



Real Organic Project Certification

Farm Information

Filling out this application will take about 15 minutes. No additional documents or receipts are needed to complete this application.

Fields with a red asterisk next to them are required fields. They must be answered for you to complete the application. If one of these fields does not apply to you simply answer NA or 0.

If at any point your are confused about a question or how to answer it, simply skip the question (or answer NA or 0 if it is a required question) and finish the application. We will follow up with you to enter the missing information.

If you get to the end of a page and click submit, but you are not moved to the next page it is because you have not answered a required question. Scroll up to see which question requires your attention.

* First Name

* Last Name

* Address1

Address2

* City

Zip Code

* Country

* Phone

Email



*What state is your farm located in?

- | | | |
|--------------------------------------|-------------------------------------|--------------------------------------|
| <input type="radio"/> Alabama | <input type="radio"/> Alaska | <input type="radio"/> Arizona |
| <input type="radio"/> Arkansas | <input type="radio"/> California | <input type="radio"/> Colorado |
| <input type="radio"/> Connecticut | <input type="radio"/> Delaware | <input type="radio"/> Florida |
| <input type="radio"/> Georgia | <input type="radio"/> Hawaii | <input type="radio"/> Idaho |
| <input type="radio"/> Illinois | <input type="radio"/> Indiana | <input type="radio"/> Iowa |
| <input type="radio"/> Kansas | <input type="radio"/> Kentucky | <input type="radio"/> Louisiana |
| <input type="radio"/> Maine | <input type="radio"/> Maryland | <input type="radio"/> Massachusetts |
| <input type="radio"/> Michigan | <input type="radio"/> Minnesota | <input type="radio"/> Mississippi |
| <input type="radio"/> Missouri | <input type="radio"/> Montana | <input type="radio"/> Nebraska |
| <input type="radio"/> Nevada | <input type="radio"/> New Hampshire | <input type="radio"/> New Jersey |
| <input type="radio"/> New Mexico | <input type="radio"/> New York | <input type="radio"/> North Carolina |
| <input type="radio"/> North Dakota | <input type="radio"/> Ohio | <input type="radio"/> Oklahoma |
| <input type="radio"/> Oregon | <input type="radio"/> Pennsylvania | <input type="radio"/> Rhode Island |
| <input type="radio"/> South Carolina | <input type="radio"/> South Dakota | <input type="radio"/> Tennessee |
| <input type="radio"/> Texas | <input type="radio"/> Utah | <input type="radio"/> Vermont |
| <input type="radio"/> Virginia | <input type="radio"/> Washington | <input type="radio"/> West Virginia |
| <input type="radio"/> Wisconsin | <input type="radio"/> Wyoming | |

*Farm Name

What is your NOP # (ok to leave blank)

*What year have you been certified organic since:

*Who is your USDA organic certifier

*Is your certification current?

Yes

No

Website

*Approximate stewarded acres

*Approximate acres of organic crop production (include hay and pasture)

Approximate number of acres in pasture

Approximate Acres in Trees/Conservation

*Acres of non certified production?

Please explain why this production is not certified

Please list the crops you grow, including pasture, and approximate acreage of each (Note: If you grow more than 10 crops, it is OK to answer mixed vegetables)

Crops

All farms must complete this section

*Do you harvest from crops grown in soil, with no barrier to the subsoil (not including microgreens and mushrooms)

Yes

No

Please explain the situation and what percentage of gross sales come from crops harvested from containers

*Do you grow Microgreens?

Yes

No

Do you add any liquid fertilizer to your microgreens?

Yes

No

Are all microgreens harvested prior to 21 days?

Yes

No

*Do you cover crop?

Yes

No

Approximately what percentage of all annual cropped ground do you grow cover crops on?

* Please check off any of the below methods that you utilize to reduce the amount of time soil is left bare

- | | | |
|---|---|--|
| <input type="checkbox"/> Cover Cropping | <input type="checkbox"/> Ground Cover | <input type="checkbox"/> Immediate seeding |
| <input type="checkbox"/> Leaving crop residue | <input type="checkbox"/> No late fall tillage | <input type="checkbox"/> Mulching |
| <input type="checkbox"/> None of the above | | |
| <input type="checkbox"/> Other (Please specify) | | |

* Do you apply compost/manure

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

For your compost and/or manure do you:

- | | | |
|-----------------------------------|--|-------------------------------|
| <input type="checkbox"/> Purchase | <input type="checkbox"/> Make your own | <input type="checkbox"/> Both |
|-----------------------------------|--|-------------------------------|

Briefly list the type of feedstock/ingredients/additives for the compost/mulch/manure and approximate amounts applied per year

* Please check which of the following soil conservation practices you use

- | | | |
|---|--|---|
| <input type="checkbox"/> Strip tillage | <input type="checkbox"/> Shallow tillage | <input type="checkbox"/> Rotating animals |
| <input type="checkbox"/> Keeping soil covered | <input type="checkbox"/> Adding compost | <input type="checkbox"/> No Till |
-

* Does your growing system (in the field or greenhouse) require the regular use of a pesticide?

