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| **Logo for formsLivestock Inspection Report (Canada)**  Please be aware that this report is based on the information provided by the operation in their Organic System Plan (OSP). Indicate any discrepancies between the information provided in the OSP and the actual practices of the operation. Be sure to answer all questions thoroughly. Please indicate any potential noncompliances (major or minor) in the Exit Interview. | | | | | |
| **Operator information** | | | | | |
| Operation Name: |  | | | | |
| Operation DBA (if applicable): |  | | | | |
| OCIA Operator Number: |  | | | | |
| Primary contact for Operation: |  | | | | |
| People present at inspection: | Name: |  | Title: |  | |
| Name: |  | Title: |  | |
| Name: |  | Title: |  | |
| Name: |  | Title: |  | |
| Is the mailing address, phone number, and email address on the OSP accurate? | | | | | Yes  No |
| Organic certificates must be issued to a legal entity. Is the Business Name indicated on the OSP the actual legal entity name for the operation? | | | | | Yes  No |
| **Comments:** | | | | | |

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| **Inspector Information** | |
| Inspector Name: |  |
| Date Inspected: |  |
| Time Inspection Began: |  |
| Time Inspection Ended: |  |

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| **1.0 Livestock** | |
| **General Information** | |
| 1. Please provide a description of the operation: | |
| 2. Please note which pastures and facilities were inspected, including specifically which organic, non-organic fields, storage areas, yard sites, and equipment. | |
| 3. For operations with any non-organic production or areas not included in the Organic System Plan, note specifically which non-organic fields, areas, and equipment were inspected. **This information is required for COR.** | |
| **Comments:** | |
| **A. Programs Requested** | |
| 4. Please be reminded that certification and verification programs cannot be added at inspection; Equivalencies may be added at inspection. | |
| Certification and verification programs:  OCIA International Standards  Canada Organic Regime (COR)  Equivalencies:  US-Canada Equivalency Arrangement  Canada-Costa Rica Equivalency Arrangement\*\*  Canada-EU Equivalency Arrangement\*\*  Canada-Switzerland Equivalency Arrangement\*\*  UK-Canada Equivalency Arrangement\*\*  \*\* Only available if operation is located in Canada. | |
| 5. Did the operation have a copy of the organic standards for which they are applying? | Yes  No |
| 6. Did the operation understand the current organic standards for which they are applying? | Yes  No |
| 7. Did the operation have a copy of their Organic System Plan on hand? | Yes  No |
| 8. Did the operator present appear knowledgeable about the operation? | Yes  No |
| 9. If equivalency programs are requested, please advise where the operation will market their products and which products will be marketed there. | |
| **Comments and Discrepancies:** | |
| **B. Previous Noncompliances** | |
| 10. The Corrective Action report includes resolved noncompliances, and the operation’s corrective actions. Were all prior year's corrective actions to noncompliances found to be fulfilled by the operation and remain implemented? If not, please provide comments. | Yes  No |
|  | |
| 11. If any Opportunity for Improvement items were to be addressed at inspection, explain how the operation has responded to the OFI, and if their response was complete, accurate and appropriate for each issue. | |
| **Pre-Inspection Review Items** | |
| 12. Please review and note all open PIR items, including those that were directed to the inspector, and provide information regarding the operation's response and whether it is accurate, appropriate, and complete. | |
| **C. Organic System Plan Index** | |
| 13. Were any changes made to pages in the OSP at inspection? If yes, please comment below and attach copies of revised modules. | Yes  No |
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| **2.0 Livestock Plan Management** | |
| **Section A is used to create the organic certificate and product addendum, so all products/livestock must be listed that are requested for certification. If the OSP questions are not complete or accurate, please work with the operator at inspection to ensure it is accurate and provide an updated copy with the report.** | |
| 1. Are the livestock products and estimated amounts and units of product accurate and complete? | Yes  No  N/A |
| 2. Are the general livestock types to be certified complete and accurate? | Yes  No |
| 3. Is the Specific Animal Types table filled out completely and found to be accurate? | Yes  No |
| 4. Was this page signed by both the operator and the inspector at inspection, as this is the document to verify what is requested for certification? | Yes  No |
| **Comments:** | |

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| **2.1 Mixed Livestock Production** |  |
| 1. Is the table complete that lists livestock not requested for certification? | Yes  No  N/A |
| 2. If breeding animals were purchased within the last year, was the source as indicated on the OSP? | Yes  No  N/A |
| 3. If conventional breeding stock was purchased, does the operation have documentation to show attempts to source organic? | Yes  No  N/A |
| 4. If the entire dairy herd is being transitioned to organic, are there any changes to the dairy herd transition chart? If so, please explain and attached an updated version. | Yes  No  N/A |
| 5. Was it found that inspection that the feed for a transitioning dairy herd is in compliance with the standards with regard to percentage and final three months of transition? | Yes  No  N/A |
| 6. Were there any catastrophic events on the operation since the last inspection (e.g. barn fire, disease) that required herd repopulation? If so, please indicate the source and whether it complies with 6.2.4 (e ). | Yes  No  N/A |
| **Comments:** | |

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| **3.0 Livestock Origin ID Systems** | |
| 1. Is the OSP accurate regarding the ID system the operation has in place? | Yes  No |
| 2. Was it found at inspection that the OSP description of the ID system is accurate and the system allows for ID of animals by the inspector and that animal ID corresponds to an animal health record? | Yes  No |
| **Comments:** | |
| 3. If the operation raises conventional (non-organic) livestock, is the OSP accurate and complete regarding measures to ensure segregation between animals, feeds, medications? | Yes  No  N/A |
| 4. Is the OSP complete regarding how treated animals can be differentiated from organic animals? | Yes  No |
| 5. Please note any concerns or issues regarding segregation of organic and non-organic livestock production. | |
| 6. If the operation is requesting poultry for certification, is the OSP accurate for the source and age they arrive on-farm? Please indicate if documentation is not complete. | Yes  No  N/A |
| **Comments:** | |

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| **4.0 Livestock Feed** | |
| 1. If animals are administered drugs, antibiotics, or growth hormones, are records available to identify which animals received these items and when? | Yes  No  N/A |
| 2. Was there evidence at inspection that livestock are fed plastic pellets for roughage? | Yes  No |
| 3. Was there any indication at inspection that livestock are fed formulas that contain urea or manure? | Yes  No |
| 4. Was there evidence at inspection that mammals or poultry are fed mammalian or poultry slaughter by-products? | Yes  No |
| **Comments:** | |
| 5. Was it found at inspection that feeding records are maintained as noted in the OSP? | Yes  No |
| 6. Were the feeding records found to be complete and contain all necessary details (e.g. dates, amounts fed, etc)? | Yes  No |
| **Comments:** | |
| 7. If the operator is requesting the OCIA program, was it verified at inspection that the percentage of feed raised on-farm or purchased from organic farms in the area is accurate? | Yes  No  N/A |
| **Comments:** | |
| 8. Was it found at inspection from records that ruminants receive at least 60% of the dry matter content in their daily ration from hay, fresh/dried fodder, or silage? If not, please provide details. | Yes  No  N/A |
|  | |
| 9. Was it found at inspection from the operation’s records that for ruminants fed silage, at least 15% of the total dry matter in the daily ration is composed of long-fiber forages? If not, please provide details. | Yes  No  N/A |
|  | |
| 10. Was it found at inspection from the operation’s records that for ruminants that have reach sexual maturity, pasture and/or grazed forage composes a minimum of 30% of the total dry matter intake during the grazing season? | Yes  No  N/A |
|  | |
| 11. For poultry or pigs, was documentation available to show that vegetable matter other than grain was part of the daily ration? If not, please provide details. | Yes  No  N/A |
|  | |
| **Comments:** | |
| 12. If calves, lambs, kids, or other young mammals are a part of the operation, is the OSP and records found on site accurate with regard to receiving colostrums and remaining with mothers for at least 24 hours after birth? If discrepancies are found, please explain. | Yes  No  N/A |
|  | |
| 13. Is the OSP accurate with regard to young animals being fed milk for at least their first three months of live? If discrepancies are found, please explain. | Yes  No  N/A |
| 14. If the operation needed to remove beef calves, lambs, or kids from their mother to prevent contagious disease (6.4.3 (c )), was a vet-approved plan available that complies with the regulation? Please note the milk that was used. | Yes  No  N/A |
| 15. If any calves were fed milk from an organic cow that received treatment of antibiotics, was a withholding period of twice the label requirement or 14 days, whichever is long, observed? | Yes  No  N/A |
|  | |
| 16. If the operation experienced a forage storage, was it documented by the operator and confirmed by a regional authority? Please provide details of the documentation, percentage of the forage ration that was non-organic as a result of this storage, source of forage, and if the operation has created a contingency plan. (see 6.4.7 c and d) | Yes  No  N/A |
