



Pacific Agricultural Certification Society

3402 32nd Ave. Vernon, BC V1T 2N1 phone 250-558-7927 fax 250-558-7947
admin@pacscertifiedorganic.ca Website: www.pacscertifiedorganic.ca

Preparation: *Renewal Plan*

Operators involved in food processing, preparation and/or packaging should use this form in years following submission of an INITIAL Organic Plan (formerly "FPP Renewal"). **NOTE:** A full list of the products that are to be maintained within your organic certification program is **mandatory** when completing this renewal plan annually. (Use the exact name of each product as identified on the organic product label.)

Please review the 2015 version of the Canadian Organic Standards and Permitted Substances List (CAN/CGSB-32.310 and 32.311) while completing this Renewal Plan. **NOTE:** These documents are on the PACS website: www.pacscertifiedorganic.ca.

Please refer to your most recent PACS Certification Review Report when completing this 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 can be printed and completed with a black ink pen. Do not use Google docs. **If you run out of room, attach another file or sheet of paper.** Keep a copy of this form for your records.

| | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------------------------------------|
| Enterprise Name | PACS Client #: 16- | Date (dd/mm/yyyy): | Office only: Date: Reviewed by: |
| Primary Contact Information Name: Position: Tel: Email: Webpage: | Additional Contact(s) (if applicable) Name: Position: Email/ phone (if different): <input type="checkbox"/> Copy on all correspondence? Name: Position: Email/ phone (if different): <input type="checkbox"/> Copy on all correspondence? | | |
| Mailing address, including municipality: | Inspection Site Location(s): <input type="checkbox"/> Same as mailing address <input type="checkbox"/> Different (please specify): <input type="checkbox"/> Multiple Locations (<i>list inspection sites below</i>) | | |
| Multiple Inspection Site Addresses (if applicable): | | | |
| Provide directions to farm location (<i>if not found using address. Attach separate sheet if information cannot fit in this space</i>): | | | |
| Is the operation: <input type="checkbox"/> Currently for sale <input type="checkbox"/> To be put up for sale this year <input type="checkbox"/> Under the management of someone else PACS must be notified of changes to business ownership or organic management. Organic certification does not carry over to a new owner without notifying and making an application to the PACS office. | | | |
| Additional Plans Completed: <input type="checkbox"/> None <input type="checkbox"/> Crop <input type="checkbox"/> Livestock (<input type="checkbox"/> Dairy <input type="checkbox"/> Meat ruminant <input type="checkbox"/> Poultry <input type="checkbox"/> Rabbit <input type="checkbox"/> Swine); <input type="checkbox"/> Greenhouse/Microgreens | | | |
| Income Category: (See http://www.pacscertifiedorganic.ca/pacs_certified_organic_to_register_renewals.html for income category breakdown. Note: This field is required and will be verified by the VO during your next inspection. See the PACS website for more details and information.) | | | |
| My products will be sold, or used as <u>ingredients</u>* in a product that will be sold, in the following jurisdictions: <input type="checkbox"/> My own regional area only (will not cross any provincial/territorial border – includes Low Risk enterprises) <input type="checkbox"/> Canada <input type="checkbox"/> USA <input type="checkbox"/> EU <input type="checkbox"/> International destinations: *Ingredients such as grapes used to make wine that is sold out of province, or grain sold to a distributor with final sales outside of the province/territory. | | | |
| Please note the primary contact name, email, phone, & physical address provided above will be posted to our website and COABC's website unless otherwise specified. You give consent to PACS to send forms, certification documents, periodic newsletters and other notifications electronically (via email): <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Do not have email | | | |
| Please complete and return to the PACS office with a cheque, email transfer or money order as per your Renewal Fees invoice provided. | | | |

A. CERTIFICATION INFORMATION

1. Do you have organic certification with any other **certification bodies**? no yes Details:
List current certification by other **agencies**: (i.e. Biodynamic, Canada GAP, Food Safe): not applicable

2. Is your staff training about the requirements of the Canadian Organic Standards current and up-to-date? yes no Provide details

3. Do you sell goods not produced by your enterprise? no yes **details**:
Do you prepare, pack or label goods for another enterprise? no yes
own brand third party brand – **details**:

B. OVERVIEW OF OPERATIONS

4. **Identify organic food preparation activities that you wish to certify. Check all that apply:**

Prepare single ingredient products Process/prepare multi-ingredient products under own brand(s) Grocery and/or Produce Distributor

Packer (includes washing) of **raw** agricultural products Process/prepare multi-ingredient products for other enterprises Warehouse/Storage Facility

Re-package and label products that are already certified organic (with no added ingredients) Preparation of Natural Health Products Broker/Trader
 Single ingredient *Multiple ingredients*

Prepare and package organic products belonging to other operators (includes freezing, heating, cutting, but not blending) Preparation of livestock feeds

