Organic Livestock Plan Application: Slaughter/Dairy

Please fill out this form if you are requesting organic certification of livestock slaughter stock (beef, sheep, etc.) and dairy stock. Poultry producers should use the Organic Poultry Plan Questionnaire. A separate organic Farm Plan Questionnaire must be filled out if you are growing your own feed or other organic crops for sale. Use additional sheets if necessary.
Attachments needed with questionnaire: Directions to your farm/ranch operation; farm map showing all fields, pasture areas and buildings; primary source of drinking water; and Pasture History Sheets.

SECTION 1: General Information

<table>
<thead>
<tr>
<th>Name</th>
<th>Operation name</th>
<th>Type of livestock operation</th>
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<tbody>
<tr>
<td>Address</td>
<td>City</td>
<td>St/Prov</td>
</tr>
<tr>
<td>Phone</td>
<td>Fax</td>
<td>E-mail</td>
</tr>
</tbody>
</table>

Preferred dates and time for inspection visit:
- morning
- afternoon
- evening

Organic Certification No.

<table>
<thead>
<tr>
<th>How many years have you raised livestock?</th>
<th>How many years have you raised livestock organically?</th>
<th>What are your sources of organic livestock information/consultation?</th>
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</table>

Why do you raise livestock organically?

<table>
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<tr>
<th>Year first certified</th>
<th>List previous organic certification by other agencies</th>
<th>List current organic certification by other agencies</th>
<th>Do you understand current organic standards?</th>
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<td>yes                                no</td>
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</table>

Year when complete Organic Livestock Plan Questionnaire was last submitted:

List type of poultry or poultry products requested for certification:

Have you ever been denied certification?
- yes
- no

If yes, describe the circumstances:
### 2: Organic Livestock Operation Profile

List animals requested for organic certification (O), in transition (T) and conventional (C):

<table>
<thead>
<tr>
<th>LIVESTOCK TYPE</th>
<th>NO. FEMALES</th>
<th>NO. MALES</th>
<th>NO. CASTRATED MALES</th>
<th>NO. YOUNG STOCK</th>
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<tr>
<td></td>
<td>O</td>
<td>T</td>
<td>C</td>
<td>O</td>
</tr>
<tr>
<td>Beef</td>
<td></td>
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<tr>
<td>Hogs</td>
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<td>Buffalo</td>
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<td>Goats</td>
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<td>Deer</td>
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<tr>
<td>Horse</td>
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<tr>
<td>Dairy</td>
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<tr>
<td>Other types</td>
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### SECTION 3: Source of Animals

Organic standards require that all organic slaughter stock be sourced from certified sources unless breeding stock was purchased prior to the last third of the gestation period. Dairy stock may be from conventional sources or transitioned to organic production, following organic standards for origin of livestock.

Do you raise all slaughter animals on farm?  □ yes  □ no  □ not applicable  □ No Changes

Do you raise dairy replacement animals on farm?  □ yes  □ no  □ not applicable

Do you purchase any livestock?  □ yes  □ no

If yes, give specific information on purchased livestock:

<table>
<thead>
<tr>
<th>TYPE OF LIVESTOCK PURCHASED</th>
<th>IDENTIFICATION NO./ NAME</th>
<th>DATE OF PURCHASE</th>
<th>PROJECTED OR REAL BIRTHING DATE</th>
<th>PURCHASE SOURCE</th>
<th>CERTIFIED BY WHAT AGENCY?</th>
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</thead>
</table>
SECTION 4: Livestock Feed and Feed Supplements

Organic standards require that certified organic livestock be fed 100% certified organic feed. Feed supplements should not contain non-organic protein sources or prohibited materials. Please save labels for the organic inspector.