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| **4.1 Forage Management Plan** | |
| 1. Was it found at inspection that the OSP is accurate with regard to the amount of pasture provided to each class/age group of livestock on the operation? | Yes  No |
| 2. Please note any concerns, comments, or issues with regard to the pasture/forage provided. | |
| 3. Were management practices noted on the OSP verified at inspection and found to ensure pasture is of sufficient quantity and quality? | Yes  No |
| **Comments:** | |
| 4. Is the OSP accurate with regard to the typical grazing season? | Yes  No |
| 5. Please advise of the dates the operator started and completed grazing this year, and note the condition of the pastures at the time of inspection. | |
| 6. Were all pastures areas viewed at inspection and verified at inspection to be on the field histories with a unique field ID? | Yes  No |
| **Comments:** | |
| 7. Were all pastures areas viewed at inspection and verified to be as noted on the field maps, including fence lines, shade, and water sources? | Yes  No |
| **Comments:** | |
| 8. Is the OSP accurate with regard to the grazing methods used in the operation's pasture system? | Yes  No |
| **Comments:** | |
| 9. Did pastures appear to be free of soil erosion, weed infestation, and evidence of overgrazing? | Yes  No |
| **Comments:** | |
| 10. Were management practices to protect natural wetlands and riparian areas found to be in place and adequate? | Yes  No |
| **Comments:** | |
| 11. Is the OSP accurate with regard to water sources available to livestock in pastures? | Yes  No |
| 12. If the operation is required by the applicable NFACC code of practice to test water for livestock, does water meet the requirements? | Yes  No  N/A |
| 13. If organic pasture is not provided for all ruminants, was the OSP accurate regarding which animals didn't have access to pasture and the reasons why access wasn't provided? | Yes  No  N/A |
| 14. Were buffer zones found to be in place at inspection, to ensure livestock don't come into contact with prohibited substances on neighboring land? | Yes  No |
| **Comments:** | |

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| **5.0 Health Care Practice** | |
| 1. Based on the inspection, is the operation's description of preventive health care practices in the OSP complete and accurate? | Yes  No |
| **Comments:** | |
| 2. Is the operation's description of physical alterations complete? | Yes  No  N/A |
| 3. For pigs, was documentation available to show castration of male piglets occurs prior to two weeks of age? If no, please provide details. | Yes  No  N/A |
|  | |
| 4. Were healthcare records found to be maintained as noted on the OSP? | Yes  No |
| 5. Did the healthcare records appear to be complete, including details about healthcare practices that then could be verified at inspection? | Yes  No |
| **Comments:** | |
| 6. Did the operation's OSP appear to be accurate regarding how animals are handled in cases where organic production methods and allowed products are not adequate? | Yes  No |
| 7. Did any animals require the use of antibiotics or other substances restricted in 1.5 e) for the same disease for three consecutive years since the last inspection? If so, were they removed from the herd within nine months following the last course of treatment? | Yes  No  N/A |
|  | |
| 8. If any dairy animals were given more than two treatments annually (antibiotics, parasiticides, or one of each), when was the start of their 12-month transition period? | Yes  No  N/A |
| **Comments:** | |
| 9. Did the healthcare records allows for traceability of each individual or flock from birth to sale/disposition? | Yes  No |
| 10. Please note any concerns, issues, or comments related to health care practices and records. | |

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| **6.0 Living Conditions** | |
| **A. General Information** | |
| 1. Was it found at inspection that the housing description in the OSP was accurate and complete? | Yes  No |
|  | |
| 2. If non-organic bedding was used, did the operation maintain documentation to show organic was not commercially available? | Yes  No  N/A |
| 3. If non-agricultural bedding was used, does the operation have documentation to show compliance with 1.4 and 1.5? | Yes  No  N/A |
| 4. Was documentation available at inspection to verify the age of weaning for animals as noted on the OSP? | Yes  No |
|  | |
| 5. Was it found at inspection that manure is managed as noted on the OSP, including cleaning and disinfection and materials used? | Yes  No  N/A |
|  | |
| 6. Is the OSP accurate with regard to time periods or dates animals are confined indoors or tethered? If not, please explain discrepancies. | Yes  No  N/A |
| 7. Did the operator document the reasons for and duration of confinement? | Yes  No  N/A |
