/> Not applicable					
TYPE	DATE PLANTED	TRANSPLANT SOURCE	EXPECTED HARVEST DATE	C / NC	ASSESSOR'S COMMENT

SECTION 5: Soil Fertility Management

<i>Organic standards require an active management plan to build soil fertility and prevent soil erosion.</i>			C / NC	ASSESSOR'S COMMENT
A. GENERAL INFORMATION				
What are your soil types?				
What are your soil/nutrient deficiencies? <i>Attach copies of test results if available.</i> <input type="checkbox"/> No deficiencies				
DESCRIBE IN DETAIL YOUR SOIL FERTILITY MANAGEMENT PROGRAMME (ON A SEPARATE SHEET). Also include what changes you anticipate.				
Please list all fertilizers used <input type="checkbox"/> Not applicable				
PRODUCT	BRAND NAME OR SOURCE	REASON FOR USE		
If you are using any chemical fertility inputs, describe your plan to reduce or eliminate their use: <input type="checkbox"/> Not applicable				
B. COMPOST/MANURE USE:				
What forms of compost/manure do you use, where is the raw material from?				
Please list all ingredients/additives				

<p>If you use <u>off-farm sources of manure/compost</u>, what are the potential contaminants from these sources? <i>Attach residue analysis of off-farm manure/compost if available.</i></p>		
<p>How much compost/manure do you apply per hectare per year</p>		
<p>Describe your composting method(s)</p>		
<p>C. SOIL EROSION:</p> <p>What soil erosion problems do you experience and where are they?</p> <p>How do you prevent soil erosion?</p>		

SECTION 6: Crop Management

Organic standards require an active management plan to maximize soil and crop health, and to prevent weed, pest and disease problems.

A. CROP ROTATION:	C / NC	ASSESSOR'S COMMENT
State crop rotation implemented in your production		

B. WEED MANAGEMENT PLAN:					
What are your problem weeds? <input type="checkbox"/> No weed problems					
What weed control methods do you use? If you use chemical weed control inputs please list their brand names and active ingredients.					
If you use chemical weed control inputs, describe your plan to reduce or eliminate their use:					
Rate the effectiveness of your weed management program: <input type="checkbox"/> excellent <input type="checkbox"/> satisfactory <input type="checkbox"/> needs improvement What changes do you anticipate?					
C. PEST MANAGEMENT PLAN:					
What are your problem pests? <input type="checkbox"/> insects (list): <input type="checkbox"/> rodents <input type="checkbox"/> birds <input type="checkbox"/> other animals: <input type="checkbox"/> No pest problems					
Do you work with a pest control advisor? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, give name					
What strategies do you use to prevent pest damage to crops?					
Describe the pest management inputs:					
PEST PROBLEM	CONTROL PRODUCT	INGREDIENT(S)	CHECK IF GMO (X)		

<p>If you use chemical pest control inputs, describe your plan to reduce or eliminate their use:</p> <p>Rate the effectiveness of your pest management program: <input type="checkbox"/> excellent <input type="checkbox"/> satisfactory <input type="checkbox"/> needs improvement What changes do you anticipate?</p>					
D. DISEASE MANAGEMENT PLAN:					
<p>What are your problem crop diseases? <input type="checkbox"/> No disease problems</p>					
<p>What disease prevention strategies do you use?</p>					
<p>Describe the disease management inputs: <input type="checkbox"/> Not applicable</p>					
DISEASE PROBLEM	CONTROL PRODUCT	INGREDIENTS	CHECK IF GMO (X)		

<p>If you use chemical disease control inputs, describe your plan to reduce or eliminate their use:</p>		
<p>Rate the effectiveness of your disease management program:</p> <p><input type="checkbox"/> excellent <input type="checkbox"/> satisfactory <input type="checkbox"/> needs improvement</p> <p>What changes do you anticipate?</p>		

SECTION 7: Water Source and Irrigation

<p><i>Water tests are required annually for nitrate and coliform bacteria if water is used for greenhouse/nursery use, washing organic products, and on-farm processing. Tests may be required for irrigation water and organic livestock drinking water. Irrigation water should not contaminate organic crops with chemical materials. Methods to conserve water usage should be part of the irrigation plan.</i></p>	C / NC	ASSESSOR'S COMMENT
<p>A. WATER USE: <input type="checkbox"/> irrigation <input type="checkbox"/> greenhouse/nursery <input type="checkbox"/> foliar sprays <input type="checkbox"/> washing crops <input type="checkbox"/> none <input type="checkbox"/> other :</p>		
<p>B. SOURCE OF WATER: <input type="checkbox"/> borehole <input type="checkbox"/> river/vlei/dam <input type="checkbox"/> spring <input type="checkbox"/> other</p> <p>Name of municipal/irrigation/water board if applicable:</p> <p><i>Attach current water tests for coliform bacteria and/or nitrates if applicable.</i></p>		
<p>C. TYPE OF IRRIGATION SYSTEM:</p>	C / NC	
<p>What Type Of Irrigation Is Used?</p> <p><input type="checkbox"/> none <input type="checkbox"/> drip <input type="checkbox"/> flood <input type="checkbox"/> centre pivot <input type="checkbox"/> micro-sprinkler <input type="checkbox"/> other</p>		
<p>What input products are applied through the irrigation system</p> <p><input type="checkbox"/> none</p>		

<p>What products do you use to clean irrigation lines/nozzles?</p> <p><input type="checkbox"/> none</p>		
<p>How do you conserve irrigation water?</p>		
<p>Known contaminants in your irrigation water: <i>(Attach residue analysis and/or salinity test results if available.)</i></p>		

SECTION 8: Maintenance of Organic Integrity

A. ADJOINING LAND USE: <i>Organic standards require that organic production areas be protected from contamination from prohibited substances (e.g., pesticides). Buffer areas may change annually, depending on contamination potential from adjoining land uses.</i>			C / NC	ASSESSOR'S COMMENT
List specific buffer areas you maintain: <i>(Show all adjoining land uses on your field maps.)</i> <input type="checkbox"/> Not applicable				
LOCATION/FIELD NO.	TYPE OF BUFFER (I.E. TREELINE, HEDGEROW, WILDLIFE PLANTING, GRASS STRIP, CROPLAND*)	DRIFT RISK AND SPRAYING EQUIPMENT ON NEIGHBOURING LAND		
* If crops are harvested from the buffer zones, describe their harvest, storage and sales:				
What additional safeguards do you use to prevent accidental contamination? <input type="checkbox"/> None				

Do any fields or portions of fields flood frequently (more than once every ten years)? yes no

If yes, give field numbers:

B. SPLIT AND PARALLEL PRODUCTION:

To prevent contamination by non-organic products, organic standards have additional rules for farmers who are farming conventionally as well as organically. The farm operator must demonstrate the ability to keep crops separate in storage. Storage areas should remain organic and not be switched back and forth. Specific records must be kept to document all crops, inputs, harvest, storage and sales.

					C / NC	ASSESSOR'S COMMENT
<p>Which category best describes your current operation?</p> <p><input type="checkbox"/> 100% organic <input type="checkbox"/> predominantly organic <input type="checkbox"/> in transition <input type="checkbox"/> predominantly conventional crop production</p> <p>If you farm conventionally, do you plan to convert fully to 100% organic production? <input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>What is your plan and time frame for conversion to organic production?</p> <p>Do you grow the same crops organically, in transition and/or conventionally: <input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>If you grow any conventional or transitional crops, please fill out the following table: <input type="checkbox"/> Not applicable</p>						
SPECIFIC CROPS/VARIETIES	FIELD NOS.	TRANSITIONAL (T) OR CONVENTIONAL (C)	TOTAL AREA (ha)	PLANNED USE AND/OR STORAGE AREAS		
Use of chemical soil amendments on farm:						
PRODUCT NAME		WHO APPLIES? SELF (S) CONTRACT (C)		WHERE STORED? (ON-FARM OR OFF-FARM; WHERE ON FARM?)		

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Herbicide & pesticide use on farm:				
PRODUCT NAME	WHO APPLIES? SELF (S) CONTRACT (C)	WHERE STORED? (ON-FARM OR OFF-FARM; WHERE ON FARM?)		

C. EQUIPMENT:				C / NC	ASSESSOR'S COMMENT
<p><i>Organic standards require that equipment used in organic crop production not contaminate fields or organic crops. Contamination includes risk from oil, fuel, and hydraulic fluids. Equipment used for both organic and conventional farming should not contaminate organic fields or crops.</i></p>					
<p>List equipment used for planting, spraying and harvesting: <input type="checkbox"/> Not applicable</p>					
EQUIPMENT NAME	OWNED (O), RENTED (R), CONTRACT (C)	TICK (✓) IF USED ON BOTH ORGANIC & CONVENTIONAL	HOW IS EQUIPMENT CLEANED BEFORE USE ON ORGANIC FIELDS?		
<p>Is your equipment maintained so that fuel, oil and hydraulic fluid do not leak? <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Not applicable</p>					
<p>If you use a sprayer ... <input type="checkbox"/> Not applicable</p> <p>Type:</p> <p>Did you purchase if new (N) or used (U)?</p>					
<p>Other equipment: Could any equipment you use have been contaminated by previous uses? <input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>If yes, describe:</p>					

