

## Organic Management System Plan for Individual Producer

### 1.0 General Information:

Name of the Farm:	
Address of the Farm (with PIN code):	Address for correspondence (with PIN code):          Mob/Phone: e-mail:
Name of the contact person/s with Mobile/Phone Number/s and e-mail I.D.:	
1.	
2.	

**2.0 Field Map of the Farm/Estate area: Attachment:**    Yes    No

### 3.0 Land Preparation, Soil & Water Conservation

Activities	Practices and Procedures undertaken	
Land preparation		
Prevention of Erosion	Soil	
	Water	

### 4.0 Agricultural Equipments:

1.1 Name of the equipment used	Operations undertaken

### 5.0 Soil Fertility Management:

Activities	Yes/No	Practices and Procedures undertaken
Is Crop Rotation/ Intercropping/ Mixed cropping/Green manuring Practiced		

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Is FYM/Compost/Vermicompost/ any other substance added to the soil		
Any other measure used to improve soil fertility. (e.g. use of Bio Fertilisers etc)		

**6.0 Input Management:**

Sl.No.	Name of Input	Source of input (on-farm/Off- farm)	Quantity Used/ha/Year

**7.0 Irrigation /Water Management:**

Source and Method of Irrigation

**8.0. Encouragement for Ecology Conservation/Management:**

Name of the Trees species	Floral/ Faunal Diversity	Management of Bio Residues

**9.0 Weed Management:**

Sl.No	Name of the weeds	Method of Management

**10.0 Seeds and Planting Stock:**

Name of seeds/planting material used (Rabi/Kharif/Summer /Perennials)	Source (ON Farm/Off Farm)	Status of Seeds/Planting material {Organic/Non organic/Non GMO/Untreated

**11.0 Livestock details :**

Name of the species	No. of animals

**12.0 Record keeping by certified operators:**

Name of the Documents	Available for verification (yes/No)

**13.0 Harvest /Post harvest Handling:**

Activity	Practices and Procedures undertaken (Manual/Mechanical)
Harvesting	
Threshing	
Drying	
Collection	

**14.0 Storage Management**

On-farm                       Off Farm

14.a Measures adopted for stored products to prevent commingling and contamination with prohibited substances?

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14.b Measures adopted for cleaning storage units or bins, and how the same is recorded?

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14.c Type of on farm pest management program used against which type of pest during storage?

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**15. 0 On- Farm processing:**

Yes     No

**16.0 Yield Estimation:**

Sl. No	Crops	Estimated Yield (MT)
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Additional Sheet/S may be used

**17.0 Marketing;** Direct Subcontracted (Provide the copy of necessary agreements)

*Additional Sheet/s May be used*

**18.0 Declaration:**

I hereby declare that I shall carry out the crop production operations in my farm according to the NPOP standard. The information provided in this System plan is correct and true to the best of my knowledge.

Date:	Signature of Operator/Representative/Authorised Signatory:	
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**Only to be filled in during inspection:**

Date of Inspection:	Signature of Inspector:
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