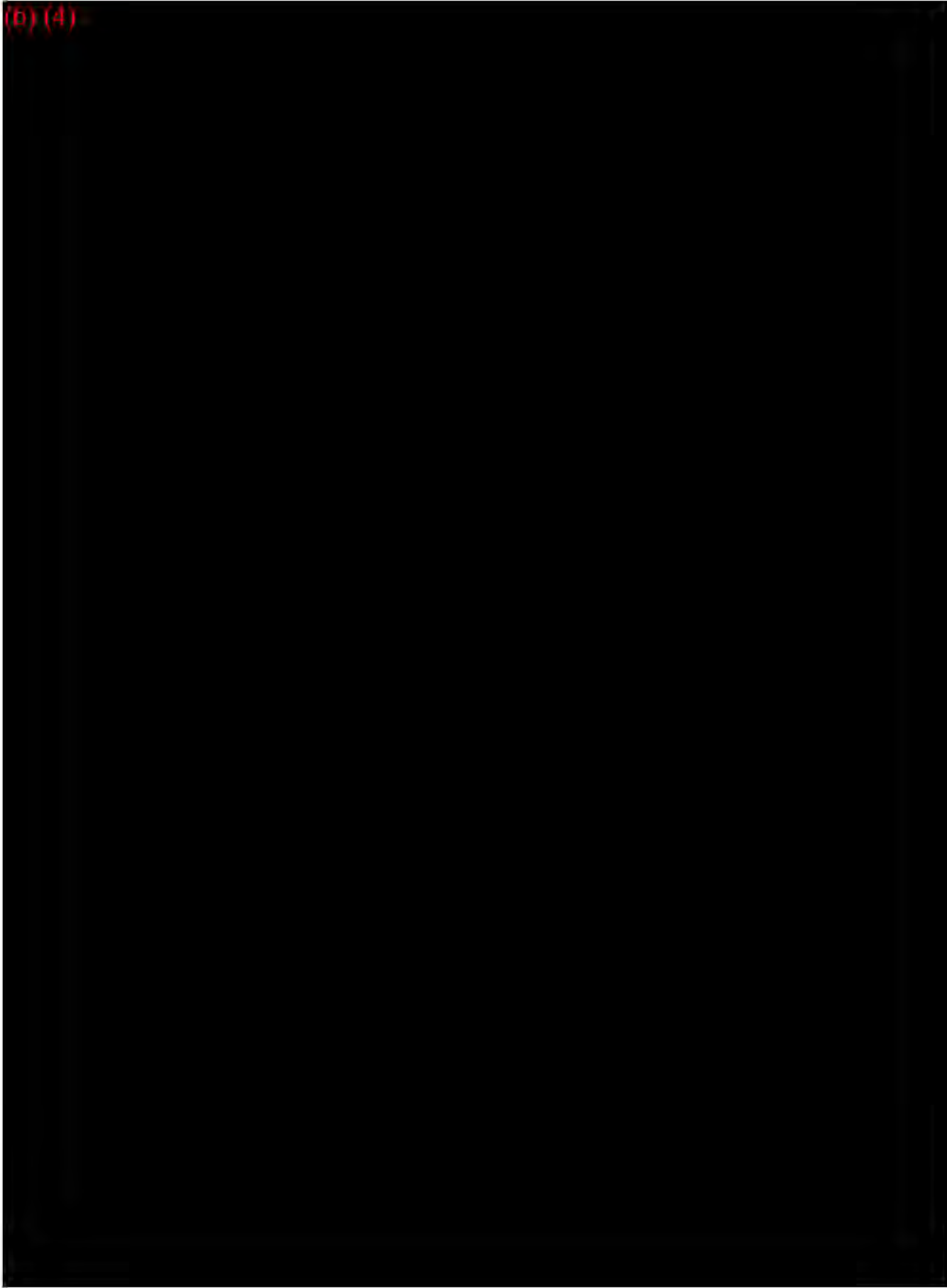


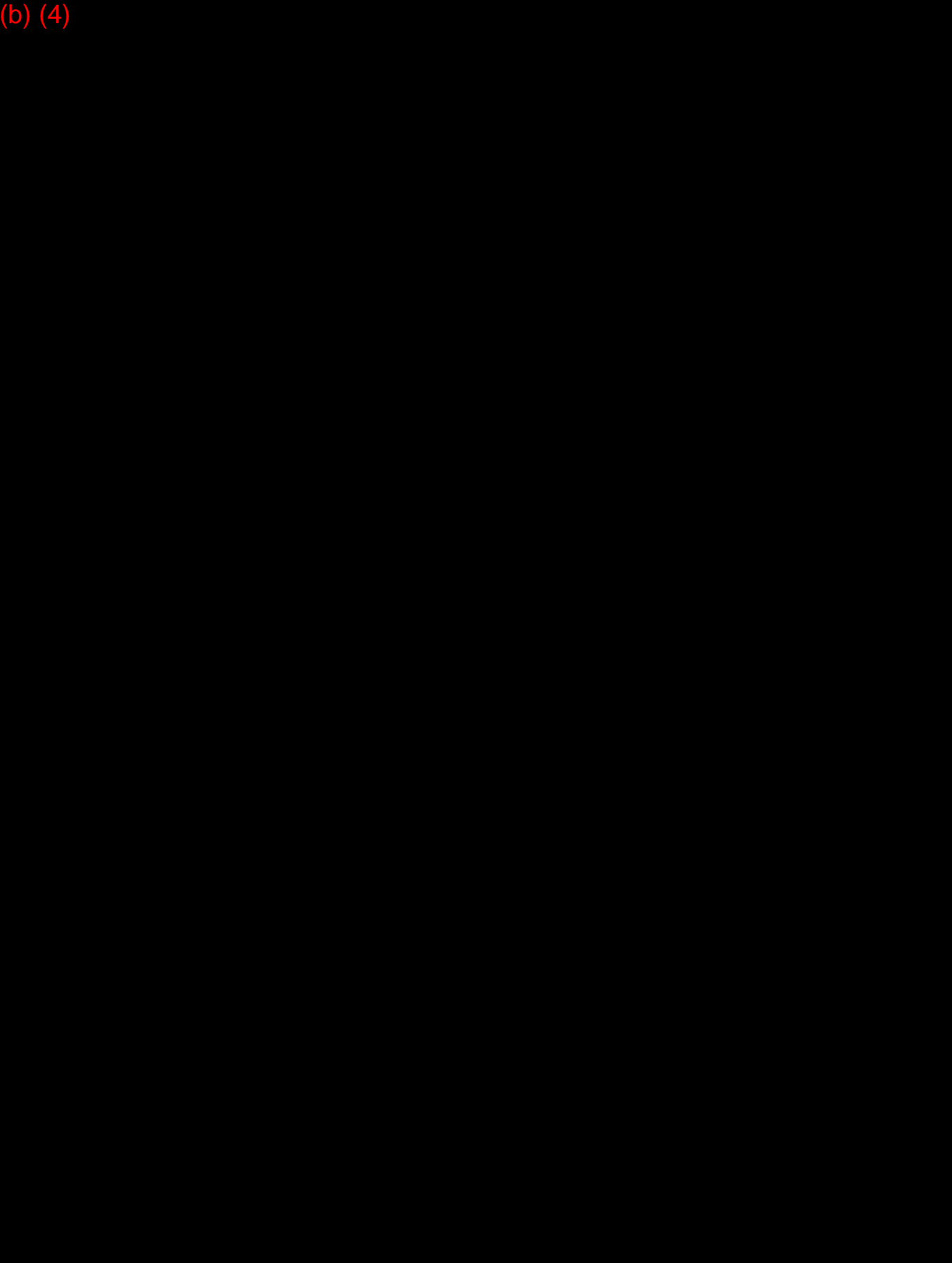
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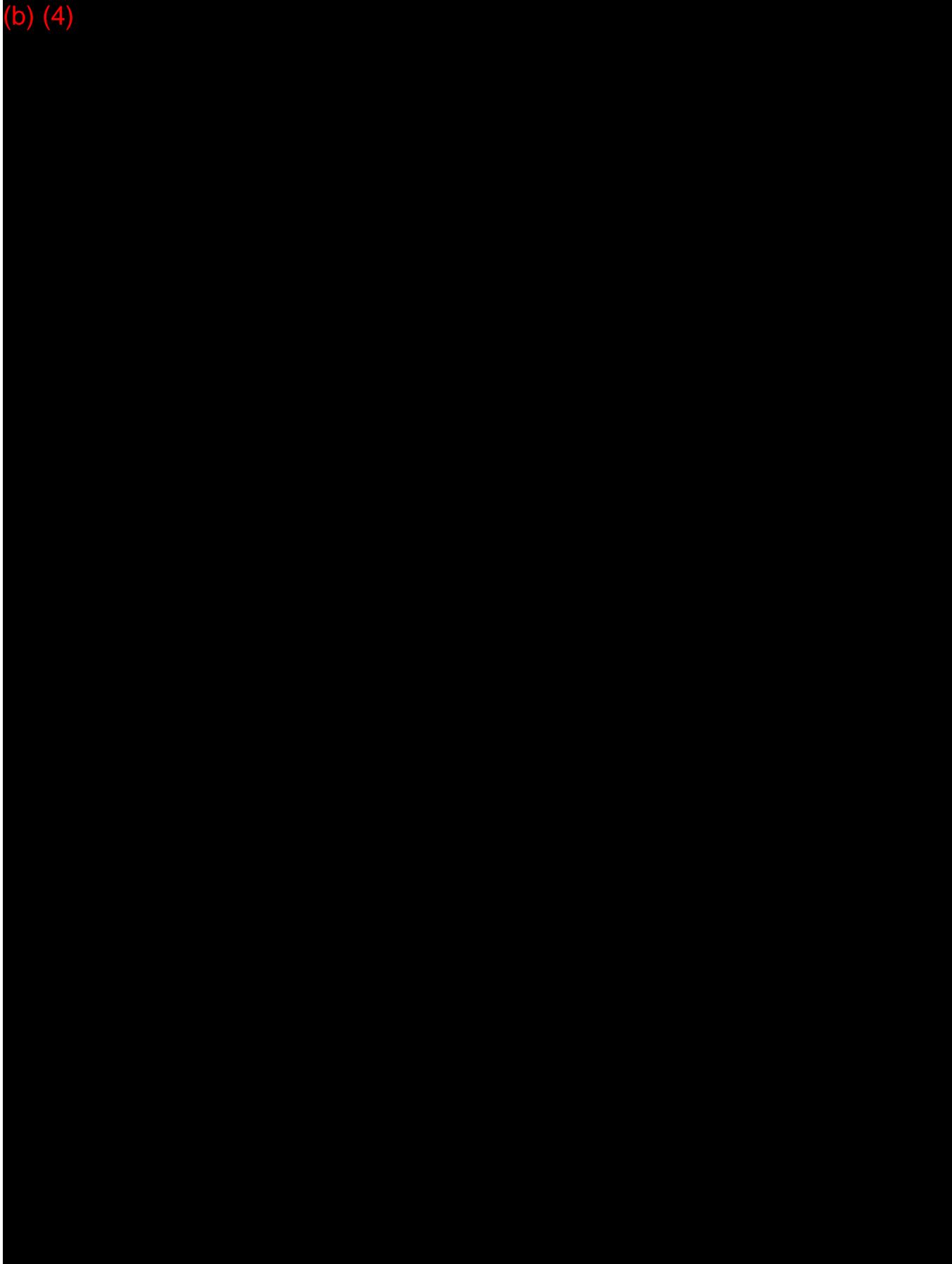


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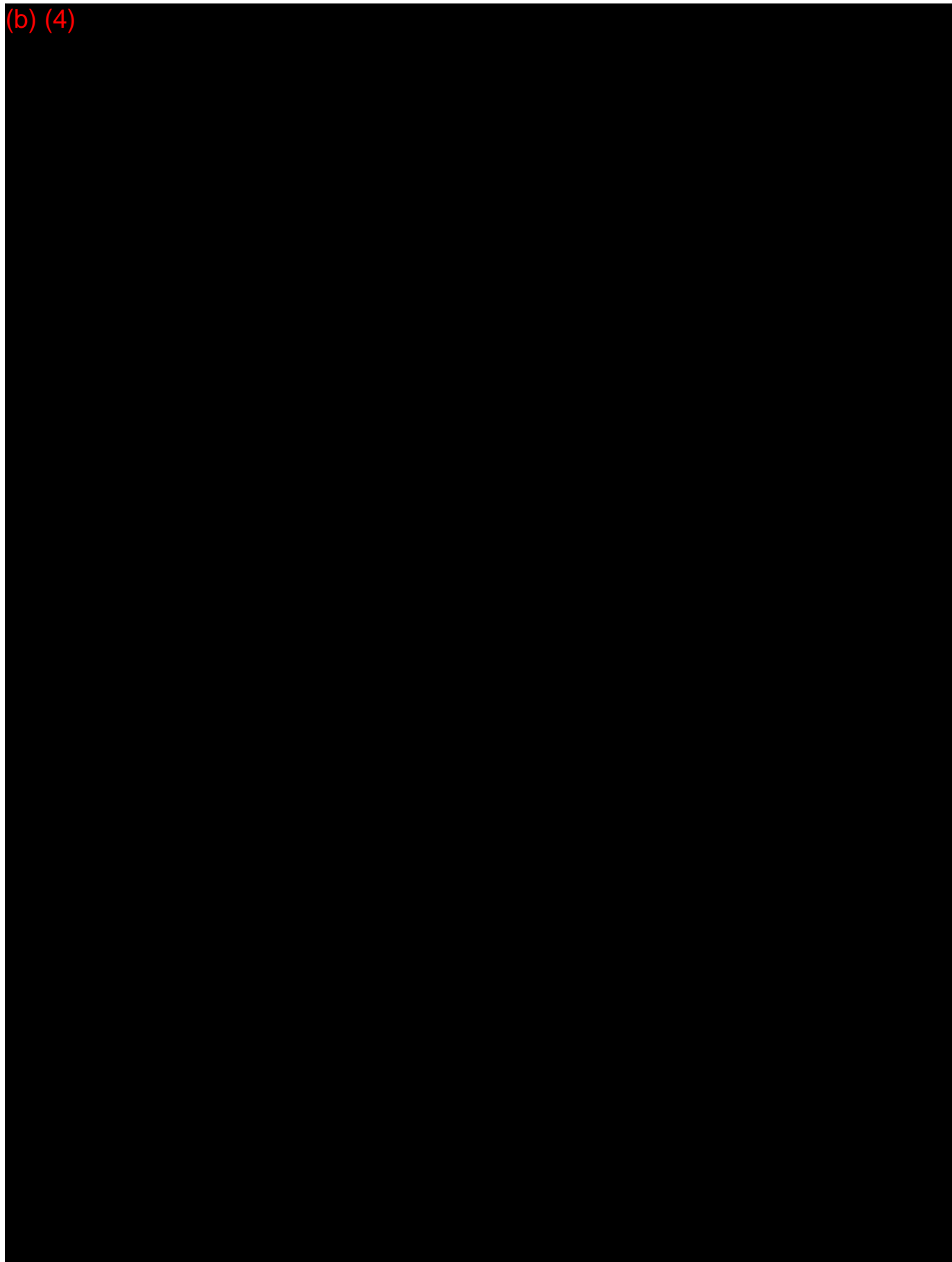
(b) (4)



(b) (4)

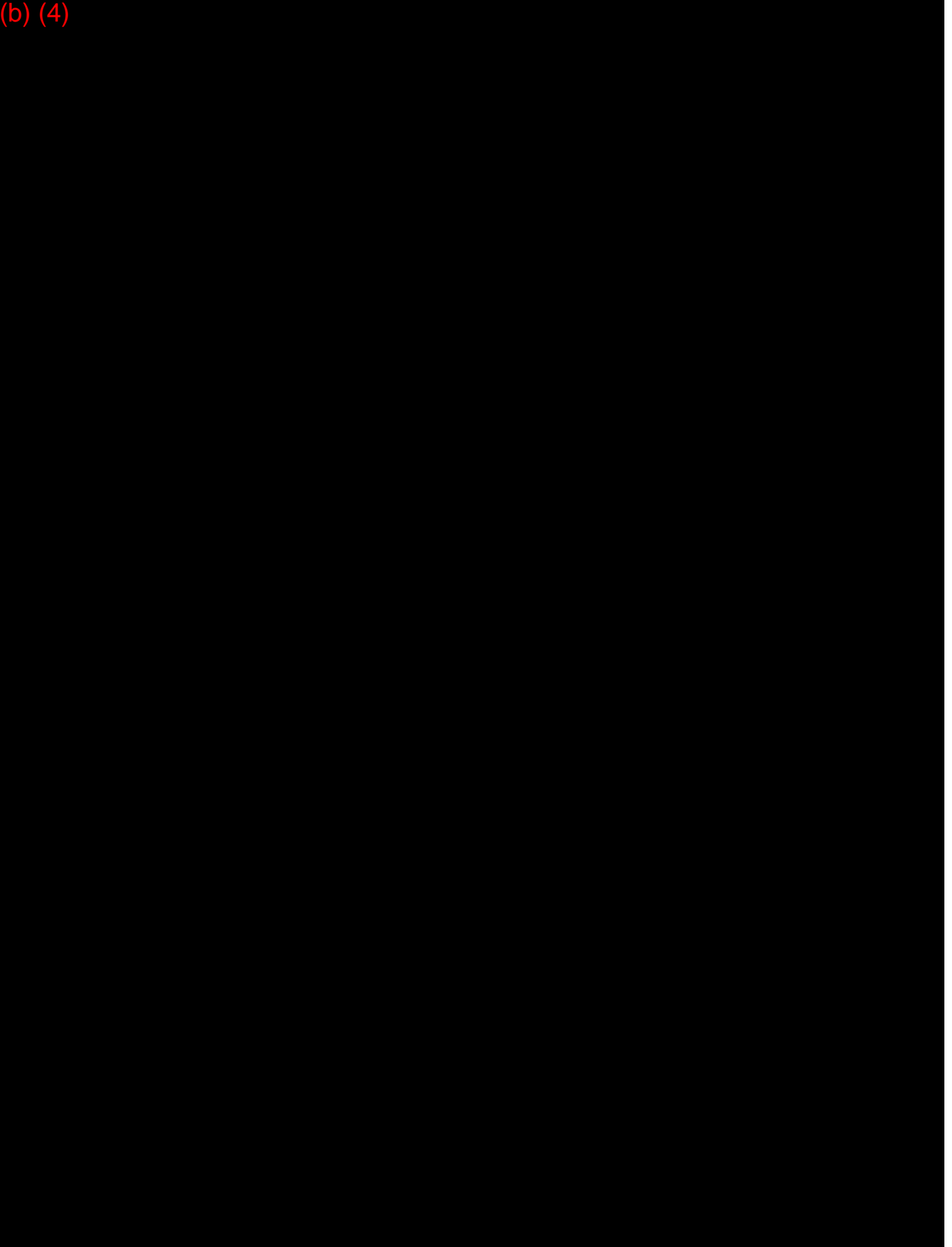


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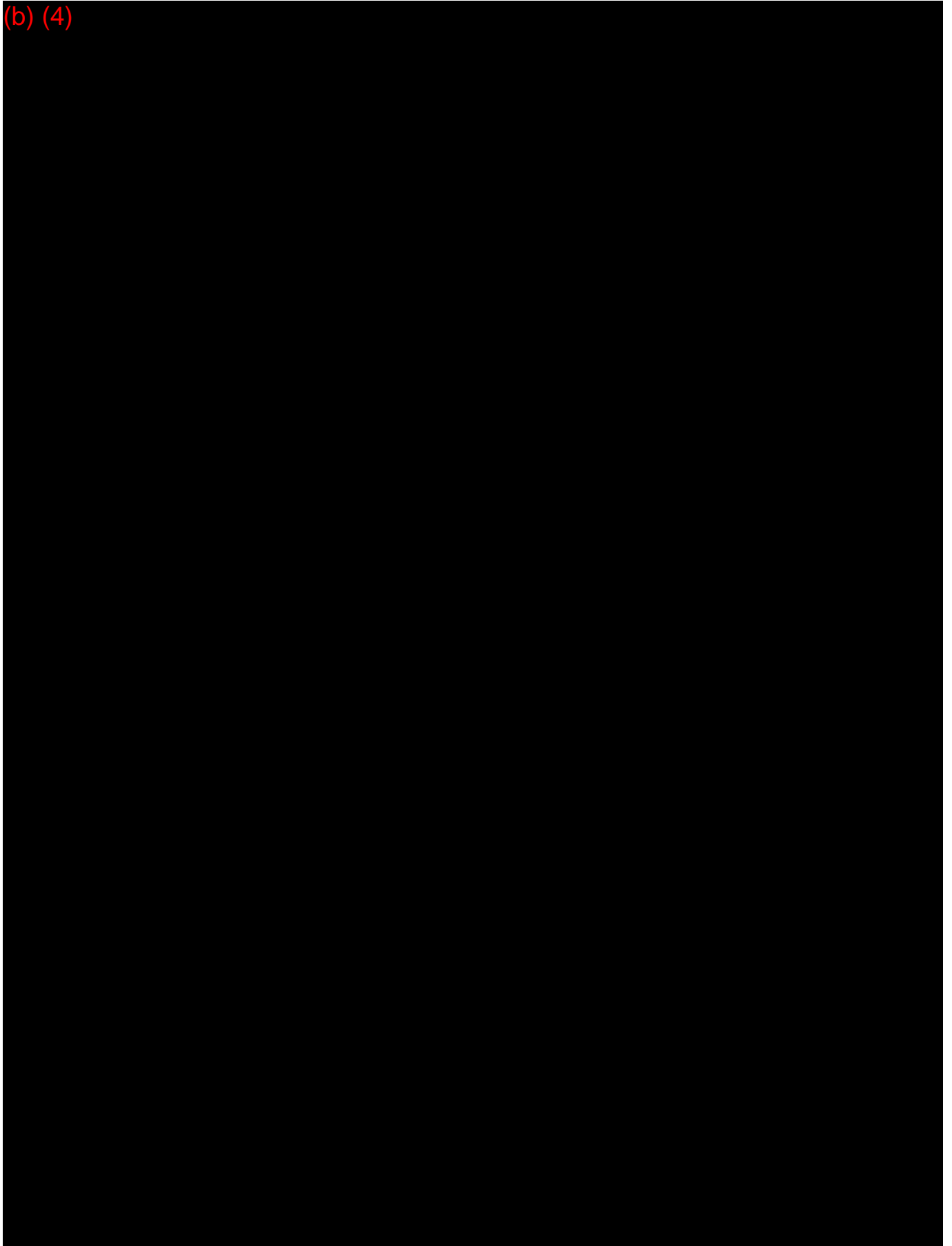
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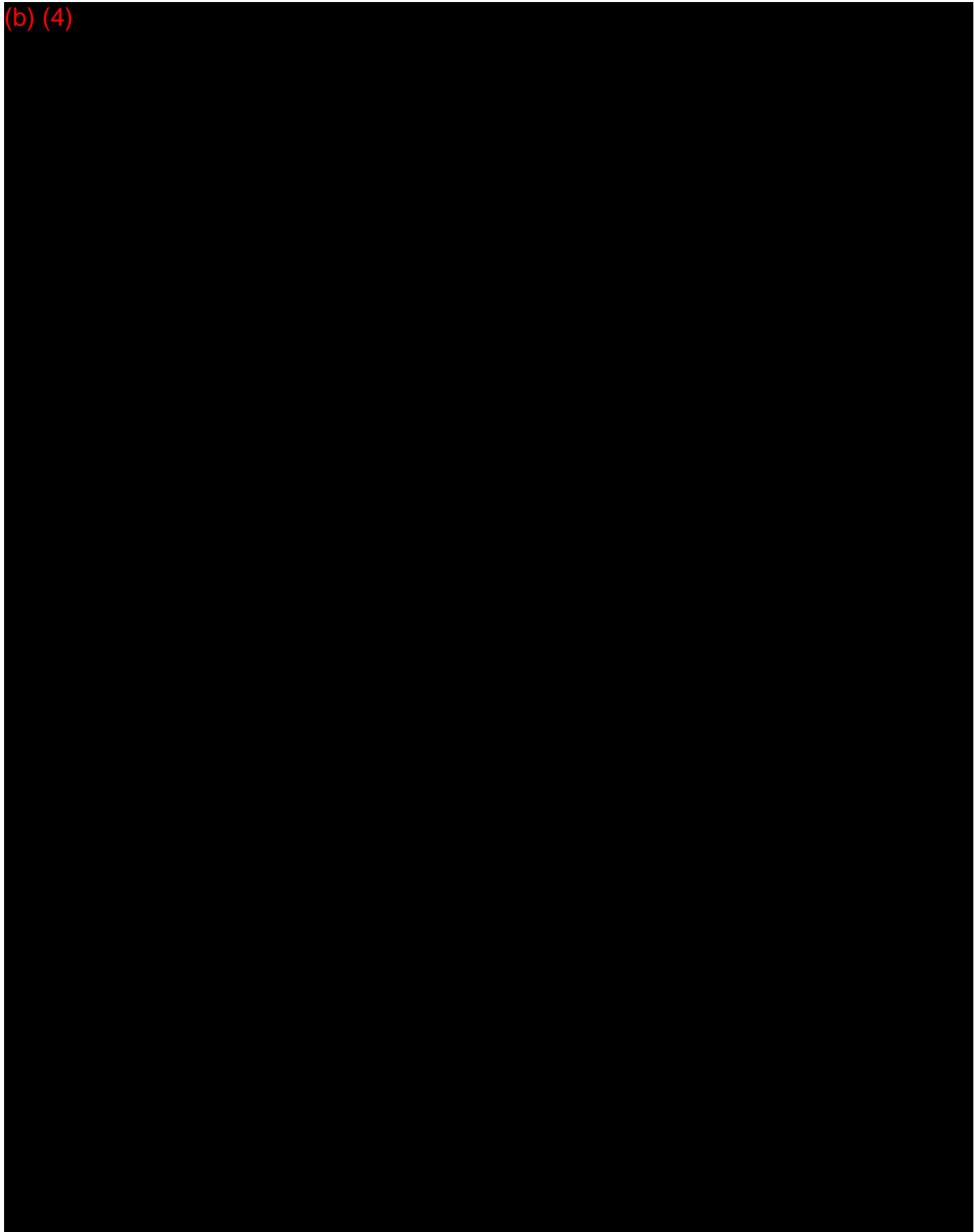
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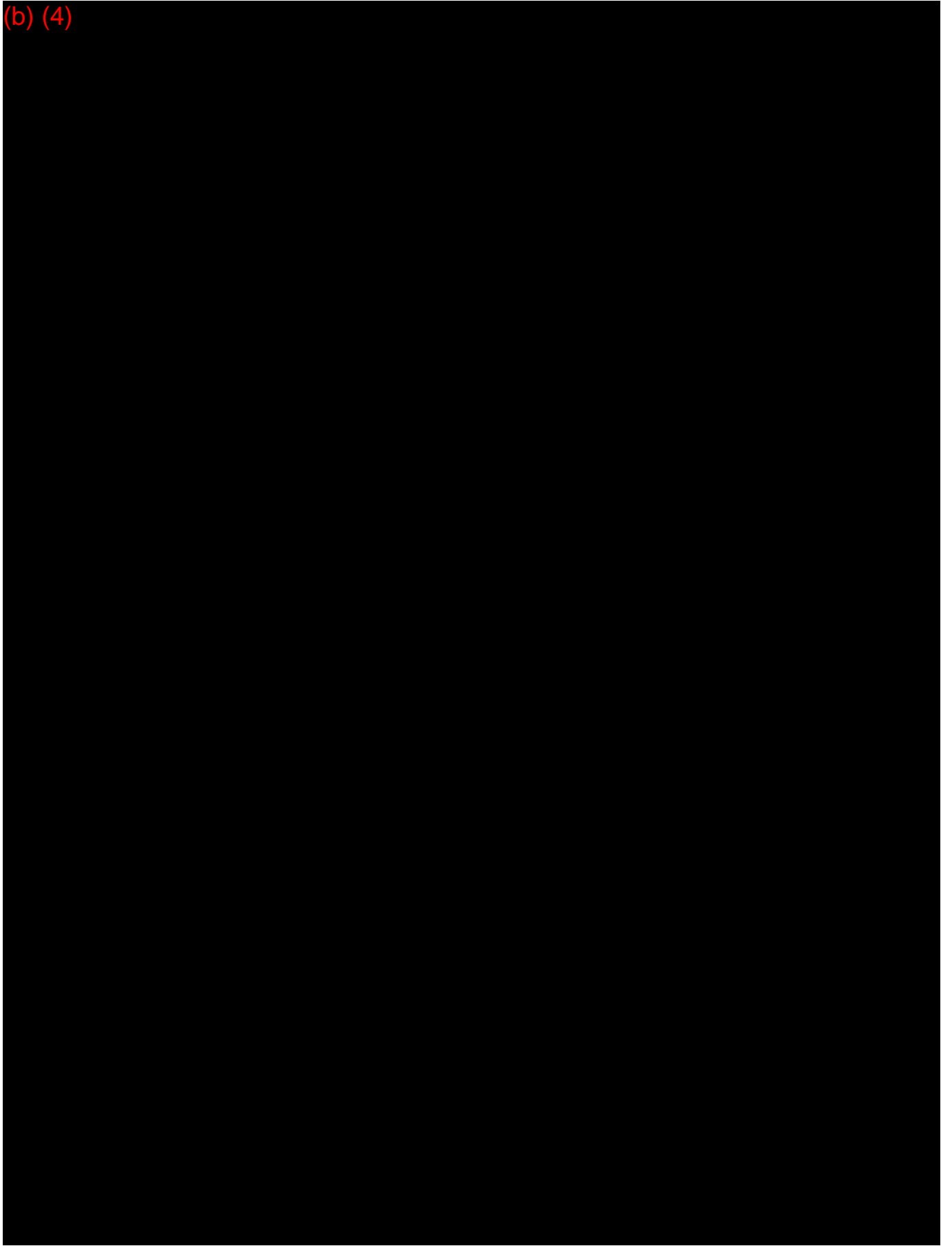
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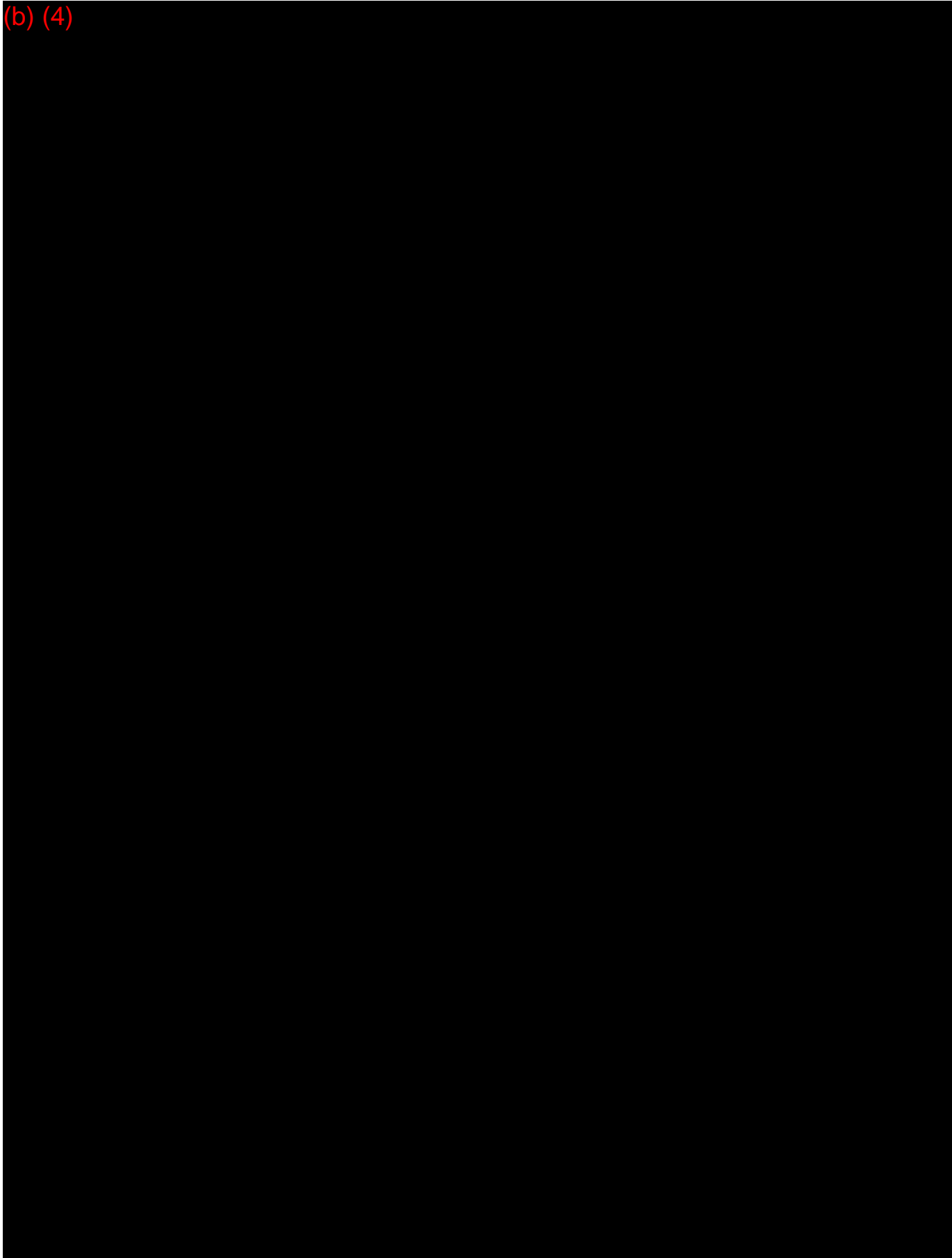
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**Texas Department of Agriculture**  
*Organic Inspection Findings*

**ROR-660**

Todd Staples, Commissioner

<b>SECTION A</b>	<b>VERIFICATION INFORMATION</b>	
	Client Name Boehning Dairy LLC	TDA Client No. <b>(b) (4)</b>
	Facility Name Boehning Dairy LLC	TDA Account No. <b>(b) (4)</b>

<b>SECTION B</b>	<b>INSPECTION INFORMATION</b>		
	Inspection Type Routine	Inspection ID No. 7575110606110500	
	Inspector ID 7575	Inspector Name <b>(b) (6)</b>	Region <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
	Date 6 / 6 / 2011 month day year	Time 11 : 5 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	County Code 279 County Lamb

<b>SECTION C</b>	<b>FINDINGS</b>
	Certification Type: <b>(b) (4)</b>  <b>(b) (4)</b>

TDA License No. (b) (4) Inspector ID No. 7575 Inspection Date 6-6-2011

SECTION D	
<b>SUMMARY</b>	
Person present at time of inspection: Brian Boehning	
<input checked="" type="checkbox"/> These findings and all comments were discussed with the inspection observer during the exit interview.	
<b>COMMENTS</b>	
(b) (4)	





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Texas Department of Agriculture  
Organic Livestock Producer Inspection Report

ROR-651

Todd Staples, Commissioner

SECTION A	<b>VERIFICATION INFORMATION</b>			
	Client Name BOEHNING DAIRY LLC		TDA Client No. (b) (4)	
Facility Name BOEHNING DAIRY LLC		TDA Account No. (b) (4)		
SECTION B	<b>INSPECTION INFORMATION</b>			
	Inspection Type ROUTINE		Inspection ID No. 7575110606110500	
	Inspector ID 7575	Inspector Name (b) (6)	Region <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	
	Date 6/6/2011 <small>Enter as MM/DD/YYYY</small>	Time 11:05 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	County Code 279	County LAMB
SECTION C	<b>FACILITY AND LIVESTOCK INFORMATION</b>			
	1) Is land used for producing livestock certified?		(b) Yes	(b) No <sup>1</sup>
	TDA Acct.#: (b) (4)	Other Certifier:	Cert. #:	
	2) Is the information regarding pastures and facilities under Section C of the ROR-603 accurate?		(b) Yes	(b) No <sup>2</sup>
	3) Is the livestock information under Section C of the ROR-603 accurate?		(b) Yes	(b) No <sup>2</sup>
	<sup>2</sup> If No, the producer must submit changes to the TDA, Organic Certification Program.			
4) Is any aspect of the livestock operation performed at another location?		(b) Yes <sup>3</sup>	(b) No	
<sup>3</sup> If Yes, are the addresses provided in the ROR-603 accurate?		(b) Yes	(b) No <sup>1</sup>	
<sup>1</sup> If No, possible noncompliance.				
5) Have all pastures been inspected as part of the Organic Land Producer Inspection?		(b) Yes	(b) No <sup>4</sup>	
<sup>4</sup> If No, when will the Organic Land Producer Inspection be performed? (b) (4)				

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Regulatory Division

Revised 8/27/2010

TDA License No. (b) (4) Inspector ID No. 7575 Inspection Date 6-6-2011

SECTION C (CONTINUED)	
<b>FACILITY AND LIVESTOCK INFORMATION (CONTINUED)</b>	
Complete the following sections as they apply to the operation.	
<b>MILK PRODUCTION</b> (b) NA (Skip to Meat Production)	
6) Is milk inspection documentation provided under Section C Questions 5a-5e of the ROR-603 accurate?	(b) Yes (b) No <sup>1</sup>
<sup>1</sup> If No, possible noncompliance. If the materials listed are incorrect and/or not listed in the ROR-603, list them below and attach all product labels and ingredient listings if available:	
Brand Name	Manufacturer
(b) (4)	
<b>MEAT PRODUCTION</b> (b) NA (Skip to Egg Production)	
7) Are animals being slaughtered and processed on farm?	( ) Yes <sup>2</sup> ( ) No
<sup>2</sup> If Yes, provide name of Certifier and Processor Certificate #:	
(b) (4)	
8) Is the loading and transportation information under Section C Questions 6b-6j of the ROR-603 accurate?	( ) Yes ( ) No <sup>3</sup>
<sup>3</sup> If No, possible noncompliance. (b) (4)	
<b>EGG PRODUCTION</b> (b) NA (Skip to Fiber Production)	
9) Is the information regarding the collection, washing, packaging, and storage of eggs under Section C Questions 7a-7h of the ROR-603 accurate?	(b) Yes (b) No <sup>4</sup>
<sup>4</sup> If No, area(s) of concern.	
10) Does the applicant/licensee have a Texas egg license number?	( ) Yes <sup>5</sup> (b) No
<sup>5</sup> If Yes, provide the Texas egg license number: (b) (4)	
<sup>5</sup> If Yes, provide the Texas egg license expiration date: Enter as MM/DD/YYYY (b) (4)	
11) Are eggs being sold directly to consumer?	(b) Yes (b) No
12) Are eggs being sold to a retail market?	( ) Yes ( ) No
<b>FIBER PRODUCTION</b> (b) A	
13) Is the information provided under Section C Questions 8a-8b of the ROR-603 accurate?	(b) Yes (b) No <sup>6</sup>
<sup>6</sup> If No, area(s) of concern.	
14) Is any organic fiber processing performed on farm?	(b) Yes <sup>7</sup> (b) No
<sup>7</sup> If Yes, provide name of Certifier and Processor Certificate #: (b) (4)	
(b) In compliance at time of inspection (b) Area(s) of concern* (b) Possible Noncompliance*	
*Please clarify under Section J and/or Section K of this report.	

TDA License No. (b) (4) Inspector ID No. 7575 Inspection Date 6-6-2011

ORIGIN OF LIVESTOCK		
SECTION D	15) Is the information regarding transitioning livestock to organic production provided in the ROR-603 accurate?	(b) Yes (b) No <sup>1</sup>
	16) Are replacement animals:	(b) (b)
	Raised on farm through natural breeding?	(4) Yes (4) No
	Raised on farm through an artificial breeding system?	Yes No
	Purchased from an organic source?	Yes No
	Purchased from a non-organic source?	Yes No
	*Documentation must be on file and available for inspection to confirm the status and history of each purchased animal.	
	17) Are dairy and breeder stock under organic management from the last third of gestation?	(b) Yes (b) No <sup>1</sup> (b) NA
	18) Are dairy animals under continuous organic management for at least one year prior to the production of milk or milk products that are to be sold, labeled, or represented as organic?	(4) Yes (4) No <sup>1</sup> (4) NA
	19) Are poultry under continuous organic management beginning no later than the second day of life?	Yes No <sup>1</sup> NA
20) Is the animal identification system listed in the ROR-603 accurate?	Yes (b) No <sup>1</sup>	
<sup>1</sup> If No, possible noncompliance.		
(b) In compliance at time of inspection ( ) Area(s) of concern* ( ) Possible Noncompliance*		
*Please clarify under Section J and/or Section K of this report.		

LIVESTOCK FEED					
SECTION E	21) Are all the feed rations for each of the individual production groups and for each season listed correctly in the ROR-603?				(b) Yes (b) No <sup>1</sup>
	<sup>1</sup> If No, possible noncompliance. List incorrect and/or feed rations not listed in the ROR-603 below:				
	Production Group:		Ration ID:	Months in which the ration is used:	
	(b) (4)				
	Ingredient:	(b) (4)	Quantity:	(b) (4)	(b) Grown or (b) Purchased <sup>2</sup>
	Ingredient:	(b) (4)	Quantity:	(b) (4)	(b) Grown or (b) Purchased <sup>2</sup>
	Ingredient:	(b) (4)	Quantity:	(b) (4)	(b) Grown or (b) Purchased <sup>2</sup>
	Ingredient:	(b) (4)	Quantity:	(b) (4)	(b) Grown or (b) Purchased <sup>2</sup>
	Ingredient:	(b) (4)	Quantity:	(b) (4)	(b) Grown or (b) Purchased <sup>2</sup>
	Ingredient:	(b) (4)	Quantity:	(b) (4)	(b) Grown or (b) Purchased <sup>2</sup>
	Production Group:		Ration ID:	Months in which the ration is used:	
	(b) (4)				
	Ingredient:	(b) (4)	Quantity:	(b) (4)	(b) Grown or (b) Purchased <sup>2</sup>
	Ingredient:	(b) (4)	Quantity:	(b) (4)	(b) Grown or (b) Purchased <sup>2</sup>
	Ingredient:	(b) (4)	Quantity:	(b) (4)	(b) Grown or (b) Purchased <sup>2</sup>
Ingredient:	(b) (4)	Quantity:	(b) (4)	(b) Grown or (b) Purchased <sup>2</sup>	
Ingredient:	(b) (4)	Quantity:	(b) (4)	(b) Grown or (b) Purchased <sup>2</sup>	

TDA License No. (b) (4)

Inspector ID No. 2575

Inspection Date 6-6-2011

LIVESTOCK FEED (CONTINUED)			
Production Group:	Ration ID:	Months in which the ration is used:	
(b) (4)			
Ingredient: (b) (4)	Quantity: (b) (4)	( ) Grown or	(b) Purchased <sup>2</sup>
Ingredient: (b) (4)	Quantity: (b) (4)	( ) Grown or	( ) Purchased <sup>2</sup>
Ingredient: (b) (4)	Quantity: (b) (4)	( ) Grown or	( ) Purchased <sup>2</sup>
Ingredient: (b) (4)	Quantity: (b) (4)	( ) Grown or	(4) Purchased <sup>2</sup>
Ingredient: (b) (4)	Quantity: (b) (4)	( ) Grown or	( ) Purchased <sup>2</sup>
Ingredient: (b) (4)	Quantity: (b) (4)	( ) Grown or	( ) Purchased <sup>2</sup>
<sup>2</sup> Is the feed source information of all purchased feed provided in the ROR-603 and the above table (if applicable) accurate? (b) Yes (b) No <sup>3</sup>			
<sup>3</sup> If No, possible noncompliance. If any purchased feed is incorrect and/or not listed in the ROR-603, list them below and attach all feed labels and ingredient listings if available:			
Purchased Feed	Supplier	Supplier Certifier	Delivered <sup>4</sup>
(b) (4)			(b) Yes <sup>4</sup> (b) No
(b) (4)			( ) Yes <sup>4</sup> ( ) No
(b) (4)			(4) Yes <sup>4</sup> ( ) No
(b) (4)			( ) Yes <sup>4</sup> ( ) No
<sup>4</sup> Are Clean Truck Affidavits on file if delivered as bulk shipments? (b) Yes (b) No <sup>5</sup> (b) NA			
22) Is feed stored in a manner that prevents contamination from rodents/other animals, spoilage by water/wind/erosion, spoilage by bacteria/organisms? ( ) Yes (b) No <sup>5</sup>			
<sup>5</sup> If No, possible noncompliance. (b) (4)			
23) Is any livestock feed processed on farm? ( ) Yes <sup>6</sup> (b) No			
<sup>6</sup> If Yes, is the information provided in Section E Question 10e of the ROR-603 accurate? (b) Yes ( ) No <sup>7</sup>			
<sup>7</sup> If No, possible noncompliance. List all incorrect and/or on farm feed processing (roasting, grinding, etc.) not listed in the ROR-603 and the equipment used in the process:			
Processing Type	Equipment		
(b) (4)			
24) If processing equipment is used for non-organic products, is the equipment cleaned to prevent cross-contamination? (b) Yes ( ) No <sup>8</sup> (b) NA			
<sup>8</sup> If No, possible noncompliance. (b) (4)			

SECTION E (CONTINUED)

TDA License No. (b) (4) Inspector ID No. 7575 Inspection Date 6-6-2011

LIVESTOCK FEED (CONTINUED)			
25) Is any livestock feed processed off farm? <span style="float:right">(b) Yes<sup>9</sup> (b) No</span>			
<sup>9</sup> If Yes, is the information provided in Section E Question 10g of the ROR-603 accurate? <span style="float:right">(b) Yes (b) No<sup>10</sup></span>			
<sup>10</sup> If No, possible noncompliance. List incorrect and/or off farm feed processing not listed in the ROR-603 below:			
Feed Processed	Type of Processing	Name of Company	Certifier of the Processing Company
(b) (4)			
26) Are feed supplements fed to livestock? <span style="float:right">(b) Yes<sup>11</sup> (b) No</span>			
<sup>11</sup> If Yes, is the information under Section E Question 11a of the ROR-603 accurate? <span style="float:right">(b) Yes (b) No<sup>12</sup></span>			
<sup>12</sup> If No, possible noncompliance. If any feed supplement listed is incorrect and/or not listed in the ROR-603, list them below and attach all labels and ingredient information if available:			
Brand Name	Manufacturer	Delivery Method	Frequency Fed
(b) (4)			
27) Is the information under Section E Question 11b of the ROR-603 accurate? <span style="float:right">(b) Yes (b) No<sup>13</sup></span>			
<sup>13</sup> If No, area(s) of concern. List the incorrect and/or water source information not listed in the ROR-603 below:			
Source	Livestock Groups Available To		
(b) (4)			
28) Is water tested? <span style="float:right">(b) Yes<sup>14</sup> (b) No</span>			
<sup>14</sup> If Yes, provide the date of the most recent water test: Enter as MM/DD/YYYY <span style="float:right">(b) (4)</span>			
29) Are materials used to clean watering sources? <span style="float:right">(b) Yes<sup>15</sup> (b) No</span>			
<sup>15</sup> If Yes, is the information under Section E Question 11e of the ROR-603 accurate? <span style="float:right">(b) Yes (b) No<sup>16</sup></span>			
<sup>16</sup> If No, possible noncompliance. If any materials listed are incorrect and/or not listed in the ROR-603, list them below and attach all labels and ingredient listings if available:			
Brand Name	Manufacturer		
(b) (4)			
(b) In compliance at time of inspection (b) Area(s) of concern* (b) Possible Noncompliance*			
*Please clarify under Section J and/or Section K of this report.			

