ORGANIC MANAGEMENT SYSTEM PLAN FOR ORGANIC INPUT APPROVAL

I. Basic details:

The organic Management system plan is the basic document for certification. In this plan, the operator describes, how he/she organises his/her production and assures fulfilment of organic regulations according to NPOP. You need to find out about compliance with standards and define corrective actions. Refer Annex 1, 2 and 3 of Chapter 3 in NPOP and other applicable chapters of NPOP before filling this annual update of OMP.

You will fill the following assessment details carefully and completely. The Qmark International Certifications Pvt. Ltd. will assess the implementation of what you describe in this Annual Updated Plan.

1	**Manufacturing Address for Organic Inputs**	
1.1	Name of the company / Firm / Legal Entity	
1.2	Responsible Person	
1.3	Complete Address for Correspondence with Pin code	**Village/City:** **Post:** **Landmark:** **Taluk:** **District:** **State:** **Pin code:**
1.4	Registered Mobile No.	
1.5	Alternate contact No.-	
1.6	E-mail ID	
1.7 Input Manufacturing Facility Name and Address with PINCODE		Name and Address for correspondence: **Village/City:** **Post:** **Landmark:** **Taluk:** **District:** **State:** **Pin code:**
1.8 Contact Person/s for Certification Activity: 1. 2.		Email: Tel/Mobile: Website:

Person(s) responsible for Organic production and their area of work
Languages known: English ◯ Hindi ◯ Others (Please specify): ◯ Are you aware of the organic certification procedure for organic input approval?
Please provide brief description of your company/firm activities:
Please describe the Steps and Process involved in production of the input products for Approval:
Is any of the preparation activity in the production process subcontracted to another organization? If yes, give details of the subcontracted activity and the agreement made for the purpose **NO** ◯

Describe your Quality Management System and any certification taken for the same?
Describe your in-house testing and third-party testing policy and how many samples drawn and testing done during last year?
Describe all the steps taken to minimize the risks caused to environment, workers health, and animal health by the potential hazards of the products?

a. Certification request for products:

Manufacturing ◯ Re-Packing/Handling ◯

b. Activities undertaken:

Processing/packing ◯ Re-packing Local trade ◯

Storage/Warehousing ◯ Export/Import ◯

c. Rout Map of organic production unit with distance: Please Enclose route map to your manufacturing unit.

d. Facility Map of Organic area with surrounding information/activities: Detailed Facility Map of your unit to be enclosed

e. Facility details:

- Year of establishment:
- Organizational Structure: (Please enclose)

- Please fill the below details

License No. of the unit with validity (FCO/INSECTICIDE ACT/ SSI/MSME)	Storage capacity for Raw Material (Kg/ton)	Storage capacity for Finished products (kg/ton)	Working Space (In sq. mt)

2. Product Description					
Name of finished product	**Registration No. (If Any)**	**Form of Product Liquid/granule/ powder**	**Name of the Ingredient**	**% Of Ingredients**	**Shelf Life (In Months)**
List of products to be enclosed in this format for all manufactured/ Re-packed products					

3. Machines/Equipment List with Capacity and details				
Name of Machine/Equipment	**Installed Capacity (per hour)**	**Purpose**	**Material of Body**	**Material of Parts**

4. Manufacturing/Production Process / Batch Manufacturing Records				
Activity (Procedures & Practices)	**Name of responsible person for the said activity**	**Time and frequency**	**Action undertaken to protect/maintain/improve the organic integrity**	**Remarks/Annex (justification with supplementary documents)**
Cleaning/Sanitization				
Raw material procurement				
Separating				
Grinding				
Compost preparation				
Mixing				
Cleaning				
Drying				
Fermenting				
Manufacturing				
Packaging				
Grading				
Digestion				
Extracting				
Dehydration				
Cutting				
Freezing				
Storage				
Filtering				
Heating				
Labeling				
Any other: specify				

5.1 Source of water and testing for toxic chemicals, heavy metals, bio-contaminants (please enclose test report copy)

5.2 Test report of products (please enclose test report copy)

6. Inputs and List of Ingredients with Composition							
Name of Inputs & Ingredients	**Purpose**	**Place of use**	**Composition**	**Suppliers/Source Details**	**Commercial Availability**	**Quantity used**	**Status: Approved (A) Restricted (R) Prohibited (PR)**
List to be enclosed							

7. Waste Management and Cleaning / Sanitation details:			
Particulars	**Schedule**	**Methods**	**Material used**
Cleaning of processing house			
Cleaning of Machines			
Cleaning of Equipment/Instruments			
Waste management			
Cleaning of input			

8. Critical control points for Risk Management				
Area of Activity	**Process Involved**	**Risk Identified and Action taken to control risk**	**Frequency of monitoring**	**Remarks/annex**
Transportation system				
Pest management				
Ingredients				
Cleaning and sanitation input				
Past use of Machines/Equipment				
Raw input collection				
Packaging material				
Work in Progress & Storage				

Confirmation:

I hereby confirm that the above information furnished is true to the best of my knowledge and any changes in the organic input manufacturing/re-packing/handling procedures will be informed to Qmark International Certifications Pvt. Ltd. accordingly. The complaints received about the organic manufacturing/re-packing/handling/trading/export activities will be recorded and will be dealt with in a quick and respectful manner.

Name & Signature of processor / representative

Date: **Place:**

Note: Please ensure about the enclosures before sending the Application Form (PAN copy, Aadhaar copy, Detailed Map of processing unit, complete process flow chart of processing, list of products, collectors/suppliers/customer, lab test report copy etc.)

Only to be filled in during inspection:		
Date of Inspection:	Signature of Inspector:	Signature of Operator/ Representative/ Authorized Person:

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Date of Application and OMSP Review :

Result of OMSP Review : 1. Complete / Incomplete but Inspection can happen and completed during the inspection (with Remarks) :

1. **Incomplete and Inspection can not happen** :

If Point 2. Selected, then have you contacted the operator for receiving completed OMSP/OSP within reasonable time ?

Final Remarks : Complete / Incomplete but Inspection can happen and can be checked and completed during the inspection (with Remarks)

Signature of Reviewer: