



Pacific Agricultural Certification Society

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 admin@pacscertifiedorganic.ca Website: www.pacscertifiedorganic.ca

Organic Plan: Apiculture

This form is to be used for initial and renewal applications for certification of **honey bees and organic apicultural products**. Your annual application submission must include this form and an initial or renewal FARM Plan. If bees are raised in conjunction with other organic crops or livestock, other Organic Plans must be requested from the PACS office. If organic bees are to be raised only to pollinate organic crops and not for producing organic apiculture products, then this is **not** the appropriate form – ask for a *Livestock Plan*. If the honey bees are not to be included your organic program at all, ask for a Split Operation Form.

Form instructions: This form can be completed on a computer, (save the form onto your hard drive before filling it in; to fill in, place cursor in grey boxes) or printed and completed with a black ink pen. Do *not* use pencil. If you run out of room, attach another file or sheet of paper. Keep a copy of this form for your records. Sections marked "VO" are for the verification officer only.

Enterprise Name:		Certification Number:	Date (dd/mm/yyyy)
Head office mailing address, including municipality		Location address(es), including municipality	
Provide directions to company location (<i>attach separate sheet if information cannot fit in this space</i>):			
Contact Person(s) - title(s) and name(s):			
Phone:	Fax:	Email address:	
Legal Status <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Company <input type="checkbox"/> Corporation <input type="checkbox"/> Cooperative <input type="checkbox"/> Other – specify:		For Office Use Only: Reviewed by: _____ Date reviewed: _____	

A. CERTIFICATION INFORMATION	
1.	Have you reviewed the National Standards and Permitted Substances List (CAN/CGSB-32.310 and 311) while filling in this Plan? <input type="checkbox"/> yes <input type="checkbox"/> no These documents can be found on the PACS website at www.pacscertifiedorganic.ca .
2.	Do you train your staff about the requirements of the Canadian Organic Standards? <input type="checkbox"/> not applicable – have no staff. <input type="checkbox"/> yes <input type="checkbox"/> no - explain how and when you plan to rectify this situation.
3.	Indicate which of the following you wish to have certified: <input type="checkbox"/> Bees <input type="checkbox"/> Pollen <input type="checkbox"/> Honey <input type="checkbox"/> Propolis <input type="checkbox"/> Royal Jelly <input type="checkbox"/> Beeswax <input type="checkbox"/> Bee venom <input type="checkbox"/> Other (specify): _____ Do you hold organic certification under COR for any of these products from this site through any CB other than PACS? <input type="checkbox"/> no – skip to next question . <input type="checkbox"/> yes – Which products? _____ Name of other CB: _____
4.	If any of the products to be certified are not produced by your enterprise provide the following information: <input type="checkbox"/> not applicable Name of enterprise producing the product: _____ Phone #: _____ Contact Name at that enterprise: _____ Product(s) involved: _____