| 8. If there is any treated wood in livestock barns or shelters, is there any risk of contact between treated wood and livestock and feed? Please provide details regarding measures to prevent contact and whether treated wood is existing or new/replacement. | Yes  No  N/A |
|  | |
| **B. Poultry** | Not Applicable |
| 9. Was it found at inspection that outdoor access for poultry is provided as noted in the OSP? | Yes  No |
|  | |
| 10. Is the OSP accurate with regard to vegetation grown in outdoor areas? | Yes  No |
|  | |
| 11. Is the OSP accurate with regard to the overhead cover? Please estimate a percentage that roof overhangs over pasture account for required overhead cover. | Yes  No |
|  | |
| 7. Based on observations at inspection, does it appear the rest periods noted in the OSP is adequate for re-growth? | Yes  No |
|  | |
| 8. Is the square footage of the poultry house(s) as noted in the OSP? | Yes  No |
|  | |
| 9. Is the OSP accurate with regard to the total number of birds and outdoor access points in each poultry house? | Yes  No |
|  | |
| 10. If winter poultry production occurs, is the OSP accurate with regard to outdoor access during the growing season? | Yes  No  N/A |
|  | |
| 11. If artificial lighting is used, is the OSP correct with regard to total day length when lighting is used? | Yes  No  N/A |
|  | |
| 12. For ducks, are water areas available as noted in the OSP? | Yes  No  N/A |
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| **7.0 Transportation and Slaughter** | |
| 1. Was it verified at inspection that at least one person is responsible during transportation for the well being of livestock at each step of the transport? | Yes  No |
| 2. Was it demonstrated that the ID method is in place during transport to ensuring adequate tracking of organic livestock? | Yes  No |
| 3. Was it verified at inspection that loading area and transport is free of protrusions? | Yes  No |
| 4. Was documentation available to show the transportation is clean and organic integrity is maintained? | Yes  No |
| 5. Is the OSP accurate with regard to the methods of transportation being adequate for ventilation and headspace? | Yes  No |
| 6. Is the OSP accurate regarding whether tranquilizers are used during the transportation process? | Yes  No |
| **Comments:** | |
| 7. Is the OSP accurate regarding transportation methods and stocking density each animal type? | Yes  No |
| 8. Was it verified at inspection that the OSP is accurate regarding documentation of processed meat products? | Yes  No |
| 9. If a lot number is used for processed meat products, is the OSP accurate regarding the numbering system? | Yes  No  N/A |
| **Comments:** | |
| 10. Were transportation and slaughter records noted on the OSP verified at inspection? | Yes  No |
| 11. Does it appear the records for transportation and slaughter are adequate to trace animals from sale back to their individual animal ID/health records such that the organic status of animals sold can be determined? | Yes  No |
|  | |
| 12. If the operation requests the OCIA program, does it appear the journey time to the slaughter facility is as noted on the OSP? | Yes  No  N/A |
|  | |
| 13. Is the OSP accurate with regard to subcontracted facilities that are used? If not, please advise of changes and whether attestation available for the facilities. Please attach copies of documents. | Yes  No  N/A |
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| **8.0 Dairy, Egg, and Animal Fiber Production** | Not Applicable |
| **Reminder: COR does not allow the phrase “certified organic” other than the certifier statement. If new labels are being used or labels are not compliant, please provide copies with the inspection report. Please also provide pictures of any promotional materials viewed (e.g. at a Farmers Market booth, brochures) with the inspection report.** | |
| 1. Is the OSP accurate with regard to egg-handling techniques, including cleaning, cleaning materials, coatings, packaging, labeling, and transport? | Yes  No  N/A |
| 2. Please note any discrepancies here, including if new cleaning materials are being used. | |
| 3. Is the OSP accurate with regard to animal fiber removal, including cleaning materials, equipment, packaging and transport? | Yes  No  N/A |
| 4. Please note any discrepancies here, including if new cleaning materials are being used. | |
| 5. Were records verified at inspection to be maintained as the OSP notes for milk, egg, or fiber production and sales? | Yes  No  N/A |
| 6. If the operation is using a lot number on these records, was it confirmed that the OSP is accurate in its description of the lot number and that it can be used to trace product? | Yes  No  N/A |
| 7. Please note any concerns, issues, or comments regarding records for production and sales. | |
| 8. If requesting the OCIA program, do records indicate the SCC and bacteria count are as noted in the OSP? | Yes  No  N/A |
|  | |
| 9. If requesting the OCIA program, do records indicate the nitrate and coliform levels in the drinking water are as noted in the OSP? | Yes  No  N/A |
|  | |