A. FEED: Feed ration table:

<table>
<thead>
<tr>
<th>LIVESTOCK</th>
<th>LIST FEED RATION INGREDIENTS, PERCENT OF RATION, AND WHETHER ORGANIC (O), TRANSITIONAL (T), CONVENTIONAL (C) [EXAMPLE: GROUND CORN, 10% (O)]</th>
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<tbody>
<tr>
<td>Females</td>
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<td>Males</td>
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<td>Castrated males</td>
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<td>Young stock</td>
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<td>Other</td>
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</table>

Do you raise any feed on your farm? □ yes □ no  If yes, please complete Organic Farm Plan Questionnaire.

Describe purchased feed: □ No purchased feed

<table>
<thead>
<tr>
<th>TYPE OF PURCHASED FEED</th>
<th>QUANTITY PURCHASED/TO BE PURCHASED</th>
<th>DATES PURCHASED</th>
<th>SOURCE(S)</th>
<th>CERTIFIED BY WHAT AGENCY?</th>
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Do you process feed (mix, grind, roast, extrude, etc.) on-farm? □ yes □ no

If yes, is the equipment also used to process conventional products? □ yes □ no

If yes, how is equipment cleaned prior to processing organic feed to prevent contamination? __________________________________________________________

What is your plan for emergency feed supplies? __________________________________________________________
Do you pasture any livestock? □ yes □ no

If yes, include a map of pastures/paddocks and ID No. and complete the attached

If yes, what months are livestock pastured? ____________________________________________________________

The National Organic Program Access to Pasture final rule (February 17, 2010) requires that ruminant animals be managed on pasture and graze daily throughout the grazing season. To ensure a pasture-based management system, the rule requires that ruminant animals derive not less than an average of 30 percent of their dry matter intake (DMI) from pasture during the grazing season (at least 120 days).

Included in the packet are USDA/NOP documents to assist in determining the dry matter intake from pasture. At the time of submitting your OSP; Please submit all dry matter intake calculation worksheets for all classes of livestock.

B. FEED SUPPLEMENTS AND ADDITIVES:

□ No supplements used □ No Changes

List all feed supplements and additives, including silage inoculants, preservatives, etc.:

<table>
<thead>
<tr>
<th>FEED SUPPLEMENT/ ADDITIVE</th>
<th>SOURCE</th>
<th>SYNTHETIC INGREDIENTS YES (Y) OR NO (N)</th>
<th>GEO* YES (Y) OR NO (N)</th>
<th>REASON FOR USE</th>
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*Organic standards require that no genetically engineered products (GEO’s) be used in organic production systems. Any supplements/additives that contain conventionally grown corn, soybeans, cotton products, etc., have the potential to be from genetically engineered sources unless the label specifically states such product is free of GEOs.

C. FEED STORAGE:

Describe your feed storage locations:

<table>
<thead>
<tr>
<th>STORAGE ID#</th>
<th>TYPE OF FEED STORED</th>
<th>TYPE OF STORAGE</th>
<th>CAPACITY</th>
<th>ORGANIC (O), TRANSITIONAL (T), CONVENTIONAL (C), BUFFER (B)</th>
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How do you control rodents in organic feed storage areas? □ No rodent problems

SECTION 5: Water
**Water used for organic livestock must be potable and readily accessible. Water tests for coliform bacteria, nitrates and/or known contaminate may be required. If required will be paid by certifying agent.**

**What are your sources of water for livestock use?**

- [ ] on-site well
- [ ] municipal
- [ ] river/creek/pond
- [ ] spring
- [ ] other

**What is the date of your last water test for coliform bacteria and nitrates?**

(Attach copy)

**If you use additives in the water, list them and state reason for use:**

- [ ] No additives used

**Describe any water contamination problems in your region:**

- [ ] No contamination problems

**If livestock have access to a river, creek, or pond, how do you prevent bank erosion?**

- [ ] No access

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**SECTION 6: Housing**

*Organic standards require that livestock living conditions provide reasonable freedom of movement, lack of crowding, proper sanitation, fresh air, sunshine, appropriate shelter and adequate bedding.*