SECTION E (CONTINUED)

TDA License No. (b) (4) Inspector ID No. 7575 Inspection Date 6-6-2011

HEALTH MANAGEMENT			
30) Is the information regarding livestock breeds under Section F Question 13a of the ROR-603 accurate?		(b) es	(b) No <sup>1</sup>
<sup>1</sup> If No, area(s) of concern. List the incorrect and/or breed information not listed in the ROR-603 below:			
Livestock Species	Breed(s)		
(b) (4)			
31) Are vaccines used in the health management program?		(b) es <sup>2</sup>	(b) No
<sup>2</sup> If Yes, is the information under Section F Question 14 of the ROR-603 accurate?		(b) Yes	(b) No <sup>3</sup>
<sup>3</sup> If No, possible noncompliance. If any vaccines listed are incorrect and/or not listed in the ROR-603, list them below and attach all labels and ingredient listings if available:			
Brand Name	Manufacturer	Age/When Given	How Administered
(b) (4)			
32) Is the information under Section F Question 15 of the ROR-603 accurate?		(b) Yes	(b) No <sup>4</sup>
<sup>4</sup> If No, possible noncompliance. If any materials listed are incorrect and/or not listed in the ROR-603, list them below and attach all labels and ingredient listings if available:			
Brand Name	Manufacturer		
(b) (4)			
33) How is the health of animals evaluated (check all that apply):			
(b)	Body condition scoring		
(b)	Physical characteristics		
(b)	Production		
4)	Visual assessment		
	Behavior		
	Testing (specify): (b) (4)		

SECTION F

TDA License No. **(b) (4)** Inspector ID No. 7575 Inspection Date 6-6-2011

HEALTH MANAGEMENT (CONTINUED)	
34) Are all products listed under Section F Question 17 of the ROR-603 accurate? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>5</sup>	
<sup>5</sup> If No, possible noncompliance. If materials listed are incorrect and/or not listed in the ROR-603, list them below and attach all labels and ingredient listings if available:	
Brand Name	Manufacturer
<b>(b) (4)</b>	
35) Is the information under Section F Questions 19-22 of the ROR-603 accurate? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>6</sup>	
<sup>6</sup> If No, area(s) of concern.	
36) Is the information under Section F Questions 23 of the ROR-603 accurate? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>7</sup>	
37) Are all pain management agents used listed in the ROR-603 accurate? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>7</sup>	
<sup>7</sup> If No, possible noncompliance. List the incorrect and/or materials not listed in the ROR-603 below and attach all labels and ingredient listings if available:	
Brand Name	Manufacturer
<b>(b) (4)</b>	
38) Is the information under Section F Questions 24a-26 of the ROR-603 accurate? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>8</sup>	
<sup>8</sup> If No, possible noncompliance.	
<input checked="" type="checkbox"/> In compliance at time of inspection <input checked="" type="checkbox"/> Area(s) of concern* <input checked="" type="checkbox"/> Possible Noncompliance*	
*Please clarify under Section J and/or Section K of this report.	

LIVESTOCK LIVING CONDITIONS	
39) Is the information under Section G Questions 27-30 of the ROR-603 accurate? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>1</sup>	
<sup>1</sup> If No, possible noncompliance.	
40) Is the information under Section G Questions 31a-31b of the ROR-603 accurate? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>2</sup>	
<sup>2</sup> If No, area(s) of concern. List the incorrect and/or bedding materials not listed in the ROR-603 below:	
Bedding Type	Source of Bedding
<b>(b) (4)</b>	

TDA License No. (b) (4) Inspector ID No. 7575 Inspection Date 6-6-2011

LIVESTOCK LIVING CONDITIONS (CONTINUED)					
SECTION G (CONTINUED)	41) What methods are used for pest management (check all that apply)? <input type="checkbox"/> Mechanical traps <input checked="" type="checkbox"/> Predators <input checked="" type="checkbox"/> Cleanliness <input checked="" type="checkbox"/> Materials <sup>3</sup> (b) (4) <input type="checkbox"/> Other (specify): (b) (4)				
	<sup>3</sup> Are all materials listed under Section G Question 32 of the ROR-603 accurate? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <sup>4</sup>				
	<sup>4</sup> If No, possible noncompliance. List the incorrect and/or materials not listed in the ROR-603 below and attach all labels and ingredient listings if available:				
	<table border="1"> <thead> <tr> <th>Brand Name</th> <th>Manufacturer</th> </tr> </thead> <tbody> <tr> <td>(b) (4)</td> <td></td> </tr> </tbody> </table>	Brand Name	Manufacturer	(b) (4)	
	Brand Name	Manufacturer			
	(b) (4)				
	42) What methods are used for predator control (check all that apply)? <input type="checkbox"/> Fencing <input checked="" type="checkbox"/> Netting <input checked="" type="checkbox"/> Guard animals <input type="checkbox"/> Hazing tactics <input type="checkbox"/> Other (specify): (b) (4)				
	43) Is manure management monitored by a County, State, Federal Agency or another organization? <input checked="" type="checkbox"/> Yes <sup>5</sup> <input type="checkbox"/> No				
	<sup>5</sup> If Yes, list the agency or organization: (b) (4)				
	44) Is the information under Section G Questions 35a-39 of the ROR-603 accurate? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>6</sup>				
<sup>6</sup> If No, possible noncompliance.					
(b) In compliance at time of inspection (b) Area(s) of concern* (b) Possible Noncompliance*					
*Please clarify under Section J and/or Section K of this report.					

PASTURE PRACTICE STANDARD	
SECTION H	45) Is the information under Section H Questions 40-47a of the ROR-603 accurate? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>1</sup>
	46) Are the Dry Matter Intake (DMI) Worksheets or an equivalent record keeping system on file? (Ruminant livestock only) <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>1</sup> <input checked="" type="checkbox"/> NA
	47) Is the pasture(s) of quality and quantity to allow all ruminant livestock under organic management to meet the DMI requirements of the National Organic Program (NOP) Regulations? (Ruminant livestock only) <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>1</sup> <input checked="" type="checkbox"/> NA
	<sup>1</sup> If No, possible noncompliance.
	(b) In compliance at time of inspection (b) Area(s) of concern* (b) Possible Noncompliance*
*Please clarify under Section J and/or Section K of this report.	



TDA License No. (b) (4) Inspector ID No. 7575 Inspection Date 6-6-2011

RECORD KEEPING					
48) Select all records maintained and if they are complete and current:		Records Maintained?		Complete & Current? <sup>1</sup>	
SECTION I	Documentation of all purchased animals <sup>2</sup>	(b) Yes	(b) No	(b) Yes	(b) No <sup>1</sup>
	Health management and treatment records <sup>2</sup>	(b) Yes	(b) No	(b) Yes	(b) No <sup>1</sup>
	Purchased feed and supplements <sup>2</sup>	(4) Yes	(4) No	(4) Yes	(4) No <sup>1</sup>
	Animal Identification <sup>2</sup>	Yes	No	Yes	No <sup>1</sup>
	Sales Records <sup>2</sup>	Yes	No	Yes	No <sup>1</sup>
	Production records <sup>2</sup>	Yes	No	Yes	No <sup>1</sup>
	Complaint Log <sup>2</sup>	Yes	No	Yes	No <sup>1</sup>
	Applied material and ingredient information <sup>2</sup>	Yes	No	Yes	No <sup>1</sup>
	Rations fed to livestock <sup>2</sup>	Yes	No	Yes	No <sup>1</sup>
	Breeding and birthing/hatching records	Yes	No	Yes	No
	Feed inventory and storage records	Yes	No	Yes	No
	Shipping/transportation records	Yes	No	Yes	No
Other (specify):	Yes	No	Yes	No	
49) Does record keeping system adequately provide for auditing the organic production?		(b) Yes		(b) No <sup>3</sup>	
<p><sup>1</sup>Verify that the records were found to be complete and current at time of inspection. <i>If No, possible noncompliance.</i></p> <p><sup>2</sup>This type of record keeping is required to demonstrate compliance. <i>If these records are not in place or if the information is insufficient to communicate the applicable information, then this is a possible noncompliance.</i></p> <p><sup>3</sup> <i>If No, possible noncompliance.</i></p> <p><i>*Note, all records must be maintained for 5 years.</i></p>					
(b) In compliance at time of inspection		(b) Area(s) of concern*		(b) Possible Noncompliance*	
*Please clarify under Section J and/or Section K of this report.					

TDA License No. (b) (4) Inspector ID No. 7575 Inspection Date 6-6-2011

SECTION J	<b>SUMMARY FOR PRODUCER</b>
	50) Person present at time of inspection: BRIAN BOEHNING
	<input checked="" type="checkbox"/> These findings and all comments were discussed with the inspection observer during the exit interview.
	<b>COMMENTS</b>
	(b) (4)

SECTION K	<b>SUMMARY FOR ORGANIC CERTIFICATION PROGRAM STAFF</b>
	<b>COMMENTS</b>
	(b) (4)
	<b>Checklist</b>
	<p>Please use this checklist to ensure you are sending and/or completing all of the necessary information and documents.</p> <p><input checked="" type="checkbox"/> Organic Livestock Producer Inspection Report</p> <p><input checked="" type="checkbox"/> Organic Inspection Findings</p> <p><input type="checkbox"/> Additional Attachments (specify):</p>

# TEXAS DEPARTMENT OF AGRICULTURE

TODD STAPLES  
COMMISSIONER

September 6, 2011

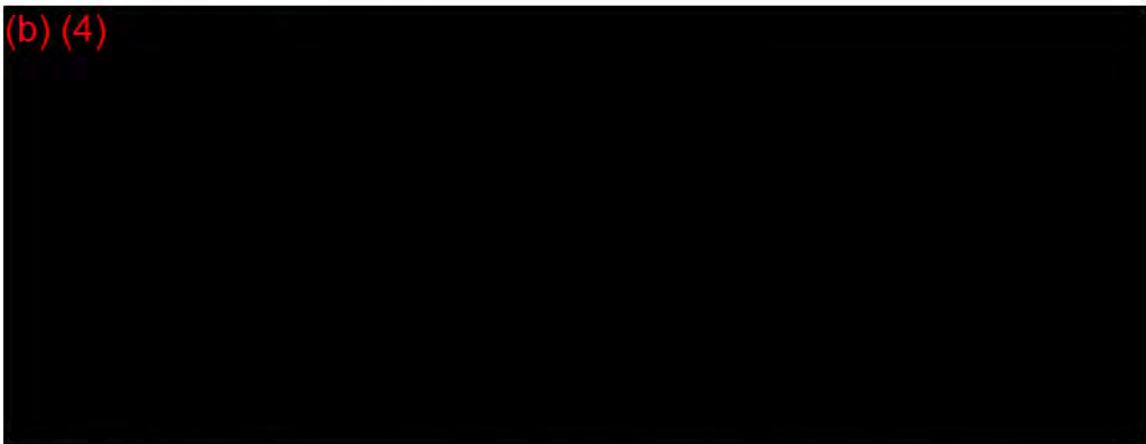
Mr. Brian Boehning  
690 CR 45  
Earth, TX 79031

Boehning Dairy LLC  
TDA Client No: (b) ( )  
Land Production Certificate No: (b) ( )  
Livestock Production Certificate No: (b) ( )

Hilltop Dairy LLC  
TDA Client No: (h) (4)  
Certificate No: (b) (4)

Dear Mr. Boehning:

(b) (4)



If you have any questions or concerns about the contents of this letter or your organic certification, please feel free to contact me directly by calling (b) (6) or sending an email to (b) (6) @TexasAgriculture.gov.

Sincerely yours

(b) (6)

Mary Ellen Holliman  
Coordinator for Organic Certification

MEH/meh



P.O. Box 12847 Austin, Texas 78711 (512) 463-7476 Fax: (888) 223-8861

[www.TexasAgriculture.gov](http://www.TexasAgriculture.gov)

AMS03488



P.O. Box 12847 Austin, Texas 78711 Voice (800) 835-5832 (512) 463-7476  
Hearing impaired: (800) 735-2988 www.TexasAgriculture.gov

**Texas Department of Agriculture**  
*Organic Inspection Findings*

ROR-660

Todd Staples, Commissioner

SECTION A		VERIFICATION INFORMATION	
SECTION A	Client Name BRIAN BOEHNING	TDA Client No. (b) (4)	
	Facility Name BOEHNING DAIRY FARM (LIVESTOCK)	TDA Account No. (b) (4)	

SECTION B		INSPECTION INFORMATION	
SECTION B	Inspection Type (b) (4)	Inspection ID No. 07575110811084340	
	Inspector ID 07575	Inspector Name (b) (6)	Region <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
	Date 8/11/2011 <small>Enter as MM/DD/YYYY</small>	Time 12:30 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	County Code 279
			County LAMB

SECTION C		FINDINGS	
SECTION C	Certification Type:	(b) (4)	
		(b) (4)	

TDA License No. **(b) (4)**

Inspector ID No. 07575

Inspection Date 8/11/2011

**SUMMARY FOR PRODUCER**

Person present at time of inspection: **Brian Boehning**

These findings and all comments were discussed with the inspection observer during the exit interview.

**COMMENTS**

**(b) (4)**

SECTION D



P.O. Box 12847 Austin, Texas 78711 Voice (800) 835-5832 (512) 463-7476  
 Hearing impaired: (800) 735-2988 www.TexasAgriculture.gov

**Texas Department of Agriculture**  
**Organic Livestock Producer Inspection Report**

ROR-651

Todd Staples, Commissioner

SECTION A		VERIFICATION INFORMATION	
SECTION A	Client Name BRIAN BOEHNING	TDA Client No. (b) (4)	
	Facility Name BOEHNING DAIRY FARM (LIVESTOCK)	TDA Account No. (b) (4)	
SECTION B		INSPECTION INFORMATION	
SECTION B	Inspection Type (b) (4)	Inspection ID No. 07575110811084340	
	Inspector ID 07575	Inspector Name (b) (6)	Region <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
	Date 8/11/2011 <small>Enter as MM/DD/YYYY</small>	Time 11:30 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	County Code 279
			County LAMB
SECTION C		FACILITY AND LIVESTOCK INFORMATION	
SECTION C	1) Is land used for producing livestock certified?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <sup>1</sup>
	TDA Acct.#: (b) (4) Other Certifier: (b) (4) Cert. #:		
	2) Is the information regarding pastures and facilities under Section C of the ROR-603 accurate?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <sup>2</sup>
	3) Is the livestock information under Section C of the ROR-603 accurate?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <sup>2</sup>
	<sup>2</sup> If No, the producer must submit changes to the TDA, Organic Certification Program.		
	4) Is any aspect of the livestock operation performed at another location?	<input checked="" type="checkbox"/> Yes <sup>3</sup>	<input type="checkbox"/> No
<sup>3</sup> If Yes, are the addresses provided in the ROR-603 accurate?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <sup>1</sup>	
<sup>1</sup> If No, possible noncompliance.			
5) Have all pastures been inspected as part of the Organic Land Producer Inspection?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <sup>4</sup>	
<sup>4</sup> If No, when will the Organic Land Producer Inspection be performed?	(b) (4)		

TDA License No. (b) (4)

Inspector ID No. 07575

Inspection Date 8/11/2011

**FACILITY AND LIVESTOCK INFORMATION (CONTINUED)**

Complete the following sections as they apply to the operation.

**MILK PRODUCTION (b) NA (Skip to Meat Production)**

6) Is milk inspection documentation provided under Section C Questions 5a-5e of the ROR-603 accurate? (b) Yes (b) No<sup>1</sup>

<sup>1</sup> If No, possible noncompliance. If the materials listed are incorrect and/or not listed in the ROR-603, list them below and attach all product labels and ingredient listings if available:

Brand Name Manufacturer

(b) (4)

**MEAT PRODUCTION (b) NA (Skip to Egg Production)**

7) Are animals being slaughtered and processed on farm? (b) Yes<sup>2</sup> (b) No

<sup>2</sup> If Yes, provide name of Certifier and Processor Certificate #:

(b) (4)

8) Is the loading and transportation information under Section C Questions 6b-6j of the ROR-603 accurate? (b) Yes (b) No<sup>3</sup>

<sup>3</sup> If No, possible noncompliance.

**EGG PRODUCTION (b) NA (Skip to Fiber Production)**

9) Is the information regarding the collection, washing, packaging, and storage of eggs under Section C Questions 7a-7h of the ROR-603 accurate? (b) Yes (b) No<sup>4</sup>

<sup>4</sup> If No, area(s) of concern.

10) Does the applicant/licensee have a Texas egg license number? (b) Yes<sup>5</sup> (b) No

<sup>5</sup> If Yes, provide the Texas egg license number:

(b) (4)

<sup>5</sup> If Yes, provide the Texas egg license expiration date: Enter as MM/DD/YYYY (b) (4)

11) Are eggs being sold directly to consumer? (b) Yes (b) No

12) Are eggs being sold to a retail market? (b) Yes (b) No

**FIBER PRODUCTION (b) NA**

13) Is the information provided under Section C Questions 8a-8b of the ROR-603 accurate? (b) Yes (b) No<sup>6</sup>

<sup>6</sup> If No, area(s) of concern.

14) Is any organic fiber processing performed on farm? (b) Yes<sup>7</sup> (b) No

<sup>7</sup> If Yes, provide name of Certifier and Processor Certificate #:

(b) (4)

(b) In compliance at time of inspection (b) Area(s) of concern\* (b) Possible Noncompliance\*

\*Please clarify under Section J and/or Section K of this report.

SECTION C (CONTINUED)





TDA License No. (b) ( ) Inspector ID No. 07575 Inspection Date 8/11/2011

LIVESTOCK FEED (CONTINUED)			
Production Group:	Ration ID:	Months in which the ration is used:	
(b) (4)			
Ingredient: (b) (4)	Quantity: (b) (4)	Grown or	(b) Purchased <sup>2</sup>
Ingredient: (b) (4)	Quantity: (b) (4)	Grown or	) Purchased <sup>2</sup>
Ingredient: (b) (4)	Quantity: (b) (4)	Grown or	( Purchased <sup>2</sup>
Ingredient: (b) (4)	Quantity: (b) (4)	Grown or	( Purchased <sup>2</sup>
Ingredient: (b) (4)	Quantity: (b) (4)	Grown or	4) Purchased <sup>2</sup>
Ingredient: (b) (4)	Quantity: (b) (4)	Grown or	Purchased <sup>2</sup>
<sup>2</sup> Is the feed source information of all purchased feed provided in the ROR-603 and the above table (if applicable) accurate? (b) Yes (b) No <sup>3</sup>			
<sup>3</sup> If No, possible noncompliance. If any purchased feed is incorrect and/or not listed in the ROR-603, list them below and attach all feed labels and ingredient listings if available:			
Purchased Feed	Supplier	Supplier Certifier	Delivered <sup>4</sup>
(b) (4)			Yes <sup>4</sup> (b) No
(b) (4)			) Yes <sup>4</sup> ( ) No
(b) (4)			Yes <sup>4</sup> 4) No
(b) (4)			Yes <sup>4</sup> No
<sup>4</sup> Are Clean Truck Affidavits on file if delivered as bulk shipments? (b) Yes (b) No <sup>5</sup> (b) NA			
22) Is feed stored in a manner that prevents contamination from rodents/other animals, spoilage by water/wind/erosion, spoilage by bacteria/organisms? ( ) Yes ( ) No <sup>5</sup>			
<sup>5</sup> If No, possible noncompliance.			
23) Is any livestock feed processed on farm? (b) Yes <sup>6</sup> (b) No			
<sup>6</sup> If Yes, is the information provided in Section E Question 10e of the ROR-603 accurate? ( ) Yes ( ) No <sup>7</sup>			
<sup>7</sup> If No, possible noncompliance. List all incorrect and/or on farm feed processing (roasting, grinding, etc.) not listed in the ROR-603 and the equipment used in the process:			
Processing Type	Equipment		
(b) (4)			
24) If processing equipment is used for non-organic products, is the equipment cleaned to prevent cross-contamination? (b) Yes (b) No <sup>8</sup> (b) NA			
<sup>8</sup> If No, possible noncompliance.			

SECTION E (CONTINUED)

TDA License No. **(b) (4)**

Inspector ID No. 07575

Inspection Date 8/11/2011

<b>LIVESTOCK FEED (CONTINUED)</b>			
25) Is any livestock feed processed off farm? <span style="float: right;"><input checked="" type="checkbox"/> Yes<sup>9</sup> <input checked="" type="checkbox"/> No</span>			
<sup>9</sup> If Yes, is the information provided in Section E Question 10g of the ROR-603 accurate? <span style="float: right;"><input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No<sup>10</sup></span>			
<sup>10</sup> If No, possible noncompliance. List incorrect and/or off farm feed processing not listed in the ROR-603 below:			
Feed Processed	Type of Processing	Name of Company	Certifier of the Processing Company
(b) (4)			
26) Are feed supplements fed to livestock? <span style="float: right;"><input checked="" type="checkbox"/> Yes<sup>11</sup> <input checked="" type="checkbox"/> No</span>			
<sup>11</sup> If Yes, is the information under Section E Question 11a of the ROR-603 accurate? <span style="float: right;"><input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No<sup>12</sup></span>			
<sup>12</sup> If No, possible noncompliance. If any feed supplement listed is incorrect and/or not listed in the ROR-603, list them below and attach all labels and ingredient information if available:			
Brand Name	Manufacturer	Delivery Method	Frequency Fed
(b) (4)			
27) Is the information under Section E Question 11b of the ROR-603 accurate? <span style="float: right;"><input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No<sup>13</sup></span>			
<sup>13</sup> If No, area(s) of concern. List the incorrect and/or water source information not listed in the ROR-603 below:			
Source	Livestock Groups Available To		
(b) (4)			
28) Is water tested? <span style="float: right;"><input checked="" type="checkbox"/> Yes<sup>14</sup> <input checked="" type="checkbox"/> No</span>			
<sup>14</sup> If Yes, provide the date of the most recent water test: Enter as MM/DD/YYYY <span style="float: right;"><input checked="" type="checkbox"/> (b) (4)</span>			
29) Are materials used to clean watering sources? <span style="float: right;"><input checked="" type="checkbox"/> Yes<sup>15</sup> <input checked="" type="checkbox"/> No</span>			
<sup>15</sup> If Yes, is the information under Section E Question 11e of the ROR-603 accurate? <span style="float: right;"><input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No<sup>16</sup></span>			
<sup>16</sup> If No, possible noncompliance. If any materials listed are incorrect and/or not listed in the ROR-603, list them below and attach all labels and ingredient listings if available:			
Brand Name	Manufacturer		
(b) (4)			
<input checked="" type="checkbox"/> In compliance at time of inspection <input checked="" type="checkbox"/> Area(s) of concern* <input checked="" type="checkbox"/> Possible Noncompliance*			
*Please clarify under Section J and/or Section K of this report.			

SECTION E (CONTINUED)

TDA License No. **(b) (4)**

Inspector ID No. 07575

Inspection Date 8/11/2011

**HEALTH MANAGEMENT**

30) Is the information regarding livestock breeds under Section F Question 13a of the ROR-603 accurate?  Yes  No<sup>1</sup>

<sup>1</sup> If No, area(s) of concern. List the incorrect and/or breed information not listed in the ROR-603 below:

Livestock Species	Breed(s)
<b>(b) (4)</b>	<b>(b) (4)</b>

31) Are vaccines used in the health management program?  Yes<sup>2</sup>  No<sup>3</sup>

<sup>2</sup> If Yes, is the information under Section F Question 14 of the ROR-603 accurate?  Yes  No<sup>3</sup>

<sup>3</sup> If No, possible noncompliance. If any vaccines listed are incorrect and/or not listed in the ROR-603, list them below and attach all labels and ingredient listings if available:

Brand Name	Manufacturer	Age/When Given	How Administered
<b>(b) (4)</b>	<b>(b) (4)</b>	<b>(b) (4)</b>	<b>(b) (4)</b>

SECTION F

32) Is the information under Section F Question 15 of the ROR-603 accurate?  Yes  No<sup>4</sup>

<sup>4</sup> If No, possible noncompliance. If any materials listed are incorrect and/or not listed in the ROR-603, list them below and attach all labels and ingredient listings if available:

Brand Name	Manufacturer
<b>(b) (4)</b>	<b>(b) (4)</b>

33) How is the health of animals evaluated (check all that apply):

- Body condition scoring
- Physical characteristics
- Production
- Visual assessment
- Behavior
- Testing (specify): **(b) (4)**

TDA License No. (b) (4)

Inspector ID No. 07575

Inspection Date 8/11/2011

**HEALTH MANAGEMENT (CONTINUED)**

34) Are all products listed under Section F Question 17 of the ROR-603 accurate?  Yes  No<sup>5</sup>

<sup>5</sup> If No, possible noncompliance. If materials listed are incorrect and/or not listed in the ROR-603, list them below and attach all labels and ingredient listings if available:

Brand Name	Manufacturer
(b) (4)	

SECTION F (CONTINUED)

35) Is the information under Section F Questions 19-22 of the ROR-603 accurate?  Yes  No<sup>6</sup>

<sup>6</sup> If No, area(s) of concern.

36) Is the information under Section F Questions 23 of the ROR-603 accurate?  Yes  No<sup>7</sup>

37) Are all pain management agents used listed in the ROR-603 accurate?  Yes  No<sup>7</sup>

<sup>7</sup> If No, possible noncompliance. List the incorrect and/or materials not listed in the ROR-603 below and attach all labels and ingredient listings if available:

Brand Name	Manufacturer
(b) (4)	

38) Is the information under Section F Questions 24a-26 of the ROR-603 accurate?  Yes  No<sup>8</sup>

<sup>8</sup> If No, possible noncompliance.

In compliance at time of inspection  Area(s) of concern\*  Possible Noncompliance\*

\*Please clarify under Section J and/or Section K of this report.

**LIVESTOCK LIVING CONDITIONS**

SECTION G

39) Is the information under Section G Questions 27-30 of the ROR-603 accurate?  Yes  No<sup>1</sup>

<sup>1</sup> If No, possible noncompliance.

40) Is the information under Section G Questions 31a-31b of the ROR-603 accurate?  Yes  No<sup>2</sup>

<sup>2</sup> If No, area(s) of concern. List the incorrect and/or bedding materials not listed in the ROR-603 below:

Bedding Type	Source of Bedding
(b) (4)	

TDA License No. **(b) (4)**

Inspector ID No. 07575

Inspection Date 8/11/2011

**LIVESTOCK LIVING CONDITIONS (CONTINUED)**

41) What methods are used for pest management (check all that apply)?

- (b) Mechanical traps
- ( ) Predators
- ( ) Cleanliness
- (4) Materials<sup>3</sup>
- Other (specify):

<sup>3</sup> Are all materials listed under Section G Question 32 of the ROR-603 accurate?  Yes  (b) No<sup>4</sup>

<sup>4</sup> If No, possible noncompliance. List the incorrect and/or materials not listed in the ROR-603 below and attach all labels and ingredient listings if available:

Brand Name	Manufacturer
(b) (4)	

SECTION G (CONTINUED)

42) What methods are used for predator control (check all that apply)?

- (b) Fencing
- ( ) Netting
- ( ) Guard animals
- ( ) Hazing tactics
- (4) Other (specify): (b) (4)

43) Is manure management monitored by a County, State, Federal Agency or another organization?  (b) Yes<sup>5</sup>  No

<sup>5</sup> If Yes, list the agency or organization: (b) (4)

44) Is the information under Section G Questions 35a-39 of the ROR-603 accurate?  (b) Yes  (b) No<sup>6</sup>

<sup>6</sup> If No, possible noncompliance.

(b) In compliance at time of inspection  Area(s) of concern\*  Possible Noncompliance\*

\*Please clarify under Section J and/or Section K of this report.

**PASTURE PRACTICE STANDARD**

45) Is the information under Section H Questions 40-47a of the ROR-603 accurate?  (b) Yes  (b) No<sup>1</sup>

46) Are the Dry Matter Intake (DMI) Worksheets or an equivalent record keeping system on file? (Ruminant livestock only)  (b) (4) Yes  (b) No<sup>1</sup>  (b) NA

47) Is the pasture(s) of quality and quantity to allow all ruminant livestock under organic management to meet the DMI requirements of the National Organic Program (NOP) Regulations? (Ruminant livestock only)  (b) (4) Yes  (b) No<sup>1</sup>  (b) NA

<sup>1</sup> If No, possible noncompliance.

(b) In compliance at time of inspection  (b) Area(s) of concern\*  (b) Possible Noncompliance\*

\*Please clarify under Section J and/or Section K of this report.

SECTION H

TDA License No. **(b) (4)**

Inspector ID No. 07575

Inspection Date 8/11/2011

<b>RECORD KEEPING</b>							
SECTION I	48) Select all records maintained and if they are complete and current:	Records Maintained?			Complete & Current? <sup>1</sup>		
	Documentation of all purchased animals <sup>2</sup>	<b>(b)</b> Yes	<b>(</b> No	<b>(b)</b> Yes	<b>(b)</b> No <sup>1</sup>		
	Health management and treatment records <sup>2</sup>	<b>)</b> Yes	<b>b</b> No	<b>)</b> Yes	<b>)</b> No <sup>1</sup>		
	Purchased feed and supplements <sup>2</sup>	<b>4)</b> Yes	<b>)</b> No	<b>(</b> Yes	<b>4)</b> No <sup>1</sup>		
	Animal Identification <sup>2</sup>	<b>(</b> Yes	<b>(</b> No	<b>4)</b> Yes	<b>(</b> No <sup>1</sup>		
	Sales Records <sup>2</sup>	<b>4)</b> Yes	<b>4)</b> No	<b>4)</b> Yes	<b>4)</b> No <sup>1</sup>		
	Production records <sup>2</sup>	<b>)</b> Yes	<b>)</b> No	<b>)</b> Yes	<b>)</b> No <sup>1</sup>		
	Complaint Log <sup>2</sup>	<b>)</b> Yes	<b>)</b> No	<b>)</b> Yes	<b>)</b> No <sup>1</sup>		
	Applied material and ingredient information <sup>2</sup>	<b>)</b> Yes	<b>)</b> No	<b>)</b> Yes	<b>)</b> No <sup>1</sup>		
	Rations fed to livestock <sup>2</sup>	<b>)</b> Yes	<b>)</b> No	<b>)</b> Yes	<b>)</b> No <sup>1</sup>		
	Breeding and birthing/hatching records	<b>)</b> Yes	<b>)</b> No	<b>)</b> Yes	<b>)</b> No		
	Feed inventory and storage records	<b>)</b> Yes	<b>)</b> No	<b>)</b> Yes	<b>)</b> No		
	Shipping/transportation records	<b>)</b> Yes	<b>)</b> No	<b>)</b> Yes	<b>)</b> No		
Other (specify): <b>(b) (4)</b>	<b>)</b> Yes	<b>)</b> No	<b>)</b> Yes	<b>)</b> No			
49) Does record keeping system adequately provide for auditing the organic production?		<b>(b)</b> Yes	<b>(b)</b> No <sup>3</sup>				
<sup>1</sup> Verify that the records were found to be complete and current at time of inspection. <i>If No, possible noncompliance.</i> <sup>2</sup> This type of record keeping is required to demonstrate compliance. <i>If these records are not in place or if the information is insufficient to communicate the applicable information, then this is a possible noncompliance.</i> <sup>3</sup> <i>If No, possible noncompliance.</i> *Note, all records must be maintained for 5 years.							
<b>(b) In compliance at time of inspection</b> <b>(b) Area(s) of concern*</b> <b>(b) Possible Noncompliance*</b>							
*Please clarify under Section J and/or Section K of this report.							

TDA License No. (b) (4) Inspector ID No. 07575 Inspection Date 8/11/2011

<b>SECTION J</b>	<b>SUMMARY FOR PRODUCER</b>
	50) Person present at time of inspection: Brian Boehning
	<input checked="" type="checkbox"/> These findings and all comments were discussed with the inspection observer during the exit interview.
	<b>COMMENTS</b>

(b) (4)

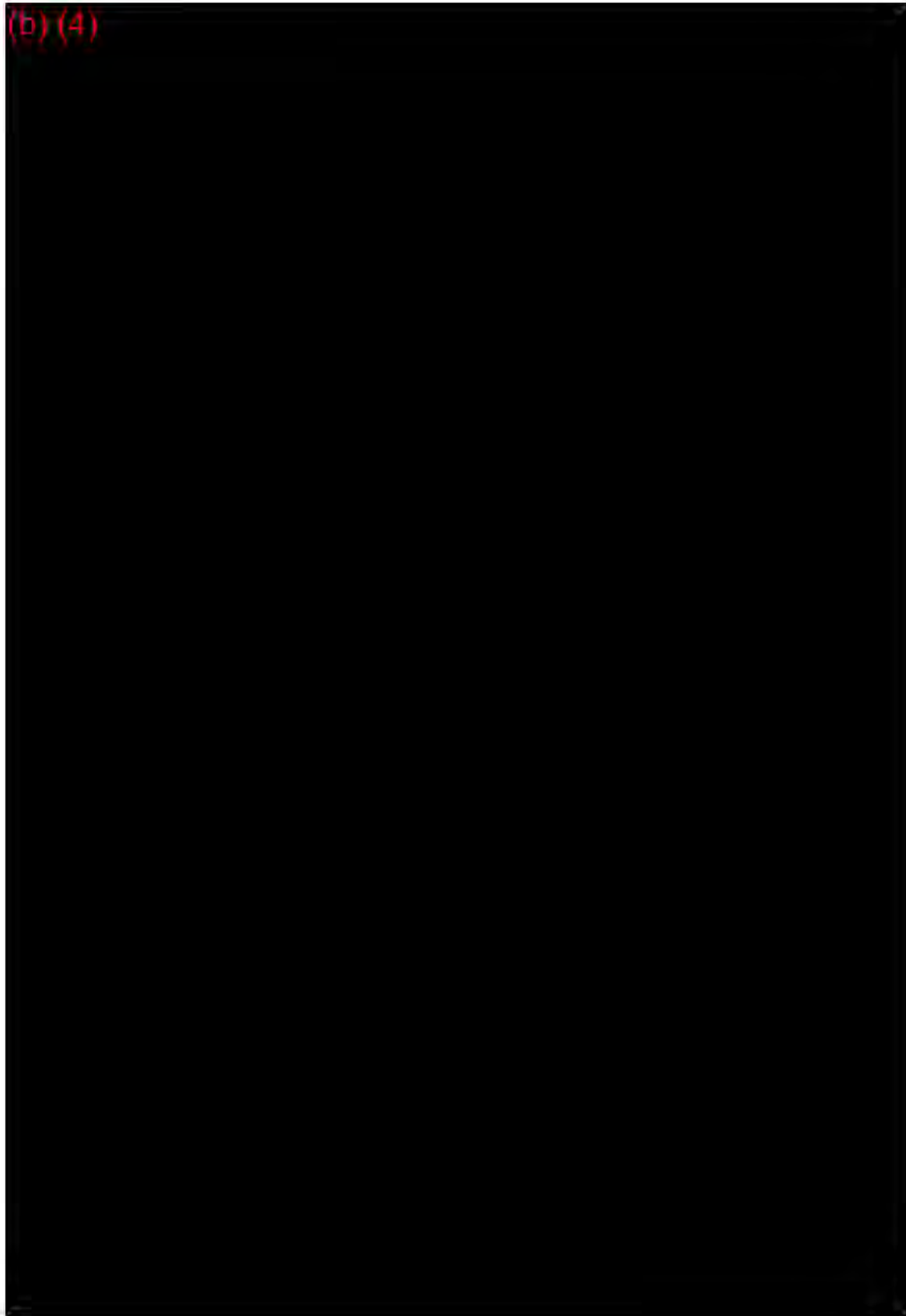
<b>SECTION K</b>	<b>SUMMARY FOR ORGANIC CERTIFICATION PROGRAM STAFF</b>
	<b>COMMENTS</b>
	(b) (4)
	<b>Checklist</b>

Please use this checklist to ensure you are sending and/or completing all of the necessary information and documents.

- (b) Organic Livestock Producer Inspection Report
- ( ) Organic Inspection Findings
- ( ) Additional Attachments (specify):

(b) (4)

(b) (4)





(b) (4)



RECEIVED JUL 28 2011

Entities:

Boehning Dairy

Hill Top Dairy

RECEIVED  
AUG 01 2011  
REGULATORY

(b) (4)

(b) (4)

## Friesenhahn, Martin - AMS

---

**From:** Mary Ellen Holliman <Mary.Holliman@TexasAgriculture.gov>  
**Sent:** Thursday, January 12, 2012 3:54 PM  
**To:** Friesenhahn, Martin - AMS  
**Cc:** Organic; Bob Tarrant; Nicky Carter  
**Subject:** RE: TDA NOP Reaccreditation Audit  
**Attachments:** TDA listing of operations as of 1.06.2012.xls

**Categories:** Yellow Category, Red Category

Mr. Friesenhahn:

The Texas Department of Agriculture requests that the on-site portion of the audit be conducted the week of May 14, 2012. Per your request, a listing of currently certified operations is attached to this email.

Sincerely yours,  
*Mary Ellen Holliman*  
Coordinator for Organic Certification Program  
Texas Department of Agriculture  
Office: (512) 463-7513  
Fax: (888) 215-5295  
[Organic@TexasAgriculture.gov](mailto:Organic@TexasAgriculture.gov)

---

**From:** Mary Ellen Holliman  
**Sent:** Tuesday, January 10, 2012 8:56 AM  
**To:** 'martin.friesenhahn@ams.usda.gov'  
**Cc:** Organic; Bob Tarrant; Nicky Carter  
**Subject:** RE: TDA NOP Reaccreditation Audit

Good morning Mr Friesenhahn:

The TDA Organic Program staff and the other TDA employees who will have direct involvement with the audit will be meeting this Thursday (1/12/2012) to determine the best option for conducting the audit. Following the conclusion of the meeting, I will respond with the date option we have chosen and a complete listing of certified operations as requested. Please note that due to the annual renewal update for land and livestock producers on 3/01/2012, the listing is subject to change.

Sincerely yours,  
*Mary Ellen Holliman*  
Coordinator for Organic Certification Program  
Texas Department of Agriculture  
Office: (512) 463-7513  
Fax: (888) 215-5295  
[Organic@TexasAgriculture.gov](mailto:Organic@TexasAgriculture.gov)

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**From:** Organic  
**Sent:** Thursday, January 05, 2012 1:41 PM  
**To:** Joe Benavides; Nicole Fiedler; Mary Ellen Holliman; Alexandra Hunt; Byron Norton  
**Subject:** FW: TDA NOP Reaccreditation Audit

-----  
**From:** Friesenhahn, Martin - AMS[SMTP:[MARTIN.FRIESENHAHN@AMS.USDA.GOV](mailto:MARTIN.FRIESENHAHN@AMS.USDA.GOV)]  
**Sent:** Thursday, January 05, 2012 1:39:59 PM  
**To:** Organic  
**Subject:** TDA NOP Reaccreditation Audit  
**Auto forwarded by a Rule**

Dear Ms. Mary Ellen Holliman,

I'm Martin Friesenhahn with the USDA, Grading and Verification (GV) Division. I have been assigned as the Lead Auditor to conduct the renewal assessment of the Texas Department of Agriculture Organic Certification Program in accordance with National Organic Program (NOP) Regulations (7 CFR Part 205).

A second auditor will be also be used during the assessment. This assessment is on-site and includes a review of the procedures, processes, and records in the office with interviews of certification personnel; and witness audits on certified operations for each scope of accreditation (crops, wild crops, etc...).

We would like to schedule your assessment for either the week beginning May 7, or May 14, 2012. Please let me know which of these 2 weeks would work best so that we can finalize the dates. After scheduling the audit date I will complete and submit the audit plan and estimate as the audit progresses.

Please provide a response to this request no later than January 13, 2012. If the Texas Department of Agriculture Organic Certification Program does not agree to the assessment, then the GV Division cannot proceed, and we will notify the NOP.

When you reply, please include a current list of NOP certified operations so we may begin the selection process for the witness audits.

*Thanks,*

*Marty*

Martin Friesenhahn  
Ag. Marketing Specialist, ASQ CQA  
USDA, AMS, LS, GV  
email: [martin.friesenhahn@ams.usda.gov](mailto:martin.friesenhahn@ams.usda.gov)  
Office: 972-222-2304  
Fax: 972-222-3173





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Grading and Verification Division  
13952 Denver West Parkway, Suite 350  
Lakewood, CO 80401

April 19, 2012

Dear: [Mary Ellen Holliman, Texas Department of Agriculture](#)

The Grading and Verification (GV) Division has received notification from the National Organic Program (NOP) to conduct a renewal assessment of the [Texas Department of Agriculture \(TDA\)](#) in accordance with the NOP Regulations (7 CFR Part 205). In order to proceed with the assessment, please provide notification confirming [TDA's](#) intent to continue with the renewal accreditation process. Notification must be received within two weeks of receipt of this letter and should be sent by e-mail to [Martin Friesenhahn](#) at [martin.friesenhahn@ams.usda.gov](mailto:martin.friesenhahn@ams.usda.gov).

If [TDA](#) intends to continue with the renewal accreditation process, the two attached documents need your immediate attention.

- The first document is the *LS-313, Application for Service*. The *LS-313* provides the GV Division with the ability to recover fees for services. [TDA](#) must provide an updated *LS-313* for GV Division records.
- The second document is the *ARC 1415A Form, Estimate of Audit Services*. Costs incurred to conduct the renewal assessment are the responsibility of [TDA](#). The attached estimate outlines the estimated cost for your renewal assessment, minus any payments previously submitted to the GV Division that have been credited to your account. If a payment was submitted to the GV Division or NOP and is not reflected in the estimate, please contact Sheri Harnett at [Sheri.Harnett@ams.usda.gov](mailto:Sheri.Harnett@ams.usda.gov) to ensure your account is properly credited.

Note: [TDA](#) will be billed by the GV Division for the actual costs of the audit after the audit takes place. Payment may be made by cashier's check, money order, credit card, or electronic fund transfer. Specific information about the payment options is included as an attachment to this letter. **Please be sure to include your FMMI Customer Number 3241986 with your payment.**

To assist the GV Division in scheduling your renewal assessment in a timely and cost effective manner, a signed copy of the *Estimate of Audit Services* and the original signed *LS-313* must be received by [May 3, 2012](#). If these items are not received by the indicated date, then the GV Division cannot proceed with the renewal assessment and [TDA's](#) NOP accreditation status may expire. Please submit the signed copy of the *Estimate of Audit Services* to the auditor-of-record at the following address [martin.friesenhahn@ams.usda.gov](mailto:martin.friesenhahn@ams.usda.gov) with a cc to the GV Division @ [ARCBranch@ams.usda.gov](mailto:ARCBranch@ams.usda.gov).



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The signed copy of the LS-313 must be submitted to the GV Division either via e-mail at [ARCBranch@ams.usda.gov](mailto:ARCBranch@ams.usda.gov); or as an alternative, it may be mailed or faxed to the GV Division at the following address or fax number:

USDA, AMS, LS, Grading and Verification Division  
Attn: – Cindy Abshire, Management Analyst  
13952 Denver West Parkway  
Building 53, Suite 350  
Lakewood, CO 80401  
Phone: 720-497-2544  
Fax: 720-497-0571

In order to be properly prepared for the assessment, please ensure that the following documents are available for review at the start of the assessment.

1. Procedures and checklist or form (if one is used) for how labels are reviewed and approved.
2. Two files on operations that have surrendered their NOP certification.
3. Information on any samples that were collected to verify compliance to the standards since the previous assessment. How many; for what reason was the testing; results of tests; and actions taken by TDA and the clients.
4. Two files where the clients were denied certification and information on how many clients (if any) have been denied certification since the previous assessment.
5. Two files where the clients were issued a notice of proposed suspension and information on how many clients (if any) have been issued a notice of proposed suspension since the previous assessment.
6. Two files where the clients were issued a notice of proposed revocation and information on how many clients (if any) have been issued a notice of proposed revocation since the previous assessment.
7. One file each where the client was issued a notice of suspension or revocation and information on how many clients (if any) have been issued a notice of suspension or revocation since the previous assessment.
8. Two files where a complaint led to an investigation and the outcome of the investigation. Information on how many investigations have been conducted since the previous assessment and the outcome.
9. Information on any willful violations of the NOP organic standards (if any) and actions taken by TDA.
10. Two files where the clients rebutted a notice of noncompliance and the follow-up actions taken by TDA.
11. Two files where the clients requested mediation or appealed a certification decision and the results.
12. The following certification files (files for the witness inspections- crop, processor, and livestock) (7 additional full file reviews will be selected on-site):
  - a) File 1 (Hilltop or Boehning Dairy- (b) (4) )
  - b) File 2 (Kings Crossing Farm – Crop inspection observation)
  - c) File 3 (Texas Sake Co. – Processor inspection observation)



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The documents and records requested above (items 5 – 10) may appear to be a lot. However, one file can be used to verify the process for several of the areas described above as it would be a natural progression. For example: A client is issued a notification of non-compliance; the issue is not resolved so a notification of proposed suspension/revocation is issued; the issue is still not resolved so a notice of suspension is issued.