Pacific Agricultural Certification Society

5.	<p>Certification Review from last year of certification <input type="checkbox"/> <i>Not previously certified – Skip to next Section.</i></p> <p>List any conditions that remain unresolved below. Attach an extra sheet if you need more room. <i>The VO will verify last year's PACS Certification Review Report with you and will update PACS regarding compliance.</i> <input type="checkbox"/> <i>none unresolved.</i></p> <table border="1" style="width: 100%; border-collapse: collapse; margin-bottom: 5px;"> <thead> <tr> <th style="width: 50%; text-align: center;">Unresolved non-compliances from last year</th> <th style="width: 50%; text-align: center;">Actions taken to address them</th> </tr> </thead> <tbody> <tr><td style="height: 20px;"> </td><td> </td></tr> <tr><td style="height: 20px;"> </td><td> </td></tr> <tr><td style="height: 20px;"> </td><td> </td></tr> <tr><td style="height: 20px;"> </td><td> </td></tr> <tr><td style="height: 20px;"> </td><td> </td></tr> </tbody> </table> <p>If more space is required, attach a separate page. <input type="checkbox"/> <i>an extra sheet is attached</i></p>	Unresolved non-compliances from last year	Actions taken to address them										
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B. OVERVIEW OF ORGANIC MANAGEMENT PLAN	
6.	<p>If you are a new applicant or if you have added any new areas to your land base, you must attach a Land Use History Sheet and a Field Identification Sheet for all areas where hives to be certified are located. The Land Use History Sheet must describe at least 3 previous years of use.</p> <p><input type="checkbox"/> Land Use History Sheet is attached <input type="checkbox"/> Field Identification Sheet is attached <input type="checkbox"/> <i>not applicable</i></p> <p>MAPS of all hive and forage areas must be attached and must include a 3 km radius around hive sites. The following minimum information must be included on each map:</p> <ul style="list-style-type: none"> * Hive site/identification * Cardinal directions (north, south, east, west) * Crops and/or land use * Production status (organic/non organic) * Municipalities * Golf courses * Sanitary landfills * Commercial traffic areas * Contaminated water features <p><input type="checkbox"/> Maps are included (indicate how many)</p>
7.	<p>Apiary locations must be separated from sources or zones of genetically engineered crops or environmental contamination by a minimum buffer zone of 3000 m (3 km or 1.875 miles). <i>CAN/CGSG-32.310 7.1.10. (NOTE: Fertilizers, with the exception of sewage sludge, are permitted within the buffer zone.)</i></p> <p>Do your hive locations meet these restrictions: <input type="checkbox"/> yes <input type="checkbox"/> no – explain:</p> <p>If no:</p> <p>Do you have Neighbour Affidavits giving evidence that prohibited substances are not used on neighbouring conventional crops? <input type="checkbox"/> yes <input type="checkbox"/> no – explain:</p> <p>Are natural features present around your hive locations that would restrict the likelihood of bee travel (such as forests, hills or waterways)? <input type="checkbox"/> no <input type="checkbox"/> yes – describe them:</p> <p>Is there abundant organic or native forage present around the hive locations that would reduce the distances that the bees would travel to forage? <input type="checkbox"/> no <input type="checkbox"/> yes – give details:</p>
8.	<p>Describe the sources of nectar, honeydew and pollen available to your bees:</p> <p><input type="checkbox"/> organically produced crops <input type="checkbox"/> undomesticated non-agricultural vegetation (i.e. wild, natural flora)</p> <p><input type="checkbox"/> Other (specify):</p> <p>If organically produced crops, are these crops under your ownership/management or a neighbour's?</p> <p>If native vegetation, how do you ensure the indigenous insect population is not displaced by your bees?</p>
9.	<p>When did you first implement organic management practices in your organic hive sites?</p>
10.	<p>Do you have non-organic hives as well as organic hives? <input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>If yes, what distance separates the organic and non-organic sites?</p> <p>Indicate how the non-organic hives are identified and visually distinct from the organic hives.</p> <p>Are apiculture products harvested from the non-organic hives? <input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>If yes, explain the procedures you use to ensure the organic integrity of the organic products. Mention your processing timing, cleaning protocols, distinguishing characteristics of the labelling, storage provisions etc.</p>