**What type of housing do you use?**

- [ ] No Changes

**Describe sizes (length x width) and number of animals per housing unit:**

**Describe type(s) of bedding:**

**How often is housing cleaned out?**

**How is housing cleaned?**

**Describe sanitation or cleaning products used:**

**What source(s) of light is used in animal housing?**

**Is day length regulated using artificial light?**

- [ ] yes
- [ ] no

**What outdoor areas other than pasture do animals use?**

**How long are animals indoors (hours per day)?**

**SECTION 7: Health Management**
**A. General Information:**

Identify the general components of your animal health management program:

- ☐ selective breeding
- ☐ raise own replacement stock
- ☐ isolation for purchased/diseased animals
- ☐ culling
- ☐ vaccinations
- ☐ good sanitation
- ☐ access to outdoors
- ☐ dry bedding
- ☐ good ventilation in housing
- ☐ good quality feed
- ☐ pasture rotation
- ☐ nutritional supplements
- ☐ probiotics
- ☐ other: _____________________________________________________________

A. List health or disease problems in the last 12 months, including vaccinations given or planned:

<table>
<thead>
<tr>
<th>HEALTH PROBLEM/ DISEASE</th>
<th>ANIMAL ID</th>
<th>PREVENTION AND MANAGEMENT PRACTICES</th>
<th>PRODUCT(S) USED</th>
<th>APPROVED (A)</th>
<th>RESTRICTED (R)</th>
<th>PROHIBITED (P)</th>
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If you use any hormones, list and state reason for use:

☐ Not used

If you use antibiotics, list in table above.

☐ Not used

If you use parasiticides, list in table above.

☐ Not used

If you use vaccinations, list in table above.

☐ Not used

Name and phone number of your veterinarian:

B. FLY CONTROL:

☐ Not a problem

If flies are a problem in your operation, what do you do to prevent or control them?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

C. PARASITE CONTROL:

☐ Not a problem

If internal or external parasites are a problem in your operation, what are they and how do you prevent or control them?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
D. PREDATOR CONTROL:  

Check which predators you have problems with: □ hawks  □ feral cats  □ raccoons/skunks, etc.
□ dogs  □ foxes  □ coyotes  □ other ________________________________

Describe how you handle predator problems in this table:

<table>
<thead>
<tr>
<th>PREDATOR PROBLEM</th>
<th>CONTROLS USED</th>
<th>PRODUCTS USED</th>
<th>APPROVED (A)</th>
<th>RESTRICTED (R)</th>
<th>PROHIBITED (P)</th>
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If you use poison baits, list products in the table above. □ None used

E. SURGICAL PRACTICES:  

Organic standards may prohibit some surgical practices, such as tail docking (except in sheep).

Describe surgical practices you use: □ Not used

<table>
<thead>
<tr>
<th>SURGICAL PRACTICE</th>
<th>WHY USED?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Castration</td>
<td></td>
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<tr>
<td>Dehorning</td>
<td></td>
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<tr>
<td>Tail docking</td>
<td></td>
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<tr>
<td>Other:</td>
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</table>

SECTION 8: Manure Management

Organic standards require manure to be free of contaminants and be spread on fields when the soil is warm and biologically active. Composting manure is preferable.

What forms of manure do you use: □ liquid  □ semi-solid/piled  □ fully composted □ No Changes

If manure from your livestock is used on your fields, describe how it is used: □ Not used

Acres/hectares of land available for manure application: ________________________________

List ingredients/additives (example: bedding, barn lime, inoculants, preservatives) ________________________________

During what months do you apply manure/compost? ________________________________

Describe your composting method(s): □ Composting not used

Estimated quantity of manure generated per year: __________ tons
### SECTION 9: Milk Handling

**Organic standards require that milk handling procedures meet regulatory requirements for sanitation.**

**What type of milk handling system do you use:**  
[ ] No Changes  [ ] We are not a dairy operation  
[ ] pipeline  [ ] automated  [ ] step saver  [ ] hand milking  [ ] parlor  [ ] tie stalls  [ ] stanchions  [ ] other ____________