5. Do you operate a packing house (pack or intend to pack certified organic products, but do not blend ingredients together and add no ingredients or processing aids)? no yes

6. **Provide a complete list of all organic products. Attach a product listing, catalogue or online catalogue link**
 Product listing or catalogue attached Website/link to product listing/catalogue:
Within the next 12 months, are you planning to make any changes to the process, activities or products which will require a modification of your renewed organic certificate? no yes
If yes, explain the changes:

7. **Use the below chart to provide updated information on **single ingredient/packing/repacking** products (blending not included)**

| Product Name | Brand | PACS Certification Information | | | Ingredient/supplier organic certificate on file |
|--------------|-------|--------------------------------|--------------------------|-------------------------------|-------------------------------------------------|
| | | Add product | Remove product | Ingredient/supplier change(s) | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> yes |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> yes |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> yes |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> yes |

Attach an additional page if more space is required. An extra sheet is attached.

8. **Use the below chart to provide updated information on **multi-ingredient** products**

| Product | Brand | PACS Certification Information | | | OPP attached? | Organic certificates attached | % Organic | Non-Organic Ingredients used? |
|---------|-------|--------------------------------|--------------------------|-------------------------------|--------------------------------------------------------------|--------------------------------------------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| | | Add product | Remove product | Ingredient/supplier change(s) | | | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> yes <input type="checkbox"/> no* | <input type="checkbox"/> yes <input type="checkbox"/> no* | <input type="checkbox"/> >95% <input type="checkbox"/> 70-95% <input type="checkbox"/> <70% | <input type="checkbox"/> no <input type="checkbox"/> yes – continue below |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> yes <input type="checkbox"/> no* | <input type="checkbox"/> yes <input type="checkbox"/> no* | <input type="checkbox"/> >95% <input type="checkbox"/> 70-95% <input type="checkbox"/> <70% | <input type="checkbox"/> no <input type="checkbox"/> yes – continue below |

| | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------------------------------------------|--------------------------------------------------------------|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> yes <input type="checkbox"/> no* | <input type="checkbox"/> yes <input type="checkbox"/> no* | <input type="checkbox"/> >95% <input type="checkbox"/> 70-95% <input type="checkbox"/> <70% | <input type="checkbox"/> no <input type="checkbox"/> yes – continue below |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> yes <input type="checkbox"/> no* | <input type="checkbox"/> yes <input type="checkbox"/> no* | <input type="checkbox"/> >95% <input type="checkbox"/> 70-95% <input type="checkbox"/> <70% | <input type="checkbox"/> no <input type="checkbox"/> yes – continue below |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> yes <input type="checkbox"/> no* | <input type="checkbox"/> yes <input type="checkbox"/> no* | <input type="checkbox"/> >95% <input type="checkbox"/> 70-95% <input type="checkbox"/> <70% | <input type="checkbox"/> no <input type="checkbox"/> yes – continue below |

If non-organic ingredients are used:

List **non-organic** ingredients, food additives and processing aids used in each of your organic products along with your rationale for using the non-organic components and the progress you have made in the last 12 months sourcing organic replacements for each.

| Non-organic ingredient | Purpose/function | Products used in | Describe your search for organic suppliers (dates, search methods, suppliers) | What criteria makes this product unavailable organically? (check all that apply) | NOI declaration submitted? |
|------------------------|------------------|------------------|-------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|------------------------------|
| | | | | <input type="checkbox"/> Form <input type="checkbox"/> Quality <input type="checkbox"/> Quantity <input type="checkbox"/> Other | <input type="checkbox"/> yes |
| | | | | <input type="checkbox"/> Form <input type="checkbox"/> Quality <input type="checkbox"/> Quantity <input type="checkbox"/> Other | <input type="checkbox"/> yes |
| | | | | <input type="checkbox"/> Form <input type="checkbox"/> Quality <input type="checkbox"/> Quantity <input type="checkbox"/> Other | <input type="checkbox"/> yes |
| | | | | <input type="checkbox"/> Form <input type="checkbox"/> Quality <input type="checkbox"/> Quantity <input type="checkbox"/> Other | <input type="checkbox"/> yes |
| | | | | <input type="checkbox"/> Form <input type="checkbox"/> Quality <input type="checkbox"/> Quantity <input type="checkbox"/> Other | <input type="checkbox"/> yes |
| | | | | <input type="checkbox"/> Form <input type="checkbox"/> Quality <input type="checkbox"/> Quantity <input type="checkbox"/> Other | <input type="checkbox"/> yes |

