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| **Operator #:** |  | **Operation Name:** | |  | **Date:** |  | |
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| 1. Provide information on your storage areas by completing the following table. | | | | | | | |
| **Type of Storage** | | | **Type of Storage Unit/Area**  **(bins, specific section of warehouse, freezer, etc.)** | | | | **Is storage unit dedicated organic?** |
| Ingredient storage | | |  | | | | YES  NO |
| Packaging material storage | | |  | | | | YES  NO |
| In-process storage | | |  | | | | YES  NO |
| Finished product storage | | |  | | | | YES  NO |
| Off-site storage | | |  | | | | YES  NO |
| Other (specify): | | |  | | | | YES  NO |
| 2. Does your operation utilize any off-site storage (including storage owned by the operation)?  YES  NO  If **YES**, provide the name, address, phone number, contact person and type of products stored at off-site facility. Please note if facility is certified and provide certification verification. If not certified, provide an affidavit verifying the exemption. | | | | | | | |
| 3. For products stored off-site, are products in sealed temper-evident packaging?  YES  NO  N/A, not stored off-site | | | | | | | |
| 4. If storage units/areas are not dedicated to organic products, what measures are taken to ensure that commingling/contamination of organic products does not occur? | | | | | | | |
| 5. If products or ingredients are stored in non-retail containers or storage prior to packaging, what information is included on the container or storage label?  Lot Number, Shipping ID, or other unique ID to link container to audit trail  Organic designation and product name  Other: | | | | | | | |
| 6. Where are cleaning or sanitizing materials stored? Where are oils, paints, lubricants, and pesticides stored? | | | | | | | |
| 7. Are organic products clearly identifiable in the storage areas and areas managed in a manner to allow for the identification of lots and to prevent commingling or contamination with prohibited substances?  YES  NO | | | | | | | |
| 8. If your operation stores product for other entities, does your operation provide reconditioning or repacking services?  YES  NO  N/A, Don’t store for others  If **YES**, provide the name, address, and organic certification agency for all clients for which reconditioning or repacking is performed: | | | | | | | |
| 9. If your operation stores product for other entities and third-party reconditioning services are used on-site by clients, please provide the name of the company or companies who provide services along with their organic certification agency.  N/A Third-party reconditioning does not occur  N/A, Don’t store for others | | | | | | | |