In addition, please submit by email to [Martin Friesenhahn](mailto:Martin.Friesenhahn@ams.usda.gov) at [martin.friesenhahn@ams.usda.gov](mailto:martin.friesenhahn@ams.usda.gov) the following files:

1. File 1 (Hilltop or Boehning Dairy- (b) (4) )
2. File 2 (Kings Crossing Farm – Crop inspection observation)
3. File 3 (Texas Sake Co. – Processor inspection observation)

Files must include the most current organic production or handling system plan (OSP); certificate issued to the certified operation; the inspection report; and certification decision documents to include any notifications of non-compliance, corrective actions taken, corrective actions resolutions notifications, and adverse action notifications as applicable.

Please submit the requested files no later than **May 3, 2012**. If files cannot be sent via e-mail and must be sent in hard copy, please contact [Martin Friesenhahn](mailto:Martin.Friesenhahn@ams.usda.gov) for the shipping address.

If you have questions or concerns regarding this request, please contact the auditor-of-record at [972-222-2304](tel:972-222-2304) or [martin.friesenhahn@ams.usda.gov](mailto:martin.friesenhahn@ams.usda.gov). You may also contact your NOP Regional Accreditation Manager, [Bob Pooler](mailto:Bob.Pooler@ams.usda.gov) at (202)-720-3252 or [bob.pooler@ams.usda.gov](mailto:bob.pooler@ams.usda.gov).

Sincerely,

Lauren Kavanaugh  
Quality Management Branch Chief  
USDA, AMS, LS, Grading and Verification Division

Enclosures: ARC 1415A Form, Estimate of Audit Services  
LS-313, Application for Service

CC: [Bob Pooler](mailto:Bob.Pooler@ams.usda.gov), NOP Regional Accreditation Manager  
MaryLou Lusby, National Organic Program  
Lars Crail, Steve Ross



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## Attachment 1

## Payment Options

Clients have four payment options: (1) cashier's check; (2) money order; (3) credit card; and (4) electronic fund transfer. Information about each option is outlined below.

### **Cashier's Check or Money Order:**

Cashier's checks and money orders must be made payable to "USDA, AMS, Livestock and Seed Program." Your account number must be placed on the memo section of the check or money order.

Checks and money orders are mailed to a lock box at the U.S. Bank. Checks and money orders may be sent by overnight mail or regular mail, using the appropriate mailing address below. Please note that checks and money orders sent by regular mail may not be received in a timely manner. Questions may be directed to US Bank Customer Service at (314) 418-6635.

#### ***Overnight Mailing Address:***

U.S. Bank  
Attn: Government Lock Box 790304  
1005 Convention Plaza  
St. Louis, MO 63101

#### ***Regular Mail Address:***

USDA, AMS, Livestock and Seed Program  
PO Box 790304  
St. Louis, MO 63179-0304

### **Credit Card:**

Credit card payments are now being accepted through PAY.GOV. If you need assistance please contact Sheri Harnett, (720) 497-2544 or [Sheri.Harnett@ams.usda.gov](mailto:Sheri.Harnett@ams.usda.gov).

### **Electronic Fund Transfers (EFT):**

The USDA has implemented procedures for Electronic Fund Transfers (EFT) through the Federal Reserve Bank. Any fees associated with the transfer are the responsibility of the remitter; please check with your financial institution to make sure there are no surprises.

The following information should be included with your payment. We also request that you send an email or fax of this information to make sure we are able to identify the payment. The information can be sent to fax, (612) 336-3563, or e-mail, [ABShelpline@aphis.usda.gov](mailto:ABShelpline@aphis.usda.gov).

1. Organization Name / Company Name
2. **FMMI Customer Number**
3. Purpose of payment
4. Contact name and number

**Automated Clearing House (ACH)** transactions are processed through Remittance Express by the Federal Reserve Bank of Richmond. The process accepts information in the Cash Concentration and Disbursement (CCD) or the Corporate Trade Exchange (CTX) formats. You will need the following information to remit a payment:

ABA: 051036706  
Name on Account: USDA, Marketing and Regulatory Programs (MRP),  
Agricultural Marketing Service (AMS)  
Account Number: 540020





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**Wire transfers** are processed through the Federal Reserve Bank of New York. You will need the following information to remit a payment.

ABA:	021030004
Name on Account:	USDA, Agricultural Marketing Service (AMS)
Account Number:	12250001
SWIFT:	FRNYUS33

**International wire transfers**, remitters should send through a US bank or a correspondent bank before going to the Federal Reserve.



Agricultural Marketing Service  
Livestock and Seed Program  
Audit, Review, and Compliance Branch

ARC 1415A Form  
Page 1 of 3

Company Information:	
Company Name:	Texas Department of Agriculture (TDA)
Est. No.:	N/A
Street Address:	1700 North Congress Avenue, Stephen F. Austin Building, 11th Floor, Rm 1125E
City, State, Zip:	Austin, TX 78701
Contact:	Mary Ellen Holliman, Coordinator for Organic Certification
Phone:	512-463-7513
Email:	Mary.Holliman@TexasAgriculture.gov; Organic@TexasAgriculture.gov
Program:	National Organic Program (NOP)
Comments:	Renewal Assessment

Audit Objectives:
Assess TDA's continuing compliance to the National Organic Program (NOP) and to verify corrective actions from the previous audit for implementation and effectiveness.

Audit Scope:
TDA's Organic Certification Program (NOP), TDA Office in Austin, TX. Inspection activities at each area of accreditation (crop, processor, livestock, & wild crop) in TX. (Currently clients only in crop, livestock & processor operations).

Audit Criteria & Reference Documents:
(1). 7 CFR Part 205 National Organic Program, Final Rule, dated December 21, 2000; Updated 3/15/2012; and (2). TDA's NOP Organic Certification Program manuals, forms, procedures, instructions, and applicable documents.



**Agricultural Marketing Service  
Livestock and Seed Program  
Audit, Review, and Compliance Branch**

ARC 1415A Form  
Page 2 of 3

Martin Friesenhahn	Team Leader	All areas of the audit. Crop & Processor inspection observations.
Lars Crail	Team Member	Livestock inspection observation and some file reviews.
	Technical Expert	
Steve Ross	Observer	Supervisor/Observer

Audit Schedule				
<i>Date:</i>	<i>Time:</i>	<i>Activity:</i>	<i>Location:</i>	<i>Auditor</i>
5/13/2012	TBD	Travel to TDY -Amarillo, TX	Amarillo, TX	LC
5/14/2012	TBD	Travel to inspection site - (b) (4) (b) (4)	Hilltop or Boehning Dairy- Earth, TX	LC
5/14/2012	8a-12:00p 1:30-2:00p 2:00-5:00p	Travel to Austin, TX Opening Meeting Start NOP Renewal Assessment Audit - document & record review	TDA Office- Austin, TX " "	MJF & SR " " " "
5/15/2012	TBD	Travel to Austin, TX - document & record review (as time allows)	TDA Office- Austin, TX	LC
5/15/2012	TBD	Travel to inspection site- Observe Processor inspection. Document & record Review (if time allows)	Texas Sake Co.- Austin, TX TDA Office- Austin, TX	MJF & SR " "
5/16/2012	TBD	Travel to inspection site- Observe Crop inspection. Document & record Review (if time allows)	Kings Crossing Farm- Austin, TX TDA Office-	MJF & SR " "
5/16/2012	8:00a - 5:30p	Continue audit- Documents & record review	TDA Office- Austin, TX	LC
5/17/2012	8:00-4:30 4:30-5:00p	Continue audit- Documents & record review. Closing Meeting	TDA Office- Austin, TX " "	MJF, SR & LC " "
5/18/2012	TBD	Return to Residence Complete Report & Post audit documentation		MJF, SR, & LC
		(Inspection sites, locations, and dates TBD & Subject to change)		



**Agricultural Marketing Service  
Livestock and Seed Program  
Audit, Review, and Compliance Branch**

ARC 1415A Form  
Page 3 of 3

Company Name: Texas Department of Agriculture (TDA)

<b>Cost Estimate</b>				
<i>Audit Time:</i>	<i>Auditor 1:</i>	<i>Auditor 2:</i>	<i>Rate:</i>	<i>Amount:</i>
Onsite Audit				
Travel	7.00	24.00	\$ 108.00	\$ 3,348.00
Pre-Audit	8.00	2.00	\$ 108.00	\$ 1,080.00
Audit	28.00	28.00	\$ 108.00	\$ 6,048.00
Post-Audit	8.00	2.00	\$ 108.00	\$ 1,080.00
Desk Audit Only	0.00	0.00	\$ 108.00	\$ -
<i>Per Diem:</i>	<i>Auditor 1:</i>	<i>Auditor 2:</i>	<i>Rate:</i>	<i>Amount:</i>
Per Diem Days	4.50	5.50	n/a	10.00
Lodging	432.00	478.00	\$77 & 108	\$ 910.00
M&IE	319.50	346.75	\$46 & 71	\$ 666.25
<i>Associated Costs:</i>	<i>Auditor 1:</i>	<i>Auditor 2:</i>	<i>Cost:</i>	<i>Amount:</i>
Airfare	0.00	969.00	\$ 969.00	\$ 969.00
Local Transportation	0.00	0.00	\$ -	\$ -
Room Tax	60.00	65.00	\$ 125.00	\$ 125.00
Rental Car	350.00	150.00	\$ 500.00	\$ 500.00
Parking	0.00	0.00	\$ -	\$ -
POV Miles	20.00	0.00	\$ 0.555	\$ 11.10
Administrative	n/a	n/a	\$ 108.000	\$ 108.00
Miscellaneous	19.35	100.00	\$ 119.35	\$ 119.35
Credit	n/a	n/a	\$ -	\$ 500.00
<b>GRAND TOTAL</b>				<b>\$ 14,464.70</b>

*I have reviewed the audit plan and cost estimate; and agree to them. I realize that the actual audit and cost may differ from this document. Additionally, I realize that audit costs associated with a corrective action audit are not included in this estimate.*

(b) (6)

4-27-12

Client (Auditee) Name: \_\_\_\_\_ Client (Auditee) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Lead Auditor Signature: *Martin Friesenhahn* Date: 4/19/2012

*\*The ARC Branch meets the requirements outlined in 5 CFR 2635.703, Use of nonpublic information.*





National Organic Program Accreditation Assessment Checklist	
<b>Date:</b>	May 14-17, 2012
<b>Assessment Identifier:</b>	NP2135BBA
<b>Assessment Activity: (select one)</b>	<input type="checkbox"/> Documentation Adequacy Review <input type="checkbox"/> Pre-decisional Assessment <input type="checkbox"/> Initial Assessment <input type="checkbox"/> Mid-Term Assessment <input checked="" type="checkbox"/> Renewal Assessment <input type="checkbox"/> Corrective Action Review <input type="checkbox"/> Corrective Action Assessment <input type="checkbox"/> Other _____
Company Information	
<b>Name of Company:</b>	Texas Department of Agriculture
<b>Company Address:</b>	1700 North Congress Avenue, Stephen F. Austin Building, 11 th Floor, Rm 1125E; P.O. Box 12847
<b>City, State, Zip:</b>	Austin, TX 78711
<b>Contact Name:</b>	Mary Ellen Holliman
<b>Title:</b>	Coordinator for Organic Certification
<b>Phone #:</b>	512-463-7513
<b>Email:</b>	<a href="mailto:Mary.Holliman@TexasAgriculture.gov">Mary.Holliman@TexasAgriculture.gov</a> ; <a href="mailto:Organic@TexasAgriculture.gov">Organic@TexasAgriculture.gov</a>
<b>Location(s) of Program Activities:</b>	Austin, TX & State of Texas for certification of clients
<b>Standards Applied:</b>	NOP
<b>Scope of Program Activities:</b>	Crop, Handler, & Livestock
<b>Countries of Operations:</b>	U.S., Texas only
Assessment Team	
<b>Team Leader:</b>	Martin Friesenhahn
<b>Second Auditor:</b>	Lars Crail
<b>Other (Identify Role):</b>	



**PLANNING AND SCHEDULING OF THE ASSESSMENT**

- Send email using the appropriate template to schedule the on-site assessment. This should be conducted as early as possible. Planning of foreign assessments should start at least 6 months prior to the anticipated assessment date. Scheduling of domestic assessments should commence no later than 3 months prior to the anticipated assessment date.
- Once assessment date is scheduled with the ACA, select satellite offices and witness audit sites to be visited during the assessment.
- After assessment sites and on-site schedule has been finalized, complete the audit plan, cost estimate, and appropriate letter regarding the assessment.
- Send the above information via email using the appropriate template. *Remember to include attachments in the email and CC all of the personnel listed on the "Letter".*

**PRE-ASSESSMENT ACTIVITIES**

- Verify that LS-313 Application for Service is on file and is the current version; not applicable for the pre-decisional assessment.
- Obtain & review the most recent copy of program documentation from the company.

<b>Title of documentation:</b>	<b>Texas Dept. of Ag. – Accreditation Docs – submitted on CD 10/11</b>
<b>Date or revision number of documentation:</b>	<b>Various Dates &amp; Revisions</b>

- Review previous audit report.  
 NP9320BBA NC Report TDA Austin TX 11 23 09 – Mid-Term Audit
- Review previous corrective actions report, as applicable.  
 NP9320BBA CA Report TDA Austin TX 04 30 10
- Review previous notices of noncompliance issued to the ACA.  
 Letter (Report from NOP) Texas Dept of Agriculture Austin TX 08 26 10  
 TDA NoNCR NOPC-033-11 071411
- Receive approval to conduct the assessment activity by obtaining a signed copy of the audit plan and cost estimate from the client.  
 1/12/12 via e-mail approval for audit, signed 4/27/12



## ON-SITE ASSESSMENT ACTIVITIES

### OPENING MEETING

The purpose of the opening meeting is to confirm the assessment plan, provide a short summary of how the assessment activities will be undertaken, confirm communication channels, and provide an opportunity for the client to ask questions.

- Introduction of participants and their roles.
- Confirmation of assessment objectives, scope, and criteria.
- Confirmation of assessment timetable and other relevant arrangement.
- Review the assessment plan. Have there been any changes since it was approved?  
No      Yes  - What are the changes? *Changed crop inspection date and location. Steve Ross not attending audit*
- Review program documentation. Have there been any changes since the last assessment?  
No      Yes  - What are the changes? *Various forms, certificates, and procedures updated for organic certification*
- Have findings from previous assessments been addressed? (if applicable)  
 Yes  No
- Methods and procedures to be used to conduct the assessment.
- Confirmation of formal communication channels.
- Confirmation that auditee will be kept informed of assessment process during the assessment.
- Confirmation that the resources and facilities needed by the assessment team are available.
- Confirmation of confidentiality matters.
- Confirmation of relevant work safety, emergency, and security procedures for the assessment team.
- Confirmation of the availability, roles, and identities of guides.
- The method of reporting, and explain that non-compliances (if any are identified) will not be classified as to severity.
- Provide an opportunity for the client to ask questions.





*Complete the following Attendance List:*

<b>Name</b>	<b>Title or Position</b>	<b>Opening</b>	<b>Closing</b>
<b>Martin Friesenhahn</b>	<b>GVD Lead Auditor</b>	<b>X</b>	<b>X</b>
<b>Lars Crail</b>	<b>NOP AM, Auditor</b>		<b>X</b>
<b>Mary Ellen Holliman</b>	<b>Coordinator for the Organic Certification</b>	<b>X</b>	<b>X</b>
<b>Randy Rivera</b>	<b>Program Administrator</b>	<b>X</b>	<b>X</b>
<b>Nicky Carter</b>	<b>Internal Audit</b>	<b>X</b>	
<b>Hector Gonzales</b>	<b>Internal Audit</b>	<b>X</b>	<b>X</b>
<b>Alex Hunt</b>	<b>Organic Certification Specialist</b>	<b>X</b>	<b>X</b>
<b>Nicole Fiedler</b>	<b>Organic Certification Specialist</b>	<b>X</b>	<b>X</b>
<b>Bob Tarrant</b>	<b>Regional Director- Lubbock</b>	<b>X</b>	
<b>Ken Widenfelder</b>	<b>Regional Director- San Antonio</b>	<b>X</b>	



CHECKLIST SECTION I – General Information on Certification Process		
1	List locations of offices where key activities occur including key activities performed.	Austin, TX
2	Note the number of operations certified to the NOP at the time of the assessment.	Total: <u>Approx. 238</u> NOP certified operations Crop: <u>140</u> Wild-crop: <u>0</u> Livestock: <u>10</u> Handlers: <u>111</u> Grower Groups: <u>0</u> Approximate Handler Types: Processors: <u>68</u> Distributors: <u>38</u> Traders: <u>2</u> Retailers: <u>3</u> All operations in Texas (each certification scope listed separately)
3	What does the ACA submit to applicants on initial application?	Application, Fee schedule, applicable OSP, NOP Standards –link, applicable forms, procedures, or documents
4	How is the information, documents and or forms provided to those inquiring about certification (hard copy/electronic)?	Hard copy & electronic
5	Who (job title/position description) conducts the initial review for completeness and ability to comply?	Certification Specialists or Program Coordinator
6	Who (job title/position description) reviews labels and material inputs?	Same – all 3- Certification Specialists or Program Coordinator
7	How are inspectors selected / assigned for inspections?	Assigned to Regional Office- then assigned based on experience, qualifications, & location
8	Are they staff inspectors or subcontracted?	TDA Staff Inspectors
9	Who (job title/position description) makes the certification decision?	Same – all 3- Certification Specialists or Program Coordinator
10	Provide a brief description of the annual update process.	Update letter submitted to client, request to send in updated OSP's/and or updated information. Handlers due by 8/15 & producers by 3/15.
11	Who (job title/position description) reviews the inspection report, results of analysis conducted (as applicable), and information requested from and provided by the applicant?	Same – all 3- Certification Specialists or Program Coordinator
12	Who (job title/position description) makes the determination on whether to issue a notice of non-compliance?	All 3 with final by Coord.



CHECKLIST SECTION I – General Information on Certification Process		
13	When operations submit corrective actions or a rebuttal, who (job title/position description) reviews the materials and makes the determination if they are adequate?	Program Spec. if able to, Coord. - Rebuttals
14	Are there any operations certified or undergoing the certification process which were re-instated after having been suspended or revoked?	Yes, Loop Cold Storage, OakRidge Valley Organics (approved for reinst. & will be issued shortly) (but suspended for not submitting updated docs.)
15	Does the ACA have a material evaluation program for liquid nitrogen fertilizers (LNF) with a nitrogen content greater than 3%?	No, Use OMRI or WSDA
16	Does the ACA certify grower groups?	No

**PROGRAM REQUIREMENTS**

- <sup>(1)</sup> *Complies:* For each requirement, identify whether the certifying agent complies, does not comply, or that a requirement is not applicable with an “X”.
- <sup>(2)</sup> *Remarks:* Provide explanations and/or comments to present evidence of compliance or non-compliance, as applicable. If a requirement is not applicable include why it does not apply.

Exclusions: Sections not included or addressed in checklist
§205.502 Applying for Accreditation – procedural requirements not addressed by auditors. §205.505 Statement of Agreement – Reference only. If requirements are not met, cite to the appropriate section(s) of §205.501. §205.510(c) – (e) NOP Administrator procedural requirements not addressed by auditors.

§§205.400, 205.401 & 205.402 General Requirements, Application, and Review				
For audit purposes, §205.400 or §205.401 are to be referenced, as applicable. These are requirements for certified operations and not the ACA. If requirements are not met, cite to the appropriate section §205.402(a)(1) or (3) and <u>reference</u> this section. The application requirements are reviewed when completing the Certification File Review Worksheets. An overall assessment based on all files reviewed, information gathered during review of certification process, interviews, and Witness Audit Checklists should be made, then identify findings under appropriate requirement.				
CHECKLIST SECTION II	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
References: NOP 2005 Reinstating Suspended Organic Operations NOP Policy Memo 11-4 Verification of Materials				
§§205.400(c) and 205.670(a)	Is there any evidence that a certified operation denied access to a representative of the Administrator, State,	X		No, access was available



**§§205.400, 205.401 & 205.402 General Requirements, Application, and Review**

For audit purposes, §205.400 or §205.401 are to be referenced, as applicable. These are requirements for certified operations and not the ACA. If requirements are not met, cite to the appropriate section §205.402(a)(1) or (3) and reference this section. The application requirements are reviewed when completing the Certification File Review Worksheets. An overall assessment based on all files reviewed, information gathered during review of certification process, interviews, and Witness Audit Checklists should be made, then identify findings under appropriate requirement.

CHECKLIST SECTION II	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
or ACA?				
<b>§205.401</b> Are all applications complete and do the OSPs meet the requirements for an OSP?	X			ROR-600 , applications were complete & applications & OSP include required information. Auditor observation: OSP's do not allow the producer to list whether the operation is all-organic, split or parallel. There is no location on the OSP to allow the operator to briefly describe the operation as an introduction.
<b>§205.402(a)(1)</b> Upon accepting applications does the ACA review the application for completeness?		X		Yes reviewed for completeness. However, See Outstanding NC.3
<b>§205.402(a)(2)</b> Does the review include making a determination if the applicant is in compliance or can comply with the requirements?		X		Yes reviewed for compliance. However, See Outstanding NC.3
<b>§205.402(a)(3)</b> Does the ACA verify that an applicant, who previously applied to another certifying agent and received a notification of noncompliance or denial of certification, has submitted documentation to support the correction of any noncompliances identified in the notification of noncompliance or denial of certification?	X			OK, listed in Application Section L
<b>§205.402(b)(1)</b> Is the time from receiving the application materials and the review reasonable?	X			Yes, from a couple of days to several months
<b>§205.402(b)(1)</b>	X			Yes, from a couple of days to



**§§205.400, 205.401 & 205.402 General Requirements, Application, and Review**

For audit purposes, §205.400 or §205.401 are to be referenced, as applicable. These are requirements for certified operations and not the ACA. If requirements are not met, cite to the appropriate section §205.402(a)(1) or (3) and reference this section. The application requirements are reviewed when completing the Certification File Review Worksheets. An overall assessment based on all files reviewed, information gathered during review of certification process, interviews, and Witness Audit Checklists should be made, then identify findings under appropriate requirement.

CHECKLIST SECTION II	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
Is the time between receiving an application and communicating the results of the review to an applicant reasonable?				several months
§§205.402(b)(2) and 205.403(e)(2) Is a copy of the inspection report as approved by the ACA provided to that operation by the ACA?		X		See NC.1- only sending the findings section of the inspection report
§205.402(c) Do any clients withdraw their application and if so, was the process in accordance with the requirements?	X			OK

**§205.403 Inspection**

Based on review of Certification File Review Worksheets, information gathered during review of certification process, interviews, and Witness Audit Checklists.

CHECKLIST SECTION III	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
§205.403(a)(1) Does the ACA conduct initial on-site inspections of each production unit, facility, and site that produces or handles organic products and that is included in the operation for which certification is requested, on all applicants?	X			Yes, verified through files and witness inspections
§205.403(b)(1) Are all inspections conducted within a reasonable time after the determination that the applicant appears to comply or can comply with the requirements?	X			Yes, from a couple of days to several months
§205.403(b)(2) Are all inspections conducted when an authorized representative of the operation who is <u>knowledgeable</u> about the operation was present <u>and</u> at a time when land, facilities, and activities that demonstrate the operation's compliance with or capability to comply	X			Yes, verified through files and witness inspections



<b>§205.403 Inspection</b>				
Based on review of Certification File Review Worksheets, information gathered during review of certification process, interviews, and Witness Audit Checklists.				
<b>CHECKLIST SECTION III</b>	<b>Complies <sup>(1)</sup></b>			<b>Remarks <sup>(2)</sup></b>
	<b>Yes</b>	<b>No</b>	<b>N/A</b>	
with the applicable provisions of subpart C could be observed?				
<b>§205.403(c)(1)</b> Do all inspections verify the operation's compliance or capability to comply with the Act and the regulations?		X		In General yes, (b) (5)
<b>§205.403(c)(2)</b> Do all inspections verify that the information (including the OSP), provided in accordance with §§205.401, 205.406, and 205.200, accurately reflect the practices used or to be used by the applicant or certified operation?	X			Yes, verified through files and witness inspections
<b>§205.403(c)(3)</b> Do all inspections verify that prohibited substances had not been and were not being applied to the operation?	X			Yes, verified through files and witness inspections
<b>§205.403(d)</b> Do inspectors conduct an exit interview with an authorized representative of the operation, who is knowledgeable about the inspected operation, <u>to confirm the accuracy and completeness</u> of inspection observations and information gathered during the on-site inspection?  Does the exit interview(s) address the need for any <u>additional information</u> as well as any <u>issues of concern</u> ?	X			Yes, verified through files and witness inspections, Yes issues of concern identified



<b>§205.403 Inspection</b>				
Based on review of Certification File Review Worksheets, information gathered during review of certification process, interviews, and Witness Audit Checklists.				
CHECKLIST SECTION III	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
<b>§205.403(e)(1)</b> Do inspectors provide the operation's authorized representative with a receipt for any samples taken during the inspections?	X			Yes, listed in Organic Inspection Handbook

<b>§205.404 Granting Certification</b>				
Based on review of Certification File Review Worksheets, information gathered during review of certification process, interviews, and Witness Audit Checklists.				
CHECKLIST SECTION IV	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
References: <i>NOP 2603 Organic Certificates</i> <i>NOP 2605 Reinstating Suspended Organic Operations</i> <i>NOP Policy Memo 11-4 Verification of Materials</i>				
<b>§205.404(a)</b> Does the ACA meet the requirements of 205.404(a) by:  reviewing the inspection report, sample results, and any additional information within a <u>reasonable time</u> after the inspection;  granting certification in all cases where it is determined that the OSP and the applicant's operation are in compliance and is able to conduct operations in accordance with the plan; and  (if the certification is granted and included requirements for the correction of minor noncompliances) <u>indicating</u> they have to be addressed within a specified time period as a condition of continued certification?	X			Yes, from a couple of days to several months,  Minor noncompliances are required to be addressed for continuing certification. Verified in files reviewed and witness inspections.
<b>§205.404(b)</b> Does the ACA issue a certificate of organic operation in all cases where certification was granted?	X			Yes, verified in files reviewed
<b>§205.404(b)(1) – (4)</b>	X			OK, Verified in files



<b>§205.404 Granting Certification</b>				
Based on review of Certification File Review Worksheets, information gathered during review of certification process, interviews, and Witness Audit Checklists.				
CHECKLIST SECTION IV	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
Do certificates issued by the ACA contain the required information?				reviewed. Yes , Certificates contain the applicable Program Handbook Information
Do certificates issued by the ACA contain the additional information and statements recommended by NOP 2603?				

<b>§205.405 Denial of Certification</b>				
Based on review of Certification File Review Worksheets (including Table 5a - Notice of Noncompliance/Adverse Action Worksheet).				
CHECKLIST SECTION V	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
References: NOP 2607 Disclosure of Information concerning USDA Accredited Certifying Agents and Certified Operations to the NOP NOP 4002 Enforcement Policy NOP Policy Memo 11-4 Verification of Materials				
<b>§205.405(a)</b> Does the ACA <u>provide a written notification of noncompliance</u> to all applicants in cases where there was a reason to believe, based on the review, that the applicant was not able to comply or was not in compliance with the requirements?	X			OK- Two files reviewed
<b>§205.405(a)</b> If the ACA issued any <u>combined notice of noncompliance and denial of certification</u> , does it meet the requirements for both notifications?			X	None issued.
<b>§205.405(a)(1) – (3)</b> Do all notices of noncompliance that were issued contain the required information in accordance with §205.405(a)(1) – (3)?	X			OK, in files reviewed
<b>§205.405(c)(1)</b> In cases when the applicant provided corrective actions or a rebuttal, does the ACA:  evaluate the rebuttal or corrective actions taken and supporting documentation;	X			OK, in files reviewed





<b>§205.405 Denial of Certification</b>				
Based on review of Certification File Review Worksheets (including Table 5a - Notice of Noncompliance/Adverse Action Worksheet).				
CHECKLIST SECTION V	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
issue the applicant an approval of certification if the corrective action or rebuttal is sufficient for the applicant to qualify for certification; or  issue the applicant a written notice of denial of certification when the corrective action or rebuttal, <u>is not</u> sufficient for the applicant to qualify for certification?				
<b>§205.405(c)(2)</b> Does the ACA issue a written notice of denial of certification to all applicants that failed to respond to the notification of noncompliance?	X			OK, in files reviewed
<b>§205.405(c)(3)</b> Does the ACA provide all notices of approval or denials to the Administrator?	X			Yes, OK, in files reviewed
<b>§§205.405(d) and 205.405(d)(1) – (3)</b> Do all issued denials of certification contain the required information in accordance with 205.405(d), and 205.405(d)(1) – (3)?	X			Yes, OK, in files reviewed
<b>§205.405(f)</b> If the ACA received new applications for certification, which included a notification of noncompliance or a notice of denial of certification, does the ACA <u>treat the application as a new application</u> and begin a new application process?			X	Did not have this type of application



<b>§205.406 Continuation of Certification</b>				
Based on review of Certification File Review Worksheets, information gathered during review of certification process, interviews, and Witness Audit Checklists. Describe the annual update process under "General information on Certification Process", Checklist Section I. Document requirement evaluations on the Certification File Review Worksheets and "Table 5a - Notice of Noncompliance/Adverse Action Worksheet" as applicable.				
CHECKLIST SECTION VI	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
References: NOP 2607 Disclosure of Information concerning USDA Accredited Certifying Agents and Certified Operations to the NOP NOP 4002 Enforcement Policy NOP Policy Memo 11-4 Verification of Materials				
<b>§205.406(a)(1) – (4)</b> Do all certified operations submit an updated OSP and pay the annual certification fees as required by §205.406(a)(1) – (4)?	X			OK, Verified in files reviewed.
<b>§205.406(b)</b> Following the receipt of an updated OSP does the ACA review it to see if the requirements of §205.406(a) have been met?	X			OK, Verified in files reviewed.
<b>§§205.406(b) and 205.403(a)(1)</b> Following the receipt of an updated OSP does the ACA within a reasonable time arrange and conduct an on-site inspection?	X			OK, Verified in files reviewed. Yes, from several days to a couple of months.
<b>§205.406(c)</b> Does the ACA provide a written notification of noncompliance to all operations in accordance with §205.662 if the ACA had reason to believe, based on the on-site inspection and a review of the information specified in §205.404, that a certified operation is not complying with the requirements of the Act and the regulations?	X			Yes, Files reviewed showed noncompliances being issued
<b>§205.406(d)</b> Does the ACA issue an updated certificate for all certified operations that were in compliance with the Act and the regulations if any information specified on the previous certificate changed?	X			Yes, files reviewed showed updated organic certificates being issued.



<b>§205.501 General Requirements for Accreditation</b>				
<b>CHECKLIST SECTION VII</b>	<b>Complies <sup>(1)</sup></b>			<b>Remarks <sup>(2)</sup></b>
	Yes	No	N/A	
References: <i>NOP 2000 General Accreditation Policies and Procedures</i> <i>NOP 2026 Submitting Annual Lists of Certified Operations</i> <i>NOP 2606 Processing Requests for Temporary Variances</i> <i>NOP Appeals Procedure: Adverse Action Appeal Process – Certified Operation or Applicant for Certification</i> <i>Policy Memo 11-8 California State Organic Program, Additional Requirements Granted</i>				
<b>§205.501(a)(1)</b> Does the ACA have <u>sufficient expertise</u> in organic production or handling techniques to fully comply with and implement the terms and conditions of the organic certification program?	X			Yes, OK –for assigned areas of responsibilities.
<b>§205.501(a)(2)</b> Does the ACA <u>demonstrate the ability</u> to fully comply with the requirements for accreditation?	X			Yes, OK
<b>§205.501(a)(3)</b> Does the ACA <u>carry out the provisions</u> of the Act and the regulations, including the provisions of §§205.402 through 205.406 and §205.670?	X			Yes, OK
<b>§205.501(a)(4)</b> Does the ACA use a <u>sufficient number of adequately trained personnel</u> , including inspectors and certification review personnel, to comply with and implement the organic certification program?	X			Yes, OK-seems to be adequate organic staff to complete certification.
<b>§205.501(a)(5)</b> Does the ACA ensure certification personnel <u>have sufficient expertise</u> in organic production or handling techniques to successfully perform the duties assigned?	X			Yes, OK- verified through witness inspections, file reviews and interviews.
<b>§205.501(a)(6)</b> Does the ACA conduct annual <u>performance evaluations</u> of all certification personnel in accordance with §205.501(a)(6)?	X			Yes, completed annually. Performance evaluation records checked for organic staff and inspectors.
<b>§205.501(a)(7)</b> Does the ACA have <u>an annual program review</u> of its certification activities conducted by someone who has expertise to conduct the reviews?  Does the ACA <u>implement measures to correct</u> any noncompliances that are identified in the evaluation?	X			TDA Organic Certification Program Annual Review - Fiscal Year 2011, & TDA Organic Certification Program MidYear Review for - Fiscal Year 2012



<b>§205.501 General Requirements for Accreditation</b>				
<b>CHECKLIST SECTION VII</b>	<b>Complies <sup>(1)</sup></b>			<b>Remarks <sup>(2)</sup></b>
	<b>Yes</b>	<b>No</b>	<b>N/A</b>	
<b>§205.501(a)(8)</b> Does the ACA <u>provide sufficient information</u> to persons seeking certification to enable them to comply with the Act and the regulations?	X			Yes, adequate information provided
<b>§205.501(a)(9)</b> Does the ACA <u>maintain all records</u> pursuant to §205.510(b) and make all such records available for inspection and copying during normal business hours?	X			Yes, records were available for review
<b>§205.501(a)(10)</b> Does the ACA <u>maintain strict confidentiality</u> with respect to its clients and not disclose to third parties any business-related information concerning any client obtained while implementing the regulations, except as provided for in §205.504(b)(5)?	X			Yes, included with the signed Annual Conflict of Interest and Confidentiality Agreement Forms – ROR-620. Verified records of staff & inspectors.
<b><i>Does the ACA prevent conflicts of interest by:</i></b>	---	---	---	---
<b>§205.501(a)(11)(i)</b> Not certifying a production or handling operation if the <u>ACA or a responsibly connected party</u> of such ACA has or has held a commercial interest in the production or handling operation?	X			OK, has not
<b>§205.501(a)(11)(ii)</b> <u>Excluding any person, including contractors</u> , with conflicts of interest from work, discussions, and decisions in all stages of the certification process and the monitoring of certified operations for all entities in which such person has or has held a commercial interest.	X			OK, COI's completed.
<b>§205.501(a)(11)(iii)</b> Not permitting any employee, inspector, contractor, or other personnel <u>to accept payment</u> , gifts, or favors of any kind, other than prescribed fees, from any business inspected.	X			OK, None observed



<b>§205.501 General Requirements for Accreditation</b>				
<b>CHECKLIST SECTION VII</b>	<b>Complies <sup>(1)</sup></b>			<b>Remarks <sup>(2)</sup></b>
	<b>Yes</b>	<b>No</b>	<b>N/A</b>	
<b>§205.501(a)(11)(iv)</b> <u>Not giving advice or providing consultancy services</u> , to certification applicants or certified operations, for overcoming identified barriers to certification.	X			OK, No consulting observed during the witness inspections.
<b>§205.501(a)(11)(v)</b> Requiring all certification personnel and responsibly connected parties to complete an <u>annual conflict of interest disclosure report</u> .	X			Yes, included with the signed Annual Conflict of Interest and Confidentiality Agreement Forms – ROR-620. Verified records of staff & inspectors.
<b>§205.501(a)(11)(vi)</b> Ensuring that the <u>decision to certify</u> an operation is made by a person different from those who conducted the review of documents and on-site inspection.		X		OK, for initial files. (b) (5)
<i>A private or governmental entity accredited as a certifying agent (ACA) under this subpart must:</i>				
<b>§205.501(a)(12)(i)</b> <u>Reconsider a certified operation's application</u> for certification and, if necessary, perform a new on-site inspection when it is determined, within 12 months of certifying the operation, that any person participating in the certification process and covered under §205.501(a)(11)(ii) has or <u>had a conflict of interest</u> involving the applicant.	X			OK
<b>§205.501(a)(12)(ii)</b> <u>Refer a certified operation</u> to a different ACA for recertification and reimburse the operation for the cost of the recertification when it is determined that any person covered under §205.501(a)(11)(i) at the time of certification of the applicant <u>had a conflict of interest</u> involving the applicant.	X			OK
<b>§205.501(a)(13)</b> <u>Accept the certification decisions</u> made by another	X			OK



<b>§205.501 General Requirements for Accreditation</b>				
<b>CHECKLIST SECTION VII</b>	<b>Complies <sup>(1)</sup></b>			<b>Remarks <sup>(2)</sup></b>
	<b>Yes</b>	<b>No</b>	<b>N/A</b>	
ACA accredited or accepted by USDA.				
<b>§205.501(a)(14)</b> <u>Refrain from making false or misleading claims</u> about its accreditation status, the USDA accreditation program for ACAs, or the nature or qualities of products labeled as organically produced.	X			OK
<b>§205.501(a)(15)(i)</b> <u>Submit to the Administrator</u> a copy of: Any notice of denial of certification (§205.405), notification of noncompliance, notification of noncompliance correction, notification of proposed suspension or revocation, and notification of suspension or revocation (§205.662) simultaneously with its issuance.	X			OK, submitted as required.
<b>§205.501(a)(15)(ii)</b> <u>Submit to the Administrator</u> a list, on January 2 of each year, including the name, address, and telephone number of each operation granted certification during the preceding year.	X			OK, Operators list submitted as required.
<b>§205.501(a)(16)</b> <u>Charge applicants</u> for certification and certified production and handling operations only those fees and charges for certification activities that it has filed with the Administrator.	X			OK, only charging the applicable fees.
<b>§205.501(a)(17)</b> Pay and submit fees to AMS in accordance with §205.640.	X			OK
<b>§205.501(a)(18)</b> <u>Provide the inspector</u> , prior to each on-site inspection, with previous on-site inspection reports and <u>notify the inspector</u> of its decision regarding certification of the operation site inspected by the inspector and of any requirements for the correction of minor noncompliances.	X			OK. Provide information to inspector form file, OK , provide notifications to inspectors
<b>§205.501(a)(19)</b> <u>Accept all production or handling applications</u> that fall within its area(s) of accreditation and certify all qualified applicants, to the extent of its administrative	X			OK



<b>§205.501 General Requirements for Accreditation</b>				
<b>CHECKLIST SECTION VII</b>	<b>Complies <sup>(1)</sup></b>			<b>Remarks <sup>(2)</sup></b>
	<b>Yes</b>	<b>No</b>	<b>N/A</b>	
capacity to do so without regard to size or membership in any association or group;				
<b>§205.501(a)(20)</b> Demonstrate its ability to <u>comply with a State's organic program</u> to certify organic production or handling operations within the State.	X			OK
<b>§205.501(a)(21)</b> Comply with, implement, and <u>carry out any other terms and conditions</u> determined by the Administrator to be necessary.	X			OK
<b>§205.501(b)(1)</b> A private or governmental entity accredited as a certifying agent under this subpart may establish a seal, logo, or other identifying mark to be used by production and handling operations certified by the certifying agent to indicate affiliation with the certifying agent. <i>Provided</i> , That, the certifying agent:  <u>Does not require use of</u> its seal, logo, or other identifying mark on any product sold, labeled, or represented as organically produced as a condition of certification.	X			OK, TDA Seal not required. Also, TDA has a Go Texan Logo
<b>§205.501(b)(2)</b> <i>Provided</i> , That, the certifying agent: <u>Does not require compliance</u> with any production or handling practices <u>other than those provided</u> for in the Act and the regulations in this part as a condition of use of its identifying mark.	X			OK, only to the NOP
<b><i>A private entity accredited as a certifying agent must:</i></b>	---	---	---	---
<b>§205.501(c)(1)</b> Hold the Secretary harmless for any failure on the part of the certifying agent to carry out the provisions of the Act and the regulations in this part.	X			OK
<b>§205.501(c)(2)</b> Furnish reasonable security, in an amount and according to such terms as the Administrator may by regulation prescribe, for the purpose of protecting the	X			OK



<b>§205.501 General Requirements for Accreditation</b>				
<b>CHECKLIST SECTION VII</b>	<b>Complies <sup>(1)</sup></b>			<b>Remarks <sup>(2)</sup></b>
	<b>Yes</b>	<b>No</b>	<b>N/A</b>	
rights of operations certified by the ACA under the Act and the regulations.				
<b>§205.501(c)(3)</b> Transfer to the Administrator and make available to any applicable State organic program's governing State official all records or copies of records concerning the person's certification activities in the event that the certifying agent dissolves or loses its accreditation.	X			OK
<b>§205.501(c)(d)</b> No private or governmental entity accredited as a certifying agent under this subpart shall exclude from participation in or deny the benefits of the National Organic Program to any person due to discrimination because of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, or marital or family status.	X			OK

<b>§205.503 Applicant Information</b>				
This section of the checklist should be completed <u>only</u> if conducting an initial assessment, annual update assessment or renewal assessment. If during any on-site assessment there is objective evidence that required information was not submitted then cite under the appropriate requirement.				
<b>CHECKLIST SECTION VIII</b>	<b>Complies <sup>(1)</sup></b>			<b>Remarks <sup>(2)</sup></b>
	<b>Yes</b>	<b>No</b>	<b>N/A</b>	
References: NOP 2000 General Accreditation Policies and Procedures NOP Appeals Procedure: Adverse Action Appeal Process – Certified Operation or Applicant for Certification				
<b><i>A private or governmental entity seeking accreditation as a certifying agent must submit the following information:</i></b>	---	---	---	---
<b>§205.503(a)</b> The business name, primary office location, mailing address, name of the person(s) responsible for the certifying agent's day-to-day operations, contact numbers (telephone, facsimile, and Internet address) of the applicant, and, for an applicant who is a private person, the entity's taxpayer identification number;	X			OK, submitted required information with the renewal assessment materials





<b>§205.503 Applicant Information</b>				
This section of the checklist should be completed <u>only</u> if conducting an initial assessment, annual update assessment or renewal assessment. If during any on-site assessment there is objective evidence that required information was not submitted then cite under the appropriate requirement.				
<b>CHECKLIST SECTION VIII</b>	<b>Complies <sup>(1)</sup></b>			<b>Remarks <sup>(2)</sup></b>
	<b>Yes</b>	<b>No</b>	<b>N/A</b>	
<b>§205.503(b)</b> The name, office location, mailing address, and contact numbers (telephone, facsimile, and Internet address) for each of its organizational units, such as chapters or subsidiary offices, and the name of a contact person for each unit;	X			OK, submitted required information with the renewal assessment materials
<b>§205.503(c)</b> Each area of operation (crops, wild crops, livestock, or handling) for which accreditation is requested and the estimated number of each type of operation anticipated to be certified annually by the applicant along with a copy of the applicant's schedule of fees for all services to be provided under these regulations by the applicant;	X			OK, submitted required information with the renewal assessment materials
<b>§205.503(d)(1)</b> The type of entity the applicant is (e.g., government agricultural office, for-profit business, not-for-profit membership association) and for: A governmental entity, a copy of the official's authority to conduct certification activities under the Act and the regulations in this part,	X			OK, state government, submitted required information with the renewal assessment materials
<b>§205.503(d)(2)</b> The type of entity the applicant is (e.g., government agricultural office, for-profit business, not-for-profit membership association) and for: A private entity, documentation showing the entity's status and organizational purpose, such as articles of incorporation and by-laws or ownership or membership provisions, and its date of establishment;	X			OK, submitted required information with the renewal assessment materials
<b>§205.503(e)</b> A list of each State or foreign country in which the applicant currently certifies production and handling operations and a list of each State or foreign country in which the applicant intends to certify production or	X			OK, submitted required information with the renewal assessment materials- certify only in the state of Texas



<b>§205.503 Applicant Information</b>				
This section of the checklist should be completed <u>only</u> if conducting an initial assessment, annual update assessment or renewal assessment. If during any on-site assessment there is objective evidence that required information was not submitted then cite under the appropriate requirement.				
CHECKLIST SECTION VIII	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
handling operations.				