- Yes No
-

Please list the pesticide and the pest it is needed to control. Please also list your average application rate and frequency of application for each pesticide.

Split Farm

All farms must complete this section

*Is any part of your farm considered a concentrated animal feeding operation, according to the USDA definition "A farm in which over 1000 animal units are confined for over 45 days a year during the growing season." (for example, 1000 animal units = roughly 1000 beef cattle; 750 dairy cows; 10,000 sheep; 2500 pigs; 82000 laying hens; 125,000 boilers; 55,000 turkeys)?

Yes

No

Please describe how/when your farm meets the USDA definition of a CAFO

*Is any part of your farm hydroponic according to the following definition, "Plants that receive the majority of their fertility through liquid feed"?

Yes

No

*Please check the box below if you have parallel production within the following categories (selling both certified organic and non-certified products within the same category). If your farm has no parallel production check the box marked "no parallel production"

- | | | |
|---|--|---|
| <input type="checkbox"/> Vegetables and small fruit (including berries) | <input type="checkbox"/> Tree fruit, tree nuts, and tree sap/syrup | <input type="checkbox"/> Hay, pasture, grain, pulses |
| <input type="checkbox"/> Ruminants for meat and byproducts | <input type="checkbox"/> Ruminants for fiber | <input type="checkbox"/> Ruminants for dairy |
| <input type="checkbox"/> Poultry for eggs | <input type="checkbox"/> Poultry for meat and byproducts | <input type="checkbox"/> Pigs for meat and byproducts |
| <input type="checkbox"/> No parallel production | | |
-

If you answered "yes" to any category above please explain the situation

*Does your farm sell non-certified organic ornamental bedding plants and/or planting stock?

- Yes No
-

Are these plants managed organically while on the farm?

- Yes No N/A
-

Are these plants clearly identified as non-organic at point of sale?

- Yes No
-

*Does your farm sell non certified meat from animals that are raised organically but are not slaughtered in a USDA facility?

Yes

No

Are non certified products managed organically other than at slaughter?

Yes

No

*To avoid label confusion, are all non-NOP certified products clearly identified as "not organic" at point of sale?

Yes

No

*Please check the box below that most accurately describes your farm

All organic

Mixed production (less than 10% non organic)

Mixed production (greater than 10% non organic)

Parallel production (both organic and non organic production of products within the same category)

Other (Please specify)

Please list which products you grow that are not certified organic

*What percent of your gross sales come from non certified products?

*Under what names/labels and brands do you market your product?

*What practices do you use that wouldn't comply with organic standards on your farm?

*Does your farm resell any products produced by other farmers?

Yes

No

Please list which products you resell and through what venue (For example: through a website, at coops or at farmer's markets). Please also note if these products are sold under your farm name, or if they retain the original grower's name.

Greenhouses/High Tunnels

*Do you sell crops grown in a greenhouse or high tunnel?

Yes

No

Are all greenhouse/tunnel crops intended for sale grown in soil connected to the bedrock (except for microgreens and plants sold in containers)?

Yes

No

Please list the soluble inputs used in your greenhouse/high tunnel system and how often you are using them (ex: fish emulsion, hydolyzed soy protein, pelleted chicken manure)

Do you use deep steam treatment of the soil (greater than 4 inches)

Yes

No

Please explain why you use deep steam soil treatment

Do you use artificial light in your greenhouse?

Yes

No

Please explain the dates and/or conditions during which artificial light is used

Do you actively heat any of your greenhouses year round?

Yes

No

Livestock

*Do you sell products from livestock raised on your farm? (If answer is no, select no and then click submit at bottom of page)

Yes

No

Do all animals have daily, year round access to the outdoors during the growing season. Outdoors constitutes at least 50% vegetative cover during the growing season (note: pigs are exempt from vegetative cover requirement). Vegetative cover may include pasture, bushes, shrubs, hedgerows and trees.

Yes

No

Please check any of the following practices if they are used on your farm

Needle teeth trimming or grinding, nose ringing, tusk removal, castration after 14 days of age, and tail docking in pigs

De-horning

De-snooding, wattle and comb trimming, notching, toe-clipping and trimming, hole punching, dobbling, de-beaking and beak trimming, caponization, and forced molting of avian species

The use of goggles or other similar artificial devices designed to reduce feather pecking

Museling and tail docking of sheep shorter than the distal end of the caudal fold in sheep

Face branding of all species

None of the above

If you answered yes to any of the above please describe the practice

Ruminants

Do you raise ruminants?

Yes

No

Please provide the number of acres exclusively used for pasture, the number of acres exclusively used for hay, and the number of acres that are used for both pasture and hay

Please provide the number of grazing animals in each animal group

What is the DMI% from pasture during the growing season (calculated for your organic certificate)

How many days is your growing season?

Are all ruminants, including dairy cattle, organic from the last third of gestation other than the one-time farm transition to organic certification?

Yes

No

Are all ruminants fed colostrum within the first 24 hours of birth?