D. HARVEST:		
<p>How are your organic crops harvested? <input type="checkbox"/> mechanical <input type="checkbox"/> by hand</p> <p>What containers are used for harvesting?</p>		
<p>Are the containers used for organic crops only? <input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>If not, how are they cleaned?</p>		
<p>E. POST-HARVEST HANDLING: <input type="checkbox"/> Not applicable</p> <p><i>Organic standards require that post-harvest handling procedures do not contaminate organic products with non-organic crops or prohibited materials. (Note: For on-farm processing, you may need to complete an Organic Processing/Handling Plan Questionnaire.)</i></p>		
<p>Describe your post-harvest handling procedures and equipment:</p>		
<p>Is the processing area and equipment used for organic products only?</p> <p><input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>How is the processing area and equipment cleaned prior to processing/packing organic produce?</p>		
<p>What kind of packaging material is used?</p>		
<p>F. CROP STORAGE: <input type="checkbox"/> No organic crop storage</p> <p>Describe your storage facilities, please provide map where storage facilities are located:</p>		

STORAGE ID#	TYPE OF CROPS STORED	TYPE OF STORAGE	CAPACITY	ORGANIC (O), TRANSITIONAL (T), CONVENTIONAL (C), BUFFER (B)		
<p>Do you use the same storage areas for organic, transitional, buffer and/or conventional crops? <input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>If yes, how do you segregate organic crops from non-organic crops?</p> <p>If yes, how do you clean storage units prior to storage of organic crops?</p>						
<p>How do you prevent/control pests in stored crops? <input type="checkbox"/> No pest problems</p>						
<p>Are any stored crop inputs used for organic crops? <input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>If yes, list all inputs: _____</p>						
<p>G. TRANSPORTATION: <input type="checkbox"/> Not applicable</p>						
<p>Who is responsible for arranging transportation of organic products:</p> <p><input type="checkbox"/> self <input type="checkbox"/> buyer <input type="checkbox"/> other:</p> <p>Describe how organic products are transported:</p>						
<p>What steps are taken to protect the integrity of organic products during transport?</p>						

SECTION 9: Record Keeping System

Organic standards require that your organic products can be tracked back to the field/location where they were produced/harvested, including written records of all inputs and production activities.	C / NC	ASSESSOR'S COMMENT
<p>Which of the following records do you keep for organic production?</p> <p><input type="checkbox"/> field maps</p> <p><input type="checkbox"/> field history sheets (previous three years)</p> <p><input type="checkbox"/> input records that show soil amendments, manure, compost, foliar sprays and pest control product applications</p> <p><input type="checkbox"/> harvest records that show field numbers and harvest amounts</p> <p><input type="checkbox"/> labour records</p> <p><input type="checkbox"/> storage records that show storage location, ID numbers, and amounts stored</p> <p><input type="checkbox"/> sales records</p> <p><input type="checkbox"/> shipping records (such as bills of lading)</p> <p><input type="checkbox"/> other</p>		
<p>Which of the following records do you keep for conventional production?</p> <p><input type="checkbox"/> Not applicable</p> <p><input type="checkbox"/> field maps</p> <p><input type="checkbox"/> field history sheets</p> <p><input type="checkbox"/> input records</p> <p><input type="checkbox"/> harvest records</p> <p><input type="checkbox"/> other</p> <p><input type="checkbox"/> labour records</p> <p><input type="checkbox"/> storage records</p> <p><input type="checkbox"/> sales records</p> <p><input type="checkbox"/> shipping records</p>		
<p>Where Do You Market Your Products:</p>		
<p>Do you use the seal of the certification agency on organic product labels? <input type="checkbox"/> yes</p> <p><input type="checkbox"/> no <input type="checkbox"/> We hope to</p> <p><i>(Attach copies of all organic product labels.)</i></p>		

SECTION 11: Affirmation

	C / NC	ASSESSOR'S COMMENT
<p>I affirm that all statements made in this application are true and correct. No chemical products have been applied to any of my organically managed fields during the three-year period prior to projected harvest.</p> <p>I understand that the operation may be subject to unannounced inspection and/or sampling for residues at any time. I will provide right of access to all appropriate facilities including those dealing with non-organic products. I will provide documentation and/or additional information that is requested.</p> <p>I agree to follow NOA's organic standards and the ground rules, as set out in the Organic Management Programme.</p> <p>Signature of Operator _____</p>		
<p>I have attached the following additional documents:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Maps of all parcels/fields (showing adjoining land use and field identification) <input type="checkbox"/> Field history sheets (with letter of three-year history for fields owned or rented for less than three years) <input type="checkbox"/> Water test, if applicable <input type="checkbox"/> Soil, plant tissue and/or residue analyses, if applicable <input type="checkbox"/> Inspection Appointment Form with directions to inspection location <input type="checkbox"/> Description of soil fertility management programme <input type="checkbox"/> Description of weed management programme <input type="checkbox"/> Description of pest management programme <input type="checkbox"/> Description of disease management programme 		

Send the completed form and as many of the attachments as you can to: NOA, PO Box 1504, Okahandja, Namibia, or info@noa.org.na or fax to 062 502410.

Please contact us with any queries or complaints. They will be dealt with confidentially, and you will be informed or the result as soon as we have been able to consider them.