Pacific Agricultural Certification Society

11.	<p>If this is your initial application: <input type="checkbox"/> not applicable – skip to next question.</p> <p>Where did your bee colonies originate? <input type="checkbox"/> on-farm <input type="checkbox"/> purchased</p> <p>If on-farm, are bee families cross-bred? <input type="checkbox"/> yes <input type="checkbox"/> no – explain:</p> <p>If purchased, were they organic? <input type="checkbox"/> yes <input type="checkbox"/> no – explain why organic bees were not purchased:</p> <p>List the purchase date for each conventional colony purchased: (NOTE: CAN/CGSG-32.310 7.1.8.1 requires that colonies be under continuous organic management for at least 12 months before products may be considered organic.)</p>																				
12.	<p>Transition <input type="checkbox"/> not applicable – Skip to next question</p> <p>Hives which were treated by substances prohibited by CGSB-32.310 clause 1.4 or by products not listed on the Permitted Substance List CGSB-32.311 must undergo 12 months of continuous organic management, during which period, all non-organic wax must be replaced by organically produced wax. This requirement can be waived if proof can be presented that no prohibited substances were applied to the hives. However, all products (such as wax) that are produced <i>before</i> the colonies are under continuous organic management shall be considered non-organic.</p> <p>Do you have proof that substances prohibited by CGSB-32.310 clause 1.4 and products not listed in CGSB-32.311 were not applied to your hives? (This must be substantiated by the Verification Officer during an inspection.) <input type="checkbox"/> yes <input type="checkbox"/> no</p>																				
13.	<p>If this is a renewal application: <input type="checkbox"/> not applicable – skip to next question.</p> <p>Replacement <u>bees</u> for established colonies shall be organic, if commercially available. Have you introduced replacement bees? <input type="checkbox"/> no <input type="checkbox"/> yes</p> <p>If yes, were they organic? <input type="checkbox"/> yes <input type="checkbox"/> no – why?</p> <p>Replacement <u>colonies</u> shall be produced within the operation or come from another established organic apiary. Have you introduced replacement colonies? <input type="checkbox"/> no <input type="checkbox"/> yes – give date of addition:</p> <p>If yes, were they organic? <input type="checkbox"/> yes <input type="checkbox"/> no – why?</p>																				
14.	<p>Provide details of your organic sites, hives and product yields in the table below:</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-bottom: 5px;"> <thead> <tr> <th style="width: 25%;">ID of the Hive Sites</th> <th style="width: 25%;"># of Hives in Site</th> <th style="width: 25%;">Individual Hive ID's</th> <th style="width: 25%;">Products Harvested From the Site</th> <th style="width: 20%;">Projected Yields</th> </tr> </thead> <tbody> <tr> <td style="height: 60px;"></td> <td></td> <td></td> <td> <input type="checkbox"/> Pollen <input type="checkbox"/> Honey <input type="checkbox"/> Propolis <input type="checkbox"/> Royal Jelly <input type="checkbox"/> Beeswax <input type="checkbox"/> Bee venom </td> <td></td> </tr> <tr> <td style="height: 60px;"></td> <td></td> <td></td> <td> <input type="checkbox"/> Pollen <input type="checkbox"/> Honey <input type="checkbox"/> Propolis <input type="checkbox"/> Royal Jelly <input type="checkbox"/> Beeswax <input type="checkbox"/> Bee venom </td> <td></td> </tr> <tr> <td style="height: 60px;"></td> <td></td> <td></td> <td> <input type="checkbox"/> Pollen <input type="checkbox"/> Honey <input type="checkbox"/> Propolis <input type="checkbox"/> Royal Jelly <input type="checkbox"/> Beeswax <input type="checkbox"/> Bee venom </td> <td></td> </tr> </tbody> </table> <p>If more space is required, attach a separate page. If you have non-organic sites as well, create a duplicate chart on a separate page, clearly marked NON-ORGANIC HIVES. <input type="checkbox"/> Non-Organic Hive page attached.</p>	ID of the Hive Sites	# of Hives in Site	Individual Hive ID's	Products Harvested From the Site	Projected Yields				<input type="checkbox"/> Pollen <input type="checkbox"/> Honey <input type="checkbox"/> Propolis <input type="checkbox"/> Royal Jelly <input type="checkbox"/> Beeswax <input type="checkbox"/> Bee venom					<input type="checkbox"/> Pollen <input type="checkbox"/> Honey <input type="checkbox"/> Propolis <input type="checkbox"/> Royal Jelly <input type="checkbox"/> Beeswax <input type="checkbox"/> Bee venom					<input type="checkbox"/> Pollen <input type="checkbox"/> Honey <input type="checkbox"/> Propolis <input type="checkbox"/> Royal Jelly <input type="checkbox"/> Beeswax <input type="checkbox"/> Bee venom	
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15.	<p>CAN/CGSG-32.310 7.1.3 requires that all apiary management activities be documented, including removal of supers and extraction of honey. List the records that you will have available for the VO to review:</p>																				
16.	<p>CAN/CGSG-32.310 7.1.6 requires consideration of factors appropriate to maintaining bee health.</p> <p>Do your bee stocks exhibit acceptable disease-resistance traits? <input type="checkbox"/> yes <input type="checkbox"/> no – Describe health concerns</p> <p>Is the forage area sufficient to provide ample nectar for the number of colonies present and for indigenous species? <input type="checkbox"/> yes <input type="checkbox"/> no – What have you done about it?</p> <p>Have you modified your apiary management practices to address any problems encountered in the last 12 months? <input type="checkbox"/> no <input type="checkbox"/> yes – Describe problem encountered and new practices implemented:</p>																				

