CSI On-Farm Product Handling Questionnaire

If your operation includes simple on-farm product handling (e.g., cleaning of your own seed for sale, vegetable washing and/or packaging, etc.), please complete these supplemental questions and attach this form to your farm system plan.

Check all handling activities that will be used on-farm:

☐ *Cleaning (e.g., seed)* ☐ *Separating* ☐ *Washing* ☐ *Drying*
☐ *Freezing* ☐ *Labelling* ☐ *Other (specify)* _____

If you are engaged in any processing activities (as described below) for your own products or on behalf of another operation, you must complete the CSI Processor System plan (ORG_PRO_04), and not this questionnaire. Please contact the CSI office if you require clarification.

Processing activities that if conducted on-farm will require the completion of the Processor System Plan:

- *Curing*
- *Cooking*
- *Grinding*
- *Churning*
- *Cutting*
- *Fermenting*
- *Distilling*
- *Canning*
- *Extracting*
- *Slaughtering*
- *Blending*
- *Etc.*

PLEASE ANSWER EACH QUESTION. IF A SECTION DOES NOT APPLY TO YOUR OPERATION, PLEASE INDICATE "Not Applicable". ***DO NOT LEAVE ANY PART OF THE SYSTEM PLAN BLANK.***

SECTION 1: GENERAL INFORMATION	
Applicant (Legal Name):	**Date:**
Provide a brief description of the kind of product handling at your farm and a description of the final product.	

SECTION 2: ASSURANCE OF ORGANIC INTEGRITY

A. ORGANIC HANDLING REQUIREMENTS

1. PRODUCT FLOW and PROCESS CONTROL

Attach a complete written description or a product flow chart that describes the sequence of activities for how your organic products are handled, including the final activities of labelling and sale.

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2. HANDLING ACTIVITIES

☐ **Not Applicable**

Prevention of commingling with conventional product produced on-farm is accomplished by:

☐ Time

Explain:

☐ Space (different locations, etc.)

Explain:

GE Product Handling – if the farm produces any GE crops, describe the process that is followed to prevent contamination of the organic products ☐ **Not Applicable**

3. EQUIPMENT

List all equipment on the **CSI Equipment List form (ORG_PRO_08_Equipment List)** or an equivalent form used.

☐ **On file**

If equipment is purged, list and describe purge procedures, quantities purged, and documentation. ☐ **Not Applicable**

B. CLEANING AND SANITATION

Check all cleaning methods used:

☐ Clean in place (CIP) ☐ Compressed air ☐ Manual washing ☐ Scraping
☐ Sweeping ☐ Vacuuming ☐ Other (specify) _____

Do you have written procedures that establish the frequency of cleaning activities? ☐ **Yes** ☐ **No** ☐ **Not Applicable**

Describe them briefly.

Do you keep records of all cleaning activities? ☐ **Yes** ☐ **No** ☐ **Not Applicable**

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SECTION 3: PEST MANAGEMENT

Use of any and all pest control products must be documented.

- Any pest control products must be reviewed and approved by CSI prior to use.
- **Attach** the list of pest control products used **(ORG_PRO_06_Pest management** or your own list**)**

Attach a map showing the location of traps and monitors, and MSDS and/or label information for substances used for pest control, if applicable, in the building where you are doing your organic product handling.

Check all pest problems you generally have:

☐ Birds ☐ Crawling insects ☐ Flying insects ☐ Mice ☐ Rats ☐ Spiders ☐ Other (specify) _____

Check all pest management practices you use:

☐ Air curtains	☐ Boric acid	☐ Carbon dioxide	☐ Cleanup of spilled product
☐ Crack and crevice spray	☐ Diatomaceous earth	☐ Electrocutors	☐ Exclusion
☐ Fogging	☐ Freezing treatments	☐ Fumigation	☐ Good sanitation
☐ Heat treatments	☐ Incoming ingredient	☐ Inspection zones around interior/perimeter	
☐ Mechanical traps	☐ Monitoring	☐ Mowing	
☐ Nitrogen	☐ Pheromone traps in facility	☐ Physical barriers	
☐ Positive air pressure	☐ Precipitated silica	☐ Pyrethrum	
☐ Release of beneficials	☐ Removal of exterior habitat/food sources	☐ Repair of holes, cracks,	☐ Rotenone
☐ Screened windows, vents, etc.	☐ Sealed doors and/or windows	☐ Sheet metal on sides of building	☐ Sticky traps exterior
☐ Ultrasound/light devices	☐ Vacuum treatments	☐ Vitamin baits	
☐ Other (specify) _____			

Check all aspects of your waste management system that apply:

☐ Composting	☐ Daily pick-up of waste	☐ Field application of waste
☐ Material recycling	☐ On-site dumpster	
☐ Other (specify) _____		

Describe your premise maintenance program that removes pest habitat and prevents pest access to handling facilities.