<b>§205.504 Evidence of Expertise and Ability</b>				
This section of the checklist should be completed <u>only</u> if conducting an initial assessment, annual update assessment or renewal assessment. If during any on-site assessment there is objective evidence that required information was not submitted then cite under the appropriate requirement.				
CHECKLIST SECTION IX	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
References: NOP 2000 General Accreditation Policies and Procedures NOP Appeals Procedure: Adverse Action Appeal Process – Certified Operation or Applicant for Certification				
<i>Personnel</i>	---	---	---	---
§205.504(a)(1) A copy of the applicant's policies and procedures for training, evaluating, and supervising personnel;	X			OK, submitted required information with the renewal assessment materials
§205.504(a)(2) The name and position description of all personnel to be used in the certification operation, including administrative staff, certification inspectors, members of any certification review and evaluation committees, contractors, and all parties responsibly connected to the certifying agent;	X			OK, submitted required information with the renewal assessment materials
§205.504(a)(3)(i) A description of the qualifications, including experience, training, and education in agriculture, organic production, and organic handling, for each <b>inspector</b> to be used by the applicant:	X			OK, submitted required information with the renewal assessment materials
§205.504(a)(3)(ii) and for Each person to be designated by the applicant to review or evaluate applications for certification:	X			OK, submitted required information with the renewal assessment materials
§205.504 (a) (4)	X			Lars Crail: Auditor



<b>§205.504 Evidence of Expertise and Ability</b>				
This section of the checklist should be completed <u>only</u> if conducting an initial assessment, annual update assessment or renewal assessment. If during any on-site assessment there is objective evidence that required information was not submitted then cite under the appropriate requirement.				
<b>CHECKLIST SECTION IX</b>	<b>Complies <sup>(1)</sup></b>			<b>Remarks <sup>(2)</sup></b>
	Yes	No	N/A	
A description of any training that the applicant has provided or intends to provide to personnel to ensure that they comply with and implement the requirements of the Act and the regulations in this part.				Observation: During the witness audit of Boehning Dairy, Inspector (h) (6) (b) (4) [REDACTED]  See Witness Audit worksheet for details. OK, submitted required information with the renewal assessment materials
<i>Administrative Policies and Procedures</i>	---	---	---	---
<b>§205.504(b)(1)</b> A copy of the procedures to be used to evaluate certification applicants, make certification decisions, and issue certification certificates;	X			OK, submitted required information with the renewal assessment materials
<b>§205.504(b)(2)</b> A copy of the procedures to be used for reviewing and investigating certified operation compliance with the Act and the regulations in this part and the reporting of violations of the Act and the regulations in this part to the Administrator;	X			OK, submitted required information with the renewal assessment materials
<b>§205.504(b)(3)</b> A copy of the procedures to be used for complying with the recordkeeping requirements set forth in §205.501(a)(9);	X			OK, submitted required information with the renewal assessment materials
<b>§205.504(b)(4)</b> A copy of the procedures to be used for maintaining the confidentiality of any business-related information as set forth in §205.501(a)(10);	X			OK, submitted required information with the renewal assessment materials
<b>§205.504(b)(5)</b> A copy of the procedures to be used, including any fees to be assessed, for making the information required under this clause available to any member of the public upon request;	X			OK, submitted required information with the renewal assessment materials



<b>§205.504 Evidence of Expertise and Ability</b>				
This section of the checklist should be completed <u>only</u> if conducting an initial assessment, annual update assessment or renewal assessment. If during any on-site assessment there is objective evidence that required information was not submitted then cite under the appropriate requirement.				
CHECKLIST SECTION IX	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
<b>§205.504(b)(6)</b> A copy of the procedures to be used for sampling and residue testing pursuant to §205.670.	X			OK, submitted required information with the renewal assessment materials
<b>Conflicts of Interest</b>	---	---	---	---
<b>§205.504(c)(1)</b> A copy of procedures intended to be implemented to prevent the occurrence of conflicts of interest, as described in §205.501(a)(11)	X			OK, submitted required information with the renewal assessment materials
<b>§205.504(c)(2)</b> A conflict of interest disclosure report, identifying any food- or agriculture-related business interests, including business interests of immediate family members, that cause a conflict of interest for all personnel required by this section and §205.501(a)(11)(v).	X			OK, submitted required information with the renewal assessment materials
<b>An applicant who currently certifies production or handling operations must submit:</b>	---	---	---	---
<b>§205.504(d)(1)</b> A list of all production and handling operations currently certified by the applicant	X			OK, submitted required information with the renewal assessment materials
<b>§205.504(d)(2)</b> Copies of at least 3 different inspection reports and certification evaluation documents for production or handling operations certified by the applicant during the previous year for each area of operation for which accreditation is requested.	X			OK, submitted required information with the renewal assessment materials
<b>§205.504(d)(3)</b> The results of any accreditation process of the applicant's operation by an accrediting body during the previous year for the purpose of evaluating its certification activities.	X			OK, submitted required information with the renewal assessment materials
<b>§205.504(e)</b> Any other information the applicant believes may assist in the Administrator's evaluation of the applicant's expertise and ability.	X			OK, submitted required information with the renewal assessment materials



<b>§205.510 Annual Report, Recordkeeping, and Renewal of Accreditation</b>				
<b>CHECKLIST SECTION X</b>	<b>Complies <sup>(1)</sup></b>			<b>Remarks <sup>(2)</sup></b>
	<b>Yes</b>	<b>No</b>	<b>N/A</b>	
<i>An accredited certifying agent must submit annually to the Administrator, on or before the anniversary date of the issuance of the notification of accreditation, the following reports and fees:</i>	---	---	---	---
<b>§205.510(a)(1)</b> A complete and accurate update of information submitted pursuant to §§205.503 and 205.504;	X			OK, submitted required information with the renewal assessment materials
<b>§205.510(a)(2)</b> Information supporting any changes being requested in the areas of accreditation described in §205.500;	X			OK, submitted required information with the renewal assessment materials
<b>§205.510(a)(3)</b> A description of the measures implemented in the previous year and any measures to be implemented in the coming year to satisfy any terms and conditions determined by the Administrator to be necessary, as specified in the most recent notification of accreditation or notice of renewal of accreditation;	X			OK, submitted required information with the renewal assessment materials
<b>§205.510(a)(4)</b> The results of the most recent performance evaluations and annual program review and a description of adjustments to the certifying agent's operation and procedures implemented or to be implemented in response to the performance evaluations and program review; and	X			OK, submitted required information with the renewal assessment materials
<b>§205.510(a)(5)</b> The fees required in §205.640(a).	X			OK, submitted required information with the renewal assessment materials
<i>Certifying agents must maintain records according to the following schedule:</i>	---	---	---	---
<b>§205.510(b)(1)</b> Records <u>obtained from</u> applicants for certification and certified operations must be maintained for <u>not less than 5 years</u> beyond their receipt;	X			OK, verified
<b>§205.510(b)(2)</b>	X			




§205.510 Annual Report, Recordkeeping, and Renewal of Accreditation				
CHECKLIST SECTION X	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
Records <u>created by</u> the ACA regarding applicants for certification and certified operations must be maintained for <u>not less than 10 years beyond</u> their creation; and				
<b>§205.510(b)(3)</b> Records <u>created or received</u> by the ACA pursuant to the <u>accreditation requirements</u> of subpart F, <u>excluding</u> any records covered by §205.510(b)(2), must be maintained for <u>not less than 5 years</u> beyond their creation or receipt.	X			OK, verified
<b>Amending Accreditation</b>	---	---	---	---
<b>§205.510(f)</b> Amendment to scope of an accreditation may be requested at any time. The application for amendment shall be sent to the Administrator and shall contain information applicable to the requested change in accreditation, a complete and accurate update of the information submitted pursuant to §§205.503 and 205.504, and the applicable fees required in §205.640.	X			OK

§205.642 Fee Schedule				
Document on Certification File Review Checklist and Certification File Review Worksheets.				
CHECKLIST SECTION XI	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
<b>§205.642</b> Are the fees charged reasonable?	X			OK, verified, set fees appear to be reasonable
<b>§205.642</b> Is the fee schedule that was submitted to applicants the same as the one provided to the Administrator?	X			OK
<b>§§205.501(a)(16) and 205.642</b> Are the fees charged to operations for certification consistent with the fee schedule filed with the Administrator?	X			OK
<b>§205.642</b> Are all applicants provided with an estimate of the total cost of certification and an estimate of the	X			OK, listed in fee schedule, provided to clients.



<b>§205.642 Fee Schedule</b>				
Document on Certification File Review Checklist and Certification File Review Worksheets.				
<b>CHECKLIST SECTION XI</b>	<b>Complies <sup>(1)</sup></b>			<b>Remarks <sup>(2)</sup></b>
	Yes	No	N/A	
annual cost of updating the certification?				
<b>§205.642</b> Are the nonrefundable portions of certification fees and the stages at which they become nonrefundable explained in the fee schedule submitted to the Administrator?	X			OK, listed
<b>§205.642</b> Does the ACA provide a copy of the fee schedule to anyone inquiring about the application process?	X			Yes, provided

<b>§205.661 Investigation of Certified Operations</b>				
<b>§205.662 Noncompliance Procedure for Certified Operations</b>				
Document on Certification File Review Worksheet, "Table 5a - Notice of Noncompliance/Adverse Action Worksheet".				
<b>CHECKLIST SECTION XII</b>	<b>Complies <sup>(1)</sup></b>			<b>Remarks <sup>(2)</sup></b>
	Yes	No	N/A	
References: NOP 2607 Disclosure of Information concerning USDA Accredited Certifying Agents and Certified Operations to the NOP NOP 4001 Complaint Handling Procedure NOP 4002 Enforcement Policy NOP Appeals Procedure: Adverse Action Appeal Process – Certified Operation or Applicant for Certification				
<b>§205.661(a)</b> If the ACA conducts any investigations of complaints of noncompliance concerning production and handling operations certified as organic by the ACA, does the ACA notify the Program Manager of all compliance proceedings and actions taken?	X			(b) (4) 
<b>§205.662(a)</b> In all cases when an inspection, review, or investigation of a certified operation by the ACA or a State organic program reveals any noncompliance with the Act or regulations, is a written notification of noncompliance sent to the certified operation?	X			Yes, verified in file reviews
<b>§205.662(a)(1) – (3)</b> Does all Notifications of Noncompliance include: A description of each noncompliance; The facts upon	X			Yes, verified in file reviews



<b>§205.661 Investigation of Certified Operations</b>				
<b>§205.662 Noncompliance Procedure for Certified Operations</b>				
Document on Certification File Review Worksheet, "Table 5a - Notice of Noncompliance/Adverse Action Worksheet".				
<b>CHECKLIST SECTION XII</b>	<b>Complies <sup>(1)</sup></b>			<b>Remarks <sup>(2)</sup></b>
	<b>Yes</b>	<b>No</b>	<b>N/A</b>	
which the notification of noncompliance is based; and The date by which the certified operation must rebut or correct each noncompliance and submit supporting documentation?				
<b>§205.662(b)</b> Does the ACA send the certified operation a written notification of noncompliance <b>resolution</b> after the certified operation demonstrates that each noncompliance is resolved?	X			Yes, verified in file reviews
<b>§205.662(c)</b> If rebuttal is unsuccessful or the correction of the noncompliance is not completed in the prescribed time period, does the ACA send the certified operation a written notice of proposed suspension or revocation of certification of the entire operation or a portion of the operation, as applicable to the noncompliance?	X			Yes, verified in file reviews
<b>§205.662(c)(1) – (4)</b> Does all Notifications of Proposed Suspension / Proposed Revocations include: The reasons for the proposed suspension or revocation; The proposed effective date of such suspension or revocation; The impact of a suspension or revocation on future eligibility for certification; and The right to request mediation pursuant to §205.663 or to file an appeal pursuant to §205.681?		X		(b) (5) 





<b>§205.661 Investigation of Certified Operations</b>				
<b>§205.662 Noncompliance Procedure for Certified Operations</b>				
Document on Certification File Review Worksheet, "Table 5a - Notice of Noncompliance/Adverse Action Worksheet".				
<b>CHECKLIST SECTION XII</b>	<b>Complies <sup>(1)</sup></b>			<b>Remarks <sup>(2)</sup></b>
	<b>Yes</b>	<b>No</b>	<b>N/A</b>	
				(b) (5)
<b>§205.662(d)</b> If the ACA or State organic program has reason to believe that a certified operation willfully violated the Act or regulations, the ACA or State organic program shall send the certified operation a notification of proposed suspension or revocation of certification of the entire operation or a portion of the operation, as applicable to the noncompliance.	X			Yes, verified in file reviews
<b>§205.662(e)(1)</b> Does the ACA or State program send the certified operation a written notification of suspension or revocation in all cases that a certified operation failed to correct the noncompliance, to resolve the issue through rebuttal or mediation, or to file an appeal of the proposed suspension or revocation of certification?	X			Yes, verified in file reviews
<b>§205.662(e)(2)</b> Has the ACA or State program sent a notice of Suspension / Revocation during the time a final resolution of either mediation or appeal is pending for a certified operation which requested either one?			X	This has not happened
<b>§205.662(g)</b> Violations of Act Has the ACA fined operations as a result of any noncompliance issues?	X			TDA has not issued any fines.
<b>§205.660(d)</b> Are all notifications of noncompliance, noncompliance resolutions, proposed suspensions or		X		(b) (5)



<b>§205.661 Investigation of Certified Operations</b>				
<b>§205.662 Noncompliance Procedure for Certified Operations</b>				
Document on Certification File Review Worksheet, "Table 5a - Notice of Noncompliance/Adverse Action Worksheet".				
<b>CHECKLIST SECTION XII</b>	<b>Complies <sup>(1)</sup></b>			<b>Remarks <sup>(2)</sup></b>
	<b>Yes</b>	<b>No</b>	<b>N/A</b>	
revocations, and suspensions or revocations issued and each response to such notification sent to the recipient's place of business via a delivery service which provides dated return receipts?				(b) (5)

<b>§205.663 Mediation</b>				
Mediation procedures are applicable to certified operations that have received a denial of certification, notification of proposed suspension, a notification of proposed revocation or a notification of noncompliance <u>that is combined with</u> a denial, proposed suspension, or proposed revocation. Mediation procedures <u>do not apply</u> to operations that have received a notification of noncompliance with no adverse action.				
<b>CHECKLIST SECTION XIII</b>	<b>Complies <sup>(1)</sup></b>			<b>Remarks <sup>(2)</sup></b>
	<b>Yes</b>	<b>No</b>	<b>N/A</b>	
<b>§205.663</b> In all instances where mediation is requested, is the request from the applicant or certified operation in writing?	X			OK, No mediation has taken place
<b>§205.663</b> If the ACA rejects the request, is the notification to reject the request of mediation sent to the operation in writing?	X			OK, No mediation has taken place
<b>§205.663</b> Does the notification to reject the request of mediation advise the operation of their right to request an appeal pursuant to 205.681?	X			OK, No mediation has taken place
<b>§205.663</b> Does the notification to reject the request of mediation advise the operation that an appeal must be requested within 30 days of the date of the written rejection of mediation?	X			OK, No mediation has taken place
<b>§205.660(d)</b> Is the notification to reject the request of mediation and each response to such notification sent to the recipient's place of business via a delivery service which provides dated return receipts?	X			OK, No mediation has taken place
<b>§205.663</b>	X			OK, No mediation has taken



<b>§205.663 Mediation</b>				
Mediation procedures are applicable to certified operations that have received a denial of certification, notification of proposed suspension, a notification of proposed revocation or a notification of noncompliance <u>that is combined with</u> a denial, proposed suspension, or proposed revocation. Mediation procedures <u>do not apply</u> to operations that have received a notification of noncompliance with no adverse action.				
CHECKLIST SECTION XIII	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
If mediation was accepted by the ACA, is the mediation conducted by a qualified mediator mutually agreed upon by the parties to the mediation?				place
<b>§205.663</b> Is an agreement reached no more than 30 days following the mediation session?	X			OK, No mediation has taken place
<b>§205.663</b> If mediation is unsuccessful, is the operation informed they have 30 days from termination of mediation to appeal the certifying agent's decision pursuant to §205.681?	X			OK, No mediation has taken place

<b>§205.670 Inspection and Testing</b>				
<b>§205.671 Exclusion from Organic Sale</b>				
§205.504(b)(6) requires that the ACA have procedures for sampling and residue testing. Procedures should address the requirements of §205.670. Evaluate procedures under §205.504(b)(6); Checklist Section IX.				
CHECKLIST SECTION XIV	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
References: <i>NOP 2610 Sampling Procedures for Residue Testing</i> <i>NOP 2611 Laboratory Selection Criteria For Pesticide Residue Testing</i> <i>NOP 2611-1 Prohibited Pesticides for NOP Residue Testing</i>				
<b>§205.670(c)</b> Are samples collected by an inspector representing the ACA, State, or Administrator as applicable?	X			Yes, by TDA staff Inspectors. Procedures listed in Organic Inspection Manual- Organic Residue Sample Collection Procedures.
<b>§205.403(e)(1)</b> Does the inspector provide the operation with a receipt for the samples taken at the time of the inspection?	X			Yes, receipt provided. Procedures listed in Organic Inspection Manual- Organic Residue Sample Collection Procedures. (VIII)
<b>§205.403(e)(1)</b> Is there any objective evidence that inspectors were charged for the samples taken?	X			No, charged to TDA unless requested by certified operation.



<b>§205.670 Inspection and Testing</b>				
<b>§205.671 Exclusion from Organic Sale</b>				
§205.504(b)(6) requires that the ACA have procedures for sampling and residue testing. Procedures should address the requirements of §205.670. Evaluate procedures under §205.504(b)(6); Checklist Section IX.				
CHECKLIST SECTION XIV	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
§205.670(c) Is chain of custody maintained?	X			Yes, Procedures listed in Organic Inspection Manual-Organic Residue Sample Collection Procedures.
§205.670(c) Is the sample submitted to an accredited lab?	X			Yes, TDA Pesticide Lab. Procedures listed in Organic Inspection Manual- Organic Residue Sample Collection Procedures.
§205.670(c) Is the sample tested in accordance with the methods described in the most current edition of the <i>Official Methods of Analysis of the AOAC International</i> or other current applicable validated methodology?	X			Yes, Yes, TDA Pesticide Lab. Procedures listed in Organic Inspection Manual-Organic Residue Sample Collection Procedures.
§§205.670(d)(2) and 205.504(b)(5)(iii) Are test results available for public access?	X			Yes, Procedures listed in Organic Inspection Manual-Organic Residue Sample Collection Procedures.
§§205.402(b)(3) and 205.403(e)(2) Is a copy of the test results provided to the applicant or certified operation?	X			Yes, Procedures listed in Organic Inspection Manual-Organic Residue Sample Collection Procedures.
§205.670(d)(1) Are test results promptly provided to the Administrator or governing State official if applicable?	X			Yes, Procedures listed in Organic Inspection Manual-Organic Residue Sample Collection Procedures.
§205.670(b) Was the testing paid for by the requesting official (Administrator or State) or the ACA?	X			Yes, by TDA unless requested by certified operation.
§205.403(c)(3) Are results compared against the National List and the Act?	X			Yes, Procedures listed in Organic Inspection Manual-Organic Residue Sample Collection Procedures.
§205.670(e) Do the results exceed the FDA or EPA regulatory	X			Yes, Procedures listed in Organic Inspection Manual-



<b>§205.670 Inspection and Testing</b>				
<b>§205.671 Exclusion from Organic Sale</b>				
§205.504(b)(6) requires that the ACA have procedures for sampling and residue testing. Procedures should address the requirements of §205.670. Evaluate procedures under §205.504(b)(6); Checklist Section IX.				
CHECKLIST SECTION XIV	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
tolerance (if there is an applicable tolerance)?				Organic Residue Sample Collection Procedures.
<b>§205.670(e)</b> If the regulatory tolerance was exceeded is it reported to the applicable agency?	X			Yes, Procedures listed in Organic Inspection Manual-Organic Residue Sample Collection Procedures.
<b>§205.671</b> Is there a prohibited substance detected that is greater than 5% of the EPA tolerance for the residue or greater than the unavoidable residual environmental contamination (UREC) level and is the product allowed to be represented as organic?	X			No, not allowed to be sold as organic. Procedures listed in Organic Inspection Manual-Organic Residue Sample Collection Procedures.
<b>§205.671</b> Are investigations conducted to determine the cause of the prohibited substance?	X			Steps verified to determine cause, Yes, Procedures listed in Organic Inspection Manual- Organic Residue Sample Collection Procedures.

<b>§205.672 Emergency Pest or Disease Treatment</b>				
If there is no instance of a prohibited substance applied due to a Federal or State emergency pest or disease treatment program identify with an "X" in NA column; and include a statement in Remarks column. These requirements only apply in the United States and not to other countries.				
CHECKLIST SECTION XV	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
<b>§205.672</b> Is there any instance where a prohibited substance was applied to a certified operation due to a Federal or State emergency pest or disease treatment program?	X			No, has not happened.
<i>If a prohibited substance is applied to a certified operation...the certification status of the operation shall not be affected as a result of the application of the prohibited substance: Provided, That:</i>	---	---	---	---
<b>§205.672(a)</b> Any harvested crop or plant part to be harvested that has contact with a prohibited substance, cannot be	X			Prohibited products excluded



<b>§205.672 Emergency Pest or Disease Treatment</b>				
If there is no instance of a prohibited substance applied due to a Federal or State emergency pest or disease treatment program identify with an "X" in NA column; and include a statement in Remarks column. These requirements only apply in the United States and not to other countries.				
CHECKLIST SECTION XV	Complies <sup>(1)</sup>			Remarks <sup>(2)</sup>
	Yes	No	N/A	
sold, labeled, or represented as organically produced.				
<b>§205.672(b)</b> Any livestock that are treated with a prohibited substance or product derived from treated livestock, cannot be sold, labeled, or represented as organically produced.	X			Prohibited products excluded
<b>Except that:</b>	---	---	---	---
<b>§205.672(b)(1)</b> Milk or milk products may be sold, labeled, or represented as organically produced beginning 12 months following the last date that the dairy animal was treated with the prohibited substance; and	X			OK, Prohibited products excluded
<b>§205.672(b)(2)</b> The offspring of gestating mammalian breeder stock treated with a prohibited substance may be considered organic: <i>Provided that</i> , the breeder stock was not in the last third of gestation on the date that the breeder stock was treated with the prohibited substance.	X			OK

**CLOSING MEETING**

The purpose of the closing meeting is to present the assessment findings and conclusions in such a manner that they are understood and acknowledged by the client.

- Sign out on attendance list (at beginning of checklist).
- Present positive aspects of the certification program.
- Present any items that are pending a determination by the NOP AIA Division.
- Present the assessment findings. For each finding, cite the specific requirement of the assessment criteria.
- Discuss the next steps in the process:
  - 1) The report is written and sent to Headquarters for review.



- 2) The NOP reviews the report and determines the compliance / noncompliance of the program and makes all decisions concerning the accreditation. The NOP has the discretion to modify the assessment findings.
- 3) The report is issued to the client by the NOP.
- Provide information about the NOP appeals process (§205.681(b)).
- Encourage feedback. Clients can submit feedback to [AIAInBox@ams.usda.gov](mailto:AIAInBox@ams.usda.gov).

**POSITIVE ASPECTS OF ACA's CERTIFICATION PROGRAM**

- Positive Aspect (1) – Good improvement regarding policy and procedure development since the prior inspection. Certification and program procedures are established along with templates. Additional refinement is required.- Bridge System starting to be used and once fully implemented should allow for one place to receive information.
- Positive Aspect (2) –Experienced inspectors during witness inspections
- Positive Aspect (3) –Program Review- Outlined status of Program & Strategic Goals

**ITEMS PENDING A DETERMINATION BY NOP**

**No items Pending – but see Outstanding NC.3**

- Pending Item (1) –
- Pending Item (2) –

**FINDINGS:**

(b) (5)

[Redacted text block]



■ [Redacted]

6  
5

[Redacted]

■ [Redacted]

[Redacted]

■ [Redacted]

[Redacted]

■ [Redacted]

[Redacted]





NC6 –

#### NOTES

##### Initial Request-

Information e-mail (packet)w/hyperlinks to various information, NOP standards, fee structure, etc.

Next- the client submits application, certif. Payment & applicable OSP, (forms & instructions available on website)

**Initial Review-** Alex or Nicole conducts – sometimes Mary Ellen, verifies for initial compliance- might ask for additional information (pending letter), verify to appear to comply.

**Inspection Packet** which includes Request for Inspection, OSP, & supporting doc. to Regional Office- Either Regional Director or Lead Inspector assign inspector and inspection (5 Regions)

**Inspection:** Inspection completed by staff inspectors – TDA staff- approx.. 32 total for all regions. Schedule inspection for initial insp. – conduct inspection, verify OSP, and docs. and fields, pastures, etc. or plant for handler. – completes inspection report & findings, sampling receipts if applicable

After Inspection- Inspection report to TDA Office- Reviewed by Nicole, Alex or Mary Ellen, (1<sup>st</sup> review usually by person that conducted initial review and then the final review by person different from the initial review – 2 persons on final review).

Certification Decision made- if granting, organic certificate issued, might be issued with minor NC's- but not usually, could be denied.  
Certificates usually issued with no conditions.

##### **Continuing Certification:**

Processors, dist., & retailers by updates to OSP to be submitted by 8/31 each year  
Crop & livestock – updates to OSP by 3/31 (either complete OSP or just any changes)

Review of updates- Alex, Nicole, or Mary Ellen

Same process to schedule insp. &

Final Review- Could be by person who reviewed the updates. Decision could be by the same person that reviewed the updates. Updated organic certificate issued each year.

Notice of NC is issued by Mary Ellen (drafted by Reviewer). Letter issued directly if no NC issued. Then CA's reviewed by initial reviewer & letter of resolution letter sent (signed by Mary Ellen)



Lars Crail Notes:

(b) (5)

[Redacted text block]

[Redacted text block]

[Redacted text block]



- (b) (5) [Redacted]

(b) (5) [Redacted]

[Redacted]

- [Redacted]
- [Redacted]
- [Redacted]

Material review

- (b) (5), (b) (4) [Redacted]

Labeling review

- (b) (5) [Redacted]
- [Redacted]



(b) (5)

- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]

Verification of Corrective actions of Noncompliances from Mid-Term Audit -Cleared 5 of 6 NC's

**NP9320BBA.NC1 - Cleared** - NOP § 205.239(a)(1) states, "The producer of an organic livestock operation must establish and maintain livestock living conditions which accommodate the health and natural behavior of animals, including: (1) Access to the outdoors, shade, shelter, exercise areas, fresh air, and direct sunlight suitable to the species, its stage of production, the climate, and the environment." *TDA certified a poultry operation (laying hen operation) in which the inspection report had stated that the poultry were not allowed access to the outdoors with the exception of three weeks during the previous year and that was due to the recommendation by their Veterinarian for disease control of Avian influenza. TDA had issued no non-compliances or areas of concerns to this operation regarding the access to the outdoors. In addition, the TDA livestock organic system plan and inspection checklist did not have any questions to address or verify the poultry access to the outdoors.* **Corrective Action:** The poultry operation surrendered certification with TDA on March 1, 2010. TDA is revising the Livestock Production Inspection Worksheet (ROR-651W) to help facilitate the inspector for verification of livestock production requirements. The approval of the draft form is expected to be completed and approved by May 31, 2010 and submitted to inspectors for their use. [Poultry files reviewed included the revised forms OSP's, Inspection Report, etc. used to verify the access to the outdoor](#)



**NP9320BBA.NC2 - Cleared** - NOP § 205.400(a) states, “A person seeking to receive or maintain organic certification under the regulations in this part must: (a) Comply with the Act and applicable organic production and handling regulations of this part.” *TDA certified a crawfish operation and issued an NOP Certificate as a Livestock Producer. The NOP does not currently have standards for aquatic species.* **Corrective Action:** TDA provided the client with a letter dated December 9, 2009, which removed the crawfish from their organic certification. [Interviews with TDA Staff and the Organic Certified Operators list reviewed confirmed that crawfish are no longer certified to the NOP by TDA.](#)

**NP9320BBA.NC4 - Cleared** - NOP §205.403(c) Verification of information states, “The on-site inspection of an operation must verify: (1) The operation’s compliance or capability to comply with the Act and the regulations in this part; and (2) That the information, including the organic production or handling system plan... accurately reflects the practices used or to be used by the applicant for certification or by the certified operation.”

- *During the on-site inspection observation of the dairy, the inspector did not verify that 90 purchased conventional heifers were transitioned to organic per the NOP Rule §205.236(a)(2) for the 12 month period. In addition, the previous inspection checklist for the inspection of August 11, 2009 listed all organic sources of the dairy cattle and did not verify these 90 heifers.* **Corrective Action:** During the February 18, 2010 processor inspection of the dairy, a TDA Inspector confirmed that the heifers did go through a 15 month transitional period prior to the harvesting of any organic milk.
- *During the on-site inspection observations, the inspector noted and discussed with the clients that the organic system plan needed additional information but did not identify this as a noncompliance or issue of concern on the Exit Interview Form.* **Corrective Action:** TDA submitted draft Organic Inspection Process Procedures and the Guidance Document for conducting Organic Producer Inspections which were revised April 9, 2010 and submitted to inspectors on April 12, 2010. The procedures were revised to emphasize the inspection process to verify the previously submitted information regarding the organic system plans and to identify potential non-compliances as applicable. In addition, a Strategic Plan and Timeline for Conducting Organic Training was submitted outlining training to be conducted in 2010 and 2011.

[Observed at all 3 witness inspections as now identifying areas of concern during the inspections. Also, detailed livestock inspection was observed.](#)

**NP9320BBA.NC5 - Cleared** - NOP § 205.404(b) states, “The certifying agent must issue a certificate of organic operation which specifies the: (2) Effective date of certification; and (3) categories of organic operation....” In addition, NOP § 205.406(d) states, “If the certifying agent determines that the certified operation is complying... and that any of the information specified on the certificate of organic operation has changed, the certifying agent must issue an updated certificate...”



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• *During the review of certificates from 10 files, it was found that one livestock certificate did not include any dates and two processor certificates did not list the effective dates.*

**Corrective Action:** TDA reissued the three certificates which now included the effective dates.

• *One client was issued a NOP Certificate as a Land Producer when the land was only in transitional status. The NOP does not allow or have a category of scope for transitional status.* **Corrective Action:** TDA submitted a letter to the client dated December 1, 2009, that revoked the Transitional NOP Organic Certificate. An example of the reissued certificate of March 1, 2010 was submitted that showed only a Transitional Certification.

Certificates reviewed during the audit included the applicable dates and information. Also, interviews and transitional certificates reviewed during the audit confirmed that no NOP Transitional certificates are being issued by TDA.

**NP9320BBA.NC6 - Cleared** - NOP §205.504(a) Evidence of expertise and ability states, “The private or governmental entity seeking accreditation as a certifying agent must submit the following documents and information... (a) Personnel (1) A copy of the applicants policies and procedures for training, evaluating, and supervising personnel.” TDA has an Organic Program Training Policy in which inspectors who conduct organic inspections must complete Organic Program training. The Policy also requires Program Specialists to receive individual training from the Program Coordinator or other Program Specialists. *Interviews and a review of training records indicated some different types of training have taken place and been completed for inspectors and Program Specialists. However, the Policy does not clearly define the training that takes place for new employees or the on-going training. The interviews and reviews of the training records did not show a consistent method or documentation of training.* **Corrective Action:** TDA submitted a revised copy of the Organic Training Program Policy and the Regulatory Inspector Training Policy for new employees, inspectors, and program specialists. TDA also submitted draft Organic Inspection Process Procedures and the Guidance Document for conducting Organic Producer Inspections which were revised April 9, 2010 and submitted to inspectors on April 12, 2010. In addition, a Strategic Plan and Timeline for Conducting Organic Training was submitted outlining training to be conducted in 2010 and 2011.

Training policy in place and training was being completed and documented as required.



## National Organic Program Certification File Review Worksheets

Tables 1 - 3 are used to record information gathered from full certification file reviews. Tables 4 - 7 are used to record information gathered from partial certification file reviews. All of the certification file review worksheets are separated into tables as described below.

<b>Certification File Review Worksheets</b>
Table 1 - General Certification File Review Information <i>(only for full file reviews)</i>
Table 2 - Summary of Certification File Review Information <i>(only for full file reviews)</i>
Table 3 - Grower Group Information <i>(only for full file reviews)</i>
Table 4 - Personnel Worksheet
Table 5a - Notice of Noncompliance / Adverse Action Worksheet
Table 5b - Notice of Noncompliance / Denial of Certification Worksheet
Table 6a - Label Review Worksheet - Products labeled as "100% Organic" or "Organic"
Table 6b - Label Review Worksheet - Packaged Products labeled as "Made with Organic"
Table 6c - Label Review Worksheet - All other labels reviewed
Table 7a - Sample Worksheet - General Information
Table 7b - Sample Worksheet - Sample Testing and Reporting Information



**Table 1 - General Certification File Review Information**

File #	Name of applicant/certified operation sampled	A Date application received	B Date of review	C Review conducted by	D Inspection date	E Inspection conducted by	F Date of final review	G Final review conducted by	H Date certification decision made	I Certification decision made by	J Date findings sent to operation 205.402(b)(1)
1	Texas Sake Co.	12/2/11	12/17/11	Mary Ellen Holliman	3/5/12	Stuart Strnad	3/8/12	Alex Hunt	3/8/12	Alex Hunt	3/16/12
2	Blanco River Organics, DBA The Farm at Monticino Ranch	4/29/11, 2/7/12	4/13/12	Nicole Fileder	6/28/11, 5/15/12	Stuart Strnad for both	7/29/11	Alex Hunt	7/30/11	Alex Hunt	7/30/11
3	Craig/Brent Wheeler	5/23/11	6/13/11	Nicole Fileder	7/14/11	Brandi Lee Chandler	7/16/11	Nicole Fileder	7/16/11	Nicole Fileder	7/16/11
4	Hidden Valley Farm	2/24/11	4/28/11 & 3/30/12	Alex Hunt	5/17/11	Steve Cavitt	6/1/11	Alex Hunt	6/3/11	Alex Hunt	6/3/11
5	Dixon Ranch	3/8/11 3/15/12	3/8/11	Byron Norton	5/24/11	Brandi Chandler	5/31/12	Byron Norton	6/3/12	Byron Norton- Same person as initial doc review- See NC3	6/3/11
6	Taylor Farm	6/28/11, 2/21/12	6/27/11 3/29/12	Nicole Fileder Nicole Fileder	7/28/11	Timothy Faske	8/3/11	Nicole Fileder	8/3/11	Alex Hunt	8/4/11
7	Turkey Creek Organic Rice	4/9/11	5/23/11	Alex Hunt	6/1/11	Mark Hatch	6/15/11	Alex Hunt	6/15/11	Alex Hunt	6/29/11
8	Boehning Dairy Farm (Witness Audit) 2011 2012	3/3/11 3/2/12	3/14/11 Cannot determine.	(b) (6)	6/6/11 6/14/12	(b) (6)	6/17/11	(b) (6)	6/18/11	(b) (6)	6/19/11





**Table 1 - General Certification File Review Information**

File #	Name of applicant/certified operation sampled	A Date application received	B Date of review	C Review conducted by	D Inspection date	E Inspection conducted by	F Date of final review	G Final review conducted by	H Date certification decision made	I Certification decision made by	J Date findings sent to operation 205.402(b)(1)
9	Picat LLC (dba Love Candy)	9/1/11	12/8/11	Alex Hunt	1/17/12	Sammy Orange (b) (6)	2/1/11	Nicole Fielder (b) (6)	2/2/11	Nicole Fielder (b) (6)	2/3/11
10	Hilltop Dairy, LLC	3/16/11	4/19/11	(b) (6)	6/6/11	(b) (6)	6/14/11	(b) (6)	6/14/11	(b) (6)	6/15/11
11											
12											
13											
14											
15											
16											
17											

Instructions: Enter dates in the mm/dd/yy format.



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**TABLE 2 - Summary of Certification File Review Information**

File #	A Scope requested	B Scope granted (L, C, WC, H)	C IA/UA	D Sample (Y/N)	E Labels (Y/N)
1	Handler	Texas Sake- H- Sake	UA	N	Y
2	Crop	Blanco River Organics, DBA The Farm at Montezino Ranch Crop- Vegetables & fruit	UA	N	N
3	Crop	Craig/Brent Wheeler- C- pecans	UA	N	N
4	Crop	Hidden Valley Farm - C- Alfalfa	UA	Y	N
5	Livestock	Dixon Ranch- L- Beef Cattle, Slaughter Sheep/lamb	UA	N	Y
6	Livestock	Taylor Farms- L- Eggs	IA	N	Y
7	Crop	Turkey Creek Organic Rice - C- Long Grain rice	UA	N	Y
8		L: A large dairy cattle operation in northern Texas with (b) (4)	(b)		
9	H	H: An all organic certified processor of candy, mostly chocolate. They produce 13 products (12 ORG, 1 MWO) that are labeled for retail.	UA	N	Y
10		H: A large all organic processor in north Texas. This operation is owned and operated by the owner of Boehning Dairy Farm. (b) (4)	(b)		
11					
12					
13					
14					
15					



**TABLE 2 - Summary of Certification File Review Information**

File #	A Scope requested	B Scope granted (L, C, WC, H)	C IA/UA	D Sample (Y/N)	E Labels (Y/N)
<p><b>Instructions:</b> For each requirement (A-E), enter the appropriate information into Table 2. Make sure the information provided in Table 2 is entered into the corresponding File # in Table 1.</p> <p><b>A.</b> Scope requested (L, C, WC, H)</p> <p><b>B.</b> Scope granted (L, C, WC, H): <i>For crop operations, include a description about the type of crop and operation such as single crop, parallel production, split production, etc. For livestock operations, include a description about the type of livestock and operation. For handling operations, include a description of the type of products and operation such as single ingredient product, multi ingredient products, trader, distributor, etc. For wild crop operations, include a description of the type of products and operation such as single products, organic and non-organic of same product in collection area, single harvester or multiple harvesters, collection areas, staging areas, production areas, and management and oversight of harvester.</i></p> <p><b>C.</b> Initial application (IA) or updated application (UA)</p> <p><b>D.</b> Was a sample pulled during the inspection? (Y/N) <i>If samples were pulled, include information in Table 7b. Sampling Worksheet - Sample and Reporting Information</i></p> <p><b>E.</b> Are any labels used by the operation? (Y/N) <i>If there are labels, include information in Table 6a, 6b, or 6c Label Review Worksheet.</i></p>					

**Table 3 - Grower Group Information**

File #	
1	N/A
2	
3	
4	
5	
<p><b>Instructions:</b> For each grower group Certification file reviewed, provide a description on the type and scope of the grower group (Crops harvested; organic and non-organic of same crops grown by producers or processed by handling operations; collection areas and production areas; and management and oversight of ICS). This information must be entered into Table 3. Make sure the information provided in Table 3 is entered into the corresponding File # in Table 1.</p>	



**Table 4 - Personnel Information Worksheet**

Name	Status – Employee / Contractor	Title / Position	Scopes Approved	Education	Training	Experience	Job Description?	COI?	Confidentiality?	Perf Eval?
(b) (6)	Staff	Inspector	C, L, H, WC	BS An Sc	TDA Org. training in livestock, land, processor ; IOIA - livestock	TDA- 13 yrs., 9 yrs as Insp., pesticides	Organic inspections	5/11/12	5/11/12	10/11 9/11
(b) (6)	Staff	Inspector	C, L, H, WC	BS Horticulture	TDA Org. training in livestock, land, processor ; IOIA training	TDA insp., pesticides, Ag. Farm work & producer	Organic inspections	4/9/12	4/9/12	9/8/11
Mary Ellen Holliman	Staff	Coordinator	C, L, H, WC	BS Ag Business & ECO	Various TDA Org. training, & various NOP ACA trainings including pasture	Org. Prog Coord. Since 3/10, Program Review Spec., AL Dept. of Ag. - pesticides	Org. Coord, Review, decisions	4/30/12	4/30/12	9/20/11



Nicole Fielder	Staff	Specialist	C, L, H, WC	BS Ag. Dev. & AnSc	rule & other organics, IOIA crop	Farm/ranc h background d, TDA or. Prog. Spec., Meats Lab	Reviewer, decisions 2	5/1/1 2	4/30/12	9/20/ 11
Alex Hunt	Staff	Specialist	C, L, H, WC	Some college ag. & food science courses	IOIA Org. training, TDA org. training	Farm work, TDA Org. Prog. Spec., various other misc. jobs & ag. jobs	Reviewer, decisions 2	5/3/1 2	5/3/12	9/20/ 11
(b) (6)	Staff	Inspector	C, L, H, WC	BS AnSC, MS Ag.	TDA Org. training in livestock, land	TDA 3 yrs, Ranch Manager, Dairy, farm exp.	Inspector	4/19/ 12	4/19/12	11/2 8/11
(b) (6)	Staff	Inspector	C, H, WC	BS Ag Eco.	TDA Org. Training	14 yrs TDA	Inspector	4/30/ 12	4/30/12	10/5/ 11
(b) (6)	Staff	Inspector	C, H,	Gen Ag.	TDA	TDA 29	Inspector	4/19/ 12	4/19/12	4/24/ 12



		WC	Org. Training- IOIA Proc.	yrs	Inspector	12	12
(b) (6)	Staff	C, H, WC	BS An Sc	Farm ranch, TDA insp.	Inspector	4/23/12	Not checked
Randy Rivera	Staff				Administer program	5/1/12	
(b) (6)	Staff	C, H, WC	BS Biology, MS – some courses	TDA 9yrs, family farm, extension & research	Inspector	5/14/12	11/8/11
<p><b>Below please provide number of personnel, divided into categories and / or job titles.</b>  <i>EX: Administrative Staff (3), Technical Staff [including inspectors, reviewers] (7), etc.</i></p> <p>TDA Organic Staff includes:            1-Administrator            2 - Program Specialist (Alex Hunt, Nicole Fielder)            1-Program Coordinator (Mary Ellen Holliman)            5 – Regional Offices (Lead Inspector(s) at each Regional Office) with 35 TDA Inspectors</p>							



**Table 5a – Notice of Noncompliance / Adverse Action Worksheet §205.662**

Name of Client	Scope	Notification of Noncompliance <i>Enter Yes, No, or NA as applicable</i>				Type of Proposed Adverse Action:	Notification of Proposed Adverse Action				Adverse Action Taken:	Request for Mediation or Appeal and Remarks
		Description of NC §205.662(a)(1)	Facts of Each NC §205.662(a)(2)	Date to Rebut or Correct §205.662(a)(3)	Resolution Notice Sent §205.662(a)(1)		Reasons for proposed action §205.662(c)(1)	Proposed Eff. Date §205.662(c)(2)	Impact of proposed action §205.662(c)(3)	Right of Mediation or appeal §205.662(c)(4)		
Texas Sake Co.	Handler	Y	Y	Y	Y	N/A						
The Farm at Montezino Ranch	Crop	Y	Y	Y	Y	N/A						
Craig/Brent Wheeler	Crop	N/A	A	N/A	N/A	N/A						
Hidden Valley	Crop	N/A	A	N/A	N/A	N/A						
Dixon Ranch	Livestock	N/A	A	N/A	N/A	N/A						
Taylor Farm	Livestock	N/A	A	N/A	N/A	N/A						
Turkey Creek Organic Rice	Crop	Y	Y	Y	Y	N/A						



**Table 5a – Notice of Noncompliance / Adverse Action Worksheet §205.662**

Name of Client	Scope	Notification of Noncompliance <i>Enter Yes, No, or NA as applicable</i>				Type of Proposed Adverse Action:	Notification of Proposed Adverse Action				Adverse Action Taken:	Request for Mediation or Appeal and Remarks
		Description of NC §205.662(a)(1)	Facts of Each NC §205.662(a)(2)	Date to Rebut or Correct §205.662(a)(3)	Resolution Notice Sent §205.662(a)(1)		Reasons for proposed action §205.662(c)(1)	Proposed Eff. Date §205.662(c)(2)	Impact of proposed action §205.662(c)(3)	Right of Mediation or appeal §205.662(c)(4)		
Aloe Farms Inc.	Handler/ Processor	N See Not e 2	Y	Y	NA	PS	N See Note 3.	Y	Y	Y	Suspension (Susp)  Revocation (Rev)  205.662(e)(1) Enter Revocation or suspension if applicable	Did the certified operation request mediation or file an appeal?  If so did the ACA or State send the notice of Suspension / Revocation while final resolution of either mediation or appeal was pending? 205.662(e)(2)  <i>Enter Remarks as appropriate. Document: 1) when Notices were submitted to the client and method used; 2) when and if the notices were sent to the Administrator.</i>
												Operation did not request mediation or file an appeal. The Notice of Suspension stated the language of 205.662(g), but did not state the section of the regulation [REDACTED] (b) (5)





**Table 5a – Notice of Noncompliance / Adverse Action Worksheet §205.662**

Name of Client	Scope	Notification of Noncompliance <i>Enter Yes, No, or NA as applicable</i>	Type of Proposed Adverse Action:	Notification of Proposed Adverse Action	Adverse Action Taken:	Request for Mediation or Appeal and Remarks
		Description of NC §205.662(a)(1) Facts of Each NC §205.662(a)(2) Date to Rebut or Correct §205.662(a)(3) Resolution Notice Sent §205.662(a)(1)	Proposed Suspension (PS) Proposed Revocation (PR) NA – none sent Enter PS, PR, or NA as applicable	Reasons for proposed action §205.662(c)(1) Proposed Eff. Date §205.662(c)(2) Impact of proposed action §205.662(c)(3) Right of Mediation or appeal §205.662(c)(4)	Suspension (Susp) Revocation (Rev) 205.662(e)(1) Enter Revocation or suspension if applicable	Did the certified operation request mediation or file an appeal?  If so did the ACA or State send the notice of Suspension / Revocation while final resolution of either mediation or appeal was pending? 205.662(e)(2)  Enter Remarks as appropriate. <u>Document:</u> 1) when Notices were submitted to the client and method used; 2) when and if the notices were sent to the Administrator.

**Instructions:**

- For livestock clients, identify the type of livestock (poultry, dairy, beef cattle, sheep, etc)
- Start with Notifications of Noncompliance (NC) and then move on to Adverse Actions (proposed suspension or revocation; and Actual suspension or revocation)
- Notifications of NC without Adverse Actions would have "NA" in the "Type of Proposed Adverse Action" column; all other columns after could remain blank if NA
- For Notifications of NC the response must be "Yes" for the first 3 columns. If the certified operation demonstrates that each NC has been resolved the response for the 4<sup>th</sup> column must also be "Yes".
- For Notifications of Proposed Adverse Actions the response must be "Yes" for all 4 columns.

Auditor Notes—Lars Crail (Table 5A):

1. (b) (5)





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**Table 5b – Notice of Noncompliance / Denial of Certification §205.405**

A.	B.	C.	D.	E.	F.	G.
Name of Client	Scope	Notification of Noncompliance Included: §205.405(a)	Applicant Response §205.405(b)	ACA Action Taken §205.405(c)	Denial of Certification included:	Identify if any of the two denial methods were used and if they were appropriate
Blandina O. Briones	Crop	Yes	No response.	No response by Applicant.	The notification did not re-cite the regulation in noncompliance, but it did state the reason.	NA
Kemberly Warren	Crop	Yes	No response. The notice of noncompliance was sent after an inspection was attempted. The operation according to the IR went "out of business."	No response by Applicant. Letter indicated that operation could withdraw its application.	Compliant.	NA
<b>Instructions:</b>						
C. Enter Yes if all 3 requirements met. (1) A description of each NC, (2) Facts upon which the notification of NC is based, and (3) Date for rebuttal or CA for each NC with supporting documentation.						
D. Enter the applicant's response: (1) Corrected NC – submitted CA; (2) Corrected NC – applied to another ACA; (3) Rebutted NC; (4) No Response provided.						
E. Enter action taken by ACA: (1) Reviewed CA/Rebuttal and conducted inspection if necessary; (2) CA/Rebuttal accepted, issued cert; (3) CA/Rebuttal not						



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accepted, issued Denial of certification; (4) No Response by Applicant – issued Denial of certification.

**F.** Enter Yes if all 4 requirements met. If any is missing indicate which one and identify NC on main checklist. The reason(s) for denial §205.405(d); (1) right to **Reapply for Certification** §205.405(d)(1); (2) right to **Request mediation** §205.405(d)(2); (3) right to **File an Appeal** §205.405(d)(3).

**G.** See main checklist for guidance notes Section V. (1) ACA issued combined notice of NC and Denial of certification §205.405(a), if correction of NC is not possible. Combined notice must include requirements of §§205.405(a) and 205.405(d); (2) ACA **denied** certification without issuing a notification of noncompliance §205.405(g), if ACA had reason to believe applicant **willfully** made a false statement or **purposefully** misrepresented the applicant's operation.



Tables 6a - Label Review Worksheet – “100% Organic” or “Organic” §205.303															
Client File	Product	1	2	3	4	5	6	7	8	9	10	11	12	Complies	
														Yes	No
Texas Sake	Organic Sake	N	N/A	N/A	N	N, But was OK per TABC (alcohol bottle) label	N	Y	Y	No, but Go Texan seal	N	Y	Y	Y	
Texas Sake	Organic Sake Kasu	N	N/A	N/A	N	Y	N	Y	Y	No, but Go Texan seal	N	Y	Y	Y	
Taylor Farms	Organic Ungraded Free Range Eggs	N	N/A	N/A	N	Y	N	Y	Y	N	N	Y	Y	Y	
Picat, LLC	Love Candy 2 pc box	N	NA	NA	N	N	N	Y	Y	N	NA	Y	Y		X
Picat, LLC	Love Candy 4 pc box	N	NA	NA	N	N	N	Y	Y	N	NA	Y	Y		X
<p><b>Instructions:</b> For products labeled as “100% Organic” or “Organic”, review against the requirements and record on table using “Y”, “N”, or “NA” as applicable (Y = Yes / N = No). Indicate for each label if it complied with requirements. Insert more rows as needed.</p> <p><b>1. For products labeled as “Organic”, does label contain the percentage of organic ingredients in the product? §205.303(a)(2) (if no, put NA for 2 and 3)</b></p> <p><b>2. Does the percentage statement exceed one-half the size of the largest type size on the panel on which the statement is displayed? §205.303(a)(2)</b></p> <p><b>3. Does the percentage statement appear in its entirety in the same type size, style, and color without highlighting? §205.303(a)(2)</b></p> <p><b>4. Is this a multi-ingredient Product labeled as 100% Organic? §205.303(a)(3)</b></p> <p><b>5. If product is labeled organic does it identify each organic ingredient in the ingredient statement? §205.303(b)(1)</b></p> <p><b>6. Does it identify water or salt as organic? §205.303(b)(1)</b></p> <p><b>7. Does the label (on the information panel) identify the name of the ACA that certified the handler of the finished product preceded by the statement, “Certified organic by * * *,” or similar phrase? §205.303(b)(2)</b></p> <p><b>8. Is the ACA identifying statement (#7 above) on the information panel and below the information identifying the handler or distributor of the product? §205.303(b)(2)</b></p> <p><b>9. Does the label use the ACA’s seal or logo? §205.303(a)(5)</b></p> <p><b>10. Is the ACA seal or logo individually displayed more prominently than the USDA seal? §205.303(a)(5)</b></p>															



**11. Does it contain the USDA Seal? §205.311(a)**

**12. Does the Seal replicate the form and design of figure 1, is printed legibly and conspicuously, and meets all requirements of §205.311(b)?**

Auditor Notes- Lars Crail- (Table 6a): (b) (5)

(b) (5)



<b>Table 6b - Label Review Worksheet – “Made with Organic”</b> (specified ingredients or food group(s))														
§205.303														
Client File	Product	1	2	3	4	5	6	7	8	9	10	11	Complies	
													Yes	No
Picat, LLC	Love Candy – Yogurt Supreme	Y	N	N	NA	NA	Y	N	Y	N	N	N		X
<p><b>Instructions:</b> For products labeled as “<i>Made with organic</i> (specified ingredients)” review against the requirements and record on table using “Y”, “N”, or “NA” as applicable (Y = Yes / N = No). Indicate for each label if it complied with requirements. Insert more rows as needed.</p> <p>1. Does the “Made with organic (specified ingredients)” statement list more than three organically produced ingredients? §205.304 (a) (1) (i)</p> <p>2. Does the “Made with organic (specified ingredients)” statement list more than three of the following food groups: beans, fish, fruits, grains, herbs, meats, nuts, oils, poultry, seeds, spices, sweeteners, and vegetables or processed milk products? §205.304 (a) (1) (ii)</p> <p>3. Does the “Made with organic (specified ingredients)” statement appear in letters that does not exceed one-half the size of the largest type size on the panel of which it appears and does it appear in its entirety in the same type size, style, and color without highlighting? §205.304 (a) (1) (iii)</p> <p>4. Does the percentage of organic ingredients statement exceed one-half the size of the largest type size on the panel on which the statement is displayed? §205.304 (a) (2)</p> <p>5. Does the percentage of organic ingredients statement appear in its entirety in the same type size, style, and color without highlighting? §205.304 (a) (2)</p> <p>6. Does the label identify each organic ingredient in the ingredient statement? §205.304 (b) (1)</p> <p>7. Does it identify water or salt as organic? §205.304 (b) (1)</p> <p>8. Does the label (on the information panel) identify the name of the ACA that certified the handler of the finished product preceded by the statement, “Certified organic by * * *,” or similar phrase? §205.304 (b) (2)</p> <p>9. Is the ACA identifying statement (#7 above) on the information panel and below the information identifying the handler or distributor of the product? §205.304 (b) (2)</p> <p>10. Does the label use the ACA’s seal or logo? §205.304 (a) (3)</p> <p>11. Does it contain the USDA Seal? §205.304 (c)</p>														







**Table 7a - Sample Testing Worksheet – General Information**

Provide information on sampling conducted by the ACA since the previous assessment. <i>(# of operations with samples pulled; number of samples pulled overall; types of samples (soil, tissue, product, water, etc...)</i>	Sampling not conducted on each certified operation as in the pasts. Samples pulled only if suspected of high risk contamination or as directed by Program. Residue Sample Collection Procedures in the Organic Inspector Manual. Samples collected during routine land producer and harvest inspections when at least 1 of the risk based sample collection criteria is met.
---	--

**Table 7b – Sample Testing and Reporting Information**

File #	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Complies	
Name of applicant / operation sampled												Type of Sample Pulled	What was sample tested for?	Why was the sample pulled?	Provide info on test results	Provide info on ACA decision & outcome	Yes	No
1																		
2																		
3																		
4	Hidden Valley Farms	Y	Y	Y	Y	Y	Y	N	N	N	N	Tissue	Pesticide	Routine Inspection	Negative – none detected	OK, no investigation	Y	
5																		
6																		
7																		
8																		
9																		
10																		

**Instructions:** Review the procedures and processes that describe how the sample was pulled and the reporting requirements. For requirements A – K, enter “Y” for “Yes” or “N” for “No”, as appropriate. Make an assessment on whether or not the requirements are met by entering an “X” under the appropriate response of the “Complies” column. If any requirement is not met, identify on Checklist Section XIV (§§205.670 & 205.671). For requirements L through P, enter the appropriate response.

- A. Was the sample collected by an inspector representing the ACA, Administrator, or State? §205.670(c)
- B. Was a receipt provided to the operation by the inspector? §205.403(e)(1)
- C. Was the chain of custody maintained? §205.670(c)





## National Organic Program Certification File Review Checklist

<p><b>Instructions:</b> This Checklist is used in conjunction with Tables 1 - 3 of the Certification File Review Worksheet. The Checklist is used only to record the overall evaluation of files where a <u>full file review</u> was conducted.</p> <p>Use the certification file number as recorded in the Certification File Review Worksheet to identify the certification file(s). If a requirement is not applicable, include relevant information in the "Remarks" for that section.</p> <p>This Checklist is not used to record the overall evaluation of full file reviews for Grower Groups. Instead, the Certification File Review Checklist—Supplement for Grower Groups must be used.</p>			
<b>Fees and other charges for certification §205.642</b>			
	<b>Yes</b>	<b>No</b>	<b>Certification File Number(s)</b>
Is the operation provided with an estimate?	X		OK-Files 1-10, fee schedule provided, includes set fees.
Are the fees charged consistent with the Fee Schedule submitted to the Administrator?	X		OK-Files 1-10
<b>Certificate §205.404(b)</b>			
<b>Does the certificate include:</b>	<b>Yes</b>	<b>No</b>	<b>Certification File Number(s)</b>
Name and address of the certified operation? §205.404(b)(1)	X		OK-Files 1-10
"Effective date of certification"? §205.404(b)(2) <i>(Date operation was initially certified to NOP Regulations)</i>	X		OK-Files 1-10
Scope -- Categories of organic operation, including crops, wild crops, livestock, or processed products produced by the certified operation? §205.404(b)(3)	X		OK-Files 1-10
Name, address, internet address, and telephone number of the certifying agent? §205.404(b)(4)	X		OK-Files 1-10
Issue date of the certificate?	X		OK-Files 1-10
Anniversary date? <i>(Date when certified operation is required to submit their next annual update)</i>	X		OK-Files 1-10
Label classification for processed organic products? <i>(100% Organic, Organic, or Made with Organic (specified ingredients or food groups))</i>	X		OK-Files 1-10- lists organic products
The statement "Certified Organic under the US National Organic Program 7 CFR Part 205"?	X		OK-Files 1-10
The statement "Once certified, a production or handling operation's organic certification continues in effect until surrendered, suspended or revoked"? §205.404(c)	X		OK-Files 1-10
Are certificates issued in English?	X		OK-Files 1-10
<b>Remarks:</b>			
<p>All areas comply with NOP requirements. Certificates lists the information for Organic Certificates as in the NOP Handbook. TDA certificates have been revised in the last year to meet the NOP Handbook requirements.</p>			



<b>Application §205.401</b>			
<b>Does the application include:</b>	<b>Yes</b>	<b>No</b>	<b>Certification File Number(s)</b>
The name of person completing the application?	X		OK-Files 1-10
Applicant's business name?	X		OK-Files 1-10
Applicant's address?	X		OK-Files 1-10
Applicant's telephone number?	X		OK-Files 1-10
If a corporation, the name, address, and telephone number of the person authorized to act on the applicant's behalf?	X		OK-Files 1-10
Information on previous certifications?	X		OK-Files 1-10
Other information deemed necessary by the ACA to determine compliance with the ACT?	X		OK-Files 1-10
<b>Remarks:</b>			
ROR-600- Organic Certification Application , applications were complete & applications & OSP included required information			
<b>Organic System Plan (OSP) §205.401(a) and §205.406(a)</b>			
<b>Does the OSP include:</b>	<b>Yes</b>	<b>No</b>	<b>Certification File Number(s)</b>
A description of practices and procedures to be performed and maintained, including the frequency with which they will be performed? §§205.202 - 205.207; 205.236 – 205.240; and 205.270 – 205.272		X	See Outstanding NC3-Files 2,4,5,8,9- OSP errors or needing more info. OK, Files 1,3,6,7,10
A list of each substance to be used as a production input, indicating its composition, source, location(s) where it will be used, and documentation of commercial availability, as applicable?			
A description of the monitoring practices and procedures to be performed and maintained, including the frequency with which they will be performed, to verify that the plan is effectively implemented?		X	See Outstanding NC3-Files 2,4,5,8,9- OSP errors or needing more info. , OK files 1,3,6,7,10
A description of the recordkeeping system implemented to comply with the requirements established in §205.103?	X		OK-Files 1-10
Does the OSP include a description of the management practices and physical barriers established to prevent commingling of organic and nonorganic products on a split operation and to prevent contact of organic production and products with prohibited substances	X		OK- Files 1-10
Additional information deemed necessary by the certifying agent to evaluate compliance with the regulations?	X		OK- Files 1-10



Continuing Certification: Did the certified operation submit an updated OSP which includes:	Yes	No	Certification File Number(s)
A summary statement, supported by documentation, detailing any deviations from, changes to, modifications to, or other amendments made to the previous year's organic system plan during the previous year?		X	See Outstanding NC3-Files 2,4,5,8,9- OSP errors or needing more info. , OK files 1,3,6,7,10
Any additions or deletions to the previous year's organic system plan, intended to be undertaken in the coming year, detailed pursuant to §205.200?		X	See Outstanding NC3-Files 2,4,5,8,9- OSP errors or needing more info. , OK files 1,3,6,7,10
Any additions to or deletions from the information required pursuant to §205.401(b)?	X		OK- Files 1-10
An update on the correction of minor noncompliance's previously identified by the certifying agent as requiring correction for continued certification?	X		OK- Files 1-10
Other information as deemed necessary by the certifying agent to determine compliance with the Act and the regulations	X		OK- Files 1-10
<b>Remarks:</b>			
TDA has had an improvement in the review process of the OSP and request for additional information prior to the inspection. (b) (5)			
<b>General Assessments:</b>			
	Yes	No	Certification File Number(s)
Are the materials and inputs used in compliance with the NL and annotations?	X		OK- Files 1-7, 9-10 (but see outstanding NC 3. For file8)
Is the application and OSP complete?		X	See Outstanding NC3-Files 2,4,5,8,9- OSP errors or needing more info. , OK files 1,3,6,7,10
Is there evidence that an exit interview was conducted?	X		OK- Files 1-10
Information on issues of concern identified by inspector.	X		OK- Files 1-10
Were there any notices of non-compliance, or adverse actions by the ACA and was the correct process followed?	X		OK- Files 1-10
If this was a continuation of certification review and any information on the certificate changed, did the ACA provide the operation with an updated certificate? §205.406 (d)	X		OK- Files 1-10, certificates updated as applicable
<b>Remarks:</b>			
Auditor Notes (Lars Crail): File #1: While reviewing the operation's file, There is a document stamped "received on 4/19/11" that appears to be a request from TDA to the operator regarding a healthcare material in use by the operation (b) (4). The notice			



states that the product contains (b) (4), (b) (5). TDA instructed the operation to search for a compliant product. No noncompliance was issued to the operation. During an interview with Mary Ellen Holliman, she stated that this product was approved by TDA at one time and further review determined it was not compliant. TDA decided not to issue a noncompliance since TDA made the error and felt that the operation should not be penalized –See NC3 –Outstanding. There is a response from the operation on 4/19/11 stating that a replacement could not be located, but that they would not continue to use the material.

(b) (4) did the 2012 (annual), 2011 (complaint), 2011 (annual), 2010 (annual), 2009 (annual). There is no TDA policy to change inspectors after a certain number continuous occurrences. This is not a noncompliance, but an observation. TDA should consider limiting the number of continuous inspections of a single operation.

See Outstanding NC3- -Files 2,4,5,8,9- OSP errors or needing more info.

**Overall Determination Statement:**

**Include** a statement based on an overall determination on whether the operation meets the following as applicable: the crop production standards (§§205.200 through 205.206); wild crop production standards (§205.207); livestock production standards (§§205.236 through 205.240); handling production standards (§§205.270 through 205.272); and applicable guidance documents of the NOP Handbook.

**Include** a statement on whether the initial review, inspection, and final decisions were in compliance with the requirements.

Operations of files reviewed meets applicable NOP Standards and Guidance of the NOP Handbook. Initial review, inspection, and final decisions meet requirements from files reviewed. (Except in the areas identified as Non-compliances and the outstanding noncompliance.



## National Organic Program Witness Audit Checklist

Witness Audit - General Information	
This Checklist is used in conjunction with Tables 1 through 3 of the Certification File Review Worksheets. The Certification File Review Worksheets and a full file review shall be completed prior to conducting the witness audit. This Checklist is used to record evaluation information for each witness audit with exception to Grower Groups. The Witness Audit Checklist for Grower Groups shall be used when witnessing Grower Groups.	
Witness audit date:	5/14/12
Name of operation:	Boehning Dairy (BD)
Location of operation:	690 Country Road 45, Earth, TX 79031 (North Texas – Panhandle)
Scope of certification requested:	(b) (4)
Scope of certification granted:	(b) (4)
Actual or Demonstration inspection:	Actual (Annual Inspection). Last annual inspection was conducted on 6/6/11 (b) (4)
Inspector's Name:	(b) (6)
Subcontracted or staff inspector:	TDA Staff Inspector, Region 1, currently (b) (6) does all 5 livestock TDA clients.
Verify conflict of interest and confidentiality status of inspector:	Conflict of Interest (no conflicts indicated) and Confidentiality Status on the same form. Signed 3/21/11. Note this is over 1 year old.
Name of knowledgeable representative of the operation:	Brian Boehning, owner and operator.
Names of anyone else present during the inspection:	(b) (4)



	(b) (4)
Time Inspection started:	9:15 am
Time Inspection completed:	4:00 pm
Was there enough time allocated for the inspection?	Yes
Did the inspector verify the corrective actions on previous non-compliances as applicable?	(b) (4)
General information on operation to include: <b>crops</b> grown, acreage, fields, where fields are located (1 site or 2 or more); <b>wild-crops</b> collected, training of collectors; type of <b>livestock</b> operation, number of animals, identification methods; type of <b>handling</b> operation, products processed, etc...	(b) (4)
General information on materials and inputs used and are they in compliance with the National List (NL) and annotations.	The inspector did a thorough job checking inputs (b) (4)  (b) (4)  Feed records were accurate and exceptionally maintained (b) (4)





As appropriate did the OSP adequately address the requirements for:	
<b>Crops</b>	
Land requirements §205.202	(b) (4)
Soil fertility and crop nutrient management practice standard §205.203	(b) (4)
Seeds and planting stock practice standard §205.204	
Crop rotation practice standard §205.205	
Crop pest, weed, and disease management practice standard §205.206	
<b>Wild-Crops</b>	
Wild crop harvesting practice standard §205.207	(b) (4)
<b>Livestock</b>	
Origin of livestock §205.236	(b) (4)
Livestock feed §205.237	(b) (4)
Livestock health care practice standard §205.238	(b) (4)
Livestock living conditions §205.239	(b) (4)
Pasture Practice Standard §205.240	(b) (4)



	(b) (4)
<b>Handler</b>	
Organic handling requirements §205.270	(b) (4)
Facility pest management practice standard §205.271	
Commingling and contact with prohibited substance prevention practice standard §205.272	

Sampling	
Was a sample pulled during the inspection? §205.670	(b) (4)
What was sampled and why?	
Verify sampling procedures, chain of control, etc. §205.670(c)	
Did the inspector provide the applicant with a receipt for any samples taken? §205.403(e)	
Did the sampling process follow the ACA's sampling procedure?	
Was the inspector charged for the samples? §205.403(e)	
Did the ACA pay for the testing? §205.670(b)	

Labels	
Were labels verified during the on-site inspection? §205.403(c)(2)	(b) (4)
Were the labels being used the same as those approved by the ACA?	
How was the inspector made aware of which labels are approved by the ACA?	



Exit Interview §205.403(d)	
Document information addressed by the inspector during the exit interview	
The inspector addressed the findings regarding (b) (4)	
Was the exit interview conducted with a knowledgeable representative?	Yes, Brian Boehning, the owner/operator.
Did the exit interview address the accuracy and completeness of the inspection observations?	Yes
Did the exit interview address the need for additional information?	(b) (4)
Did the exit interview address issues of concern identified during the inspection?	(b) (4)

Questions for the inspector:	
As the inspection progresses insert additional questions to ask the inspector on areas of the inspection/operation that need clarification.	
What did the inspector receive from the ACA in order to conduct the inspection?	Prior inspection report, current OSP, the certification notice to the operation from the prior inspection and an IR template
Does the Inspector have a copy of the NOP Standards?	Yes
If applicable was the inspector knowledgeable of recent updates to the standards or policy clarifications?	(b) (4)
How is the inspector informed of the ACA's policies and procedures and changes to them?	Communication through TDA headquarters staff.
Does the inspector provide consulting services of any kind?	No. Full time TDA inspector.
If so, how is this information provided to the ACA?	
What is the inspector's background (experience, training, and education) in relation to the operation being inspected?	(b) (6)



	<p>(b) (6)</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p>
--	--

<b>Questions for the Applicant / Certified Operation:</b>	
As the inspection progresses insert additional questions to ask the operation's representative on areas of the operation that need clarification	
Did the certified operation receive a copy of the previous inspection report, if applicable?	Yes
Did the operation receive a certificate from the ACA?	Yes
Does the client have a current copy of the NOP Standards?	(b) (4)
If applicable, how did the operation receive information on temporary variances?	(b) (4)

<b>Overall did the inspection verify:</b>	
That the operation was in compliance or was able to comply with the ACT? §205.403(c)(1)	Yes. A well operated and organized ranch.
That the OSP accurately reflected the practices used by the operation? §205.403(c)(2)	Yes.



United States Department of Agriculture  
Agricultural Marketing Service  
National Organic Program

1400 Independence Avenue S.W.  
Room 2646-South Building  
Washington, DC 20250

NOP 2005-4  
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That prohibited substances had not been and were not being applied to the operation? §205.403(c)(3)	Yes.
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## National Organic Program Witness Audit Checklist

Witness Audit - General Information	
This Checklist is used in conjunction with Tables 1 through 3 of the Certification File Review Worksheets. The Certification File Review Worksheets and a full file review shall be completed prior to conducting the witness audit. This Checklist is used to record evaluation information for each witness audit with exception to Grower Groups. The Witness Audit Checklist for Grower Groups shall be used when witnessing Grower Groups.	
Witness audit date:	May 15, 2012
Name of operation:	Texas Sake Co.
Location of operation:	Austin, TX
Scope of certification requested:	Handler
Scope of certification granted:	Handler
Actual or Demonstration inspection:	Demonstration
Inspector's Name:	(b) (6)
Subcontracted or staff inspector:	Staff
Verify conflict of interest and confidentiality status of inspector:	No conflicts of interest
Name of knowledgeable representative of the operation:	(b) (6)
Names of anyone else present during the inspection:	(b) (6)
Time Inspection started:	10:00am
Time Inspection completed:	12:15pm
Was there enough time allocated for the inspection?	yes
Did the inspector verify the corrective actions on previous non-compliances as applicable?	N/A, no previous Non-compliances
General information on operation to include: <b>crops</b> grown, acreage, fields, where fields are located (1 site or 2 or more); <b>wild-crops</b> collected, training of collectors; type of <b>livestock</b> operation, number of animals, identification methods; type of <b>handling</b> operation, products processed, etc...	Handler Operation – only produces organic sake, 4 products listed: Sake Kasu, Sake, & Koji, 2 <sup>nd</sup> insp. For org. certification
General information on materials and inputs used and are they in compliance with the National List (NL) and annotations.	only organic rice, & yeast – Yeast was on NL



<b>As appropriate did the OSP adequately address the requirements for:</b>	
<b>Crops</b>	
Land requirements §205.202	N/A
Soil fertility and crop nutrient management practice standard §205.203	N/A
Seeds and planting stock practice standard §205.204	N/A
Crop rotation practice standard §205.205	N/A
Crop pest, weed, and disease management practice standard §205.206	N/A
<b>Wild-Crops</b>	
Wild crop harvesting practice standard §205.207	N/A
<b>Livestock</b>	
Origin of livestock §205.236	N/A
Livestock feed §205.237	N/A
Livestock health care practice standard §205.238	N/A
Livestock living conditions §205.239	N/A
Pasture Practice Standard §205.240	N/A
<b>Handler</b>	
Organic handling requirements §205.270	Organic Handling requirements listed in the OSP and observed in the operation met NOP Requirements.
Facility pest management practice standard §205.271	Verified during inspection. Inspector Identified need to keep better pest management records during the inspection.
Commingling and contact with prohibited substance prevention practice standard §205.272	Only organic products so no comingling issues.

<b>Sampling</b>	
Was a sample pulled during the inspection? §205.670	No
What was sampled and why?	N/A
Verify sampling procedures, chain of control, etc. §205.670(c)	N/A-Verified procedures – Procedures were OK
Did the inspector provide the applicant with a receipt for any samples taken? §205.403(e)	N/A-Verified procedures – Procedures were OK
Did the sampling process follow the ACA’s sampling procedure?	N/A-Verified procedures – Procedures were OK
Was the inspector charged for the samples? §205.403(e)	N/A-Verified procedures – Procedures were OK
Did the ACA pay for the testing? §205.670(b)	N/A-Verified procedures – Procedures were OK



Labels	
Were labels verified during the on-site inspection? §205.403(c)(2)	Yes
Were the labels being used the same as those approved by the ACA?	Yes
How was the inspector made aware of which labels are approved by the ACA?	By the Certification File submitted with the certification docs.

Exit Interview §205.403(d)	
Document information addressed by the inspector during the exit interview	
<ul style="list-style-type: none"> <li>-Pest Mgmt.- Need to keep records of monitoring and other activities, not just list in OSP</li> <li>- Recordkeeping – need to keep hard copy receipts of yeast purchased</li> <li>-Floor Plan – need to update floor plan in OSP to reflect actual practices</li> </ul>	
Was the exit interview conducted with a knowledgeable representative?	Yes
Did the exit interview address the accuracy and completeness of the inspection observations?	Yes
Did the exit interview address the need for additional information?	Yes
Did the exit interview address issues of concern identified during the inspection?	Yes

Questions for the inspector:	
As the inspection progresses insert additional questions to ask the inspector on areas of the inspection/operation that need clarification.	
What did the inspector receive from the ACA in order to conduct the inspection?	Certification File, past insp. Report, certificate, updated OSP,
Does the Inspector have a copy of the NOP Standards?	Yes
If applicable was the inspector knowledgeable of recent updates to the standards or policy clarifications?	Yes
How is the inspector informed of the ACA's policies and procedures and changes to them?	E-mail or website
Does the inspector provide consulting services of any kind?	None
If so, how is this information provided to the ACA?	
What is the inspector's background (experience, training, and education) in relation to the operation being inspected?	Ag. Degree, NOP Training, past NOP audits,

**Questions for the Applicant / Certified Operation:**





As the inspection progresses insert additional questions to ask the operation's representative on areas of the operation that need clarification	
Did the certified operation receive a copy of the previous inspection report, if applicable?	See NC1 – Certified Operation only received a copy of the findings and not a copy of the inspection report
Did the operation receive a certificate from the ACA?	yes
Does the client have a current copy of the NOP Standards?	Yes, available on-line
If applicable, how did the operation receive information on temporary variances?	N/A

Overall did the inspection verify:	
That the operation was in compliance or was able to comply with the ACT? §205.403(c)(1)	yes
That the OSP accurately reflected the practices used by the operation? §205.403(c)(2)	yes
That prohibited substances had not been and were not being applied to the operation? §205.403(c)(3)	yes

Handler Operation – only produces organic sake, 4 products listed: Sake Kasu, Sake, & Koji (not yet sold), 2<sup>nd</sup> insp. For org. certification. Last Inspection was conducted on 3/5/12 by (b) (b). This inspection was conducted as a demonstration inspection. Small operation that only produces organic. Organic rice was observed and available in facility. Observed the small yeasts bottles that contain the yeast added to the batch.



## National Organic Program Witness Audit Checklist

Witness Audit - General Information	
This Checklist is used in conjunction with Tables 1 through 3 of the Certification File Review Worksheets. The Certification File Review Worksheets and a full file review shall be completed prior to conducting the witness audit. This Checklist is used to record evaluation information for each witness audit with exception to Grower Groups. The Witness Audit Checklist for Grower Groups shall be used when witnessing Grower Groups.	
Witness audit date:	May 15, 2012
Name of operation:	Blanco River Organics DBA The Farm at Montesino Ranch
Location of operation:	Wimberly, TX
Scope of certification requested:	Crop
Scope of certification granted:	Crop
Actual or Demonstration inspection:	Actual – annual renewal
Inspector’s Name:	(b) (6)
Subcontracted or staff inspector:	Staff
Verify conflict of interest and confidentiality status of inspector:	No conflicts of interest
Name of knowledgeable representative of the operation:	(b) (6)
Names of anyone else present during the inspection:	(b) (6)
Time Inspection started:	2:00pm
Time Inspection completed:	5:45pm
Was there enough time allocated for the inspection?	yes
Did the inspector verify the corrective actions on previous non-compliances as applicable?	N/A, no previous CA’s
General information on operation to include: <b>crops</b> grown, acreage, fields, where fields are located (1 site or 2 or more); <b>wild-crops</b> collected, training of collectors; type of <b>livestock</b> operation, number of animals, identification methods; type of <b>handling</b> operation, products processed, etc...	Vegetable & Fruit Farm- various vegetables & some fruit- peaches, blackberry, 1 Ac total with (b) Acres of crop, All organic operation for this section of the farm, separated by high fence and adequate buffer zones on all areas. Rest of ranch is not organic but is managed organically or as close as possible. Had 3 greenhouses, not being used at the time of the inspection.



<p>General information on materials and inputs used and are they in compliance with the National List (NL) and annotations.</p>	<p>Inputs used included (b) (4) [redacted]          [redacted] It complied with the NL as applicable</p>
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As appropriate did the OSP adequately address the requirements for:	
<b>Crops</b>	
Land requirements §205.202	Yes, organic for many years.
Soil fertility and crop nutrient management practice standard §205.203	Yes, crop rotation, soil amendments, cover crops See NC.3 Outstanding NC on still having some incomplete reviews on OSP's- on this OSP listed off farm manure as one of the major sources of soil fertility and in the next section listed manure as N/A.
Seeds and planting stock practice standard §205.204	Yes, organic seeds used when possible, or organic seed search. No treated or GMO seeds used.
Crop rotation practice standard §205.205	Yes, rotation of various vegetables and green manure crops
Crop pest, weed, and disease management practice standard §205.206	Yes, various pest treatments listed including (b) (4) [redacted] - verified during inspection
<b>Wild-Crops</b>	
Wild crop harvesting practice standard §205.207	N/A
<b>Livestock</b>	
Origin of livestock §205.236	N/A
Livestock feed §205.237	N/A
Livestock health care practice standard §205.238	N/A
Livestock living conditions §205.239	N/A
Pasture Practice Standard §205.240	N/A
<b>Handler</b>	
Organic handling requirements §205.270	N/A
Facility pest management practice standard §205.271	N/A
Commingling and contact with prohibited substance prevention practice standard §205.272	N/A

Sampling	
Was a sample pulled during the inspection? §205.670	No
What was sampled and why?	No Sample taken
Verify sampling procedures, chain of control, etc.	OK, Procedures verified - OK



§205.670(c)	
Did the inspector provide the applicant with a receipt for any samples taken? §205.403(e)	No sample taken, procedures OK
Did the sampling process follow the ACA's sampling procedure?	No sample taken, procedures OK
Was the inspector charged for the samples? §205.403(e)	No sample taken, procedures OK
Did the ACA pay for the testing? §205.670(b)	No sample taken, procedures OK

Labels	
Were labels verified during the on-site inspection? §205.403(c)(2)	N/A, no labels
Were the labels being used the same as those approved by the ACA?	N/A
How was the inspector made aware of which labels are approved by the ACA?	N/A

Exit Interview §205.403(d)	
Document information addressed by the inspector during the exit interview <span style="color: red;">(b) (4), (b) (5)</span> <div style="background-color: black; width: 100%; height: 100%; min-height: 100px;"></div>	
Was the exit interview conducted with a knowledgeable representative?	Yes
Did the exit interview address the accuracy and completeness of the inspection observations?	Yes
Did the exit interview address the need for additional information?	Yes
Did the exit interview address issues of concern identified during the inspection?	Yes

Questions for the inspector:	
As the inspection progresses insert additional questions to ask the inspector on areas of the inspection/operation that need clarification.	
What did the inspector receive from the ACA in order to conduct the inspection?	Certification File, past insp. Report, certificate, updated OSP & docs, crop list, input list
Does the Inspector have a copy of the NOP Standards?	Yes
If applicable was the inspector knowledgeable of recent updates to the standards or policy clarifications?	Yes
How is the inspector informed of the ACA's policies and	e-mails and notices



procedures and changes to them?	
Does the inspector provide consulting services of any kind?	No
If so, how is this information provided to the ACA?	
What is the inspector's background (experience, training, and education) in relation to the operation being inspected?	Ag. Degree, NOP Training, past NOP audits,

<b>Questions for the Applicant / Certified Operation:</b> As the inspection progresses insert additional questions to ask the operation's representative on areas of the operation that need clarification	
Did the certified operation receive a copy of the previous inspection report, if applicable?	See NC – Certified Operation only received a copy of the findings and not a cop of the inspection report
Did the operation receive a certificate from the ACA?	yes
Does the client have a current copy of the NOP Standards?	yes
If applicable, how did the operation receive information on temporary variances?	N/A

<b>Overall did the inspection verify:</b>	
That the operation was in compliance or was able to comply with the ACT? §205.403(c)(1)	yes
That the OSP accurately reflected the practices used by the operation? §205.403(c)(2)	Yes, accept as noted by inspector during exit meeting
That prohibited substances had not been and were not being applied to the operation? §205.403(c)(3)	yes

Vegetable & Fruit Farm- various vegetables & some fruit- peaches, blackberry, (b) Ac total with (b) Acres of crop, All organic operation for this section of the farm, separated by high fence and adequate buffer zones on all areas. Farm has been organic for many years. Just changed to different farm manager as previous one had left recently. Rest of ranch is not organic but is managed organically or as close as possible. Had 3 greenhouses, not being used at the time of the inspection. As noted by the inspector, greenhouse measurement was incorrect in OSP but was close to total square feet. Also, need to revise OSP to accurately reflect some of the current practices and inputs. No prohibited substances observe on farm, and new farm manager is



United States Department of Agriculture  
Agricultural Marketing Service  
National Organic Program

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Page 5 of 5

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slowly starting to figure out how to manage the farm more efficiently. The new manager had been working on this farm for several years.

(b) (5)

(b) (5), (b) (4)








(b) (5), (b) (6), (b) (4)



(b) (6), (b) (5), (b) (4)



(b) (5), (b) (4)





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**Texas Department of Agriculture**  
*Organic Inspection Findings*

ROR-660

Todd Staples, Commissioner

<b>SECTION A</b>	<b>VERIFICATION INFORMATION</b>	
	Client Name REDLAND DAIRY LLC	TDA Client No. (b) (4)
	Facility Name REDLAND DAIRY, LLC.	TDA Account No. (b) (4)

<b>SECTION B</b>	<b>INSPECTION INFORMATION</b>			
	Inspection Type Routine		Inspection ID No. 07575110809103014	
	Inspector ID 07575	Inspector Name (b) (6)	Region <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	
	Date 8/10/2011 <small>Enter as MM/DD/YYYY</small>	Time 12:30 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	County Code 369	County PARMER

<b>SECTION C</b>	<b>FINDINGS</b>
	Certification Type: (b) (4) (b) (4)

TDA License No. **(b) (4)**

Inspector ID No.   07575  

Inspection Date   8/10/2011  

<b>SUMMARY FOR PRODUCER</b>	
Person present at time of inspection: <b>(b) (6)</b>	
<input checked="" type="checkbox"/> These findings and all comments were discussed with the inspection observer during the exit interview.	
COMMENTS	
<b>(b) (4)</b>	

SECTION D



**Texas Department of  
Agriculture**  
*Organic Land Producer Inspection  
Report*

ROR-650

Todd Staples, Commissioner

SECTION A	VERIFICATION INFORMATION	
SECTION A	Client Name REDLAND DAIRY LLC	TDA Client No. (b) (4)
	Facility Name REDLAND DAIRY, LLC.	TDA Account No. (b) (4)

SECTION B	INSPECTION INFORMATION			
SECTION B	Inspection Type Routine	Inspection ID No. 07575110809103014		
	Inspector ID 07575	Inspector Name (b) (6)	Region <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	
	Date    08/10/2011 <small>Enter as MM/DD/YYYY</small>	Time   11:23 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	County Code 369	County PARMER

SECTION C	FARM AND LAND INFORMATION				
SECTION C	Total farm acres: (b) (4)	Certified farm acres:	Organic: (b) (4)	Transitional: (b) (4)	
		In crop production:	Organic: (b) (4)	Transitional: (b) (4)	
		Not in crop production:	Organic: (b) (4)	Transitional: (b) (4)	
		Certified Greenhouse area (sq. ft.):	Organic: (b) (4)	Transitional: (b) (4)	
	1) Is the information regarding on and off-farm processing under Section B of the ROR-607 accurate?	(b) (4)	Yes	(b) (4)	No <sup>1</sup>
	2) Is the information regarding on-farm storage under Section B of the ROR-607 accurate?	(b) (4)	Yes	(b) (4)	No <sup>1</sup>
	3) Is the information under Section C of the ROR-607 regarding the general farm map accurate?	(b) (4)	Yes	(b) (4)	No <sup>1</sup>
4) Is the information under Section D of the ROR-607 regarding the listing of fields, greenhouses/indoor production areas accurate?	(b) (4)	Yes	(b) (4)	No <sup>1</sup>	
5) Is the information under Section E of the ROR-607 regarding field crop/greenhouse plan for the one-year certification period accurate?	(b) (4)	Yes	(b) (4)	No <sup>1</sup>	
<sup>1</sup> If No, the producer must submit changes directly to the Organic Certification Program.					
6) Is the information under Section F of the ROR-607 regarding preceding three-year material use accurate?	(b) (4)	Yes	(b) (4)	No <sup>2</sup>	
<sup>2</sup> If No, possible noncompliance.					
7) Is this business currently in operation?	(b) (4)	Yes	(b) (4)	No (inspection complete)	
<input checked="" type="checkbox"/> In compliance at time of inspection <input type="checkbox"/> Area(s) of concern <input type="checkbox"/> Possible Noncompliance					
Write comments under comments section.					

TDA License No. **(b) (4)** Inspector ID No. 07575 Inspection Date 08/10/2011

<b>BUFFER ZONES</b>		<b>(b) NA (if all in-door production)</b>		
<b>SECTION D</b>	7) Are conventional crops grown on farm?	<b>(b) Yes</b> <sup>1</sup>	<b>(b) No</b>	
	<sup>1</sup> If Yes, describe how boundaries of field units are marked:			<b>(b) (4)</b>
	8) Is the information under Section G of the ROR-607 regarding the location, type, width, and adjoining land use accurate?	Yes	<b>(b) No</b> <sup>2</sup>	
	9) Is the information under Section G of the ROR-607 regarding adjacent roadways accurate?	Yes <b>(b) No</b> <sup>2</sup>	<b>(b) N/A</b>	
	10) Is the information under Section G of the ROR-607 regarding flood waters accurate?	Yes	<b>(b) No</b> <sup>2</sup>	
<sup>2</sup> If No, possible noncompliance.				
	11) Do any fields have a potential for contamination from drift or run-off?	<b>(b) Yes</b> <sup>3</sup>	<b>(b) No</b>	
<sup>3</sup> If Yes, list the information below:				
<b>Field(s) at Risk</b>	<b>Additional Steps Taken to Prevent Contamination</b>			
<b>(b) (4)</b>	<b>(b) (4)</b>			
<b>(b) In compliance at time of inspection    (b) Area(s) of concern    (b) Possible Noncompliance</b>				
Write comments under comments section.				

<b>GREENHOUSE/INDOOR UNIT INFORMATION</b>		<b>(b) NA (if all out-door production)</b>		
<b>SECTION E</b>	12) Is the information regarding production systems under Section H Subsection 2 of the ROR-607 accurate?	<b>(b) Yes</b>	<b>(b) No</b> <sup>1</sup>	
	13) Are all input products used or intended for use in greenhouse/indoor unit production listed in Section H of the ROR-607?	<b>(b) Yes</b>	<b>(b) No</b> <sup>2</sup>	
	<sup>2</sup> If No, area(s) of concern and list the information below:			<b>(b) (4)</b>
	<b>Product</b>	<b>Brand Name or Source</b>	<b>No. of Applications Per Year</b>	<b>Reason for use</b>
<b>(b) (4)</b>	<b>(b) (4)</b>	<b>(b) (4)</b>	<b>(b) (4)</b>	
	14) Is all of the information in Section H Subsections 3, 4, and 5 of the ROR-607 accurate?	<b>(b) Yes</b>	<b>(b) No</b> <sup>1</sup>	
<sup>1</sup> If No, area(s) of concern and explain under comments section.				
<b>(b) In compliance at time of inspection    (b) Area(s) of concern    (b) Possible Noncompliance</b>				
Write comments under comments section.				



TDA License No. (b) (4)

Inspector ID No. 07575

Inspection Date 08/10/2011

<b>SOIL AND CROP FERTILITY MANAGEMENT</b>			
Soil Type: (b) Sandy (b) Sandy Loam (b) Loam (b) Clay Loam (b) Clay			
15) Is the information under Section J Subsection 1 of the ROR-607 regarding the monitoring of fertility management accurate? (b) Yes (b) No <sup>1</sup>			
16) Is the information under Section J Subsection 1 of the ROR-607 regarding the components of soil and crop fertility plan accurate? (b) Yes (b) No <sup>1</sup>			
17) Is the list of all soil and crop inputs used or intended for use under Section J Subsection 2 of the ROR-607 accurate? (b) Yes (b) No <sup>2</sup>			
<sup>2</sup> If No, and if any additional soil or crop inputs are verified that were not included in the application, list the information below:			
Product	Brand Name or Source	No. of Applications Per Year	Reason for use
(b) (4)			
18) Is all of the information under Section J Subsection 2 of the ROR-607 regarding compost use accurate? (b) Yes (b) No <sup>1</sup>			
19) Are all copies of labels or lists of ingredients and their source available at the time of inspection? <sup>2</sup> (b) (4) Yes (b) (4) No <sup>1</sup>			
<sup>2</sup> If any additional soil or crop input labels are verified during the inspection that were <u>not</u> included with the application, list them in the above table and attach copies of them with this worksheet.			
20) Is all of the information under Section J Subsection 3 of the ROR-607 regarding manure use accurate? (b) Yes (b) No <sup>1</sup>			
<sup>1</sup> If No, area(s) of concern and explain under comments section.			
(b) In compliance at time of inspection (b) Area(s) of concern (b) Possible Noncompliance			
Write comments under comments section.			

SECTION F

TDA License No. (b) (4)

Inspector ID No. 07575

Inspection Date 08/10/2011

<b>SOIL AND WATER CONSERVATION</b>		(b) NA (if all in-door production)
<b>SECTION G</b>	21) Are annual rainfall records maintained?	(b) Yes (b) No
	22) Is the information under Section K Subsection 1 of the ROR-607 regarding the soil and water conservation methods of production and non-production areas accurate?	(4) Yes (4) No <sup>1</sup>
	23) Is there any evidence of soil erosion?	Yes <sup>2</sup> No
	<sup>2</sup> If Yes, what is the cause of erosion and what practices are in place to prevent further erosion?	
	(b) (4)	
24) Is the information under Section K Subsection 1 of the ROR-607 regarding the uses of water, the sources of water, and irrigation systems accurate?	(b) Yes (b) No <sup>1</sup> (4) (4)	
25) Is the information under Section K Subsection 1 of the ROR-607 regarding practices used to protect water quality accurate?	Yes No <sup>1</sup>	
<sup>1</sup> If No, area(s) of concern and explain under comments section.		
(b) In compliance at time of inspection (b) Area(s) of concern (b) Possible Noncompliance		
Write comments under comments section.		

<b>PROPAGATION MATERIALS</b>				
<b>SECTION H</b>	26) Is the information under Section L Subsection 1 of the ROR-607 regarding the types of propagation materials used accurate?	(b) Yes (b) No <sup>1</sup> (4) (4)		
	27) Is the information under Section L Subsections 2 and 3 of the ROR-607 regarding the sources of propagation materials accurate?	(b) Yes (b) No <sup>2</sup> (4) (4)		
	<sup>2</sup> If No, and if any additional propagation materials are verified that were not included in the application, list the information below:			
	Product	Brand Name or Source	No. of Applications Per Year	Reason for use
	(b) (4)			
*If any additional propagation material labels are verified during the inspection that were <u>not</u> included with the application, attach copies of them with this worksheet.				
<sup>1</sup> If No, possible noncompliance and list any discrepancies under the comments section.				
(b) In compliance at time of inspection (b) Area(s) of concern (b) Possible Noncompliance				
Write comments under comments section.				

TDA License No. (b) (4)

Inspector ID No. 07575

Inspection Date 08/10/2011

SECTION I			
PEST, DISEASE, AND WEED MANAGEMENT			
28) Is the information under Section M Subsection 2 of the ROR-607 regarding pest problems and methods used to control pests accurate?	(b) (4)	Yes	(b) (4) No <sup>1</sup>
29) Are all materials used to control pest problems listed under Section M Subsection 2 of the ROR-607 accurate?	(b) (4)	Yes	(b) (4) No <sup>1</sup>
30) Is the information under Section M Subsection 3 of the ROR-607 regarding disease prevention strategies accurate?	(b) (4)	Yes	(b) (4) No
31) Are all materials used to control disease problems listed under Section M Subsection 3 of the ROR-607 accurate?	(b) (4)	Yes	(b) (4) No <sup>1</sup>
32) Is all of the information under Section M Subsection 4 of the ROR-607 regarding weed management accurate?	(b) (4)	Yes	(b) (4) No <sup>1</sup>
<sup>1</sup> If No, possible noncompliance. List all materials not listed in the ROR-607 below and attach any labels or source information if available.			
Product	Brand Name or Source	No. of Applications Per Year	Reason for use
(b) (4)			
(b) In compliance at time of inspection		(b) Area(s) of concern	(b) Possible Noncompliance
Write comments under comments section.			