Pacific Agricultural Certification Society

E. HEALTH CARE, DISEASE AND PEST MANAGEMENT													
32.	Describe your training and experience with bee keeping.												
33.	How do you promote strong, healthy colonies? <input type="checkbox"/> merging weaker, albeit healthy colonies <input type="checkbox"/> renewing queens <input type="checkbox"/> maintaining adequate hive density <input type="checkbox"/> inspecting colonies systematically <input type="checkbox"/> relocating diseased colonies to isolated areas <input type="checkbox"/> other – explain:												
34.	How do you select and breed queens for disease and parasite resistance?												
35.	Describe your preventative health care practices with regard to: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 40%; padding: 2px;">Bee stocks:</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Colony location:</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Availability of food, forage and water:</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Renewal of beeswax:</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Disinfection and cleaning of equipment:</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Destruction of contaminated hives and materials:</td> <td style="padding: 2px;"></td> </tr> </table> <p style="margin-top: 5px;">If more space is required, attach a separate page. <input type="checkbox"/>an extra sheet is attached</p>	Bee stocks:		Colony location:		Availability of food, forage and water:		Renewal of beeswax:		Disinfection and cleaning of equipment:		Destruction of contaminated hives and materials:	
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36.	Describe your management plan if confronted with pests, parasites or disease.												
37.	What is your source of comb foundation?												
38.	Botanical remedies are preferred over non-synthetic or synthetic substances to control pests, parasites and diseases, provided that they are listed in Table 5.3 of CAN/CGSB-32.311. Have you had occasion to use any remedial treatments in the last 12 months? <input type="checkbox"/> yes <input type="checkbox"/> no – Skip to next question. If yes , what substances did you use and what ailment were you treating? Were honey supers on the hive at the time? <input type="checkbox"/> yes <input type="checkbox"/> no What was the date of the nectar flow following the use of this substance?												
39.	If synthetic allopathic drugs (e.g. antibiotics) are used, the veterinary treatments must be clearly documented. <u>Before treatment, the hive must be removed from the foraging area and taken out of organic production to prevent the spread of antibiotics within the apiary.</u> The treated hive(s) must be placed in isolation and undergo a one-year transition period and all wax must be replaced with organic wax. Have you required the use of allopathic drugs in the last 12 months? <input type="checkbox"/> yes <input type="checkbox"/> no – Skip to next question. If yes , do you have the required documentation available for the Verification Officer? <input type="checkbox"/> yes <input type="checkbox"/> no – explain:												
40.	Have you had a need to destroy the male brood in the last 12 months? <input type="checkbox"/> yes <input type="checkbox"/> no – Skip to the next section. If yes , give the reason:												

F. EXTRACTION, PROCESSING AND STORAGE	
41.	Do you extract honey from brood comb with live brood? <input type="checkbox"/> yes <input type="checkbox"/> no
42.	Is the extraction facility inspected by food inspectors or other regulatory agencies? <input type="checkbox"/> yes <input type="checkbox"/> no If yes , provide the name, address, and phone number of the agency: What was the date of the last inspection?
43.	If the extraction facility is used for both organic and non-organic products, describe how organic integrity is protected for the organic products, including how extraction equipment and any settling/storage tanks are cleaned:
44.	Describe the extraction process in your facility, including how honey is moved between extraction equipment and any settling/storage tanks:
45.	To what temperature do you heat the honey for extraction? To what temperature do you heat honey for decrystallization? (NOTE: Organic honey heated above the temperatures specified in CAN/CGSB-32.310 7.1.16.4 may be used as an ingredient in a multi-ingredient product, but it may not be sold for direct consumption with an organic claim.)