| 10. Was it found at inspection that the OSP is accurate regarding the description of the dairy parlor? | Yes  No  N/A |
| 11. Is the OSP accurate regarding the cleaning procedures used on dairy equipment and cleaning/sanitizers used? | Yes  No  N/A |
| **Comments:** | |
| 12. Was documentation verified at inspection regarding contamination protection measures noted in the OSP and the overall documentation of dairy equipment cleaning? | Yes  No  N/A |
|  | |
| 13. If any non-organic cows were added to the milk production unit, were they non-lactating? | Yes  No  N/A |
| 14. If non-organic cows will be milked by the operation this year, were measures noted in the OSP to prevent commingling found to be in place and appear to be adequate to ensure organic integrity? | Yes  No  N/A |
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| **9.0 Recordkeeping** | |
| 1. Was the operator able to demonstrate that livestock records are maintained for at least 5 years? | Yes  No |
| **Comments:** | |
| 2. Does the operator maintain a complaint log? | Yes  No |
| 3. If there are complaints logged for organic products, did the operator document the actions taken in response to the complaint(s)? | Yes  No  N/A |
| 4. If the complaint log includes any complaints, please detail the action taken by the operator with respect to such complaints and any deficiencies found in products or services that affect compliance with the requirements for certification. | |
| 5. Is the OSP accurate with regard to records the operation maintains for organic livestock production? | Yes  No |
| 6. Is the OSP accurate with regard to records the operation maintains for conventional livestock production? | Yes  No  N/A |
| **Comments:** | |
| **Equivalencies** | |
| 7. Is the operation using any feed ingredients obtained via equivalency arrangements? If yes, please confirm if proper documentation to show compliance with agreements is maintained. | |
| 8. If US-Canada Equivalency is requested, does it appear the operation can comply with the critical variance (i.e. animals not treated with antibiotics), understands the need to provide a copy of their certificate with exports to show the required attestation statement (“Certified in compliance with the terms of the US-Canada Organic Equivalency Arrangement”) with export shipments, and will apply labels compliant with NOP requirements? If the operation has made sales to this equivalency, please explain what documentation was viewed at inspection showing they comply (e.g. shipping documents included attestation). Please explain any issues or potential concerns, including the operator’s understanding of the agreement. | |
| 9. If Canada-Costa Rica Equivalency is requested, does it appear the operation can comply with all applicable labeling requirements? If the operation has made sales to this equivalency, please explain what documentation was viewed at inspection showing they comply. Please explain any issues or potential concerns, including the operator’s understanding of the agreement. | |
| 10. If the Canada-EU Equivalency is requested, does it appear the operator can comply with label requirements? If the operation has made sales to this equivalency, please explain what documentation was viewed at inspection showing they comply. Please explain any issues or potential concerns, including the operator’s understanding of the agreement. | |
| 11. If the Canada-Switzerland Equivalency is requested, does it appear the operator can comply with label requirements? If the operation has made sales to this equivalency, please explain what documentation was viewed at inspection showing they comply. Please explain any issues or potential concerns, including the operator’s understanding of the agreement. | |
| **Samples** | |
| 12. Were samples taken at the time of inspection? | Yes  No |
| 13. If yes, please describe the sample taken, why it was taken, the source, and where the sampling occurred. Please also ensure to complete and provide the sample information form and lab analysis form. Copies of both forms must be provided to the operator and OCIA. | |
| **Traceability Audit** | |
| 14. Please randomly select a product, animal, or group of animals and verify its traceability from sale, through production, to origin, including production versus sales reconciliation. In the case of sales to multiple programs, traceability must be verified for a sale to each individual program (if livestock or livestock products were sold as being certified/verified to that program). Please specify documents reviewed, their quality, and summarize the results in a narrative fashion. | |
| 15. For new uncertified applicants, please verify if any sales were made as “organic.” Please provide detail of sales, if applicable, and specify whether sales were within the province or not and subject to COR.  N/A Returning operator or currently certified  No sales made as “organic”  Sales occurred and are noted below. | |
| **Inventory Balance** | |