**How are you licensed?**  
[ ] Grade A  [ ] Grade B  [ ] other ____________

**Describe cleaning cycle for milking equipment** (water temperature, number of rinses, etc.): __________________________________________________________________________________________________________

Name of detergent used: __________________________________________________________________________________________________________

Name of acid cleaner used: __________________________________________________________________________________________________________

Name of sanitizer used: __________________________________________________________________________________________________________

**Somatic cell counts for last six tests, if available**

<table>
<thead>
<tr>
<th>DATE</th>
<th>POUNDS PRODUCED</th>
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**List products used to clean animals:**  
[ ] None used  

- Teat dips: __________________________________________________________________________________________________________

- Udder washes: __________________________________________________________________________________________________________

**How often do you change inflations?** __________________________________________________________________________________________________________

**How many animals do you currently milk?** __________________________________________________________________________________________________________

**Report production for the last six milkings:**

<table>
<thead>
<tr>
<th>DATE</th>
<th>POUNDS PRODUCED</th>
<th>DATE</th>
<th>POUNDS PRODUCED</th>
<th>DATE</th>
<th>POUNDS PRODUCED</th>
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### SECTION 10: Handling for Slaughter

**Slaughter facilities must be certified.**

[ ] No Changes  [ ] We don’t slaughter

If you slaughter your livestock, describe slaughter and meat processing procedures:

- __________________________________________________________________________________________________________

- __________________________________________________________________________________________________________

Name, address, and phone number of facility where your animals are slaughtered:

- __________________________________________________________________________________________________________

Contact person ________________  Is the facility certified organic?  [ ] yes  [ ] no  By what agency? ________________

**How are animals loaded?** __________________________________________________________________________________________________________

**Do you use electric prods?**  
[ ] yes  [ ] no
What form of transportation is used? ________________________________________________

How long does transportation take? ________________________________________________

Are animals provided with food in transit? □ yes □ no

Water? □ yes □ no

Where are animals kept after delivery to slaughter facility but before slaughter? ________________________________________________

How many hours from loading until time of slaughter? _________________________________

Are organic animals kept separate from non-organic animals? □ yes □ no

Describe the method of slaughter: ________________________________________________

SECTION 11: Animal Identification

Organic standards require individual identification of large animals and “lot” identification of small animals.

Describe your identification system: ________________________________________________

If animals are treated with prohibited materials, how are they identified and/or segregated? ________________________________________________

SECTION 12: Recordkeeping

Please include a description of your recordkeeping system implemented to comply with the requirements established in USDA NOP Standard Regulations §205.103 (Please attach to the OSP).

Check types of records you keep: □ No Changes

- documentation of purchased animals  □ breeding  □ purchased feed/feed supplements  □ feed labels
- health  □ somatic cell/plate count  □ milk production  □ sales  □ feed storage  □ shipping/transportation
- slaughter  □ other

SECTION 13: Marketing
TYPE OF MARKETING:

☐ farmers market  ☐ direct to retail  ☐ CSA/subscription service  ☐ on-farm retail  ☐ wholesale

☐ wholesale to processor  ☐ contract to buyer  ☐ other___________________________________________________

Do you use the seal of the certification agency on organic product labels?  ☐ yes  ☐ no
(Attach examples of all organic product labels.)

SECTION 14: Affirmation

I affirm that all statements made in this application are true and correct. No prohibited products have been applied to any of the organically managed pasture areas for the last three years, nor to any animals I plan to sell as organic. I understand that my operation may be subject to unannounced inspection and/or sampling for residues at any time. I agree to follow organic standards.

Signature of Operator ____________________________ Date________

I have attached the following additional documents:

☐ Maps of the operation (including pasture/rotational grazing areas and showing adjoining land use and identification)

☐ Directions to farm/ranch

☐ Water test, if applicable

☐ Pasture History Sheet (if applicable)

☐ Organic product labels for your products (if applicable)