



WOODBURY COUNTY
ORGANICS BOARD - RURAL ECONOMIC DEVELOPMENT
7TH & DOUGLAS STREETS, SIXTH FLOOR
SIOUX CITY, IA 51101

ORGANIC CONVERSION APPLICATION

DEADLINE: MUST BE RECEIVED AT ABOVE ADDRESS BY MARCH 15, 2006

ONLY A RESIDENT OF WOODBURY COUNTY, IOWA, WHO IS THE OWNER OF THE REAL PROPERTY TO BE CONVERTED, MAY APPLY FOR BENEFITS UNDER THE ORGANICS CONVERSION POLICY

NAME:

APPLICATION DATE:

COMPANY NAME (IF ANY):

STREET ADDRESS:

CITY, STATE, & ZIP CODE:

PHONE NUMBER: (HOME):

(WORK):

(CELL):

ONLY REAL PROPERTY, ZONED AS AGRICULTURE AND LOCATED IN WOODBURY COUNTY, IOWA, THAT HAS BEEN EITHER FARMED BY A METHOD NOT IN COMPLIANCE WITH USDA NATIONAL ORGANIC PROGRAM STANDARDS, OR THAT HAS BEEN DORMANT OR NOT BEEN ACTIVELY USED FOR FARMING OPERATIONS, IS ELIGIBLE UNDER THE ORGANICS CONVERSION POLICY.

Parcel & Owner Information	Answer
TOTAL FARM ACREAGE YOU PLAN TO CONVERT	
PARCEL NUMBERS OF LAND TO BE CONVERTED (INCLUDE THE NUMBER OF ACRES IN EACH PARCEL TO BE CONVERTED IF MORE THAN ONE PARCEL INVOLVED.)	
CITY/TOWNSHIP IN WHICH PROPERTY IS LOCATED	
PROVIDE A HISTORY OF USE OF THE LAND FOR THE LAST FIVE YEARS (E.G., HAS IT BEEN FARMED OR BEEN DORMANT?, IF FARMED, WHAT CROPS/LIVESTOCK WERE RAISED OVER THAT PERIOD OF TIME? WHAT FERTILIZERS/CHEMICALS HAVE BEEN APPLIED? IF DORMANT, WHY AND HOW LONG HAS IT BEEN DORMANT?)	
IF LAND TO BE CONVERTED HAS BEEN DORMANT, IS IT CAPABLE OF BEING CERTIFIED ORGANIC IN THE FIRST YEAR OF PRODUCTION?	

Parcel & Owner Information	Answer
DESCRIBE THE LAYOUT OF THE LAND TO BE CONVERTED? (E.G., IS IT FLAT, ROLLING, OR HILLS?)	
HOW LONG HAVE YOU OWNED THE LAND TO BE CONVERTED?	
DO YOU OWN OTHER AGRICULTURALLY ZONED LAND? IF SO, HOW MANY ACRES AND WHERE IS IT LOCATED, IS IT BEING FARMED, AND IS IT FARMED ORGANICALLY?	
IS THE LAND HELD IN THE NAME OF YOU INDIVIDUALLY OR IN THE NAME OF A CORPORATION, PARTNERSHIP, OR OTHER ENTITY? IF HELD BY AN ENTITY, ARE THE MAJORITY OF PROFIT INTERESTS HELD BY WOODBURY COUNTY RESIDENTS (I.E., A POLICY REQUIREMENT)?	
DO YOU PLAN TO CASH RENT THE LAND TO BE CONVERTED? IF SO, WHAT IS THE NAME, PHONE, AND ADDRESS OF THE PERSON ACTUALLY FARMING THE LAND?	
HOW MUCH DID YOU OWE & PAY IN REAL PROPERTY TAXES ON THE LAND TO BE CONVERTED LAST YEAR?	
ARE THERE A PHYSICAL STRUCTURE ON THE LAND TO BE CONVERTED? IF YES, PLEASE DESCRIBE	

