



**Greenhouse Addendum**

Form to be completed for **each** greenhouse. Please include a map of the facility with this addendum.

<b>Business Name:</b>	<b>Contact Name:</b>
<b>Greenhouse Name/ID:</b>	

**Site Information**

Crops are grown for:

On-farm use  Retail sale  Non-retail sale  Other (please specify)

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What media is used for crop production? **Check all that apply NOTE: all inputs must be listed in Input Inventory** (form OCP.F.09)

Soil  Vermiculite  Rockwool  Sand  Gravel  Perlite  Clay pellets  N/A

Peat  Bark  Coir  Brick shards  Other (please specify):

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What materials are used in crop production? **Check all that apply**

Pots  Trays  Polystyrene foam  Fencing/netting  Plastic mulch  N/A

Plastic mulch  Grow tubes  Humidity domes  Other (please specify):

**Hydroponic/ Aquaponics**  N/A

**Please list any chemicals used in water in input inventory (e.g. pH adjusters, sterilizers, softeners, etc.)**

Please explain how water is disposed of during cleaning/changing?

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Does this method ensure surrounding environmental areas are not being contaminated?

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Are fish incorporated into your production system?  
*If yes, please list any medications, chemicals, or other inputs besides fish feed in your input inventory.*

	Yes
	No



**Crop information**

Crops are intended for: **Check all that apply**

Planting/seed stock  Human consumption  Animal feed  Other (please specify):

List all seeds used or planned for use in the current season. Check the appropriate boxes and provide other information as needed. **Attach additional pages as necessary**

- No seeds are used
- All seeds are organic
- Some untreated seeds are used

**NOTE: IF YOU ARE USING NON-ORGANIC SEEDS IN YOUR OPERATION, YOU MUST DOCUMENT THREE ATTEMPTS TO SOURCE ORGANIC SEED AND HAVE THIS AVAILABLE FOR REVIEW DURING YOUR ON-SITE INSPECTION.**

*Annual and biannual seedlings must be produced according to organic standards while perennial plants must be managed for at least one year prior to harvest of crop or sale of the plant as certified organic transplant.*

**Please list all crops to be included on organic certificate. Attach additional sheets as necessary.**

CROP	EXPECTED HARVEST DATE	PROJECTED YIELD

**Signature**

I affirm that all statements made in this Greenhouse Addendum are true and correct to the best of my knowledge.

Representative Name (printed):

Date:

Representative Signature: