



# KENTUCKY DEPARTMENT OF AGRICULTURE

Office of Agricultural Marketing and Product Promotion • Organic Program  
111 Corporate Drive, Frankfort, KY 40601 • (502) 573-0282 • kyagr.com  
Jonathan Shell, Commissioner of Agriculture



## Processing and Handling Organic System Plan: Livestock Addendum

Please fill out this questionnaire if you are requesting organic process/handling certification or recertification of livestock meat products.

**WARNING:** This form will be returned to you if it is not completed in its entirety. This will significantly delay the certification process, in regards to your file.

SECTION 1: ORIGIN OF LIVESTOCK	NOP §205.236
1. Do you request organic certificates to accompany animals that are scheduled to be processed organically? *If no, how do you verify that the animal(s) are eligible for organic processing?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Do you request herd lists to accompany animals that are scheduled to be processed organically? *If no, how do you verify that the animal(s) are eligible for organic processing?	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 2: LIVESTOCK FEED	NOP §205.237
1. How long are organic poultry/livestock normally on the property before being processed?	
2. Have you ever needed to feed organic poultry/livestock while they were in your care? *If yes, did you feed 100% organic feed? Please explain the situation and where you sourced the feed from:	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 3: LIVESTOCK HEALTHCARE	NOP §205.238
1. Have you ever needed to treat an organic animal in your care with medication? *If yes, please explain and include the kind of medication that was used?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Do you ever document the overall health of organic poultry/livestock, when they are unloaded onto your property?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you ever had an organic carcass test positive for antibiotic residue? *If yes, please explain:	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECTION 4: LIVESTOCK LIVING CONDITIONS	NOP §205.239
1. Do all of the organic animals that come into your care have access to water and shelter? *If yes, please indicate those areas on your facility map. * If no, please indicate how you comply with 205.239(a)(1)	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Do you provide bedding in your holding pens? *If yes, please provide the source:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Certificate #:



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## SECTION 5: PASTURE REQUIREMENTS

1. Do organic livestock/poultry have access to pasture?

☐ Yes ☐ No

\*If yes, is the pasture organic?

☐ Yes ☐ No