Production Information	Answer
WHAT DO YOU PLAN TO RAISE/PROCESS ORGANICALLY? (BE SPECIFIC: E.G., VEGETABLES - TOMATOES, ALFALFA, ETC.; FRUIT - APPLES, ETC.; GRAIN; LIVESTOCK - CATTLE, CHICKEN, HOGS; ORGANIC PROCESSING INFORMATION - DAIRY, MEAT, OR OTHER.)	
IF YOU PLAN TO RAISE MORE THAN ONE ORGANIC ITEM, PLEASE LIST THE ACREAGE FOR EACH ITEM TO BE RAISED	

Production Information	Answer
DESCRIBE PRIMARY TILLAGE SYSTEM TO BE USED	
WILL YOU USE COVER CROPS? IF SO, PLEASE LIST	
WILL YOU USE COMPOST? IF SO, PLEASE NOTE SOURCES (E.G., ON FARM, PURCHASED COMPLETE, LOCAL DAIRY, ETC.)	
DO YOU PLAN TO USE MANURE? IF SO, COMPOSTED OR UN-COMPOSTED? IF UN-COMPOSTED, WILL YOU USE WITHIN 6 MONTHS OF A VEGETABLE CROP HARVEST?	
PLEASE LIST ANY OTHER BROUGHT IN FERTILITY SOURCES THAT YOU MAY USE (E.G., LIQUID FISH, SOYBEAN/ALFALFA MEAL, SPECIFIC PURCHASED PRE-MIXES, ETC.)	
DO YOU USE PROFESSIONAL SOIL TESTING SERVICES?	
BRIEFLY DESCRIBE WHAT YOU ANTICIPATE AS YOUR PRIMARY WEED PROBLEMS AND METHODS OF CONTROL	
BRIEFLY DESCRIBE WHAT YOU ANTICIPATE AS YOUR PRIMARY INSECT PROBLEMS AND METHOD OF CONTROL	
BRIEFLY DESCRIBE WHAT YOU ANTICIPATE AS YOUR PRIMARY DISEASE PROBLEMS AND METHOD OF CONTROL	
PLEASE LIST THE WATER SOURCE YOU WILL USE FOR CROP IRRIGATION	
WHAT IS YOUR CROP ROTATION PLAN, IF ANY?	
PLEASE PROVIDE ANY ADDITIONAL INFORMATION THAT YOU DEEM RELEVANT PERTAINING TO YOUR PRODUCTION METHODS	

Land Management Information	Answer
IS THERE ANY LIKELIHOOD OF CHEMICAL/SPRAY DRIFT CONTAMINATION OF YOUR FIELDS?	
DO YOU HAVE AN ADEQUATE BUFFER TO PROTECT YOURSELF FROM POTENTIAL CONTAMINATION? IF YES, PLEASE DESCRIBE BUFFER INCLUDING SIZE	
HAVE YOU CONTACTED YOUR NEIGHBOR ABOUT YOUR INTENTION TO CONVERT TO ORGANIC PRACTICES?	
DO YOU ANTICIPATE A NEED TO PRACTICE SOIL EROSION PREVENTION AND CONSERVATION PRACTICES? WHAT SPECIAL PRACTICES WILL BE REQUIRED TO PREVENT SOIL EROSION AND OTHER SOIL/WATER DENIGRATIONS?	

Marketing & Networking Information	Answer
<p>HAVE YOU CONSULTED WITH AN EXPERIENCED, KNOWLEDGEABLE, AND SUCCESSFUL ORGANIC FARMER PRIOR TO SUBMITTING THIS APPLICATION?</p> <p>IF YES, PLEASE PROVIDE THE NAME OF SAID INDIVIDUAL</p> <p>IF NO, WHY DO YOU THINK YOU WILL BE SUCCESSFUL IN ORGANIC FARMING? DO YOU DESIRE WOODBURY COUNTY TO PROVIDE YOU THE NAMES OF SUCH INDIVIDUALS?</p>	
IF YOU ARE CASH RENTING, OR IF SOMEONE ELSE WILL DO THE ACTUAL FARMING,WHAT EXPERIENCE DOES YOUR RENTER/FARMER HAVE IN ORGANIC FARMING PRACTICES?	
DO YOU PLAN TO SELL RAW OR PROCESSED FOOD?	