C. PRODUCT COMPOSITION and PREPARATION - CAN/CGSB-32.310 clauses 1.4 and 9 & PSL Section 6

| | | |
|----|---------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 9. | In the last 12 months have there been any changes to the following? | |
| | Item | Answer |
| | Processes used in the production of your organic products | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a |
| | | If yes, explanation <i>If yes</i> , identify new process(es) used in the production of your products: <input type="checkbox"/> Physical (e.g. wash, cut, slice, grind, dry, press) – <i>list</i> : <input type="checkbox"/> Mechanical (e.g. grind, mix, bake or roast, melt, deep fry, pasteurize, boil) – <i>list</i> : <input type="checkbox"/> Biological (e.g. ferment, smoke) – <i>list</i> : <input type="checkbox"/> Other – <i>describe</i> : |
| | Facility | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a |
| | Product flow through facility | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a |
| | Distribution & sales | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a |
| | Co-processor/private labelling | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a |
| | Organic ingredients and ingredient suppliers | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a |
| | Multi-ingredient products only: | |
| | Product recipes/formulation | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a |
| | | <input type="checkbox"/> updated OPP attached <input type="checkbox"/> Organic certificates for new ingredients attached |

D. MAINTAINING ORGANIC INTEGRITY

10. Is culinary steam used in the processing of organic products? yes no steam is used
 Does culinary steam have direct contact with organic products? no yes - **all inputs that contact food or food contact surfaces must be declared in the inputs table at #15.**

11. Have there been any changes at your facility or within your operations involving any of the following?

| Item | Answer | If yes, explain |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|-----------------|
| Food contact surfaces (counters, containers and conveyors) used for preparation, carrying or storage of organic products or ingredients | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a | |
| Temporary containers used for carrying or storing organic products or ingredients | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a | |
| Packaging materials | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a | |
| Lubricants contacting food | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a | |
| Water supply or treatment(s) | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a | |
| Facility management and methods of preventing contamination from Prohibited substances HAACP | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a | |
| Are there currently any goods (non-organic or organic) or containers in your facility treated with any substance (i.e. DPA (diphenylamine), quaternary ammonium, fumigants) not listed in the <i>Permitted Substances Lists (CAN/CGSB-32.311-2015)</i> ? | <input type="checkbox"/> yes <input type="checkbox"/> no | |
| Standard operating procedures | <input type="checkbox"/> yes <input type="checkbox"/> no | |

Attach an additional page if more space is required. **An extra sheet is attached.**

PRODUCTION AND STORAGE

12. Have there been any changes at your facility or within your operations involving any of the following?

| Item | Answer | Explanation/Details |
|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|---------------------|
| Organic/non-organic production run schedules or practices (including sanitation runs; purges, etc.) | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a | |
| Storage areas within your facility | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a | |
| Off-site and/or third party storage facilities (note: all facilities may require annual inspection) | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a | |

Attach an additional page if more space is required. **An extra sheet is attached.**

13. If you use off-site storage, do you own the facility? yes no n/a
If no, have you already submitted a completed **Independent Storage Statement** to the PACS office for each storage facility that is **not certified organic**? yes no – **identify which are missing:**

PEST MANAGEMENT and SANITATION

14. Have there been any changes to pest management relative to the following:

| Item | Answer | Explanation/Details |
|-----------------------------------------------------|---------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Pest control service provider | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a | |
| Pest prevention strategies | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a | |
| Mechanical controls | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a | |
| Baits, lures, repellants (and all other substances) | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a | If you are using baits, lures or repellents not listed within the Permitted Substances Lists, either inside or outside the facilities, documentary evidence of pest activity must be submitted substantiating the need for these prohibited substances. |

| | | |
|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | <input type="checkbox"/> Baits, lures or repellents used are listed on the PSL <input type="checkbox"/> Pest activity logs are attached Comments: |
| Pest control map | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a | If yes – attach a copy with your renewal |
| Are there any other changes not listed above that have or will be implemented? | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a | |

15. **Changes to Cleaning & Sanitation**
Describe any changes that have been made to your sanitation protocols within the past 12 months

List any new cleaning products added in the past 12 months (*for all food contact surfaces including temporary containers, counters and conveyor belts*). **Products are the same as previous PACS Certification Review Report**

| What food contact surfaces are cleaned (including hands and gloves)? If on equipment, identify equipment. | Product Name, Brand/Manufacturer | Documentation attached | Documented Removal |
|--------------------------------------------------------------------------------------------------------------|----------------------------------|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| | | <input type="checkbox"/> Product Label or Spec sheet <input type="checkbox"/> MSDS <input type="checkbox"/> Ingredients list | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a |
| | | <input type="checkbox"/> Product Label or Spec sheet <input type="checkbox"/> MSDS <input type="checkbox"/> Ingredients list | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a |
| | | <input type="checkbox"/> Product Label or Spec sheet <input type="checkbox"/> MSDS <input type="checkbox"/> Ingredients list | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a |
| | | <input type="checkbox"/> Product Label or Spec sheet <input type="checkbox"/> MSDS <input type="checkbox"/> Ingredients list | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a |