SECTION J			
MAINTENANCE OF ORGANIC INTEGRITY			
33) Are any crops grown conventionally on farm?	(b) (4)	Yes	(b) (4) No
34) Is all of the information under Section N Subsection 1 of the ROR-607 regarding conventional or transitional crops accurate?	(b) (4)	Yes	(b) (4) No <sup>1</sup>
35) Is all of the information under Section N Subsection 2 of the ROR-607 regarding equipment used in organic production accurate?	(b) (4)	Yes	(b) (4) No <sup>1</sup>
36) Is all of the information under Section N Subsection 3 of the ROR-607 regarding harvest practices of organic crops accurate?	(b) (4)	Yes	(b) (4) No <sup>1</sup>
37) Is all of the information under Section N Subsection 4 of the ROR-607 regarding post-harvest practices accurate?	(b) (4)	Yes	(b) (4) No <sup>1</sup>
38) Is all of the information under Section N Subsection 5 of the ROR-607 regarding crop storage practices accurate?	(b) (4)	Yes	(b) (4) No <sup>1</sup>
39) Is all of the information under Section N Subsection 6 of the ROR-607 regarding the transportation of crops accurate?	(b) (4)	Yes	(b) (4) No <sup>1</sup> (b) (4) N/A
<sup>1</sup> If No, possible noncompliance. List any discrepancies under the comments section.			
(b) In compliance at time of inspection		(b) Area(s) of concern	(b) Possible Noncompliance
Write comments under comments section.			

TDA License No. (b) (4)

Inspector ID No. 07575

Inspection Date 08/10/2011

<b>RECORD KEEPING</b>					
40) Select all records maintained and if they are complete and current:		Records Maintained?		Complete & Current? <sup>1</sup>	
Field Activity Log <sup>2</sup>	(b) (4)	Yes	(b) (4) No	(b) (4) Yes	(b) (4) No <sup>1</sup>
Harvest Records <sup>2</sup>	(b) (4)	Yes	(b) (4) No	(b) (4) Yes	(b) (4) No <sup>1</sup>
Previous Land Use <sup>2</sup> (3 previous years for new applicants)		Yes	No	Yes	No <sup>1</sup>
Material Storage Records <sup>2</sup>		Yes	No	Yes	No <sup>1</sup>
Sales Records <sup>2</sup>		Yes	No	Yes	No <sup>1</sup>
Seed Source Documentation <sup>2</sup>		Yes	No	Yes	No <sup>1</sup>
Complaint Log <sup>2</sup>		Yes	No	Yes	No <sup>1</sup>
Applied Material Records <sup>2</sup>		Yes	No	Yes	No <sup>1</sup>
Documentation of Seed and/or Seedling Production		Yes	No	Yes	No
Equipment Records		Yes	No	Yes	No
Manure and/or Compost Records		Yes	No	Yes	No
Labor Records		Yes	No	Yes	No
Other (specify): (b) (4)	(b) (4)	Yes	No	Yes	No
41) Does record keeping system adequately provide for auditing the organic production?		(b) (4)	Yes	(b) (4)	No <sup>3</sup>
<sup>1</sup> Verify that the records were found to be complete and current at time of inspection. <i>If No, possible noncompliance.</i> <sup>2</sup> This type of record keeping is required to demonstrate compliance. <i>If these records are not in place or if the information is insufficient to communicate the applicable information, then this is a possible noncompliance.</i> <sup>3</sup> <i>If No, possible noncompliance.</i> *Note, all records must be maintained for 5 years.					
(b) In compliance at time of inspection		(b) Area(s) of concern		(b) Possible Noncompliance	
Write comments under comments section.					

SECTION K

TDA License No. (b) (4)

Inspector ID No. 07575

Inspection Date 08/10/2011

<b>RESIDUE SAMPLE COLLECTION LOG</b>				
42) Total number of samples collected: 0				
Inspector Sample Number	Reason for Residue Sampling	Sample Source	Sample Type	Field Numbers/ Greenhouse Units Sampled:
(b) (4)	(b) (4)	Initial Inspection	Soil	(b) (4)
		Routine Inspection	Tissue	
		Re-inspection	Compost	
		Complaint/Violation	Other	
		Initial Inspection	Soil	
		Routine Inspection	Tissue	
		Re-inspection	Compost	
		Complaint/Violation	Other	
		Initial Inspection	Soil	
		Routine Inspection	Tissue	
		Re-inspection	Compost	
		Complaint/Violation	Other	
(b) (4)	(b) (4)	<input type="checkbox"/> Initial Inspection	<input type="checkbox"/> Soil	(b) (4)
		<input type="checkbox"/> Routine Inspection	<input type="checkbox"/> Tissue	
		<input type="checkbox"/> Re-inspection	<input type="checkbox"/> Compost	
		<input type="checkbox"/> Complaint/Violation	<input type="checkbox"/> Other	
(b) (4)	(b) (4)	<input type="checkbox"/> Initial Inspection	<input type="checkbox"/> Soil	(b) (4)
		<input type="checkbox"/> Routine Inspection	<input type="checkbox"/> Tissue	
		<input type="checkbox"/> Re-inspection	<input type="checkbox"/> Compost	
		<input type="checkbox"/> Complaint/Violation	<input type="checkbox"/> Other	
(b) (4)	(b) (4)	<input type="checkbox"/> Initial Inspection	<input type="checkbox"/> Soil	(b) (4)
		<input type="checkbox"/> Routine Inspection	<input type="checkbox"/> Tissue	
		<input type="checkbox"/> Re-inspection	<input type="checkbox"/> Compost	
		<input type="checkbox"/> Complaint/Violation	<input type="checkbox"/> Other	
(b) (4)	(b) (4)	<input type="checkbox"/> Initial Inspection	<input type="checkbox"/> Soil	(b) (4)
		<input type="checkbox"/> Routine Inspection	<input type="checkbox"/> Tissue	
		<input type="checkbox"/> Re-inspection	<input type="checkbox"/> Compost	
		<input type="checkbox"/> Complaint/Violation	<input type="checkbox"/> Other	

SECTION L

TDA License No. (b) (4) Inspector ID No. 07575 Inspection Date 08/10/2011

<b>SECTION M</b>	<b>SUMMARY FOR PRODUCER</b>
	43) Person present at time of inspection: (b) (6)
	<input checked="" type="checkbox"/> These findings and all comments were discussed with the inspection observer during the exit interview.
	<b>COMMENTS</b>

(b) (4)

<b>SECTION N</b>	<b>SUMMARY FOR ORGANIC CERTIFICATION PROGRAM STAFF</b>
	<b>COMMENTS</b>
	(b) (4)
	<b>Checklist</b>

Please use this checklist to ensure you are sending and/or completing all of the necessary information and documents.

- (b) Organic Land Producer Inspection Report
- (4) Organic Land Producer Inspection Findings
- Residue Sample Collection Receipt
- PI-518 Official Sample Chain of Custody
- Additional Attachments (specify):

(b) (4)



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**Texas Department of Agriculture**  
*Organic Inspection Findings*

ROR-660

Todd Staples, Commissioner

<b>SECTION A</b>	<b>VERIFICATION INFORMATION</b>	
	Client Name REDLAND DAIRY LLC	TDA Client No. (b) (4)
	Facility Name REDLAND DAIRY, LLC.	TDA Account No. (b) (4)

<b>SECTION B</b>	<b>INSPECTION INFORMATION</b>	
	Inspection Type Routine	Inspection ID No. 07575110809102839
	Inspector ID 07575	Inspector Name (b) (6)
	Date 8/10/2011 <small>Enter as MM/DD/YYYY</small>	Time 11:22 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM
	Region <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	County Code 369
		County PARMER

<b>SECTION C</b>	<b>FINDINGS</b>
	Certification Type: (b) (4) <div style="background-color: black; width: 100%; height: 150px; margin-top: 5px;"></div>

TDA License No.   (b) (4)   Inspector ID No.   07575   Inspection Date   8/10/2011  

<b>SUMMARY FOR PRODUCER</b>	
Person present at time of inspection: <u>  (b) (6)  </u>	
<input checked="" type="checkbox"/> These findings and all comments were discussed with the inspection observer during the exit interview.	
<b>COMMENTS</b>	
(b) (4)	
<b>SECTION D</b>	





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**Texas Department of Agriculture**  
**Organic Livestock Producer Inspection Report**

ROR-651

Todd Staples, Commissioner

SECTION A		VERIFICATION INFORMATION					
SECTION A	Client Name REDLAND DAIRY LLC	TDA Client No. (b) (4)					
	Facility Name REDLAND DAIRY, LLC.	TDA Account No. (b) (4)					
SECTION B							
INSPECTION INFORMATION							
SECTION B	Inspection Type Routine	Inspection ID No. 07575110809102839					
	Inspector ID 07575	Inspector Name (b) (6)	Region <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5				
	Date 8/9/2011 <small>Enter as MM/DD/YYYY</small>	Time 10:16 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	County Code 369	County PARMER			
	<th colspan="4">SECTION C</th>			SECTION C			
<th colspan="4">FACILITY AND LIVESTOCK INFORMATION</th>				FACILITY AND LIVESTOCK INFORMATION			
1) Is land used for producing livestock certified?		(b) (4)	Yes	(b) (4)	No <sup>1</sup>		
TDA Acct.#:	0507264	Other Certifier:		Cert. #:			
2) Is the information regarding pastures and facilities under Section C of the ROR-603 accurate?		(b) (4)	Yes	(b) (4)	No <sup>2</sup>		
3) Is the livestock information under Section C of the ROR-603 accurate?		(b) (4)	Yes	(b) (4)	No <sup>2</sup>		
<sup>2</sup> If No, the producer must submit changes to the TDA, Organic Certification Program.							
4) Is any aspect of the livestock operation performed at another location?		(b) (4)	Yes <sup>3</sup>	(b) (4)	No		
<sup>3</sup> If Yes, are the addresses provided in the ROR-603 accurate?		(b) (4)	Yes	(b) (4)	No <sup>1</sup>		
<sup>1</sup> If No, possible noncompliance.							
5) Have all pastures been inspected as part of the Organic Land Producer Inspection?		(b) (4)	Yes	(b) (4)	No <sup>4</sup>		
<sup>4</sup> If No, when will the Organic Land Producer Inspection be performed?		(b) (4)					

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<b>FACILITY AND LIVESTOCK INFORMATION (CONTINUED)</b>	
Complete the following sections as they apply to the operation.	
<b>MILK PRODUCTION</b>	<input type="checkbox"/> <b>NA (Skip to Meat Production)</b>
6) Is milk inspection documentation provided under Section C Questions 5a-5e of the ROR-603 accurate?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>1</sup>
<sup>1</sup> If No, possible noncompliance. If the materials listed are incorrect and/or not listed in the ROR-603, list them below and attach all product labels and ingredient listings if available:	
<b>Brand Name</b>	<b>Manufacturer</b>
<b>(b) (4)</b>	
<b>MEAT PRODUCTION</b>	<input checked="" type="checkbox"/> <b>NA (Skip to Egg Production)</b>
7) Are animals being slaughtered and processed on farm?	<input checked="" type="checkbox"/> Yes <sup>2</sup> <input checked="" type="checkbox"/> No
<sup>2</sup> If Yes, provide name of Certifier and Processor Certificate #:	
<b>(b) (4)</b>	
8) Is the loading and transportation information under Section C Questions 6b-6j of the ROR-603 accurate?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>3</sup>
<sup>3</sup> If No, possible noncompliance.	
<b>EGG PRODUCTION</b>	<input checked="" type="checkbox"/> <b>NA (Skip to Fiber Production)</b>
9) Is the information regarding the collection, washing, packaging, and storage of eggs under Section C Questions 7a-7h of the ROR-603 accurate?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>4</sup>
<sup>4</sup> If No, area(s) of concern.	
10) Does the applicant/licensee have a Texas egg license number?	<input checked="" type="checkbox"/> Yes <sup>5</sup> <input checked="" type="checkbox"/> No
<sup>5</sup> If Yes, provide the Texas egg license number:	
<b>(b) (4)</b>	
<sup>5</sup> If Yes, provide the Texas egg license expiration date: Enter as MM/DD/YYYY	
<b>(b) (4)</b>	
11) Are eggs being sold directly to consumer?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
12) Are eggs being sold to a retail market?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>FIBER PRODUCTION</b>	<input checked="" type="checkbox"/> <b>NA</b>
13) Is the information provided under Section C Questions 8a-8b of the ROR-603 accurate?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>6</sup>
<sup>6</sup> If No, area(s) of concern.	
14) Is any organic fiber processing performed on farm?	<input checked="" type="checkbox"/> Yes <sup>7</sup> <input checked="" type="checkbox"/> No
<sup>7</sup> If Yes, provide name of Certifier and Processor Certificate #:	
<b>(b) (4)</b>	
<input checked="" type="checkbox"/> <b>In compliance at time of inspection</b> <input checked="" type="checkbox"/> <b>Area(s) of concern*</b> <input checked="" type="checkbox"/> <b>Possible Noncompliance*</b>	
*Please clarify under Section J and/or Section K of this report.	

SECTION C (CONTINUED)

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ORIGIN OF LIVESTOCK				
SECTION D	15) Is the information regarding transitioning livestock to organic production provided in the ROR-603 accurate?	<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>1</sup>	
	16) Are replacement animals:			
	Raised on farm through natural breeding?	Yes	No	
	Raised on farm through an artificial breeding system?	Yes	No	
	Purchased from an organic source?	Yes	No	
	Purchased from a non-organic source?	Yes	No	
	*Documentation must be on file and available for inspection to confirm the status and history of each purchased animal.			
	17) Are dairy and breeder stock under organic management from the last third of gestation?	<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>1</sup>	<b>(b) (4)</b> NA
	18) Are dairy animals under continuous organic management for at least one year prior to the production of milk or milk products that are to be sold, labeled, or represented as organic?	Yes	No <sup>1</sup>	NA
	19) Are poultry under continuous organic management beginning no later than the second day of life?	Yes	No <sup>1</sup>	NA
20) Is the animal identification system listed in the ROR-603 accurate?	Yes	<b>(b) (4)</b> No <sup>1</sup>		
<sup>1</sup> If No, possible noncompliance.				
<b>(b) (4)</b> In compliance at time of inspection		<b>(b) (4)</b> Area(s) of concern*	<b>(b) (4)</b> Possible Noncompliance*	
*Please clarify under Section J and/or Section K of this report.				

LIVESTOCK FEED				
SECTION E	21) Are all the feed rations for each of the individual production groups and for each season listed correctly in the ROR-603?		<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>1</sup>
	<sup>1</sup> If No, possible noncompliance. List incorrect and/or feed rations not listed in the ROR-603 below:			
	Production Group:	Ration ID:	Months in which the ration is used:	
	<b>(b) (4)</b>	<b>(b) (4)</b>	<b>(b) (4)</b>	
	Ingredient:	Quantity:	<b>(b) (4)</b> Grown or	<b>(b) (4)</b> Purchased <sup>2</sup>
	<b>(b) (4)</b>	<b>(b) (4)</b>	<b>(b) (4)</b> Grown or	<b>(b) (4)</b> Purchased <sup>2</sup>
	<b>(b) (4)</b>	<b>(b) (4)</b>	<b>(b) (4)</b> Grown or	<b>(b) (4)</b> Purchased <sup>2</sup>
	<b>(b) (4)</b>	<b>(b) (4)</b>	<b>(b) (4)</b> Grown or	<b>(b) (4)</b> Purchased <sup>2</sup>
	<b>(b) (4)</b>	<b>(b) (4)</b>	<b>(b) (4)</b> Grown or	<b>(b) (4)</b> Purchased <sup>2</sup>
	<b>(b) (4)</b>	<b>(b) (4)</b>	<b>(b) (4)</b> Grown or	<b>(b) (4)</b> Purchased <sup>2</sup>
Production Group:	Ration ID:	Months in which the ration is used:		
<b>(b) (4)</b>	<b>(b) (4)</b>	<b>(b) (4)</b>		
Ingredient:	Quantity:	<b>(b) (4)</b> Grown or	<b>(b) (4)</b> Purchased <sup>2</sup>	
<b>(b) (4)</b>	<b>(b) (4)</b>	<b>(b) (4)</b> Grown or	<b>(b) (4)</b> Purchased <sup>2</sup>	
<b>(b) (4)</b>	<b>(b) (4)</b>	<b>(b) (4)</b> Grown or	<b>(b) (4)</b> Purchased <sup>2</sup>	
<b>(b) (4)</b>	<b>(b) (4)</b>	<b>(b) (4)</b> Grown or	<b>(b) (4)</b> Purchased <sup>2</sup>	
<b>(b) (4)</b>	<b>(b) (4)</b>	<b>(b) (4)</b> Grown or	<b>(b) (4)</b> Purchased <sup>2</sup>	
<b>(b) (4)</b>	<b>(b) (4)</b>	<b>(b) (4)</b> Grown or	<b>(b) (4)</b> Purchased <sup>2</sup>	

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**LIVESTOCK FEED (CONTINUED)**

**Production Group:** (b) (4) **Ration ID:** (b) (4) **Months in which the ration is used:** (b) (4)

Ingredient: <u>(b) (4)</u>	Quantity: <u>(b) (4)</u>	<input checked="" type="checkbox"/> Grown or	<input checked="" type="checkbox"/> Purchased <sup>2</sup>
Ingredient: <u>(b) (4)</u>	Quantity: <u>(b) (4)</u>	<input checked="" type="checkbox"/> Grown or	<input checked="" type="checkbox"/> Purchased <sup>2</sup>
Ingredient: <u>(b) (4)</u>	Quantity: <u>(b) (4)</u>	<input checked="" type="checkbox"/> Grown or	<input checked="" type="checkbox"/> Purchased <sup>2</sup>
Ingredient: <u>(b) (4)</u>	Quantity: <u>(b) (4)</u>	<input checked="" type="checkbox"/> Grown or	<input checked="" type="checkbox"/> Purchased <sup>2</sup>
Ingredient: <u>(b) (4)</u>	Quantity: <u>(b) (4)</u>	<input checked="" type="checkbox"/> Grown or	<input checked="" type="checkbox"/> Purchased <sup>2</sup>
Ingredient: <u>(b) (4)</u>	Quantity: <u>(b) (4)</u>	<input type="checkbox"/> Grown or	<input type="checkbox"/> Purchased <sup>2</sup>

<sup>2</sup>Is the feed source information of all purchased feed provided in the ROR-603 and the above table (if applicable) accurate?  Yes  No<sup>3</sup>

<sup>3</sup>If No, possible noncompliance. If any purchased feed is incorrect and/or not listed in the ROR-603, list them below and attach all feed labels and ingredient listings if available:

Purchased Feed	Supplier	Supplier Certifier	Delivered <sup>4</sup>
<u>(b) (4)</u>	<u>(b) (4)</u>	<u>(b) (4)</u>	<input checked="" type="checkbox"/> Yes <sup>4</sup> <input checked="" type="checkbox"/> No
<u>(b) (4)</u>	<u>(b) (4)</u>	<u>(b) (4)</u>	<input checked="" type="checkbox"/> Yes <sup>4</sup> <input checked="" type="checkbox"/> No
<u>(b) (4)</u>	<u>(b) (4)</u>	<u>(b) (4)</u>	<input checked="" type="checkbox"/> Yes <sup>4</sup> <input checked="" type="checkbox"/> No
<u>(b) (4)</u>	<u>(b) (4)</u>	<u>(b) (4)</u>	<input type="checkbox"/> Yes <sup>4</sup> <input type="checkbox"/> No

<sup>4</sup>Are Clean Truck Affidavits on file if delivered as bulk shipments?  Yes  No<sup>5</sup>  NA

22) Is feed stored in a manner that prevents contamination from rodents/other animals, spoilage by water/wind/erosion, spoilage by bacteria/organisms?  Yes  No<sup>5</sup>

<sup>5</sup>If No, possible noncompliance.

23) Is any livestock feed processed on farm?  Yes<sup>6</sup>  No

<sup>6</sup>If Yes, is the information provided in Section E Question 10e of the ROR-603 accurate?  Yes  No<sup>7</sup>

<sup>7</sup>If No, possible noncompliance. List all incorrect and/or on farm feed processing (roasting, grinding, etc.) not listed in the ROR-603 and the equipment used in the process:

Processing Type	Equipment
<u>(b) (4)</u>	<u>(b) (4)</u>

24) If processing equipment is used for non-organic products, is the equipment cleaned to prevent cross-contamination?  Yes  No<sup>8</sup>  NA

<sup>8</sup>If No, possible noncompliance.

SECTION E (CONTINUED)

TDA License No. **(b) (4)** Inspector ID No. 07575 Inspection Date 8/9/2011

<b>LIVESTOCK FEED (CONTINUED)</b>			
25) Is any livestock feed processed off farm? <input checked="" type="checkbox"/> Yes <sup>9</sup> <input checked="" type="checkbox"/> No			
<sup>9</sup> If Yes, is the information provided in Section E Question 10g of the ROR-603 accurate? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>10</sup>			
<sup>10</sup> If No, possible noncompliance. List incorrect and/or off farm feed processing not listed in the ROR-603 below:			
Feed Processed	Type of Processing	Name of Company	Certifier of the Processing Company
<b>(b) (4)</b>			
26) Are feed supplements fed to livestock? <input checked="" type="checkbox"/> Yes <sup>11</sup> <input checked="" type="checkbox"/> No			
<sup>11</sup> If Yes, is the information under Section E Question 11a of the ROR-603 accurate? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>12</sup>			
<sup>12</sup> If No, possible noncompliance. If any feed supplement listed is incorrect and/or not listed in the ROR-603, list them below and attach all labels and ingredient information if available:			
Brand Name	Manufacturer	Delivery Method	Frequency Fed
<b>(b) (4)</b>			
27) Is the information under Section E Question 11b of the ROR-603 accurate? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>13</sup>			
<sup>13</sup> If No, area(s) of concern. List the incorrect and/or water source information not listed in the ROR-603 below:			
Source	Livestock Groups Available To		
<b>(b) (4)</b>			
28) Is water tested? <input checked="" type="checkbox"/> Yes <sup>14</sup> <input checked="" type="checkbox"/> No			
<sup>14</sup> If Yes, provide the date of the most recent water test Enter as MM/DD/YYYY <b>(b) (4)</b>			
29) Are materials used to clean watering sources? <input checked="" type="checkbox"/> Yes <sup>15</sup> <input checked="" type="checkbox"/> No			
<sup>15</sup> If Yes, is the information under Section E Question 11e of the ROR-603 accurate? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>16</sup>			
<sup>16</sup> If No, possible noncompliance. If any materials listed are incorrect and/or not listed in the ROR-603, list them below and attach all labels and ingredient listings if available:			
Brand Name	Manufacturer		
<b>(b) (4)</b>			
<input checked="" type="checkbox"/> In compliance at time of inspection <input checked="" type="checkbox"/> Area(s) of concern* <input checked="" type="checkbox"/> Possible Noncompliance*			
*Please clarify under Section J and/or Section K of this report.			

SECTION E (CONTINUED)

TDA License No. **(b) (4)** Inspector ID No. 07575 Inspection Date 8/9/2011

HEALTH MANAGEMENT			
30) Is the information regarding livestock breeds under Section F Question 13a of the ROR-603 accurate?		<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <sup>1</sup>
<sup>1</sup> If No, area(s) of concern. List the incorrect and/or breed information not listed in the ROR-603 below:			
Livestock Species	Breed(s)		
<b>(b) (4)</b>			
31) Are vaccines used in the health management program?		<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<sup>2</sup> If Yes, is the information under Section F Question 14 of the ROR-603 accurate?		<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <sup>3</sup>
<sup>3</sup> If No, possible noncompliance. If any vaccines listed are incorrect and/or not listed in the ROR-603, list them below and attach all labels and ingredient listings if available:			
Brand Name	Manufacturer	Age/When Given	How Administered
<b>(b) (4)</b>			
SECTION F	32) Is the information under Section F Question 15 of the ROR-603 accurate?		<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>4</sup>
	<sup>4</sup> If No, possible noncompliance. If any materials listed are incorrect and/or not listed in the ROR-603, list them below and attach all labels and ingredient listings if available:		
	Brand Name	Manufacturer	
<b>(b) (4)</b>			
33) How is the health of animals evaluated (check all that apply):			
<input checked="" type="checkbox"/> Body condition scoring			
<input checked="" type="checkbox"/> Physical characteristics			
<input type="checkbox"/> Production			
<input type="checkbox"/> Visual assessment			
<input type="checkbox"/> Behavior			
Testing (specify) <b>(b) (4)</b>			

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HEALTH MANAGEMENT (CONTINUED)	
34) Are all products listed under Section F Question 17 of the ROR-603 accurate? <b>(b)</b> Yes <b>(b)</b> No <sup>5</sup>	
<sup>5</sup> If No, possible noncompliance. If materials listed are incorrect and/or not listed in the ROR-603, list them below and attach all labels and ingredient listings if available:	
<b>Brand Name</b>	<b>Manufacturer</b>
<b>(b) (4)</b>	
35) Is the information under Section F Questions 19-22 of the ROR-603 accurate? <b>(b)</b> Yes <b>(b)</b> No <sup>6</sup>	
<sup>6</sup> If No, area(s) of concern.	
36) Is the information under Section F Questions 23 of the ROR-603 accurate? <b>(b)</b> Yes <b>(b)</b> No <sup>7</sup>	
37) Are all pain management agents used listed in the ROR-603 accurate? <b>(4)</b> Yes <b>(4)</b> No <sup>7</sup>	
<sup>7</sup> If No, possible noncompliance. List the incorrect and/or materials not listed in the ROR-603 below and attach all labels and ingredient listings if available:	
<b>Brand Name</b>	<b>Manufacturer</b>
<b>(b) (4)</b>	
38) Is the information under Section F Questions 24a-26 of the ROR-603 accurate? <b>(b)</b> Yes <b>(b)</b> No <sup>8</sup>	
<sup>8</sup> If No, possible noncompliance.	
<b>(b) ( In compliance at time of inspection (b) Area(s) of concern* (b) Possible Noncompliance*</b>	
*Please clarify under Section J and/or Section K of this report.	

LIVESTOCK LIVING CONDITIONS	
39) Is the information under Section G Questions 27-30 of the ROR-603 accurate? <b>(b)</b> Yes <b>(b)</b> No <sup>1</sup>	
<sup>1</sup> If No, possible noncompliance.	
40) Is the information under Section G Questions 31a-31b of the ROR-603 accurate? <b>(b)</b> Yes <b>(b)</b> No <sup>2</sup>	
<sup>2</sup> If No, area(s) of concern. List the incorrect and/or bedding materials not listed in the ROR-603 below:	
<b>Bedding Type</b>	<b>Source of Bedding</b>
<b>(b) (4)</b>	

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<b>LIVESTOCK LIVING CONDITIONS (CONTINUED)</b>	
41) What methods are used for pest management (check all that apply)?	
<b>SECTION G (CONTINUED)</b>	<input checked="" type="checkbox"/> Mechanical traps
	<input checked="" type="checkbox"/> Predators
	<input type="checkbox"/> Cleanliness
	<input type="checkbox"/> Materials <sup>3</sup>
	Other (specify): <b>(b) (4)</b>
<sup>3</sup> Are all materials listed under Section G Question 32 of the ROR-603 accurate? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>4</sup>	
<sup>4</sup> If No, possible noncompliance. List the incorrect and/or materials not listed in the ROR-603 below and attach all labels and ingredient listings if available:	
<b>Brand Name</b>	<b>Manufacturer</b>
<b>(b) (4)</b>	
42) What methods are used for predator control (check all that apply)?	
<b>SECTION G (CONTINUED)</b>	<input checked="" type="checkbox"/> Fencing
	<input checked="" type="checkbox"/> Netting
	<input type="checkbox"/> Guard animals
	<input type="checkbox"/> Hazing tactics
	Other (specify): <b>(b) (4)</b>
43) Is manure management monitored by a County, State, Federal Agency or another organization? <input checked="" type="checkbox"/> Yes <sup>5</sup> <input checked="" type="checkbox"/> No	
<sup>5</sup> If Yes, list the agency or organization: <b>(b) (4)</b>	
44) Is the information under Section G Questions 35a-39 of the ROR-603 accurate? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>6</sup>	
<sup>6</sup> If No, possible noncompliance.	
<b>(b) (4) In compliance at time of inspection</b> <b>(b) Area(s) of concern*</b> <b>(b) Possible Noncompliance*</b>	
*Please clarify under Section J and/or Section K of this report.	

<b>PASTURE PRACTICE STANDARD</b>	
<b>SECTION H</b>	45) Is the information under Section H Questions 40-47a of the ROR-603 accurate? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>1</sup>
	46) Are the Dry Matter Intake (DMI) Worksheets or an equivalent record keeping system on file? (Ruminant livestock only) <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>1</sup> <input checked="" type="checkbox"/> NA
	47) Is the pasture(s) of quality and quantity to allow all ruminant livestock under organic management to meet the DMI requirements of the National Organic Program (NOP) Regulations? (Ruminant livestock only) <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <sup>1</sup> <input checked="" type="checkbox"/> NA
<sup>1</sup> If No, possible noncompliance.	
<b>(b) (4) In compliance at time of inspection</b> <b>(b) Area(s) of concern*</b> <b>(b) Possible Noncompliance*</b>	
*Please clarify under Section J and/or Section K of this report.	



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<b>RECORD KEEPING</b>					
48) Select all records maintained and if they are complete and current:		Records Maintained?		Complete & Current? <sup>1</sup>	
<b>SECTION I</b>	Documentation of all purchased animals <sup>2</sup>	<b>(b) (4)</b> Yes	<b>(b) (4)</b> No	<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>1</sup>
	Health management and treatment records <sup>2</sup>	<b>(b) (4)</b> Yes	<b>(b) (4)</b> No	<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>1</sup>
	Purchased feed and supplements <sup>2</sup>	Yes	No	Yes	No <sup>1</sup>
	Animal Identification <sup>2</sup>	Yes	No	Yes	No <sup>1</sup>
	Sales Records <sup>2</sup>	Yes	No	Yes	No <sup>1</sup>
	Production records <sup>2</sup>	Yes	No	Yes	No <sup>1</sup>
	Complaint Log <sup>2</sup>	Yes	No	Yes	No <sup>1</sup>
	Applied material and ingredient information <sup>2</sup>	Yes	No	Yes	No <sup>1</sup>
	Rations fed to livestock <sup>2</sup>	Yes	No	Yes	No <sup>1</sup>
	Breeding and birthing/hatching records	Yes	No	Yes	No
	Feed inventory and storage records	Yes	No	Yes	No
Shipping/transportation records	Yes	No	Yes	No	
Other (specify): <b>(b) (4)</b>	Yes	No	Yes	No	
49) Does record keeping system adequately provide for auditing the organic production?		<b>(b) (4)</b> Yes		<b>(b) (4)</b> No <sup>3</sup>	
<sup>1</sup> Verify that the records were found to be complete and current at time of inspection. <i>If No, possible noncompliance.</i> <sup>2</sup> This type of record keeping is required to demonstrate compliance. <i>If these records are not in place or if the information is insufficient to communicate the applicable information, then this is a possible noncompliance.</i> <sup>3</sup> <i>If No, possible noncompliance.</i> *Note, all records must be maintained for 5 years.					
<b>(b) (4)</b> In compliance at time of inspection <b>(b) (4)</b> Area(s) of concern* <b>(b) (4)</b> Possible Noncompliance*					
*Please clarify under Section J and/or Section K of this report.					

TDA License No. (b) (4) Inspector ID No. 07575 Inspection Date 8/9/2011

<b>SECTION J</b>	<b>SUMMARY FOR PRODUCER</b>
	50) Person present at time of inspection: <u>(b) (6)</u>
	<input checked="" type="checkbox"/> These findings and all comments were discussed with the inspection observer during the exit interview.
	<b>COMMENTS</b>

(b) (4)

<b>SECTION K</b>	<b>SUMMARY FOR ORGANIC CERTIFICATION PROGRAM STAFF</b>
	<b>COMMENTS</b>
	(b) (4)
	<b>Checklist</b>

Please use this checklist to ensure you are sending and/or completing all of the necessary information and documents.

- (b) Organic Livestock Producer Inspection Report
- ( Organic Inspection Findings
- (4) Additional Attachments (specify):

(b) (4)



**Texas Department of Agriculture**  
**Organic Processor (Food and Feed)**  
**Inspection Report**

ROR-652

Todd Staples, Commissioner

<b>SECTION A</b>	<b>VERIFICATION INFORMATION</b>	
	Client Name REDLAND DAIRY LLC	TDA Client No. (b) (4)
	Facility Name REDLAND DAIRY LLC	TDA Account No. (b) (4)

<b>SECTION B</b>	<b>INSPECTION INFORMATION</b>	
	Inspection Type Routine	Inspection ID No. 07575120306060917
	Inspector ID 07575	Inspector Name (b) (6)
	Date 3/6/2012 <small>Enter as MM/DD/YYYY</small>	Time 10:38 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM
	County Code 369	County PARMER
	Inspector Name (b) (6)	Region <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5

<b>SECTION C</b>	<b>PROCESSING CATEGORIES</b>	
	1) Select the types of certified organic products that are processed (check all that apply):	
	(b) (4) Bakery goods Bulk grains, beans and seeds Canned fruits and vegetables Canned soups, chili and broths Cereals Chips, crackers, cookies and granola products Coffee and teas Frozen foods Dairy Products Feed, forage, hay or feed supplement (livestock) Other (specify): (b) (4)	(b) (4) Fruits and nuts Grains, flours and mixes (packaged) Herbs, spices, salt and flavorings Juices and beverages Meat and meat products Nut butters, jams, jellies, honey, syrup, etc. Snacks and candy Sweeteners and sugar Vegetables
2) Are any processing categories being conducted that are not included in Section C of the ROR-606? <input checked="" type="checkbox"/> Yes <sup>1</sup> <input checked="" type="checkbox"/> No		
<sup>1</sup> If Yes, possible noncompliance.		
(b) (4) In compliance at time of inspection (b) (4) Area(s) of concern* (b) (4) Possible Noncompliance*		
*Please clarify under Section K and/or Section L of this report.		

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PRODUCTS MANUFACTURED AND INGREDIENTS			
3) Are all products manufactured under Section D Subsection 1 of the ROR-606 accurate?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <sup>1</sup>
<sup>1</sup> If No, list all additional manufactured products below. <i>Possible noncompliance.</i>			
Product Name	% Organic	Organic Label to be Used on Product	
(b) (4)	100% Organic	(b) Organic	(b) Made with Organic
(b) (4)	100% Organic	(b) Organic	(b) Made with Organic
(b) (4)	100% Organic	(b) Organic	(b) Made with Organic
(b) (4)	100% Organic	Organic	Made with Organic
(b) (4)	100% Organic	Organic	Made with Organic
(b) (4)	100% Organic	Organic	Made with Organic
(b) (4)	100% Organic	Organic	Made with Organic
(b) (4)	100% Organic	Organic	Made with Organic
(b) (4)	100% Organic	Organic	Made with Organic
(b) (4)	100% Organic	Organic	Made with Organic
4) Are all certificates for organic ingredients available at the time of inspection?		(b) Yes	(b) No <sup>2</sup>
5) Are all organic ingredients clearly identified from non-organic ingredients?		(b) Yes	(b) No <sup>2</sup>
6) Are all organic ingredients stored in a manner to prevent contamination and commingling from non-organic ingredients?		Yes	No <sup>2</sup>
<sup>2</sup> If No, possible noncompliance.			
<b>(b) (4) In compliance at time of inspection</b>		<b>(b) Area(s) of concern*</b>	<b>(b) Possible Noncompliance*</b>
*Please clarify under Section K and/or Section L of this report.			

PROCESSING AND HANDLING			
7) Is the information under Section E Question 4 of the ROR-606 accurate?		(b) Yes	(b) No <sup>1</sup>
8) Does the operation's quality control program adequately prevent commingling and contamination, and monitor the effectiveness of the organic system plan?		(b) Yes	(b) No <sup>1</sup>
9) Does the facility and procedures in place prevent contamination of certified organic products by prohibited substances and/or commingling with non-organic products?		Yes	No <sup>1</sup>
10) Is the information under Section E Questions 7-14 of the ROR-606 accurate?		Yes	No <sup>1</sup>
<sup>1</sup> If No, possible noncompliance.			
11) Which of the following receiving, storage, and handling areas are used for certified organic products (check all that apply)?			
(b) (4) Receiving areas or docks, scales, etc.			
(b) (4) Bulk bin(s) or storage unit(s)			
(b) (4) Cold storage unit(s) used exclusively for certified organic products			
(b) (4) Designated area(s) for certified organic products with cold storage unit(s)			
(b) (4) Dry shelf storage unit(s) used exclusively for certified organic products			

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<b>PROCESSING AND HANDLING (CONTINUED)</b>	
<b>SECTION E (CONTINUED)</b>	<p><b>(b) (4)</b> Designated area(s) for certified organic products within dry shelf storage unit(s)</p> <p><b>(4)</b> Washing, cleaning, grading, clipping area(s)</p> <p>Other (specify): <b>(b) (4)</b></p> <p>Not applicable</p> <p>12) Handling areas and equipment for packing and grading of certified organic products (check all that apply):</p> <p><input type="checkbox"/> Areas with equipment designated exclusively for handling of certified organic products</p> <p><input type="checkbox"/> Areas with portable equipment designated exclusively for handling of certified organic products</p> <p><input type="checkbox"/> Scheduled times for segregated handling of certified organic products</p> <p><input type="checkbox"/> Other (specify): <b>(b) (4)</b></p> <p><input type="checkbox"/> Not applicable</p> <p>13) Are any processing aids used that are not included as ingredients? <b>(b) (4)</b> Yes<sup>2</sup> <b>(b) (4)</b> No</p> <p><sup>2</sup>If Yes, are all processing aids listed under section I of the ROR-606? <b>(b) (4)</b> Yes <b>(b) (4)</b> No<sup>3</sup></p> <p><sup>3</sup>If No, list all processing aids not listed under section I of this report. <i>Possible noncompliance.</i></p> <p>14) Are any processed products stored on-site that were not processed at the facility? <b>(b) (4)</b> Yes<sup>4</sup> <b>(b) (4)</b> No</p> <p>15) Are any processed products stored at a separate facility with a different physical address of the processing facility? <b>(b) (4)</b> Yes<sup>4</sup> <b>(b) (4)</b> No</p> <p><sup>4</sup>If Yes, provide name of Certifier and Certification #:                      Certifier: <b>(b) (4)</b> Certification #: <b>(b) (4)</b></p> <p><b>(b) (4)</b> In compliance at time of inspection <b>(b) (4)</b> Area(s) of concern* <b>(b) (4)</b> Possible Noncompliance*</p> <p>*Please clarify under Section K and/or Section L of this report.</p>

<b>SANITATION</b>	
<b>SECTION F</b>	<p>16) Are materials used for sanitation? <b>(b) (4)</b> Yes<sup>1</sup> <b>(b) (4)</b> No</p> <p><sup>1</sup>If Yes, are all materials used for sanitation listed under Section I of the ROR-606? <b>(b) (4)</b> Yes <b>(b) (4)</b> No<sup>2</sup> <b>(b) (4)</b> NA</p> <p>17) Is the information under Section F Question 21 of the ROR-606 concerning methods used for sanitation and/or cleaning accurate? Yes <b>(b) (4)</b> No<sup>2</sup></p> <p><sup>2</sup> If No, area(s) of concern.</p> <p>18) Does the facility and all equipment appear clean and free from the risk of possible contamination to processed products at the time of inspection? Yes <b>(b) (4)</b> No<sup>4</sup></p> <p>19) Are prohibited materials used in sanitation and/or cleaning? Yes<sup>3</sup> <b>(b) (4)</b> No</p> <p><sup>3</sup>If Yes, do the methods of handling and application of prohibited materials prevent contamination of certified organic products? Yes <b>(b) (4)</b> No<sup>4</sup> <b>(b) (4)</b> NA</p> <p><sup>4</sup> If No, possible noncompliance.</p> <p><b>(b) (4)</b> In compliance at time of inspection <b>(b) (4)</b> Area(s) of concern* <b>(b) (4)</b> Possible Noncompliance*</p> <p>*Please clarify under Section K and/or Section L of this report.</p>

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SECTION G		PEST MANAGEMENT	
	20) Are materials used for pest management?	<b>(b) (4)</b> Yes <sup>1</sup>	<b>(b) (4)</b> No
	<sup>1</sup> If Yes, are all materials used for pest management listed under Section I of the ROR-606?	<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>2</sup> <b>(b) (4)</b> NA
	21) Is the information under Section G Question 24 of the ROR-606 concerning methods used for pest management accurate?	Yes	<b>(b) (4)</b> No <sup>2</sup>
	<sup>2</sup> If No, area(s) of concern.		
	22) Is the facility and all equipment free of pests and/or the signs of pests at the time of inspection?	Yes	<b>(b) (4)</b> No <sup>4</sup>
	23) Are prohibited materials used in pest management?	Yes <sup>3</sup>	<b>(b) (4)</b> No
	<sup>3</sup> If Yes, do the methods of handling and application of prohibited materials prevent contamination of certified organic products?	Yes	<b>(b) (4)</b> No <sup>4</sup> <b>(b) (4)</b> NA
	24) Is the information under Section G Question 26 of the ROR-606 accurate?	Yes	<b>(b) (4)</b> No <sup>4</sup>
	<sup>4</sup> If No, possible noncompliance.		
<b>(b) (4)</b> In compliance at time of inspection		<b>(b) (4)</b> Area(s) of concern*	<b>(b) (4)</b> Possible Noncompliance*
*Please clarify under Section K and/or Section L of this report.			

SECTION H		PRODUCT LABELING	
	25) Are organic products labeled or re-labeled?	<b>(b) (4)</b> Yes <sup>1</sup>	<b>(b) (4)</b> No
	<sup>1</sup> If Yes, do all labels included in the operation's supporting documentation match the labels that are present at the time of inspection?*	<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>2</sup> <b>(b) (4)</b> NA
*Labels will be included with new applications (if labeling or re-labeling is being conducted). Annual updates will only include labels if changes are made to existing labels or new labels are added.			
26) List the number of certified organic products with their corresponding label type or production lot number:			
	<b>Label Type</b>	<b>Number of Products</b>	
	100% ORGANIC - All ingredients and processing aids are certified organic.	<b>(b) (4)</b>	
	ORGANIC - At least 95% of the ingredients are certified organic, and all other ingredients are either listed on the National List or are agriculture products that are not commercially available in organic form.	<b>(b) (4)</b>	
	MADE WITH ORGANIC (Specified Ingredients) - At least 70% of the ingredients are certified organic, and all other ingredients are produced without genetic modification and without the use of prohibited substances.	<b>(b) (4)</b>	
	ORGANIC INGREDIENTS LISTED IN INGREDIENT STATEMENT ONLY.	<b>(b) (4)</b>	
	Certified organic products in non-retail containers are labeled with production lot number.	<b>(b) (4)</b>	
	27) Is the information under Section H Questions 29 and 30 of the ROR-606 accurate?	<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>2</sup>
	<sup>2</sup> If No, area(s) of concern. Explain in comments section.		
<b>(b) (4)</b> In compliance at time of inspection		<b>(b) (4)</b> Area(s) of concern*	<b>(b) (4)</b> Possible Noncompliance*
*Please clarify under Section K and/or Section L of this report.			

TDA License No. **(b) (4)** Inspector ID No. 07575 Inspection Date 3/6/2012

SECTION I		
MATERIALS USED		
28) Are all of the materials listed under Section I of the ROR-606 accurate? <b>(b)</b> Yes <b>(b)</b> No <sup>1</sup>		
<sup>1</sup> List all materials <u>not</u> included in the ROR-606 in the table below. <i>If No, possible noncompliance:</i>		
Brand Name:	Manufacturer:	Reason for use:
<b>(b) (4)</b>		
<b>(b) (4) In compliance at time of inspection</b> <b>(b) Area(s) of concern*</b> <b>(b) Possible Noncompliance*</b>		
*Please clarify under Section K and/or Section L of this report.		

SECTION J		
RECORD KEEPING		
29) Select all records maintained and if they are complete and current:	Records Maintained?	Complete & Current? <sup>1</sup>
Names and addresses of suppliers <sup>2</sup>	<b>(b) (4)</b> Yes <b>(b) (4)</b> No	<b>(b) (4)</b> Yes <b>(b) (4)</b> No <sup>1</sup>
Purchasing records of certified organic products/ingredients (including purchase dates, invoices, and quantities) <sup>2</sup>	<b>(b) (4)</b> Yes <b>(b) (4)</b> No	<b>(b) (4)</b> Yes <b>(b) (4)</b> No <sup>1</sup>
Current Inventory of Products and Ingredients <sup>2</sup>	Yes No	Yes No <sup>1</sup>
Handling Records <sup>2</sup>	Yes No	Yes No <sup>1</sup>
Routine quality control inspections, reports, and evaluations <sup>2</sup>	Yes No	Yes No <sup>1</sup>
Verification of certifications and records of certifying agents for all certified organic products <sup>2</sup>	Yes No	Yes No <sup>1</sup>
Sales and shipping records of certified organic products <sup>2</sup>	Yes No	Yes No <sup>1</sup>
Other (specify):	Yes No	Yes No <sup>1</sup>
30) Does record keeping system adequately provide for auditing the organic system plan?	<b>(b) (4)</b> Yes <b>(b) (4)</b> No <sup>3</sup>	
<sup>1</sup> Verify that the records were found to be complete and current at time of inspection. <i>If No, possible noncompliance.</i>		
<sup>2</sup> This type of record keeping is required to demonstrate compliance. <i>If these records are not in place or if the information is insufficient to communicate the applicable information, then this is a possible noncompliance.</i>		
<sup>3</sup> <i>If No, possible noncompliance.</i>		
*Note, all records must be maintained for 5 years.		