Marketing & Networking Information	Answer
<p>HAVE YOU CREATED A BUSINESS PLAN FOR YOUR ORGANIC PRODUCTION/PROCESSING BUSINESS? IF YES, PLEASE ATTACH SAID PLAN TO YOUR APPLICATION</p>	
<p>PLEASE LIST ALL MARKETS YOU WILL PRODUCE FOR (E.G., FARMER'S MARKET, CSA'S, LOCAL RESTAURANTS, GROCERY STORE, NATIONAL DISTRIBUTOR, FARM STAND, REGIONAL WHOLESALERS, ETC.)</p>	
<p>HAVE YOU CONTACTED POTENTIAL BUYERS FOR YOUR ORGANIC PRODUCT? IF YES, WHAT KIND OF COMMITMENT OR FEEDBACK DID YOU GET?</p>	
<p>HAVE YOU CONTACTED A LOCAL OR NON-LOCAL PROCESSING FACILITY THAT WILL PROVIDE VALUE-ADD TO YOUR PRODUCTS? EXPLAIN</p>	
<p>ARE YOU PRESENTLY A MEMBER OF, OR DO YOU PLAN TO JOIN, A LOCAL COOPERATIVE? IF YES, PLEASE PROVIDE NAME OF COOPERATIVE</p>	
<p>DO YOU PLAN ON TAKING ADVANTAGE OF WOODBURY COUNTY'S "LOCAL FOOD PURCHASE POLICY"?</p>	
<p>WHO DO YOU PLAN TO ACT AS YOUR CERTIFICATION AGENCY? HAVE YOU CONTACTED THEM?</p>	
<p>PLEASE LIST THE NAME OF PUBLICATIONS TO PERIODICALS DEVOTED TO ORGANIC FARMING TO WHICH YOU SUBSCRIBE:</p>	
<p>HOW DID YOU HEAR OF WOODBURY COUNTY'S "ORGANIC CONVERSION POLICY"?</p>	
<p>ARE THERE ANY INDIVIDUALS YOU WANT WOODBURY COUNTY TO CONTACT ON YOUR BEHALF WITH RESPECT TO YOUR ORGANIC CONVERSION? PLEASE PROVIDE NAME, PHONE, AND ADDRESS</p>	

Marketing & Networking Information	Answer
DO YOU WANT WOODBURY COUNTY, ORGANICS BOARD, OR OTHER ORGANIC FARMERS TO HELP YOU WITH DEVELOPMENT A BUSINESS PLAN, ESTABLISHING ORGANIC FARMER & MARKETING CONTACTS, OR OTHER NEED? IF YES, PLEASE SPECIFY	

I HAVE READ AND UNDERSTAND THE USDA NATIONAL ORGANIC PROGRAM STANDARDS & REGULATIONS LOCATED AT www.ams.usda.gov/nop/nop/standards/fullregtextonly.html, I HAVE VISITED THE STATE OF IOWA ORGANICS PROGRAM WEBSITE AT www.agriculture.state.ia.us/agdiv/organic.htm, AND I HAVE READ AND UNDERSTAND THE ORGANICS CONVERSION POLICY AT www.woodburyiowa.com. I AFFIRM THAT I WILL FOLLOW THE USDA NATIONAL ORGANIC PROGRAM STANDARDS & REGULATIONS.

I UNDERSTAND THAT I WILL BE REQUIRED TO FILL OUT AND SIGN A ONE-PAGE CERTIFICATE OF COMPLIANCE PROVIDED BY WOODBURY COUNTY PRIOR TO RECEIVING A TAX REBATE UNDER THE “ORGANICS CONVERSION POLICY”. I UNDERSTAND THAT IF I FAIL TO COMPLY WITH THE ORGANICS CONVERSION POLICY, THAT I WILL BE LIABLE TO RETURN ALL TAX REBATES AND BENEFITS CONFERRED BY THE POLICY.

I AFFIRM THAT I AUTHORIZE WOODBURY COUNTY TO OBTAIN ALL APPLICATIONS, AND SUPPORTING DOCUMENTATION, FOR CERTIFICATION FROM ORGANIC CERTIFICATION AUTHORITIES. I UNDERSTAND THAT ANY INFORMATION RECEIVED BY WOODBURY COUNTY IS FOR STATISTICAL AND COMPLIANCE PURPOSES ONLY.

APPLICANT SIGNATURE

APPLICANT’S SPOUSE SIGNATURE