| 16. Please conduct an annual inventory balance for the prior year for animal and animal products sold as “organic” since the last inspection, and for all organic types of animals/animal products produced in parallel, including production versus sales reconciliation. If no animal or animal products were sold as “organic” since the last inspection, please complete the balance on at least one animal or animal product certified last year Be sure to specify amounts and calculations in narrative or table format (use additional sheets if needed). **Please include amounts still in inventory as of the inspection.** Be sure to explain any discrepancies. | |

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| **10.0 Annex** | |
| **Please review the Livestock Feed table at inspection. If there are discrepancies, please work with the operator at inspection to update the OSP. If new materials are being used, please include details about the brand name, manufacturer information, and documentation (if available) with the report.** | |
| 1. Was the Livestock Feed table found at inspection to be complete and accurate, including all feed, supplements, additives, salts, minerals, and consumable bedding? | Yes  No |
|  | |
| 2. Was documentation verified at inspection for all items on the Livestock Feed table, including organic certificates (as applicable), non-GMO statements (same), labels, etc? | Yes  No |
|  | |
| 3. Was the Animal Class/Age group ration table found at inspection to be accurate and complete and supported by the operation's records? | Yes  No |
|  | |
| 4. Please note any issues, concerns, or comments regarding the dry matter calculations. | |
| **Annex 2: Health Care Practice** | |
| 5. Was the Vaccine/vitamin/mineral/topical treatment table found at inspection to be complete and accurate, including all substances used by the operation? | Yes  No |
|  | |
| 6. Was documentation verified at inspection for all items on the Vaccine/vitamin/mineral/topical treatment table? | Yes  No |
|  | |
| 7. Please note any additional concerns, issues, or comments about the vaccines/vitamin/mineral/topical treatments. | |
| 8. Was the medication table found at inspection to be complete and accurate, including all substances used by the operation? | Yes  No |
|  | |
| 9. Was documentation verified at inspection for all items on the medication table? | Yes  No |
|  | |
| 10. If antibiotics were used on any livestock, was documentation available to show use complies with 6.6.10(f)? Please provide detail regarding withholding periods below. | Yes  No  N/A |
|  | |
| 11. If internal parasites were an issue for livestock, were records available to show how they were managed? | Yes  No  N/A |
|  | |
| 12. If parasiticides were used to control parasites, did records show their use was compliant with 6.6.11? Please provide detail regarding withdrawal times below. | Yes  No  N/A |
|  | |
| 13. Please note any additional concerns, issues, or comments about the medications. | |
| **Annex 3: Stocking Rates** | |
| 14. Was the stocking rates table verified at inspection to be complete and accurate, including all animals for all stages of production? | Yes  No |
|  | |
| 15. Were stocking rates found to comply with the organic regulations? If there were any exceptions that are allowed by the standards (e.g. Table 7 for pigs/boars), please provide details about the circumstances. | Yes  No |
|  | |
| 16. Please note any additional concerns, issues, or comments about the stocking rates, including any discrepancies. | |
| 17. Were records available to show that livestock are rotationally grazed? Please note any issues found with pasture with regard to regrowth time. | Yes  No  N/A |
|  | |
| 18. Is the OSP accurate with regard to housing for dairy calves? | Yes  No  N/A |
| 19. Are there tie stalls in the dairy barn that are used? If yes, please note below if documentation shows compliance with exercise requirements of 6.12.1. | Yes  No  N/A |
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| **Confidentiality, Signature, and Exhibits**  The information contained in this report is confidential among the inspector, the inspected party, OCIA International, and its accreditors. This report does not constitute certification or consultation, nor should it be used for promotional purposes. All observations and compliance assessments made are based on current Standards of the certification program(s) identified in Section 1, and are derived directly from observations, review of documents made available, and operator interview by the OCIA inspector.  By signing this form, I attest that I, in my capacity as inspector for the above noted operation, affirm that I do not have an interest that conflicts with those of the above client’s case. I also attest to the fact that the inspection covered the programs noted above and that I understand the standards/regulations concerning these programs. | | |
|  |  |  |
| OCIA Inspector Signature | OCIA Inspector Number | Date (M/D/Y) |
| Attached are all exhibits used as supporting documentation, the Inspection Affidavit, and the Inspection Exit Interview.  **List of Attachments:** | | |