2023 HANDLER ORGANIC SYSTEM PLAN – SECTION 8

8. PEST CONTROL: NOP 205.271

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| **Date:** |
| **Customer ID:** AG-C000     OC |
| Legal business name: |
| DBA: |

Who is responsible for pest control?

In House-Name of person responsible:

Contract pest control service:

Does your operation have written pest control management procedures?

No Yes. *If yes, please attach.*

What pest problems do you have at your facility?

Frequency of pest monitoring:

Are records of pest monitoring kept? No Yes

Are records of all pesticide applications kept? No Yes

| Check all pest management practices used: | | |
| --- | --- | --- |
| Good sanitation | Screened windows/vent | Diatomaceous earth\* |
| Incoming ingredient inspection | Physical barriers | Boric Acid\* |
| Removal of exterior habitat/food sources | Temperature treatments | Pyrethrum\* |
| Clean-up spilled product | Ultrasound/light devices | Fogging\* |
| Air curtains | Sticky traps | Crack and crevice spray\* |
| Sealed doors/windows | Electrocutors | Rotenone\* |
| Repair cracks/holes | Pheromone traps\* | Fumigation\* |
| Tin cats | Vitamin baits\* | Carbon Dioxide\* |
| Other: | | |

**\*The use, frequency, and method of application of these materials must be included on your input inventory and be given prior approval by the Oregon Dept. of Agriculture. The Input Inventory must be updated and submitted prior to use of new materials.**

Application of pest control materials first requires implementing physical means of pest prevention and elimination. If pest control materials are utilized, please explain how preventative measures and physical controls are insufficient:

**If materials are used, please explain preventative measures to prevent contact with organic equipment, products, ingredients, and packaging:**

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| --- | --- | --- |
| **Name:** | **Title:** | **Date:** |
| ***I affirm that all statements made in this Organic System Plan are true and correct to the best of my knowledge.*** | | |