Yes

No

Please describe how your farm raises calves

Poultry

Do you raise poultry?

Yes

No

Do all poultry spend a minimum of half of their life outdoors before being slaughtered (where outdoors is defined as 50% vegetated cover)?

Yes

No

At how many weeks/ days do you slaughter your meat birds?

At what age do you put meat birds outside?

Please describe all variations of poultry housing that you use (mobile/fixed) and the minimum total space allotment per bird at any given time for both indoor and outdoor housing and for all life stages:

Please provide the total number of acres of pasture available for all poultry on the farm:

Please provide the total number of birds you will raise on these acres per year:

Approximately how many times per year do poultry animals rotate through the same piece of land?

For mobile housing/fencing, please describe the approximate number of times poultry will be on the same space per season:

Is there sufficient water, food, and protection in outdoor areas?

Yes

No

Do you provide more than .6ft of perch space per bird?

Yes

No

Does enough natural light enter shelters during daylight hours to read inside?

Yes

No

Do you use artificial lights to extend daylight hours?

Yes

No

If yes, what is the maximum total number of hours daylight received?

Please describe how you keep volatile ammonia levels low in fixed houses:

Pigs

Do you raise pigs?

Yes

No

How many pigs do you raise?

How many acres do you provide for this number of pigs?

Are pigs housed in groups at all times except for farrowing, boars, and illnesses

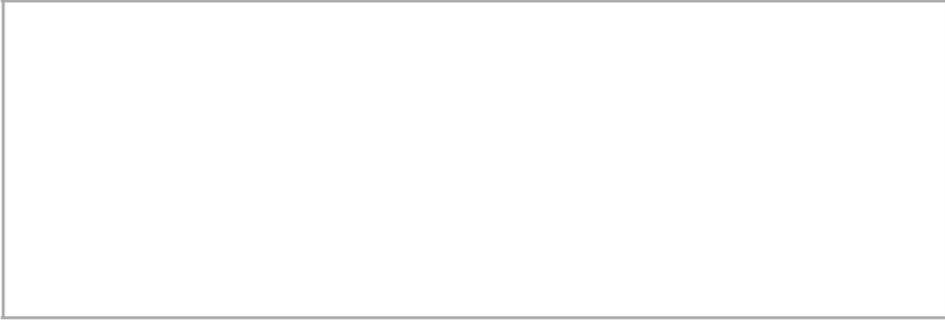
Yes

No

Briefly describe the shelter used for farrowing:

Briefly describe all bedding and manipulatable materials provided

How are your pigs managed to prevent degradation of the soil?

An empty rectangular box with a thin black border, intended for the user to provide their answer to the question above.

Certifications

All farms must complete this section

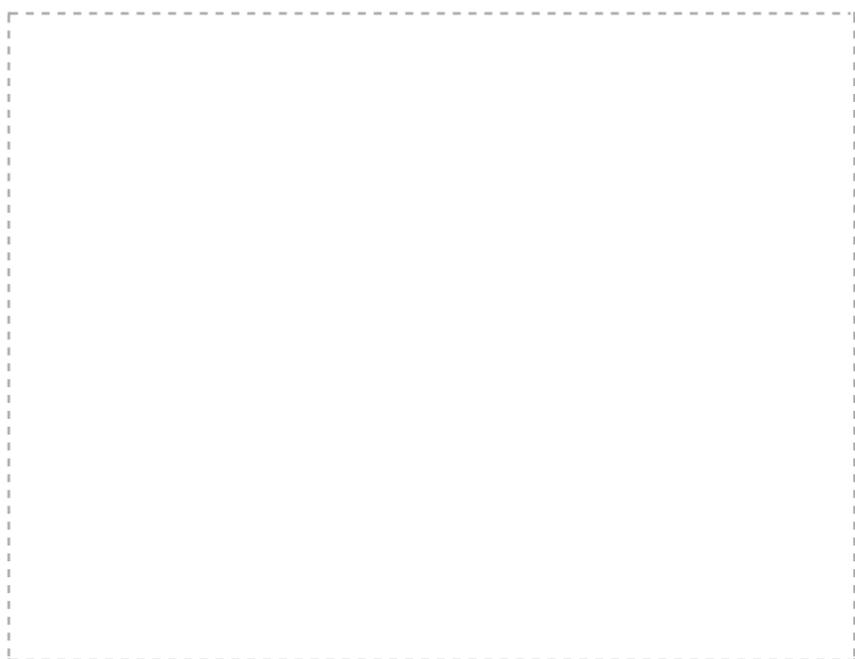
Do you have any questions for us?

We are still in the pilot phase of our application process. Do you have any suggestions for us to improve this application?

Please list other certified organic farms that you would recommend for inclusion in the Real Organic Project. Please consider reaching out to them and encouraging them to apply

*By signing this box you agree that all statements made in this application are true and any false representation will negate ROP certification. The person signing this box is authorized to sign this document on behalf of their farm.

To sign document use your mouse - holding down the left mouse button sign in the box below



Signed by