

ORGANIC CERTIFICATION INSPECTION CHECKLIST

GENERAL INFORMATION

Name: _____

Date: _____

Location: _____

Land and Soil Management

- Yes No — Buffer zones are established to prevent contamination
- Yes No — Soil fertility is managed through approved methods
- Yes No — No prohibited substances applied in last three years
- Yes No — Erosion control measures are effectively implemented

Seeds and Planting Stock

- Yes No — Organic seeds or planting stock are used when available
- Yes No — Non-organic seeds are untreated and non-GMO
- Yes No — Documentation for seed sourcing is complete and valid
- Yes No — Seed cleaning procedures prevent cross-contamination

Pest and Disease Control

- Yes No — Preventive management practices are the primary control
- Yes No — Approved biological or botanical substances are used

Yes No — Records of all pest control applications are maintained

Yes No — Equipment is cleaned before use in organic areas

Record Keeping and Audit Trail

Yes No — Field logs and harvest records are up to date

Yes No — Sales and shipping documents track organic status

Yes No — Storage areas are clearly labeled and segregated

Yes No — Input purchase receipts are archived for verification

FINAL NOTES

Inspector Comments:

Inspector Name: _____

Inspector Email: _____

Inspection Date: _____

I confirm this inspection was completed accurately