What type of pest management system do you use?

☐ In-house: name of responsible person

☐ Contract pest control service: name, address, and phone number

Are records kept of your pest monitoring activities? ☐ **Yes** ☐ **No**

Is commercial pesticide product only used when monitoring records indicate that the preventive measures are not effective? ☐ **Yes** ☐ **No**

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Are records kept of all pesticide applications? ☐ **Yes** ☐ **No**

If prohibited pest control substances were used, list all measures taken to prevent contact with organic products or ingredients.

If prohibited pest control products were used, what measures are you taking or planning to take to avoid their use in the future?

SECTION 4: STORAGE AND TRANSPORTATION

A. STORAGE

If there is off-site storage, give name, address, phone number, contact person and type of products stored at off-site facility, or **attach a record** that provides this information:

Describe the method to identify the organic status of stored bulk product.

B. TRANSPORTATION OF ORGANIC PRODUCTS

OUTGOING FINISHED PRODUCT:

In what form are finished products shipped?

☐ Cardboard cases	☐ Cardboard drums	☐ Dry bulk	☐ Foil bags
☐ Mesh bags	☐ Metal drums	☐ Tote bags	☐ Tote boxes
☐ Paper bags	☐ Plastic crates	☐ Other (specify) _____	

How are outgoing products transported?

Do you arrange outgoing product transportation? ☐ **Yes** ☐ **No**

Have transport companies been notified of organic handling requirements? ☐ **Yes** ☐ **No**

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How do you verify that outgoing transport units are clean prior to loading organic products?

Is the verification documented? ☐ **Yes** ☐ **No**

Has the transport equipment been verified as being free from chemical/pesticide residues and/or invertebrate and vertebrate pests? ☐ **Yes** ☐ **No**

Do you use a previous load haul certificate like the form "CSI ORG_04_Clean Transport"? ☐ **Yes** ☐ **No**

Are organic products shipped at the same time as conventional in the same transport units? ☐ **Yes** ☐ **No**

Check steps taken to segregate organic products:

☐ Dedicated organic only transport units ☐ Organic product shrink wrapped ☐ Pallet tags identifying "organic"

☐ Separate area in transport unit ☐ Use of pallets

☐ Other (specify) _____

SECTION 5: PACKAGING

A. PACKAGING

Please describe how your organic products are packaged.

Are all materials that come into contact with processed organic food clean and of food grade quality? ☐ **Yes** ☐ **No**

Where are packaging materials stored?

Are any fungicides, fumigants, or pest control products used on the packaging material or in this storage area? ☐ **Yes** ☐ **No**

If yes, describe use and products.

While in your possession, have any packaging materials been exposed to synthetic fungicides, preservatives, fumigants, fuel, oil, or other petro-chemicals either through direct application or from being stored in the same location with the chemicals? ☐ **Yes** ☐ **No**

If yes, describe the potential exposure.

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Are packaging materials reused? ☐ **Yes** ☐ **No**

If yes, describe how reusable packaging materials are cleaned prior to use?

Are reusable packaging materials used for both organic and non-organic products? ☐ **Yes** ☐ **No**

If yes, list specific non-organic products packaged.

CONTROL of NON-CONFORMING PRODUCT

Do you have procedures in place to segregate product or remove labels from product if it is found to be out of conformance with the applicable standard(s)?

☐ **Yes** ☐ **No**

SECTION 6: WATER USE

A. WATER

Check off the ways in which water is used: ☐ None used

☐ Cleaning equipment ☐ Cleaning organic product ☐ Cooling

☐ Product transport ☐ Other (specify) _____

Source of water:

☐ Municipal ☐ On-site well ☐ Other (specify) _____

Does the water meet the Canadian federal and/or provincial legislation and standards? ☐ **Yes** ☐ **No**

Attach copy of water test, if applicable.

List any known water contaminants.

☐ **None**

Are any on-site water treatment processes in place?

☐ **None**

If yes, please describe:

Please submit a copy of the completed system plan with all the appropriate attachments to:

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Ottawa, Ontario
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Phone: 1-800-516-3300
Email: info@seeds-canada.ca

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