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<b>RECORD KEEPING (CONTINUED)</b>		
<b>SECTION J (CONTINUED)</b>	31) Are city, state, or federal food health and safety permits/licenses available at the time of inspection?	(b) (4) Yes <sup>4</sup> (b) (4) No <sup>5</sup> (b) (4) NA
	32) Are records indicating water used on certified products and discharge water meet city, state, or federal Safe Drinking Water Act requirements?	(b) (4) Yes (b) (4) No <sup>5</sup> (b) (4) NA
	<sup>4</sup> If Yes, list the following information regarding the permits/licenses:	
	<b>Issuing Agency</b>	<b>Expiration Date</b> <small>Enter as MM/DD/YYYY</small>
	<b>(b) (4)</b>	
<sup>5</sup> If No, possible noncompliance.		
<b>(b) (4)</b>	<b>In compliance at time of inspection</b>	<b>(b) (4) Area(s) of concern*</b> <b>(b) (4) Possible Noncompliance*</b>
*Please clarify under Section K and/or Section L of this report.		



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<b>SECTION K</b>	<b>SUMMARY FOR HANDLER</b>
	33) Person present at time of inspection: <u>(b) (6)</u>
	<input checked="" type="checkbox"/> These findings and all comments were discussed with the inspection observer during the exit interview.
	<b>COMMENTS</b>

(b) (4)

<b>SECTION L</b>	<b>SUMMARY FOR ORGANIC CERTIFICATION PROGRAM STAFF</b>
	<b>COMMENTS</b>
	(b) (4)
	<b>Checklist</b>

Please use this checklist to ensure you are sending and/or completing all of the necessary information and documents.

- (b) (4) Organic Processor (Food and Feed) Inspection Report
- (b) (4) Organic Inspection Findings
- Additional Attachments (specify):

(b) (4)



**Texas Department of Agriculture**  
**Organic Processor (Food and Feed)**  
**Inspection Report**

ROR-652

Todd Staples, Commissioner

SECTION A		VERIFICATION INFORMATION	
SECTION A	Client Name REDLAND DAIRY LLC	TDA Client No. (b) (4)	
	Facility Name REDLAND DAIRY, LLC	TDA Account No. (b) (4)	

SECTION B		INSPECTION INFORMATION			
SECTION B	Inspection Type Routine	Inspection ID No. 07575120306060842			
	Inspector ID 07575	Inspector Name (b) (6)	Region <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5		
	Date      3/6/2012 <small>Enter as MM/DD/YYYY</small>	Time    08:51 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	County Code 369	County PARMER	

SECTION C		PROCESSING CATEGORIES	
SECTION C	1) Select the types of certified organic products that are processed (check all that apply):		
	(b) (4) Bakery goods (b) (4) Bulk grains, beans and seeds Canned fruits and vegetables Canned soups, chili and broths Cereals Chips, crackers, cookies and granola products Coffee and teas Frozen foods Dairy Products Feed, forage, hay or feed supplement (livestock) Other (specify): (b) (4)	(b) (4) Fruits and nuts (b) (4) Grains, flours and mixes (packaged) (b) (4) Herbs, spices, salt and flavorings Juices and beverages Meat and meat products Nut butters, jams, jellies, honey, syrup, etc. Snacks and candy Sweeteners and sugar Vegetables	
2) Are any processing categories being conducted that are not included in Section C of the ROR-606?    (b) Yes <sup>1</sup> (b) No			
<sup>1</sup> If Yes, possible noncompliance.			
(b) (4) In compliance at time of inspection		(b) Area(s) of concern*	(b) Possible Noncompliance*
*Please clarify under Section K and/or Section L of this report.			

TDA License No. **(b) (4)** Inspector ID No. 07575 Inspection Date 3/6/2012

PRODUCTS MANUFACTURED AND INGREDIENTS			
3) Are all products manufactured under Section D Subsection 1 of the ROR-606 accurate?		<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>1</sup>
<sup>1</sup> If No, list all additional manufactured products below. <i>Possible noncompliance.</i>			
Product Name	% Organic	Organic Label to be Used on Product	
<b>(b) (4)</b>	100% Organic	<b>(b) (4)</b> Organic	<b>(b) (4)</b> Made with Organic
<b>(b) (4)</b>	100% Organic	<b>(b) (4)</b> Organic	<b>(b) (4)</b> Made with Organic
<b>(b) (4)</b>	100% Organic	<b>(b) (4)</b> Organic	<b>(b) (4)</b> Made with Organic
<b>(b) (4)</b>	100% Organic	<b>(b) (4)</b> Organic	<b>(b) (4)</b> Made with Organic
<b>(b) (4)</b>	100% Organic	<b>(b) (4)</b> Organic	<b>(b) (4)</b> Made with Organic
<b>(b) (4)</b>	100% Organic	<b>(b) (4)</b> Organic	<b>(b) (4)</b> Made with Organic
<b>(b) (4)</b>	100% Organic	<b>(b) (4)</b> Organic	<b>(b) (4)</b> Made with Organic
<b>(b) (4)</b>	100% Organic	<b>(b) (4)</b> Organic	<b>(b) (4)</b> Made with Organic
<b>(b) (4)</b>	100% Organic	<b>(b) (4)</b> Organic	<b>(b) (4)</b> Made with Organic
4) Are all certificates for organic ingredients available at the time of inspection?		<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>2</sup>
5) Are all organic ingredients clearly identified from non-organic ingredients?		<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>2</sup>
6) Are all organic ingredients stored in a manner to prevent contamination and commingling from non-organic ingredients?		<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>2</sup>
<sup>2</sup> If No, possible noncompliance.			
<b>(b) (4)</b> In compliance at time of inspection		<b>(b) (4)</b> Area(s) of concern*	<b>(b) (4)</b> Possible Noncompliance*
*Please clarify under Section K and/or Section L of this report.			

PROCESSING AND HANDLING			
7) Is the information under Section E Question 4 of the ROR-606 accurate?		<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>1</sup>
8) Does the operation's quality control program adequately prevent commingling and contamination, and monitor the effectiveness of the organic system plan?		<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>1</sup>
9) Does the facility and procedures in place prevent contamination of certified organic products by prohibited substances and/or commingling with non-organic products?		<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>1</sup>
10) Is the information under Section E Questions 7-14 of the ROR-606 accurate?		<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>1</sup>
<sup>1</sup> If No, possible noncompliance.			
11) Which of the following receiving, storage, and handling areas are used for certified organic products (check all that apply)?			
<b>(b) (4)</b> Receiving areas or docks, scales, etc.			
<b>(b) (4)</b> Bulk bin(s) or storage unit(s)			
<b>(b) (4)</b> Cold storage unit(s) used exclusively for certified organic products			
<b>(b) (4)</b> Designated area(s) for certified organic products with cold storage unit(s)			
<b>(b) (4)</b> Dry shelf storage unit(s) used exclusively for certified organic products			

TDA License No. **(b) (4)** Inspector ID No. 07575 Inspection Date 3/6/2012

PROCESSING AND HANDLING (CONTINUED)	
<b>SECTION E (CONTINUED)</b>	<b>(b) (4)</b> Designated area(s) for certified organic products within dry shelf storage unit(s) Washing, cleaning, grading, clipping area(s) Other (specify): _____ Not applicable
	12) Handling areas and equipment for packing and grading of certified organic products (check all that apply): <b>(b) (4)</b> Areas with equipment designated exclusively for handling of certified organic products <b>(b) (4)</b> Areas with portable equipment designated exclusively for handling of certified organic products <b>(b) (4)</b> Scheduled times for segregated handling of certified organic products Other (specify): <b>(b) (4)</b> <b>(b) (4)</b> Not applicable
	13) Are any processing aids used that are not included as ingredients? <b>(b) (4)</b> Yes <sup>2</sup> <b>(b) (4)</b> No <sup>2</sup> If Yes, are all processing aids listed under section I of the ROR-606? <b>(b) (4)</b> Yes <b>(b) (4)</b> No <sup>3</sup> <sup>3</sup> If No, list all processing aids not listed under section I of this report. <i>Possible noncompliance.</i>
	14) Are any processed products stored on-site that were not processed at the facility? <b>(b) (4)</b> Yes <sup>4</sup> <b>(b) (4)</b> No 15) Are any processed products stored at a separate facility with a different physical address of the processing facility? <b>(b) (4)</b> Yes <sup>4</sup> <b>(b) (4)</b> No
	<sup>4</sup> If Yes, provide name of Certifier and Certification #: Certifier: <b>(b) (4)</b> Certification #: <b>(b) (4)</b>
	<b>(b) (4)</b> In compliance at time of inspection <b>(b) (4)</b> Area(s) of concern* <b>(b) (4)</b> Possible Noncompliance*
	*Please clarify under Section K and/or Section L of this report.

SANITATION	
<b>SECTION F</b>	16) Are materials used for sanitation? <b>(b) (4)</b> Yes <sup>1</sup> <b>(b) (4)</b> No <sup>1</sup> If Yes, are all materials used for sanitation listed under Section I of the ROR-606? <b>(b) (4)</b> Yes <b>(b) (4)</b> No <sup>2</sup> <b>(b) (4)</b> NA
	17) Is the information under Section F Question 21 of the ROR-606 concerning methods used for sanitation and/or cleaning accurate? Yes <b>(b) (4)</b> No <sup>2</sup> <sup>2</sup> If No, area(s) of concern.
	18) Does the facility and all equipment appear clean and free from the risk of possible contamination to processed products at the time of inspection? Yes <b>(b) (4)</b> No <sup>4</sup>
	19) Are prohibited materials used in sanitation and/or cleaning? Yes <sup>3</sup> <b>(b) (4)</b> No <sup>3</sup> If Yes, do the methods of handling and application of prohibited materials prevent contamination of certified organic products? Yes <b>(b) (4)</b> No <sup>4</sup> <b>(b) (4)</b> NA
	<sup>4</sup> If No, possible noncompliance.
	<b>(b) (4)</b> In compliance at time of inspection <b>(b) (4)</b> Area(s) of concern* <b>(b) (4)</b> Possible Noncompliance*
*Please clarify under Section K and/or Section L of this report.	

TDA License No. **(b) (4)** Inspector ID No. 07575 Inspection Date 3/6/2012

SECTION G		
<b>PEST MANAGEMENT</b>		
20) Are materials used for pest management?	<b>(b) (4)</b> Yes <sup>1</sup>	<b>(b) (4)</b> No
<sup>1</sup> If Yes, are all materials used for pest management listed under Section I of the ROR-606?	<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>2</sup> <b>(b) (4)</b> NA
21) Is the information under Section G Question 24 of the ROR-606 concerning methods used for pest management accurate?	Yes	<b>(b) (4)</b> No <sup>2</sup>
<sup>2</sup> If No, area(s) of concern.		
22) Is the facility and all equipment free of pests and/or the signs of pests at the time of inspection?	Yes	<b>(b) (4)</b> No <sup>4</sup>
23) Are prohibited materials used in pest management?	Yes <sup>3</sup>	<b>(b) (4)</b> No
<sup>3</sup> If Yes, do the methods of handling and application of prohibited materials prevent contamination of certified organic products?	Yes <b>(b) (4)</b>	No <sup>4</sup> <b>(b) (4)</b> NA
24) Is the information under Section G Question 26 of the ROR-606 accurate?	Yes	<b>(b) (4)</b> No <sup>4</sup>
<sup>4</sup> If No, possible noncompliance.		
<b>(b) (4)</b>	<b>In compliance at time of inspection</b>	<b>(b) (4)</b> Area(s) of concern* <b>(b) (4)</b> Possible Noncompliance*
*Please clarify under Section K and/or Section L of this report.		

SECTION H		
<b>PRODUCT LABELING</b>		
25) Are organic products labeled or re-labeled?	<b>(b) (4)</b> Yes <sup>1</sup>	<b>(b) (4)</b> No
<sup>1</sup> If Yes, do all labels included in the operation's supporting documentation match the labels that are present at the time of inspection?*	<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>2</sup> <b>(b) (4)</b> NA
<i>*Labels will be included with new applications (if labeling or re-labeling is being conducted). Annual updates will only include labels if changes are made to existing labels or new labels are added.</i>		
26) List the number of certified organic products with their corresponding label type or production lot number:		
	<b>Label Type</b>	<b>Number of Products</b>
	100% ORGANIC - All ingredients and processing aids are certified organic.	<b>(b) (4)</b>
	ORGANIC - At least 95% of the ingredients are certified organic, and all other ingredients are either listed on the National List or are agriculture products that are not commercially available in organic form.	<b>(b) (4)</b>
	MADE WITH ORGANIC (Specified Ingredients) - At least 70% of the ingredients are certified organic, and all other ingredients are produced without genetic modification and without the use of prohibited substances.	<b>(b) (4)</b>
	ORGANIC INGREDIENTS LISTED IN INGREDIENT STATEMENT ONLY.	<b>(b) (4)</b>
	Certified organic products in non-retail containers are labeled with production lot number.	<b>(b) (4)</b>
27) Is the information under Section H Questions 29 and 30 of the ROR-606 accurate?	<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>2</sup>
<sup>2</sup> If No, area(s) of concern. Explain in comments section.		
<b>(b) (4)</b>	<b>In compliance at time of inspection</b>	<b>(b) (4)</b> Area(s) of concern* <b>(b) (4)</b> Possible Noncompliance*
*Please clarify under Section K and/or Section L of this report.		

TDA License No. **(b) (4)** Inspector ID No. 07575 Inspection Date 3/6/2012

SECTION I		
MATERIALS USED		
28) Are all of the materials listed under Section I of the ROR-606 accurate? <b>(b)</b> Yes <b>(b)</b> No <sup>1</sup>		
<sup>1</sup> List all materials <u>not</u> included in the ROR-606 in the table below. <i>If No, possible noncompliance:</i>		
Brand Name:	Manufacturer:	Reason for use:
<b>(b) (4)</b>		
<b>(b) (4) In compliance at time of inspection</b> <b>(b) Area(s) of concern*</b> <b>(b) Possible Noncompliance*</b>		
*Please clarify under Section K and/or Section L of this report.		

SECTION J		
RECORD KEEPING		
29) Select all records maintained and if they are complete and current:	Records Maintained?	Complete & Current? <sup>1</sup>
Names and addresses of suppliers <sup>2</sup>	<b>(b) (4)</b> Yes <b>(b) (4)</b> No	<b>(b) (4)</b> Yes <b>(b) (4)</b> No <sup>1</sup>
Purchasing records of certified organic products/ingredients (including purchase dates, invoices, and quantities) <sup>2</sup>	<b>(b) (4)</b> Yes <b>(b) (4)</b> No	<b>(b) (4)</b> Yes <b>(b) (4)</b> No <sup>1</sup>
Current Inventory of Products and Ingredients <sup>2</sup>	<b>(b) (4)</b> Yes <b>(b) (4)</b> No	<b>(b) (4)</b> Yes <b>(b) (4)</b> No <sup>1</sup>
Handling Records <sup>2</sup>	<b>(b) (4)</b> Yes <b>(b) (4)</b> No	<b>(b) (4)</b> Yes <b>(b) (4)</b> No <sup>1</sup>
Routine quality control inspections, reports, and evaluations <sup>2</sup>	Yes No	Yes No <sup>1</sup>
Verification of certifications and records of certifying agents for all certified organic products <sup>2</sup>	Yes No	Yes No <sup>1</sup>
Sales and shipping records of certified organic products <sup>2</sup>	Yes No	Yes No <sup>1</sup>
Other (specify): <b>(b) (4)</b>	Yes No	Yes No <sup>1</sup>
30) Does record keeping system adequately provide for auditing the organic system plan?	<b>(b)</b> Yes <b>(b)</b> No <sup>3</sup>	
<sup>1</sup> Verify that the records were found to be complete and current at time of inspection. <i>If No, possible noncompliance.</i>		
<sup>2</sup> This type of record keeping is required to demonstrate compliance. <i>If these records are not in place or if the information is insufficient to communicate the applicable information, then this is a possible noncompliance.</i>		
<sup>3</sup> <i>If No, possible noncompliance.</i>		
*Note, all records must be maintained for 5 years.		

TDA License No. **(b) (4)** Inspector ID No. 07575 Inspection Date 3/6/2012

RECORD KEEPING (CONTINUED)				
<b>SECTION J (CONTINUED)</b>	31) Are city, state, or federal food health and safety permits/licenses available at the time of inspection?	<b>(b) (4)</b> Yes <sup>4</sup>	<b>(b) (4)</b> No <sup>5</sup>	<b>(b) (4)</b> NA
	32) Are records indicating water used on certified products and discharge water meet city, state, or federal Safe Drinking Water Act requirements?	<b>(b) (4)</b> Yes	<b>(b) (4)</b> No <sup>5</sup>	<b>(b) (4)</b> NA
	<sup>4</sup> If Yes, list the following information regarding the permits/licenses:		Enter as MM/DD/YYYY	
	<b>Issuing Agency</b>	<b>Expiration Date</b>		
	<b>(b) (4)</b>			
<sup>5</sup> If No, possible noncompliance.				
<b>(b) (4)</b> In compliance at time of inspection <b>(b) (4)</b> Area(s) of concern* <b>(b) (4)</b> Possible Noncompliance*				
*Please clarify under Section K and/or Section L of this report.				

TDA License No. (b) (4) Inspector ID No. 07575 Inspection Date 3/6/2012

<b>SECTION K</b>	<b>SUMMARY FOR HANDLER</b>
	33) Person present at time of inspection: <u>(b) (6)</u>
	<input checked="" type="checkbox"/> These findings and all comments were discussed with the inspection observer during the exit interview.
	<b>COMMENTS</b>

(b) (4)

<b>SECTION L</b>	<b>SUMMARY FOR ORGANIC CERTIFICATION PROGRAM STAFF</b>
	<b>COMMENTS</b>
	(b) (4)
	<b>Checklist</b>

Please use this checklist to ensure you are sending and/or completing all of the necessary information and documents.

- Organic Processor (Food and Feed) Inspection Report
- Organic Inspection Findings
- Additional Attachments (specify):

(b) (4)





P.O. Box 12847 Austin, Texas 78711 Voice (800) 835-5832 (512) 463-7476  
Hearing impaired: (800) 735-2988 www.TexasAgriculture.gov

**Texas Department of Agriculture**  
**Processor (Food and Feed) Organic System**  
**Plan**

ROR-606

TODD STAPLES, COMMISSIONER

SECTION A	<b>VERIFICATION INFORMATION</b> <input type="checkbox"/> New Application <input checked="" type="checkbox"/> Annual Update <input type="checkbox"/> Change to OSP		
	Full Legal Business Name: REDLAND DAIRY, LLC		D.B.A. (if applicable):
	Facility Name: REDLAND	Client No. (b) (4)	Account No. (b) (4)
	Contact Individual: (b) (6)		

SECTION B	<b>REQUIRED SUPPORTING DOCUMENTATION</b>	
	All of the following items are required for a complete application. To avoid processing delays, please use this checklist to ensure that your application is complete.	
	(b) (4)	Overall description of physical facilities including a complete diagram of the facilities
	(b) (4)	Description of handling and processing procedures and materials
	(b) (4)	Flowchart showing movement of certified products during handling and processing, including equipment, machinery, and storage areas
	(b) (4)	Description of the critical control points of potential contamination and commingling
	(b) (4)	Description of internal quality control procedures that details the movement of each specific lot of certified products through each step of the handling and processing operation
	(b) (4)	Description of final product storage, preparation for transportation, loading and methods of transportation used in distribution
	(b) (4)	Attach copies of all current food health and safety permits/licenses
	(b) (4)	Processing Categories (SECTION C)
(b) (4)	Products Manufactured and Ingredients (SECTION D)	
(b) (4)	Processing and Handling (SECTION E)	
(b) (4)	Sanitation (SECTION F)	
(b) (4)	Pest Management (SECTION G)	
(b) (4)	Product Labeling (SECTION H)	
(b) (4)	Materials Used (SECTION I)	
(b) (4)	Record Keeping (SECTION J)	
(b) (4)	Attachments (i.e. ingredient listings)	

This document becomes public record and is subject to disclosure. With few exceptions, you have the right to request and be informed about the information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. (Reference: Government Code, Sections 552.021, 552.023, and 559.004.)





Business Name:

**INGREDIENTS**

3) List all ingredients used in each organic product (attach all certificates for all organic ingredients):

Product Name: (b) (4) (b) (4)

Organic Ingredients

Non-Organic Ingredients

(b) (4)

(b) (4)

SECTION D (CONTINUED)

\*Make additional copies of this page for each submitted product.

Business Name:

SECTION E		PROCESSING AND HANDLING	
4) Select the types of processing equipment used:			
(b) (4)	Stone Milling	(b) (4)	Hammer Mill
(b) (4)	Sizing/Cleaning	(b) (4)	Pelletizer
(b) (4)	Other (specify):	(b) (4)	Roller Mill
		(b) (4)	None
5) Do you have a quality control program implemented to evaluate potential commingling and contamination, and to monitor the effectiveness of your organic system plan?		(b) (4)	Yes
		(b) (4)	No <sup>1</sup>
6) Do you have facilities and procedures in place to prevent contamination of certified organic products by prohibited substances and/or commingling with non-organic products?		(b) (4)	Yes
		(b) (4)	No <sup>1</sup>
7) Are all processing and handling systems cleaned prior to each run of certified organic product?		(b) (4)	Yes
		(b) (4)	No <sup>1</sup>
8) Are methods used during processing to prevent contamination and commingling from non-certified organic product?		(b) (4)	Yes
		(b) (4)	No <sup>1</sup>
9) Is a segregated area designated for storage of certified organic product to be processed?		(b) (4)	Yes
		(b) (4)	No <sup>1</sup>
<sup>1</sup> If No, explain: (b) (4)			
10) Is handling equipment designated exclusively for certified organic product?		(b) (4)	Yes
		(b) (4)	No <sup>2</sup>
<sup>2</sup> If No, describe your cleaning process and list any materials used in section H:			
11) Are processed products:			
Shipped immediately to other warehouse facilities?		(b) (4)	Yes
Temporarily stored or warehoused on-site?		(b) (4)	No <sup>3</sup>
Stored on-site until shipped to buyer?		(b) (4)	No <sup>3</sup>
<sup>1</sup> If Yes, is a segregated area designated for storage of processed organic products?		(b) (4)	Yes
		(b) (4)	No <sup>4</sup>
<sup>1</sup> If No, explain: (b) (4)			
12) Is shipping and transportation of processed organic products managed to prevent commingling and contamination from nonorganic products?		(b) (4)	Yes
		(b) (4)	No <sup>5</sup>
<sup>2</sup> If No, explain:			
(b) (4)			

Business Name: \_\_\_\_\_

**PROCESSING AND HANDLING (CONTINUED)**

13) Packaging materials used for processed organic products (check all that apply):

(b) (4) Exclusively for certified organic products	(b) (4) New
(b) (4) Previously used	(b) (4) Contain no prohibited materials
(b) (4) Have been cleaned or lined with new liners	(b) (4) Other (specify): (b) (4)

14) Do you process any organic by-products? (b) (4) Yes<sup>6</sup> (b) (4) No

<sup>6</sup>If Yes, list the types of by-products you process: (b) (4)

(b) (4)

<sup>7</sup>If Yes, do methods used for conveying, handling and storing of certified by-products prevent commingling and contamination from non-organic by-products? (b) (4) Yes (b) (4) No

<sup>7</sup>If No, explain: (b) (4)

(b) (4)

SECTION E (CONTINUED)

15) Which of the following receiving, storage, and handling areas are used for certified organic products (check all that apply)?

- (b) (4) Receiving areas or docks, scales, etc.
- (b) (4) Bulk bin(s) or storage unit(s)
- (b) (4) Cold storage unit(s) used exclusively for certified organic products
- (b) (4) Designated area(s) for certified organic products with cold storage unit(s)
- (b) (4) Dry shelf storage unit(s) used exclusively for certified organic products
- (b) (4) Designated area(s) for certified organic products within dry shelf storage unit(s)
- (b) (4) Washing, cleaning, grading, clipping area(s)
- (b) (4) Other (specify): (b) (4)
- (b) (4) Not applicable

16) Handling areas and equipment for packing and grading of certified organic products (check all that apply):

- (b) (4) Areas with equipment designated exclusively for handling of certified organic products
- (b) (4) Areas with portable equipment designated exclusively for handling of certified organic products
- (b) (4) Scheduled times for segregated handling of certified organic products
- (b) (4) Other (specify): (b) (4)
- (b) (4) Not applicable

17) Do you use any processing aids that are not included as ingredients? (b) (4) Yes<sup>8</sup> (b) (4) No

<sup>8</sup>If Yes, list all processing aids under section I.

18) Are any processed products stored on-site that were not processed at your facility? (b) (4) Yes<sup>9</sup> (b) (4) No

19) Do you store any processed products that are located at a separate facility with a different physical address of the processing facility? (b) (4) Yes<sup>9</sup> (b) (4) No

<sup>9</sup>If Yes, you must submit form ROR-602 Distributor Organic System Plan with all applicable fees.

Business Name: REDLAND DAIRY (b) (4)

**SECTION F**

**<sup>1</sup>SANITATION**

20) Are materials used for sanitation? (b) (4) Yes<sup>1</sup> (b) (4) No

<sup>1</sup>If Yes, list materials used under section I.

21) Select methods and/or materials used for sanitation and/or cleaning (check all that apply):

(b) (4) Citric acid	(b) (4)	Phosphoric acid <sup>2</sup>	(b) (4)	Allowed bleaches
(b) (4) Hydrogen peroxide	(b) (4)	Sodium hydroxide	(b) (4)	Water
(b) (4) Sweeping/brushing	(b) (4)	Compressed air	(b) (4)	Not Applicable
Other (specify): (b) (4)				

22) Are prohibited materials used in sanitation and/or cleaning? (b) (4) Yes<sup>2</sup> (b) (4) No

<sup>2</sup>If Yes, are certified organic products protected from contamination from prohibited materials used in sanitation and/or cleaning? (b) (4) Yes (b) (4) No

<sup>2</sup>If Yes, do the methods of handling and application of prohibited materials used in sanitation and/or cleaning prevent contamination of certified organic (b) (4) Yes (b) (4) No

**SECTION G**

**<sup>1</sup>PEST MANAGEMENT**

23) Are materials used for pest management? (b) (4) Yes<sup>1</sup> (b) (4) No

<sup>1</sup>If Yes, list materials used under section I.

24) Select methods and/or materials used for pest management (check all that apply):

(b) (4) Sanitation	(b) (4)	Physical barriers	(b) (4)	Insect/rodent traps
(b) (4) Sticky traps/baits	(b) (4)	Boric Acid	(b) (4)	Pheromone traps
(b) (4) Botanical insecticides	(b) (4)	Soaps and/or oils	(b) (4)	Microbial or viral insecticides
(b) (4) Diatomaceous earth (DE)	(b) (4)	Other (specify): (b) (4)	(b) (4)	

25) Are prohibited materials used in pest management? (b) (4) Yes<sup>2</sup> (b) (4) No

<sup>2</sup>If Yes, are certified organic products protected from contamination from prohibited materials used in pest management? (b) (4) Yes (b) (4) No

<sup>2</sup>If Yes, do the methods of handling and application of prohibited materials used in pest management prevent contamination of certified organic products? (b) (4) Yes (b) (4) No

26) Are pest control materials applied by a: (b) (4) NA

(b) (4) Designated employee or department;

(b) (4) Registered commercial pest control service company.<sup>3</sup>

<sup>3</sup>Attach the most recent invoices and/or contracts from commercial pest control service company.

RECEIVED  
MAR 08 2012  
REGULATORY

Business Name: \_\_\_\_\_

PRODUCT LABELING	
27) Do you label products?	(b) Yes <sup>1</sup> (b) (4) No
<sup>1</sup> If Yes, attach copies of all labels used for certified organic products.	
28) Which labeling categories do you use (check all that apply)? (All calculations exclude added water and salt)	(b) (4) /A
(b) (4) 100% ORGANIC - All ingredients and processing aids are certified organic.	
(b) (4) ORGANIC - At least 95% of the ingredients are certified organic, and all other ingredients are either listed on the National List or are agriculture products that are not commercially available in organic form.	
(b) (4) MADE WITH ORGANIC (Specified Ingredients)* - At least 70% of the ingredients are certified organic, and all other ingredients are produced without genetic modification and without the use of prohibited substances.	
IDENTIFICATION OF ORGANIC INGREDIENTS IN INGREDIENT STATEMENT ONLY*	
*Not allowed on livestock feed products.	
29) The following labeling requirements have been met:	(b) (4) /A
(b) (4) Certified organic by <Name of Certifier> <sup>2</sup> appears above, below or next to the name and address of the processor or distributor of the product (not allowed on products with organic ingredient statement only).	
(b) (4) Organic ingredients are identified as organic in the ingredient statement.	
(b) (4) Other labeling options, including TDA logo and USDA seal (if used), comply with applicable restrictions.	
30) Does the facility have certified organic products custom labeled for them by another certified organic operation?	(b) (4) es <sup>2,3</sup> (b) (4)
<sup>2</sup> If Yes, you must submit documentation verifying the approval of all labels by the certifying agent(s) listed on the label other than the Texas Department of Agriculture.	
<sup>3</sup> If Yes, provide the following information about the certified organic operation:	
Business Name:	(b) (4)
Certified by:	(b) (4) DA (b) (4) Other (specify):
Certification Number:	(b) (4)





Business Name: \_\_\_\_\_

**RECORD KEEPING**

SECTION J

- 32) Select all records that are currently maintained (check all that apply):
- (b) (4) Names and addresses of suppliers, including producers, processors, and distributors\*
  - (b) (4) Purchasing records of certified products\*
  - (b) (4) Current inventory of certified organic products\*
  - (b) (4) Current inventory of ingredients for processing\*
  - (b) (4) Records regarding each stage of handling and processing for all certified organic products\*
  - (4) Routine quality control inspections, reports and evaluations\*
  - (4) Verification of certifications and records of certifying agents for all certified organic products\*
  - (4) Sales and shipping records of certified organic products\*
  - (4) Records indicating water used on certified products and discharge water meet city, state, or federal Safe Drinking Water Act requirements\*
  - (b) (4) Records indicating compliance with city, state or federal health code requirements (if applicable)\*
  - (b) (4) Other (specify): \_\_\_\_\_

\*Note: This type of record keeping is required to demonstrate compliance. If you do not have this in place currently, you must develop a system to collect this information and present it to the inspector at the time of inspection.

33) How long do you plan to maintain the above selected records? *Minimum 5 years*

Business Name:

**AFFIRMATION**

I affirm that all statements made in this application are true and correct. No prohibited products have been applied to any organic product. I understand that the operation may be subjected to unannounced inspections and/or sampling for residues at any time as deemed appropriate to ensure compliance with the NOP Rule. I understand that acceptance of this form in no way implies granting of certification by the Texas Department of Agriculture (TDA) Organic Certification Program. I agree to follow the NOP Rule and all other TDA Organic Program Rules.

The responsible party, by and through their personal or agent's signature below:

- (1) certifies that all information provided in connection with this application at any time is true and correct to the best of the responsible party's knowledge;
- (2) acknowledges that any misrepresentation or false statement made by the responsible party, or an authorized agent of the responsible party, in connection with this application, whether intentional or not, will constitute grounds for denial, revocation, or non-renewal of any license issued pursuant to this application and/or assessment of monetary administrative penalties; and
- (3) if applying as an individual, further acknowledges that this application may be denied and that any license issued pursuant to this application may be suspended or denied renewal for failure to pay child support. Applicant similarly certifies that such farm or handler has not produced or handled any agriculture product sold or labeled as organically produced except in accordance with Title 7, U.S. Code of Federal Regulation. If signed by an agent (including employee) of the responsible party, the person signing certifies that he or she is authorized to make the preceding certifications on behalf of the applicant.

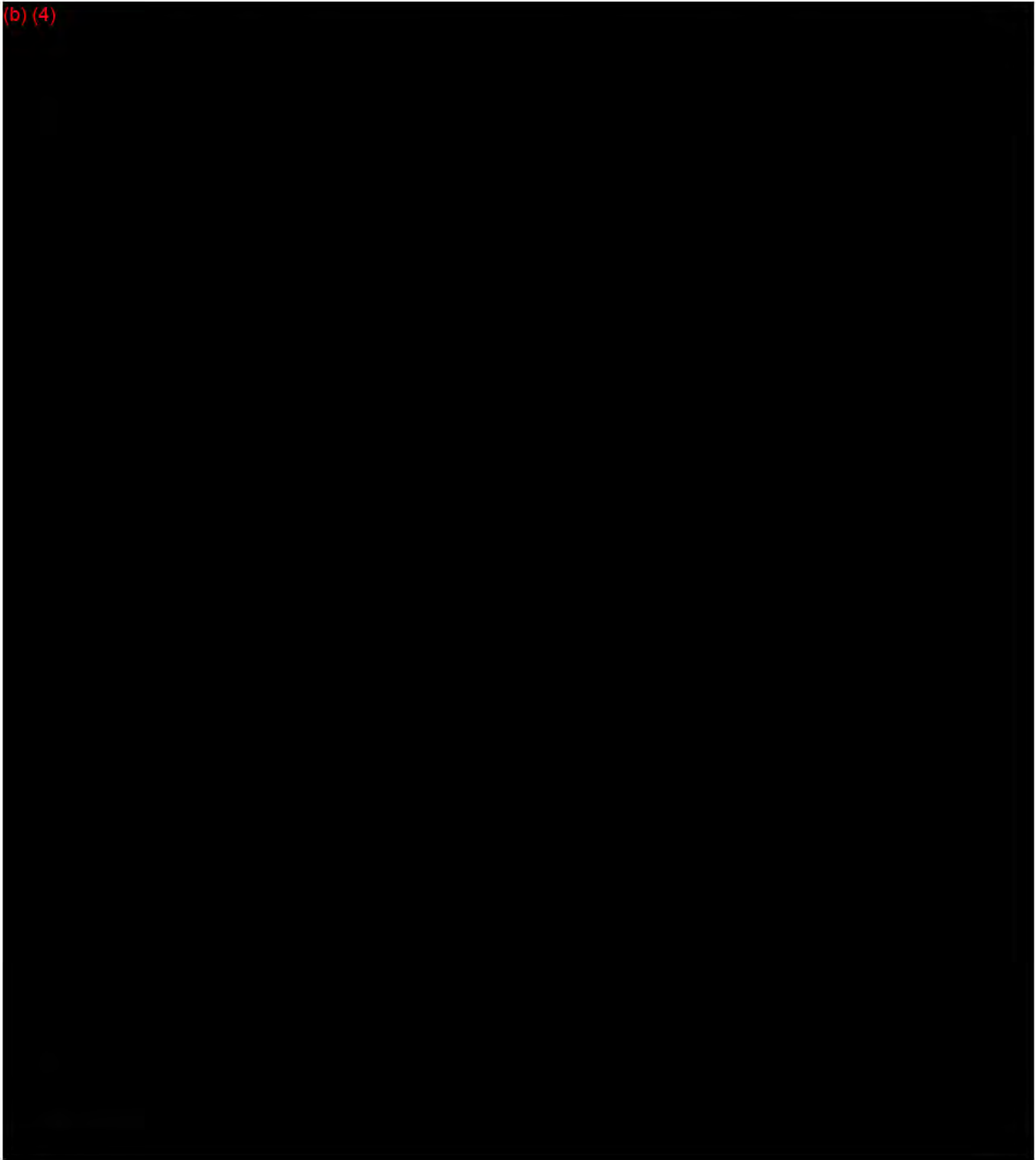
SECTION K

Signature of Responsible Party:	(b) (6)	Date:	8-24-11
Print Name:	(b) (6)		

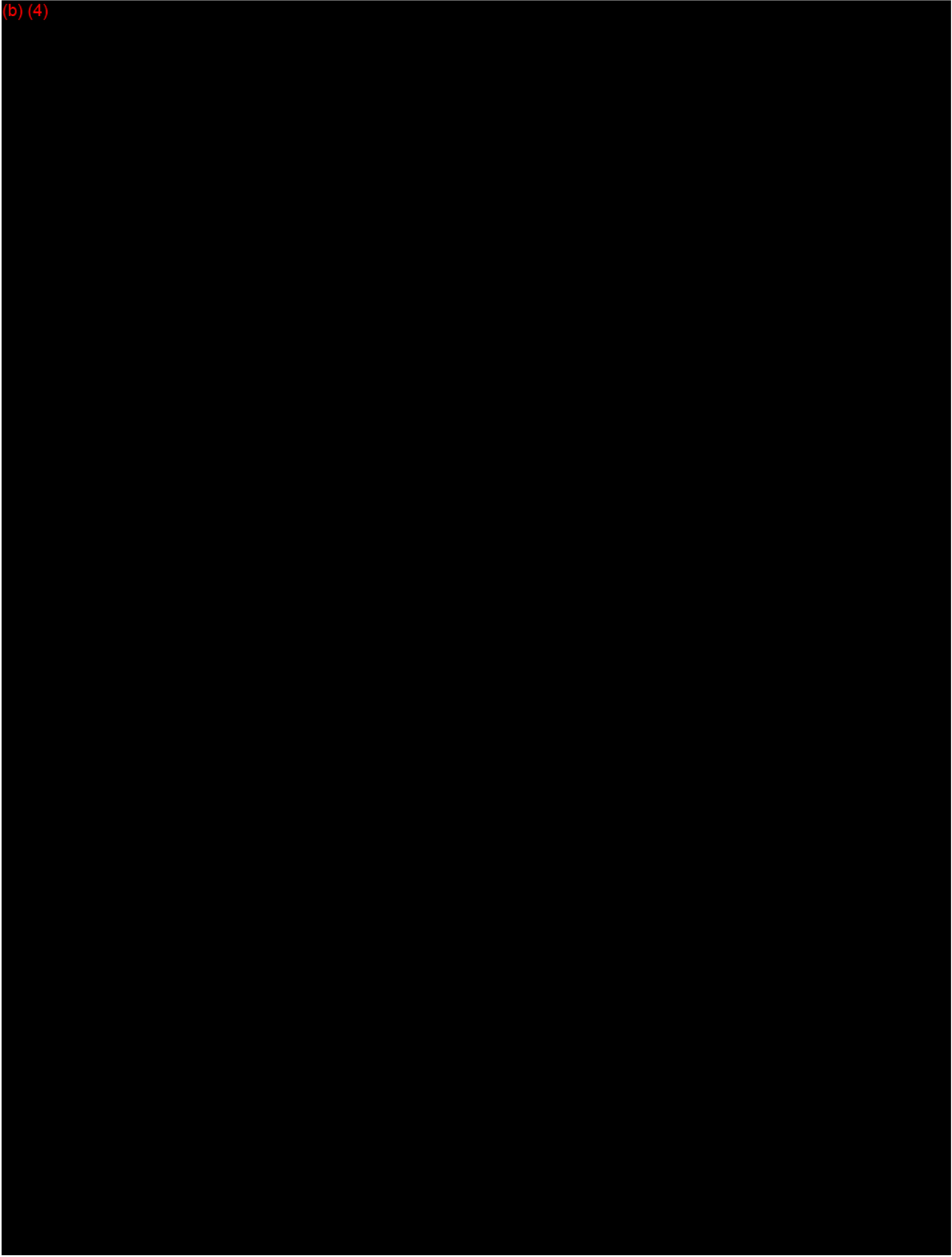
(b) (4) have made copies of this form and other supporting documents for my own records.  
 I have attached the following documents:  
 Notice(s) of non-compliance or denial of certification from other certifying agencies  
 Description of corrective actions taken regarding previous non-compliance(s) and evidence of such actions  
 All required attachments (ingredient labels, organic labels, etc.)

**Submit completed form, fees and supporting documents to:**  
 Texas Department of Agriculture  
 Organic Certification Program  
 P.O. Box 12847  
 Austin, TX 78711

(b) (4)



(b) (4)



TWA: 0.5 ppm 8 hour(s). Form: All forms  
 OSHA PEL (United States, 8/1997).  
 CEIL: 3 mg/m<sup>3</sup> Form: All forms  
 CEIL: 1 ppm Form: All forms

## Section 9. Physical and chemical properties

Physical state : Liquid. [Liquid.]  
 Color : Yellow. [Light]  
 Odor : chlorine  
 pH : 13.2 [Conc. (% w/w): 100%]  
 Specific gravity : 1.237

## Section 10. Stability and reactivity

Stability : The product is stable. Under normal conditions of storage and use, hazardous polymerization will not occur.  
 Reactivity : Extremely reactive or incompatible with acids.  
 Slightly reactive to reactive with metals.  
 Mixing this product with acid or ammonia releases chlorine gas.  
 Hazardous decomposition : Under normal conditions of storage and use, hazardous decomposition products should not be produced.

## Section 11. Toxicological information

### Potential acute health effects

Eyes : Corrosive to eyes.  
 Skin : Corrosive to the skin.  
 Inhalation : Corrosive to the respiratory system.  
 Ingestion : Causes burns to mouth, throat and stomach.

### Potential chronic health effects

Target organs : Contains material which may cause damage to the following organs: lungs, upper respiratory tract.

## Section 12. Ecological information

## Section 13. Disposal considerations

Waste disposal : The generation of waste should be avoided or minimized wherever possible. Avoid dispersal of spilled material and runoff and contact with soil, waterways, drains and sewers. Disposal of this product, solutions and any by-products should at all times comply with the requirements of environmental protection and waste disposal legislation and any regional local authority requirements.

Waste classification : Unused product is D002 (Corrosive)

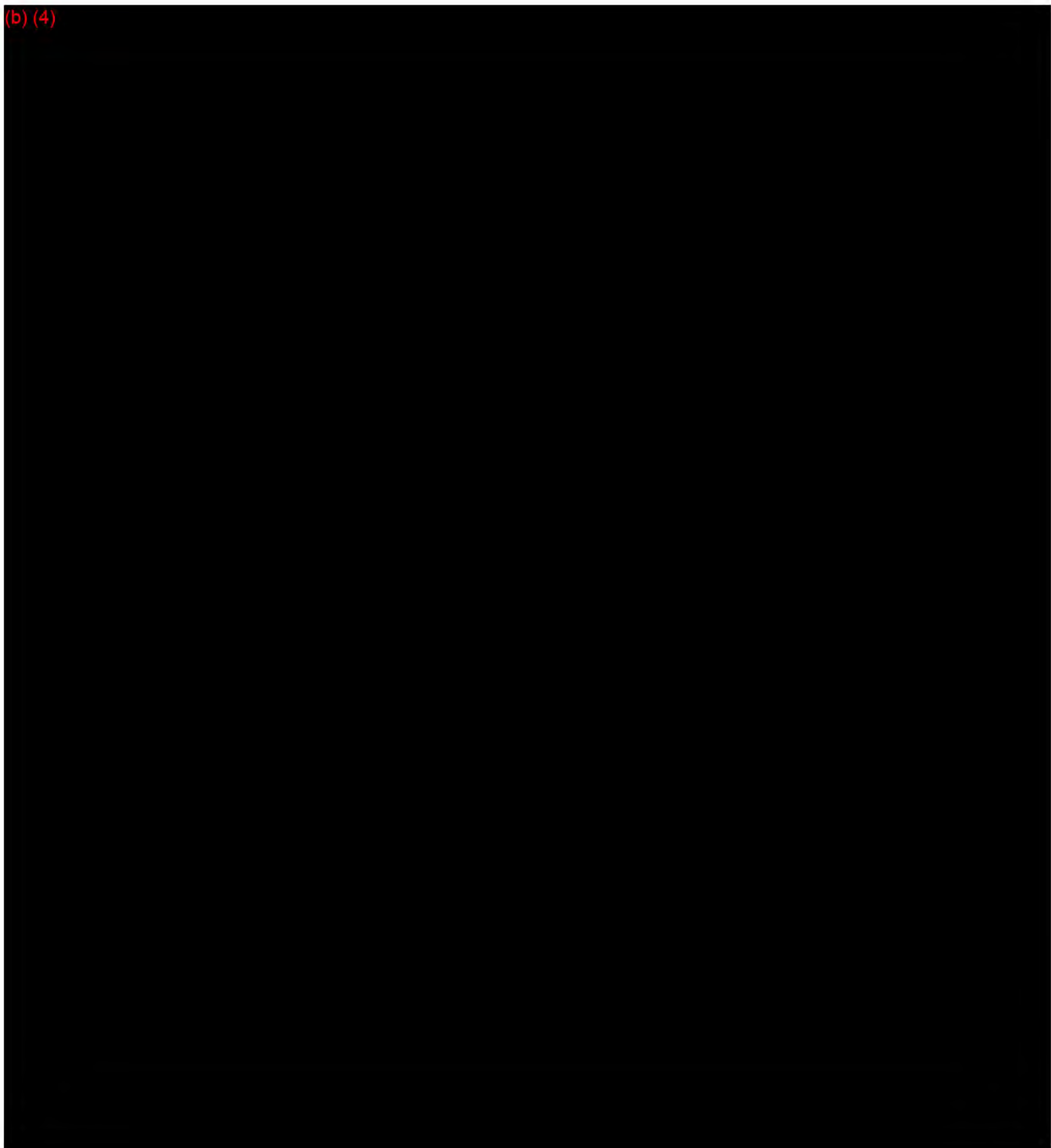
Consult your local or regional authorities.

## Section 14. Transport information

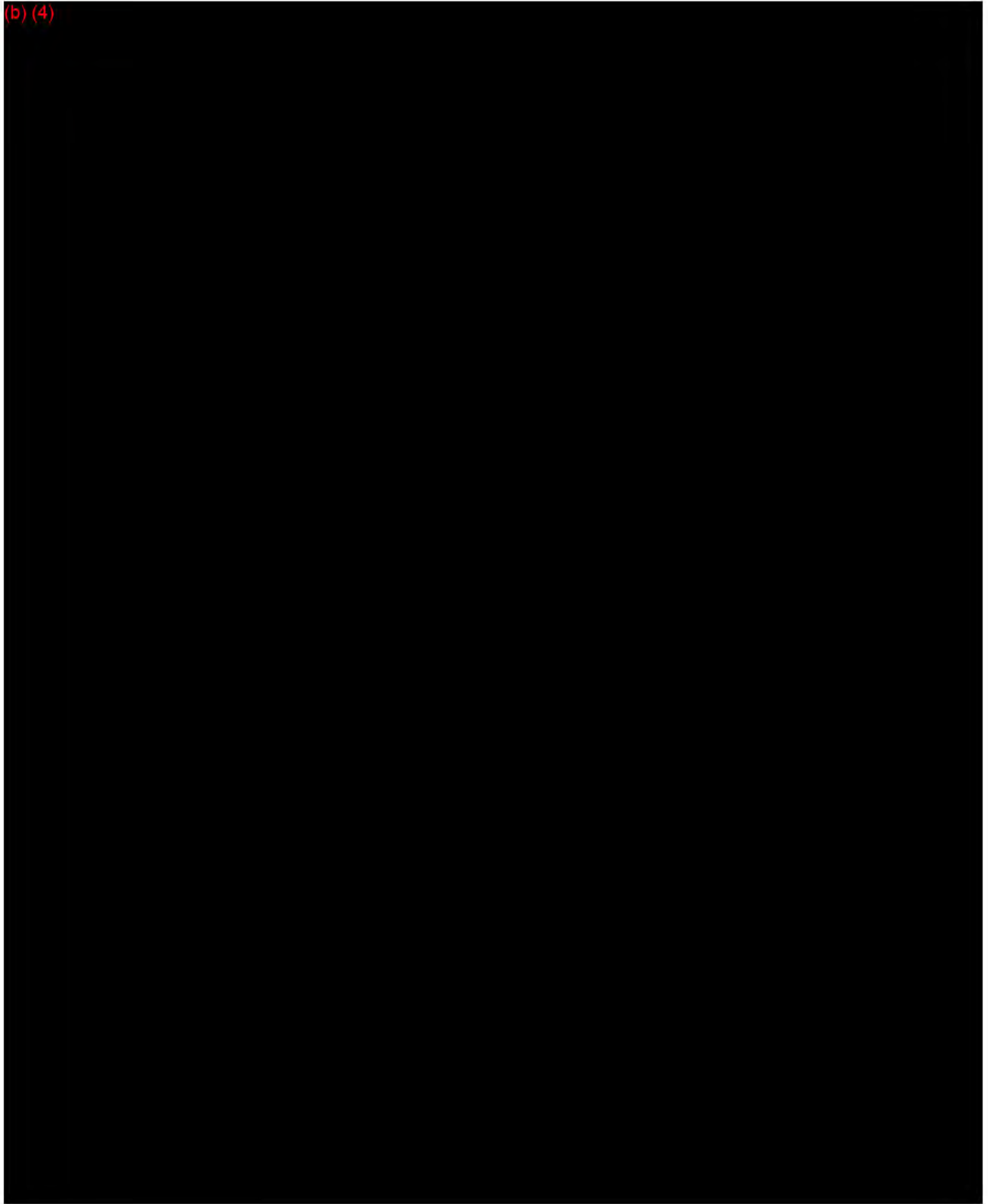
Regulatory information	UN number	Proper shipping name	Class	Packing group	Additional information
DOT Classification	UN1719	Caustic alkali liquids, n.o.s. (sodium hydroxide, sodium hypochlorite)	8	II	Not available.

APPLIES ONLY DURING ROAD TRANSPORT

(b) (4)



(b) (4)

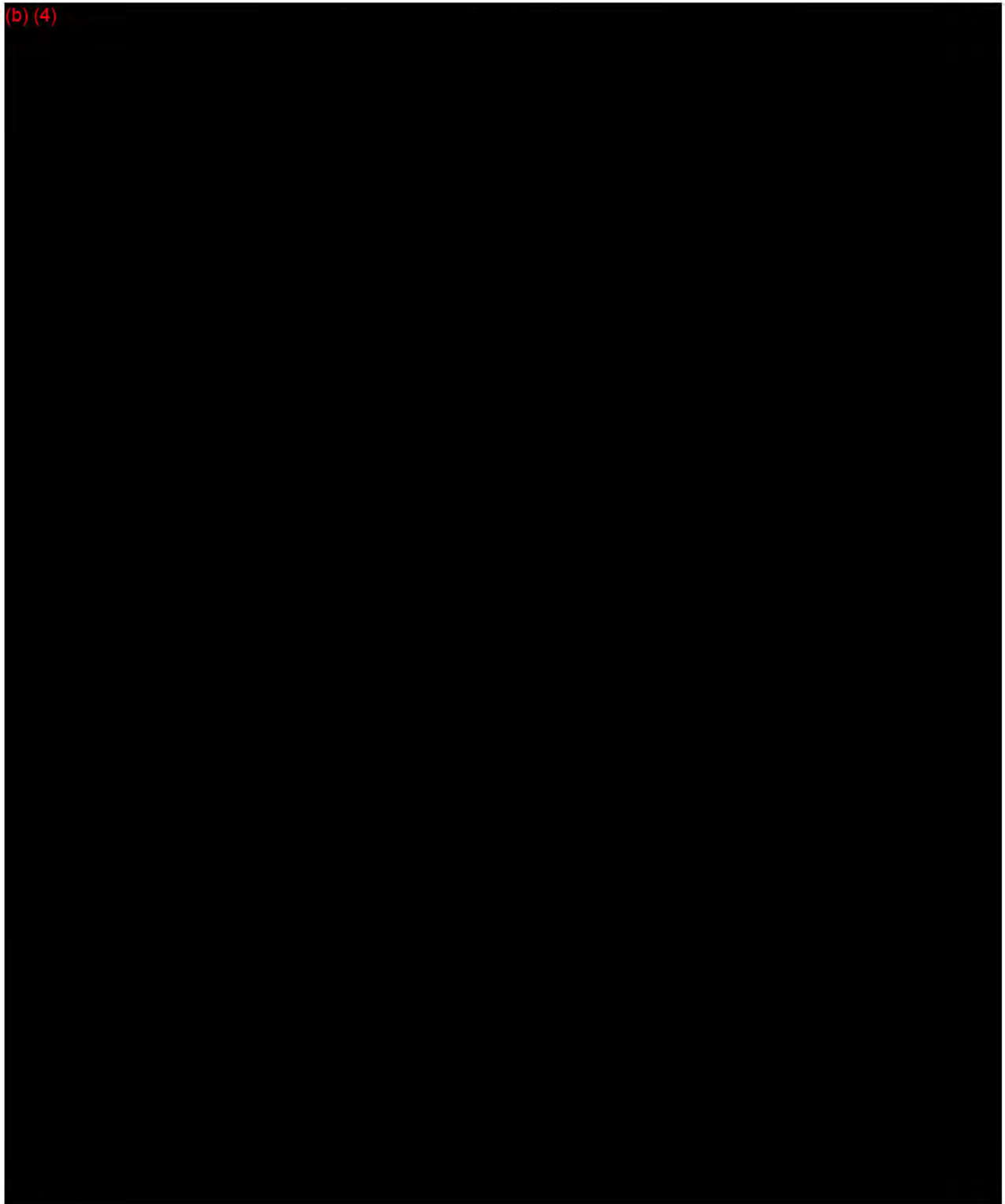




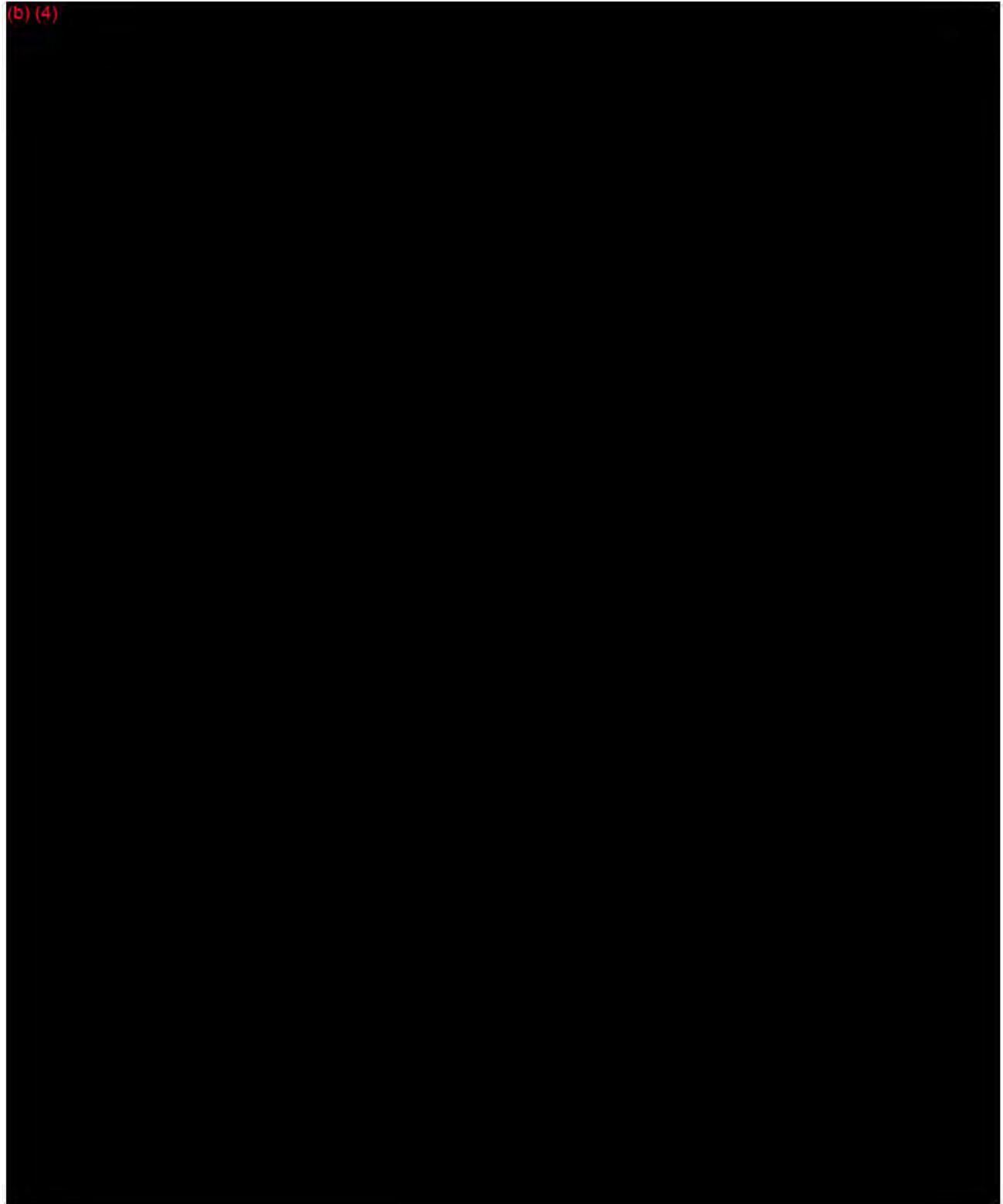
(b) (4)



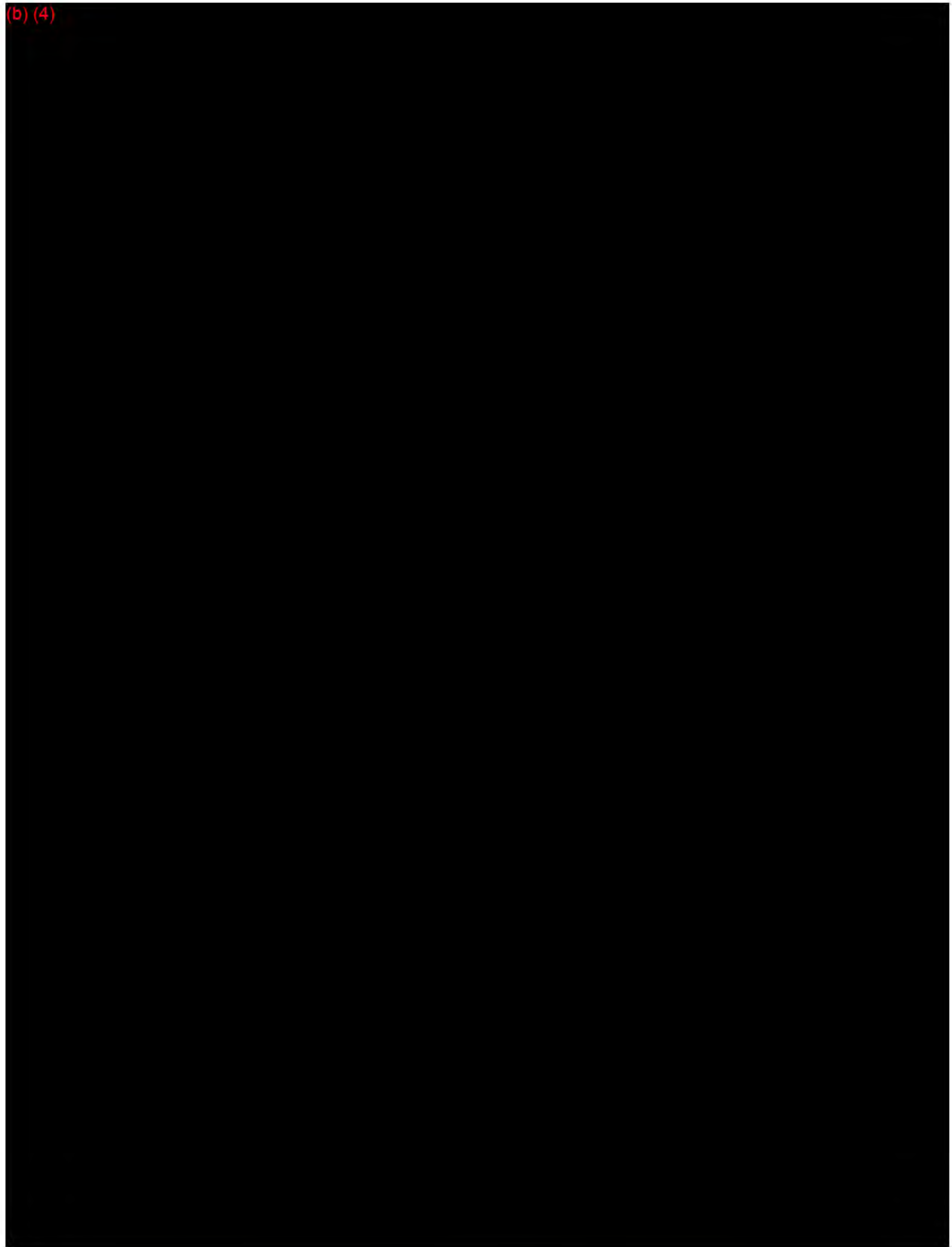
(b) (4)



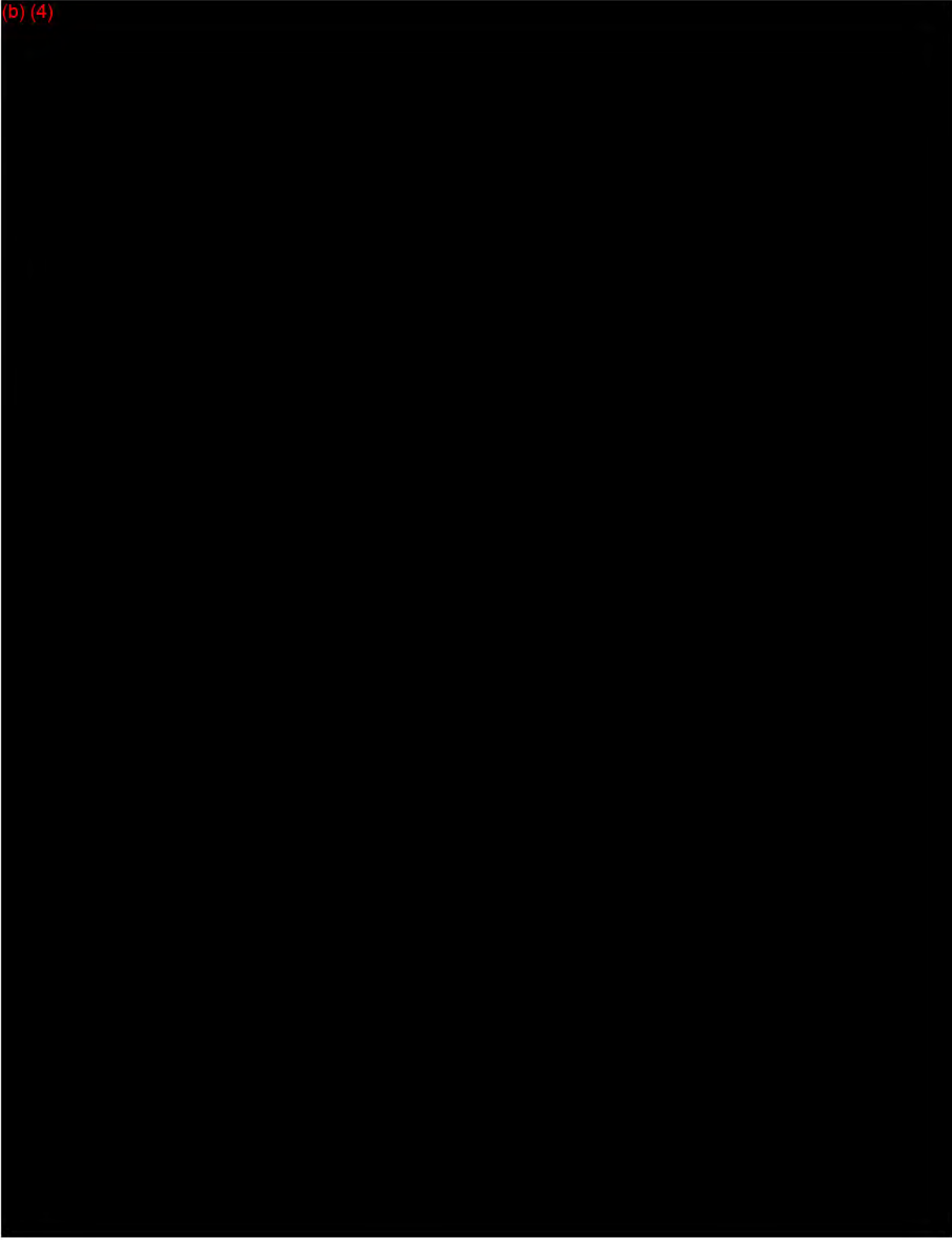
(b) (4)



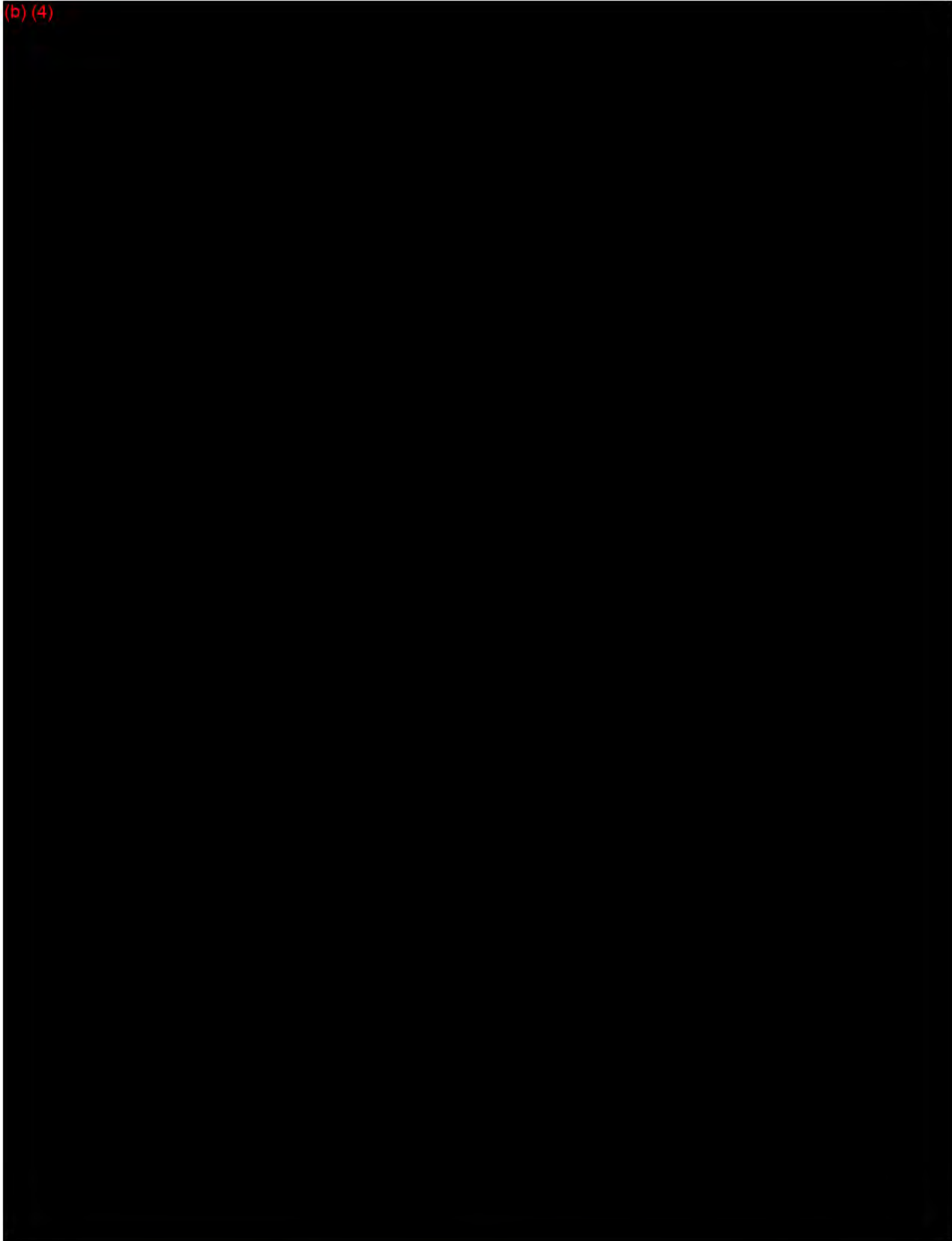
(b) (4)



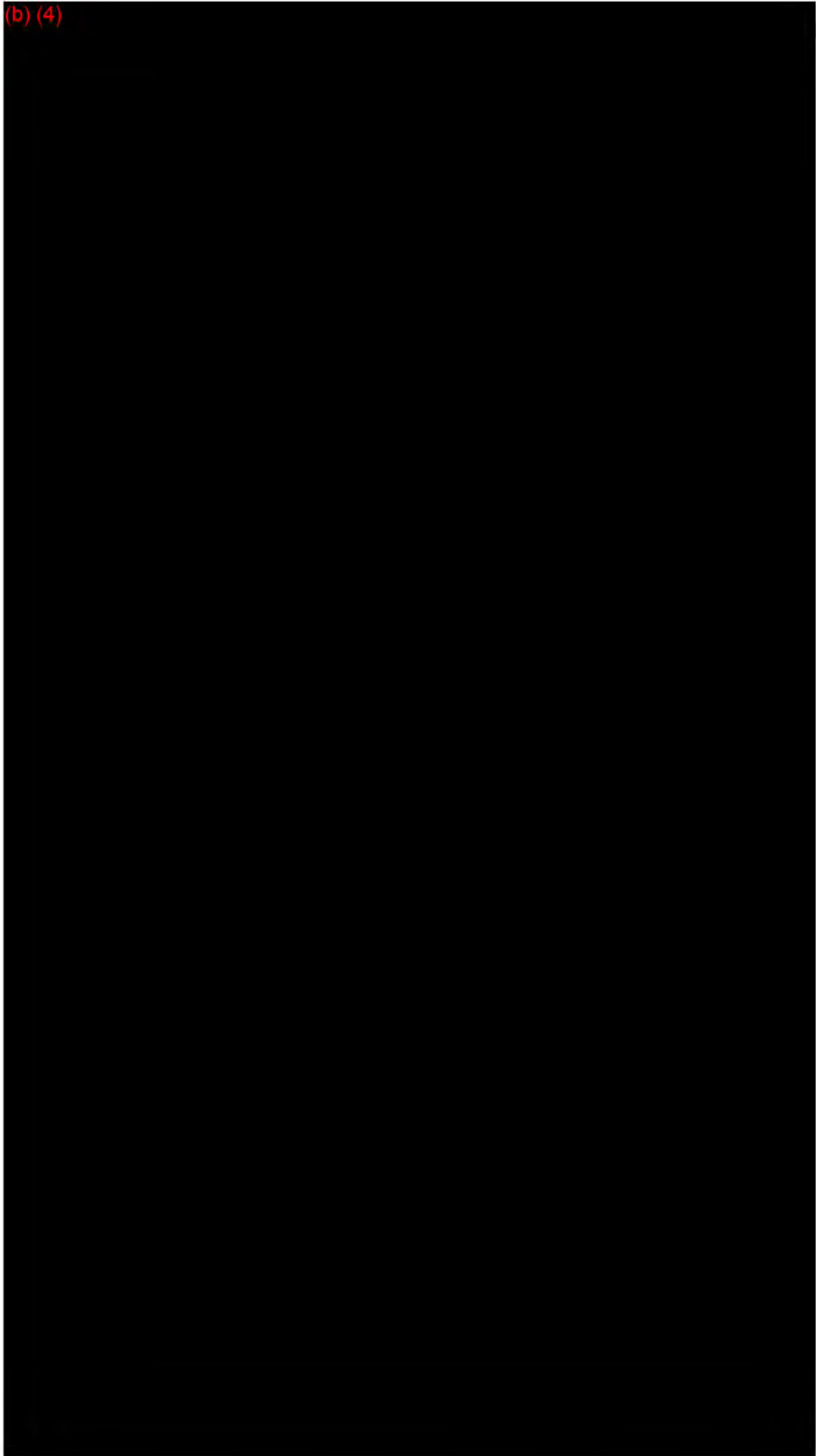
(b) (4)



(b) (4)



(b) (4)

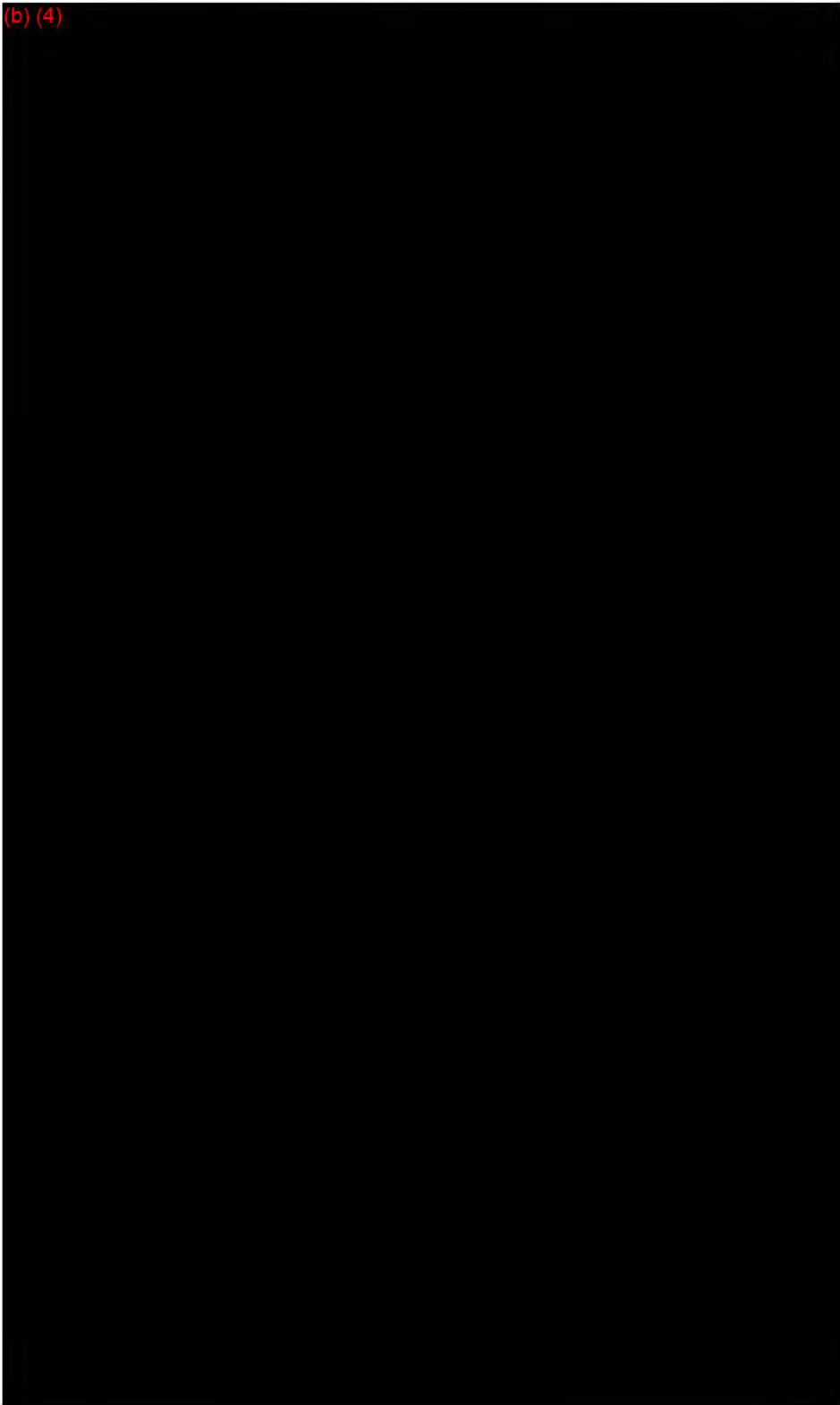


(b) (4)





(b) (4)



(b) (4)



(b) (4)



(b) (4)



(b) (4)





**REDLAND DAIRY, LLC.**

MILK FLOW (b) (4)

(b) (4)





(b) (4)



# REDLAND DAIRY, LLC

QUALITY CONTROL (b) (4)

(b) (4)



(b) (4)



**REDLAND DAIRY, LLC.**

(b) (4)

PROCEDURES

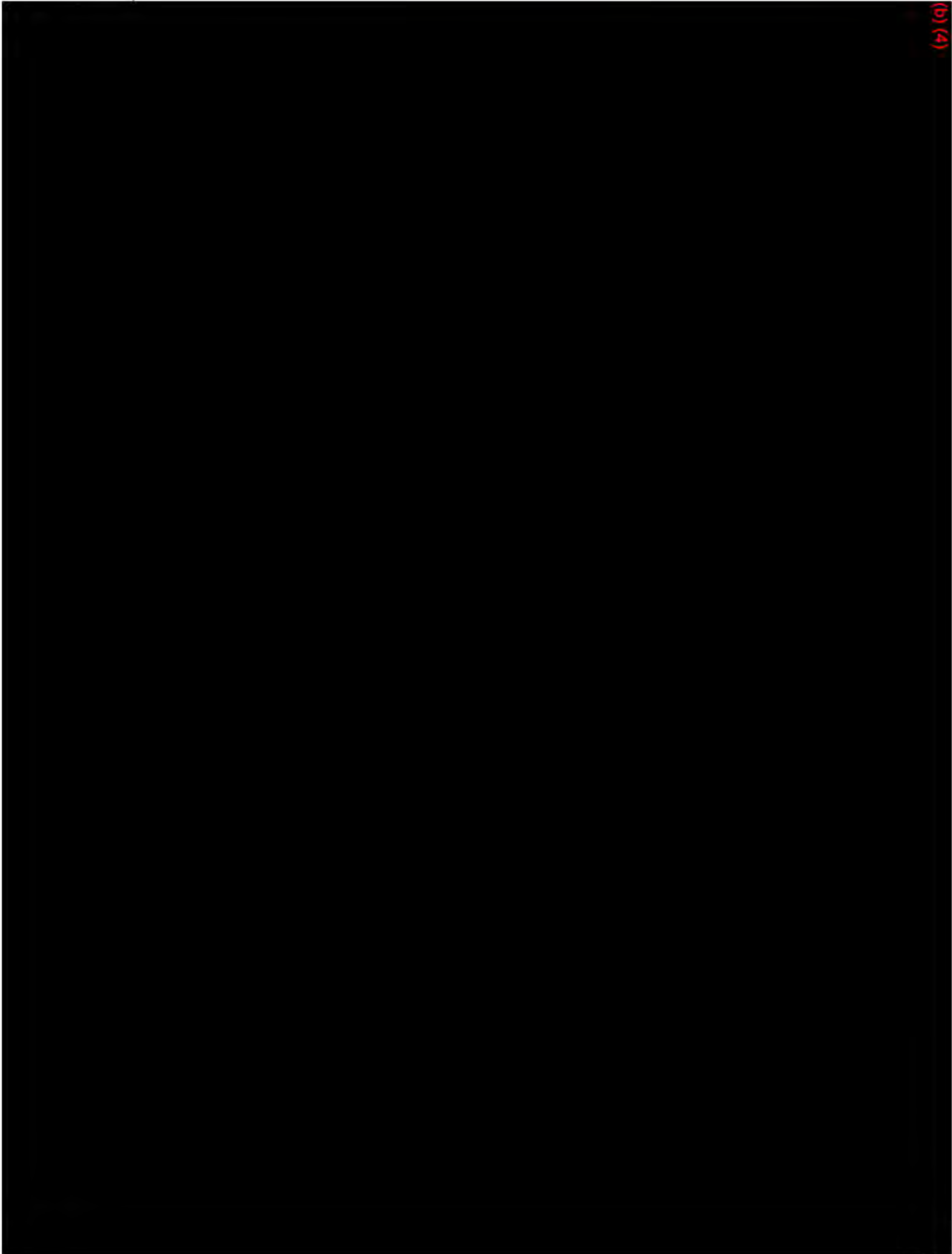
(b) (4)

**REDLAND DAIRY, LLC.**  
**STANDARD OPERATING PROCEDURES**  
**MILKING**

(b) (4)







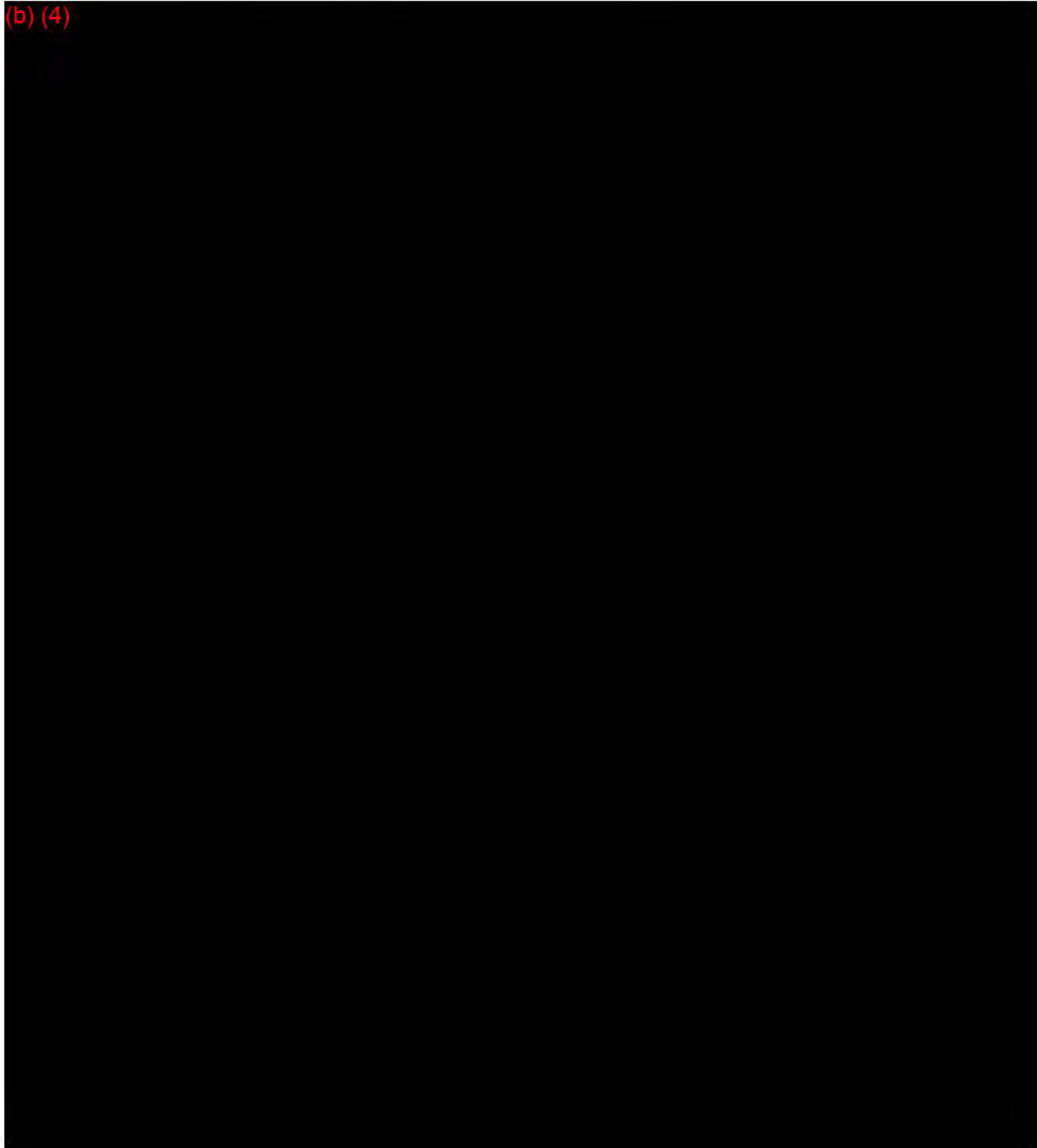
(b) (4)



**REDLAND DAIRY, LLC.**

MILK FLOW (b) (4)

(b) (4)



(b) (4)

**REDLAND DAIRY, LLC**  
**CRITICAL CONTROL POINTS**

(b) (4)



**REDLAND DAIRY, LLC**  
MILK STORAGE AND TRANSPORTATION

(b) (4)





## PERMIT ENCLOSED

Please contact this office immediately if any information on this permit/license is incorrect.

This permit shall be posted in a conspicuous location within the facility. Place permit/license in a protective sleeve or frame to protect the permit from its environment.

Permit fees are due every two years. Failure to submit the renewal fee before the expiration date will result in a late fee, as well as, proposed revocation of the permit/license for noncompliance as required of Chapter 217, Texas Administrative Code.

A permit will be amended if: (1) a name change of facility, (2) ownership change or (3) change of location of a permitted place of business takes place prior to the permit expiration date located below. To obtain an application for these amendments, call 512-834-6626 or download the application at [www.dshs.state.tx.us/fdlicense/apps.shtm](http://www.dshs.state.tx.us/fdlicense/apps.shtm)

If you have any questions or desire additional information concerning the application process or this permit/license, please contact the Food and Drug Licensing Group at (512) 834-6626. If you have any questions or desire additional information concerning the application process or this permit/license, please contact the Food and Drug Licensing Group at (512) 834-6626.

REDLAND DAIRY LLC  
42547 US 70  
PORTALES NM 88130



**TEXAS DEPARTMENT OF STATE HEALTH SERVICES  
REGULATORY LICENSING UNIT  
GRADE 'A' MILK PERMIT**



**REDLAND DAIRY LLC**

750 CR X

FARWELL, TX 79325

*Pursuant to Health and Safety Code Chapter 435 and Title 25 of the Texas Administrative Code, and in reliance on statements and representations made by the licensee, the licensee shall be subject to all applicable rules, regulations and orders of the Texas Department of State Health Services now or hereafter in effect. The above licensee is authorized to engage in the following activities:*

PRODUCER DAIRY

PERMITNO.: (b) (4)

Expiration Date: 08/31/2012

NON-TRANSFERABLE

David L. Lakey, M.D.  
Commissioner

19684

**MUST BE DISPLAYED IN A CONSPICUOUS LOCATION WITHIN THE FACILITY**



Department of Health and Human Services  
Food and Drug Administration

DAIRY FARM INSPECTION REPORT

Inspecting Agency:  
Texas Dept. of State Health Service

NAME AND LOCATION OF DAIRY: Randall Dairy  
ADDRESS: 750 CRX  
CITY: Tamworth STATE: TEXAS ZIP: 79225

POUNDS SOLD DAILY: (b) (4)  
Plant: (b) (4)  
Permit No.: (b) (4)

Inspection of your farm today showed violations existing in the items checked below. You are further notified that this inspection sheet serves as notification of the intent to suspend your permit if the violations are not in compliance at the time of the next inspection. (See Sections 3 and 5 of the Grade "A" Pasteurized Milk Ordinance.)

COWS

1. Abnormal Milk:  
Cows secreting abnormal milk milked last or in separate equipment.....(a)  
Abnormal milk properly handled/disposed of.....(b)  
Proper care of abnormal milk handling equipment.....(c)

MILKING BARN, STABLE, OR PARLOR

2. Construction:  
Floors, gutters, and feed troughs of concrete or equally impervious materials; in good repair.....(a)  
Walls and ceilings smooth, painted or finished adequately; in good repair; ceiling dust-tight.....(b)  
Separate stalls or pens for horses, calves, and bulls; no overcrowding.....(c)  
Adequate natural and/or artificial light; well distributed.....(d)  
Properly ventilated.....(e)

3. Cleanliness:  
Clean and free of litter.....(a)  
No swine or fowl.....(b)

4. Cowyard:  
Graded to drain; no pooled water or wastes.....(a)  
Cowyard clean; cattle housing areas & manure packs properly maintained.....(b)  
No swine.....(c)  
Manure stored inaccessible to cows.....(d)

MILKHOUSE OR ROOM

5. Construction and Facilities:  
Floors:  
Smooth; concrete or other impervious material; in good repair.....(a)  
Graded to drain.....(b)  
Drains trapped, if connected to sanitary system.....(c)

- Walls and Ceilings:  
Approved material and finish.....(a)  
Good repair (windows, doors and hoseport included).....(b)

- Lighting and Ventilation:  
Adequate natural and/or artificial light; properly distributed.....(a)  
Adequate ventilation.....(b)  
Doors/windows closed during dusty weather.....(c)  
Vents and lighting fixtures properly installed.....(d)

- Miscellaneous Requirements:  
Milkhouse operations only; sufficient size.....(a)  
No direct opening into living quarters or barn, except as permitted by Ordinance.....(b)  
Liquid wastes properly disposed of.....(c)  
Proper hoseport where required.....(d)  
Acceptable surface under hoseport.....(e)  
Suitable shelter for transport truck as required by this Ordinance.....(f)

Cleaning Facilities

- Two-compartment wash and rinse vat of adequate size.....(a)  
Suitable water heating facilities.....(b)  
Water under pressure piped to milkhouse.....(c)

6. Cleanliness:

- Floors, walls, windows, tables and similar non-product-contact surfaces clean.....(a)  
No trash, unnecessary articles, animals or fowl.....(b)

TOILET AND WATER SUPPLY

7. Toilet:  
Provided; conveniently located.....(a)  
Constructed and operated according to Ordinance.....(b)  
No evidence of human wastes about premises.....(c)  
Toilet room in compliance with Ordinance.....(d)

8. Water Supply:

- Constructed and operated according to Ordinance.....(a)  
Complies with bacteriological standards.....(b)  
No connection between safe and unsafe supplies; no improper submerged inlets.....(c)

UTENSILS AND EQUIPMENT

9. Construction:  
Smooth, impervious, nonabsorbent, safe materials; easily cleanable.....(a)  
In good repair; accessible for inspection.....(b)  
Approved single-service articles; not reused.....(c)  
Utensils and equipment of proper design.....(d)  
Approved mechanically cleaned milk pipeline System.....(e)

10. Cleaning:  
Utensils and equipment clean.....(a)

11. Sanitization:  
All multi-use containers and equipment subjected to approved sanitization process (See Ordinance).....(a)

12. Storage:  
All multi-use containers and equipment properly stored.....(a)  
Stored to assure complete drainage, where applicable.....(b)

(b) (4)

TRANSFER/PROTECTION OF MILK

14. Protection From Contamination:  
No overcrowding.....(a)  
Product and CIP circuits separated.....(b)  
Improperly handled milk discarded.....(c)  
Immediate removal of milk.....(d)  
Milk and equipment properly protected.....(e)  
Sanitized milk surfaces not exposed to contamination (f)  
Air under pressure of proper quality.....(g)

15. Drug and Chemical Control:  
Cleaners and sanitizers properly identified.....(a)  
Drug administration equipment properly handled and stored.....(b)  
Drugs properly labeled (name and address) and stored.....(c)  
Drugs properly labeled (directions for use, cautionary statements, active ingredient).....(d)  
Drugs properly used and stored to preclude contamination of milk.....(e)

PERSONNEL

16. Hand-Washing Facilities:  
Proper hand-washing facilities convenient to milking operations.....(a)  
Wash and rinse vats not used as hand-washing facilities.....(b)

17. Personnel Cleanliness:  
Hands washed clean and dried before milking, or performing milk house functions; re-washed when contaminated.....(a)  
Clean outer garments worn.....(b)

18. Cooling:  
Milk cooled to 45°F or less within 2 hours after milking, except as permitted by Ordinance.....(a)  
Recirculated cooling water from safe source and properly protected; complies with bacteriological standards.....(b)  
An acceptable recording device shall be installed and maintained when required.....(c)

PEST CONTROL

19. Insect and Rodent Control:  
Fly breeding minimized by approved manure disposal methods (See Ordinance).....(a)  
Manure packs properly maintained.....(b)  
All milkhouse openings effectively screened or otherwise protected; doors tight and self-closing; screen doors open outward.....(c)  
Milkhouse free of insects and rodents.....(d)  
Approved pesticides; used properly.....(e)  
Equipment and utensils not exposed to pesticide contamination.....(f)  
Surroundings neat and clean; free of harborage and breeding areas.....(g)  
Feed storage not attraction for birds, rodents or insects.....(h)

Remarks: (b) (4)

DATE: 4/1/12 SANTARIAN: (b) (6) SAN. I.D.M. (b) (4) OWNER/OPERATOR/MANAGER: (b) (6)

Note: Check numbers correspond to required sanitation standards as published in the Ordinance. (See Sections 3 and 5 of the Grade "A" Pasteurized Milk Ordinance.)  
Form FDA 2359