Gloves are used yes no
Attach an additional page if more space is required. **An extra sheet is attached.**

TRANSPORTATION

16. How is organic integrity (prevention of commingling, contamination) kept during transport? Check all that apply.

- All transport vehicles are dedicated to organic.
- Transport company complies with organic requirements
- Truck clean out documentation for BULK shipments.
- Transports inspected when products/ingredients received and rejected if not clean.
- All shipping containers (i.e. cases, pallets, shipping containers etc.) are clearly identified as organic.
- Tamper-proof shipping methods.
- Products are in impermeable packaging.
- Organic products segregated during transport.
- Transport Standard Operating Procedures (SOP) attached.
- More information and/or other methods used:

17. Describe any changes that have been made to your transportation arrangements within the past 12 months, or any changes that are planned for the near future. **Not applicable**

E. MARKETING & LABELLING

18. Has there been any change to your brand name? yes no
If yes, provide revised name(s) on marketing label(s), or brand(s):

19. To whom do you currently sell your products? (Check all that apply): **n/a – this enterprise co-processes only**

To end consumers To wholesalers To processors Sold through a distributor/broker

To retailers To restaurants/cafés Other (specify):

Through what channels are your products currently sold? (check all that apply):

Wholesaler Processor Farmers' Market
 CSA Broker Restaurants
 Farm gate/in-house Box delivery scheme Direct to a retailer
 Packing house Other (*specify*):

20. If you sell directly to a retailer, respond to the following: *not applicable*

My products are in final packaging when they arrive at the retailer's facility yes no Details:

My products are in temporary/intermediary packaging when they arrive at the retailer's facility. yes no Details:

Organic labelling cannot be applied to a product repacked by a retailer/third party who does not hold organic certification. Organic labelling is not applied by the retailer: true false – explain

21. **Private Labelling:** Does your company package organic products and/or apply organic labels bearing any brand other than your own (or are there plans to)? yes no

Are you adding or subtracting products produced for other companies – Private Label Agreement required.
 yes no

If yes, complete the table below for those products:

| Product name (as it appears on the label) | Company for which you do the work | Is contracting company certified organic? | Certification Agency listed on label |
|-------------------------------------------|-----------------------------------|----------------------------------------------------------|--------------------------------------|
| | | <input type="checkbox"/> yes <input type="checkbox"/> no | |
| | | <input type="checkbox"/> yes <input type="checkbox"/> no | |
| | | <input type="checkbox"/> yes <input type="checkbox"/> no | |
| | | <input type="checkbox"/> yes <input type="checkbox"/> no | |

Attach an additional page if more space is required. *An extra sheet is attached.*

22. Have there been any changes to your labels in the past 12 months? no yes – **New Labels attached**

F. RECORDKEEPING

23. Has anything changed with respect to your recordkeeping systems?
 no yes *Details:*

24. Do you retain **all** records (inputs, production, preparation, sales and handling) for the minimum 5 years required under **CAN/CGSB-32-310** clause 4.4.5? yes no – *explain:*

Documents I maintain at my operation:

Complaint log
 Invoices, purchase records, and sales receipts
 Lot numbering/coding tracking records
 Pest Control records
 Production and inventory records
 Storage Records
 Transportation log

I understand that I must have the above indicated documents available for my inspection where applicable

Attachments I am including with this renewal application:

Facility diagram(s)
 Flow chart (from ingredient to final sale)
 Independent Storage Statement
 MSDS sheets (cleaning/pest control materials, boiler additives)

- New product labels
- Non-Organic Ingredient (NOI) Declaration
- Organic certificates for new ingredients
- Organic Product Profile sheets (OPPs)
- Packer Sheet
- Pest management map
- Private label/copacker agreement(s)
- Product list/Catalogue
- Product Specification Sheets
- Third Party Service Provider Agreement
- Other (*specify*):

G. ADDITIONAL INFORMATION

If there is any information you wish to share or that may provide assistance to the Certification Committee's review of your renewal application, please add the information here:

Remember to let the PACS office know whenever you make changes to your organic products. This includes changes in facility, management, recipes, ingredients, suppliers, labels and storage facilities. You may not market a product as organic until it has been evaluated by PACS and listed on your organic certificate. You must submit your OPP for approval to the PACS office prior to the first organic production run.

You are required to update your organic plan each year. Keep a copy of this Renewal Plan as a reference for updating in the future. This application is part of your organic records and must be kept with your other farm records.

H. 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:

- 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 on its certification
 - 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

See website for details: <http://www.pacscertifiedorganic.ca/docs/PACS%20Risk%20Assessment%20Program%20Policy%20and%20Checklist%20v10b%204Dec14.pdf>

Signed: _____

Print Name: _____

Date: _____