

CHECK LIST FOR FARMER IN ICS

- I Name of the ICS :
 II Registration No. of ICS :
 III Name of the Farmer :
 IV Regd. No. of the Farmer :
 V Address :

VI Area offer for Certification.

Crop	Area	

- VII Date & Time of Inspection :
 VIII Person present during inspection :

Sl.No	Critical Control Points	NPOP CLAUSE	Inspector's Remarks	NON CONFORMITY	
				MAJOR	MINOR
1	Knowledge of NPOP Standard		<input type="checkbox"/> Inadequate <input type="checkbox"/> adequate		
2	Whether having copy of IQS manual in local language		<input type="checkbox"/> Available <input type="checkbox"/> Not Available		
3	Whether having copy of internal standard & brochure in local language		<input type="checkbox"/> Distributed <input type="checkbox"/> Not distributed		
4	Knowledge of farming system & packages of practices of crop grown		<input type="checkbox"/> Conventional <input type="checkbox"/> Organic		
5	Whether attended any training programme conducted by ICS.		<input type="checkbox"/> Attended <input type="checkbox"/> Not Conducted <input type="checkbox"/> Inadequate		
6	No. of Internal Inspection done		<input type="checkbox"/> Once <input type="checkbox"/> Twice		
7	Farm map with plot indicating the crops cultivated in rotation		<input type="checkbox"/> Proper <input type="checkbox"/> Not Proper		
8	Conversion Period		<input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> Organic		
9	Whether the farm diary is maintained regularly		<input type="checkbox"/> Maintained regularly <input type="checkbox"/> Not maintained regularly		
10	Whether the farmer sign any agreement with the ICS		<input type="checkbox"/> Agreement signed <input type="checkbox"/> Not signed		
11	Frequent flooding of field		<input type="checkbox"/> Limited scope <input type="checkbox"/> Inundated area		
12	Is there a standing crop		<input type="checkbox"/> Exist <input type="checkbox"/> Not exist(now) <input type="checkbox"/> Barren		
13	Use of seed (Organic/untreatedconventional/GM).		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Local Farmsaved Organic GM		
14	Any document of seed & planting material		<input type="checkbox"/> Maintained <input type="checkbox"/> Notmaintained		
15	Is the farm rainfed		<input type="checkbox"/> Rainfed <input type="checkbox"/> Irrigated		
16	Source of water		<input type="checkbox"/> Rain <input type="checkbox"/> Borewell <input type="checkbox"/> Other		
17	Any chance of soil erosion & its remedial action		<input type="checkbox"/> Limited <input type="checkbox"/> Frequent		
18	Crop rotation.		<input type="checkbox"/> Followed <input type="checkbox"/> Not followed		

19	Name of nutrient input used & its status & record			<input type="checkbox"/> Onfarm <input type="checkbox"/> Offfarm(approved)		
20	Is it adequate			<input type="checkbox"/> Adequate <input type="checkbox"/> Not adequate		
21	Whether any prohibited inputs(as per NPOP standards) are used			<input type="checkbox"/> Not Used <input type="checkbox"/> Used (Specify details)		
22	No. of farm animal & fodder used			in numbers		
23	Weed management status.			<input type="checkbox"/> Hand weeding <input type="checkbox"/> Mulching		
24	Any pest problem & its remedial action & record			<input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> Heavy		
25	Any disease problem & its remedial action & record.(whether adequate)			<input type="checkbox"/> Exist <input type="checkbox"/> Not exist		
26	Harvest status					
a)	Estimated yield					
b)	Yield record			<input type="checkbox"/> Maintained <input type="checkbox"/> Notmaintained		
27	Storage status & its record			<input type="checkbox"/> Separate <input type="checkbox"/> Intermingle		
28	Transportation & its record			<input type="checkbox"/> Smallvehicle <input type="checkbox"/> LMV		
29	Any risk found during internal inspection & corrective action suggested or sanction imposed by ICS.			Risk assessment done <input type="checkbox"/> Not done <input type="checkbox"/> None <input type="checkbox"/>		
30	Assessment of Risk during onsite Audit					
a)	Parallel/Split Production			<input type="checkbox"/> Practise <input type="checkbox"/> Notpractise		
b)	Maintenance of Buffer Zone			<input type="checkbox"/> Maintained <input type="checkbox"/> Not maintained		
c)	Is there any risk of contamination by seepage/drift from neighbouring fields			<input type="checkbox"/> Limited <input type="checkbox"/> Medium <input type="checkbox"/> High		
d)	Contamination by use of machinery & equipments			<input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High		
e)	Use of Prohibited inputs			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
f)	Use of seed as per organic standard			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
g)	Risk of Comingling during					
	Harvest			Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/>		
	Threshing			Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/>		
	Storage (Inputs/Produces)			Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/>		
	Transportation			Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/>		
31	Local Hazard observed			Observed <input type="checkbox"/> None <input type="checkbox"/>		
32	NonConformity observed					
	1					
	2					
	3					
	4					

Signature of the Farmer/Representative
Name

Signature of the ICS Personnel
Name

Signature of the Inspector
Name