Pacific Agricultural Certification Society

46.	What methods do you use to remove debris from extracted honey?			
47.	Indicate the type(s) of honey packaging used: <input type="checkbox"/> metal barrels <input type="checkbox"/> glass <input type="checkbox"/> plastic Are the containers food-grade? <input type="checkbox"/> yes <input type="checkbox"/> no – explain: Are the containers air-tight? <input type="checkbox"/> yes <input type="checkbox"/> no – explain: Describe the packaging (sizes etc) and labelling: Attach sample labels for your apiculture products. <input type="checkbox"/> sample labels are attached <input type="checkbox"/> labels are not attached – explain:			
48.	Surfaces in direct contact with honey must be constructed of food-grade materials or coated with beeswax. What are your honey-preparation areas constructed of? Are they coated with beeswax? <input type="checkbox"/> yes <input type="checkbox"/> no			
49.	Check all pest problems you generally experience in the extraction/storage facilities: <input type="checkbox"/> flying insects <input type="checkbox"/> crawling insects <input type="checkbox"/> rats <input type="checkbox"/> mice <input type="checkbox"/> spiders <input type="checkbox"/> birds <input type="checkbox"/> other (specify): Describe the structural pest management plan for these facilities:			
50.	Is the extraction facility sealed from bees and other insects? <input type="checkbox"/> yes <input type="checkbox"/> no If yes , explain how: If no , in what areas can bees and insects enter the facility?			
51.	Are bee repellents used around the facility? <input type="checkbox"/> yes <input type="checkbox"/> no If yes , what repellents are used:			
52.	If bees gather in the extraction area, how are they removed?			
53.	Do you keep records of your pest monitoring/management activities? <input type="checkbox"/> yes <input type="checkbox"/> no – explain:			
54.	List all pest management materials used. Include bait stations outside of facility.			
	Brand or Trade Name	Active Ingredients	Locations where used	Frequency
	If additional space is required, attach an extra sheet. <input type="checkbox"/> an extra sheet is attached			
55.	Complete the following table for all cleaning products used in the hives and in the processing area(s):			
	Brand Name	Active Ingredients	Documentation Attached	Where Used
			<input type="checkbox"/> Prod Label / spec sheet <input type="checkbox"/> MSDS <input type="checkbox"/> Ingredients list <input type="checkbox"/> PACS Sanitation Dec	
			<input type="checkbox"/> Prod Label / spec sheet <input type="checkbox"/> MSDS <input type="checkbox"/> Ingredients list <input type="checkbox"/> PACS Sanitation Dec	
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G. TRANSPORTATION and RECORDKEEPING

56.	Who is responsible for arranging transportation of your apiculture products? Describe how organic products are transported, including any packaging used for transport other than already described. What potential contamination or commingling problems do you have with the transport of organic products? <input type="checkbox"/> none
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Pacific Agricultural Certification Society

57.	<p>How is organic integrity (prevention of commingling, contamination) kept during transport? Select as many as are appropriate.</p> <p><input type="checkbox"/> All transport vehicles are dedicated to organic (skip to next section).</p> <p><input type="checkbox"/> Transport company notified of organic handling requirements.</p> <p><input type="checkbox"/> Agreement with transport company to handle organic goods according to requirements.</p> <p><input type="checkbox"/> Clean truck affidavits come with incoming products.</p> <p><input type="checkbox"/> Clean truck affidavits are sent with outgoing products.</p> <p><input type="checkbox"/> Transports inspected when products/ingredients received and rejected if not clean.</p> <p><input type="checkbox"/> Transports inspected before being loaded and rejected if not clean.</p> <p><input type="checkbox"/> All shipping containers (i.e. cases, pallets, shipping containers etc.) are clearly identified as organic.</p> <p><input type="checkbox"/> Tamper-proof shipping methods.</p> <p><input type="checkbox"/> Products are in impermeable packaging.</p> <p><input type="checkbox"/> Organic products segregated during transport.</p> <p><input type="checkbox"/> Transport Standard Operating Procedures (SOP) attached.</p> <p><input type="checkbox"/> More information and/or other methods used:</p>														
58.	<p>When an enterprise operates under COR organic certification, the operator must maintain records and relevant supporting documents concerning the inputs, production, preparation and handling of crops, livestock and organic products that are or are intended to be sold, labelled or otherwise represented as organic in accordance with the CAN/CGSB-32.310.</p> <p>Which of the following records do you keep for organic production? Check all that apply.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Hive location maps</td> <td><input type="checkbox"/> Hive management/maintenance records</td> </tr> <tr> <td><input type="checkbox"/> Input records for materials used in or on the hives</td> <td><input type="checkbox"/> Monitoring records/analyses (water tests, quality tests)</td> </tr> <tr> <td><input type="checkbox"/> Equipment cleaning records</td> <td><input type="checkbox"/> Harvest records showing hive IDs, harvest dates/amounts</td> </tr> <tr> <td><input type="checkbox"/> Extraction process records</td> <td><input type="checkbox"/> Storage records showing location ID, lot #'s, amounts</td> </tr> <tr> <td><input type="checkbox"/> Cleaning, sanitation, clean-down logs</td> <td><input type="checkbox"/> Product sales</td> </tr> <tr> <td><input type="checkbox"/> Shipping records</td> <td><input type="checkbox"/> Transaction certificates</td> </tr> <tr> <td><input type="checkbox"/> Audit control summary</td> <td><input type="checkbox"/> Other (specify):</td> </tr> </table>	<input type="checkbox"/> Hive location maps	<input type="checkbox"/> Hive management/maintenance records	<input type="checkbox"/> Input records for materials used in or on the hives	<input type="checkbox"/> Monitoring records/analyses (water tests, quality tests)	<input type="checkbox"/> Equipment cleaning records	<input type="checkbox"/> Harvest records showing hive IDs, harvest dates/amounts	<input type="checkbox"/> Extraction process records	<input type="checkbox"/> Storage records showing location ID, lot #'s, amounts	<input type="checkbox"/> Cleaning, sanitation, clean-down logs	<input type="checkbox"/> Product sales	<input type="checkbox"/> Shipping records	<input type="checkbox"/> Transaction certificates	<input type="checkbox"/> Audit control summary	<input type="checkbox"/> Other (specify):
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H. NOTES	
59.	<p>You will be required to submit an application that updates this plan each year. Keep a copy of this Organic Plan as a reference for future updates. This application is part of your records and must be kept with those records.</p> <p><input type="checkbox"/> A copy of this completed plan is kept in company records.</p>
60.	<p>Use this area to add information that may provide assistance to the Certification Committee who will review this Organic Plan.</p>

I. ATTACHMENTS that I am including with this document:	
<input type="checkbox"/> Hive location maps	<input type="checkbox"/> Harvest records
<input type="checkbox"/> Hive management records	<input type="checkbox"/> Shipping records
<input type="checkbox"/> Input records:	<input type="checkbox"/> MSDS sheets (cleaning / pest control materials)
<input type="checkbox"/> Paid labor records	<input type="checkbox"/> Product Specification Sheets
<input type="checkbox"/> Storage Records	<input type="checkbox"/> PACS Sanitation Declaration
<input type="checkbox"/> Product Labels	<input type="checkbox"/> Other (specify):

Pacific Agricultural Certification Society

J. ORGANIC OPERATOR AFFIRMATION

I affirm that all statements made in this application are true and correct.

I understand that:

- The applicable transition period of my enterprise does not commence until all documents constituting a complete application have been duly submitted to the PACS office for review, upon which time my enterprise and all its functions are operating under certification body supervision.
- Acceptance of this document in no way implies granting of certification by the Certification Body (CB).
- My operation may be subject to unannounced inspection and/or sampling for residues at any time as deemed appropriate to ensure compliance with the Canadian Organic Standards and Permitted Substances Lists.
- Any wilful misrepresentation will result in de-certification.
- Production methods may not alternate between organic and non-organic methods.
- This completed document is confidential information according to the policies of the BC Certified Organic Program. Membership and certification status, however, is public information.

I agree:

- That I have read, understood, and agree to comply with the CB Constitution, Bylaws and Production Standards.
- To provide any further information as required by the CB.
- To allow the Verification Officer and/or members of the Certification Committee and the COABC Accreditation Board auditors access to all areas of my enterprise and to my records, including but not limited to: inputs, production, processing, handling, sales and products purchased for resale, from both organic and non-organic production.

I am applying as a [choose only one of the following]:

- COR applicant*** - ISO-compliant certification for interprovincial/international trade.
- BCCOP applicant*** - certification of my products for sales only within my own province/territory (BC Certified Organic Program).
- BCCOP applicant*** certification of my products to the BCCOP Low Risk Program. I understand that the eligibility requirements for participation in the Low Risk Program include the following criteria:
- a) Enterprise must not be exporting organic product out of BC
 - b) Enterprise must not practice parallel production
 - c) Enterprise must not have outstanding conditions
 - d) Enterprise must have received a valid organic certificate in all of the previous three years
 - e) The enterprise must be assessed for risk, and receive a low-risk ranking from the certification committee

Signed: _____ Print Name: _____ Date: _____