**Parcel Transfer Form**

Instructions: Use this form to transfer of a parcel in organic or transitional status between two MDA certified organic operations.

* This form must be completed and received by MDA within one month of the transfer.
* There must be continuous organic management of the transferred parcel.
* All information on this form must be complete to approve the transfer

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| **Section 1: Parcel Transfer Information** | |
| 1. Transfer Description (Sale, Rent, End of Lease, etc.): | |
| 2. Date of Transfer: | |
| 3. Parcel Identification (APN, FSA Farm/Tract number, etc.): | |
| 4. Physical Address: | |
| 5. Proof of Certification – *Attach a copy of the previous land manager’s most recent Organic System Plan (OSP) indicated the transferred parcel* | OSP attached |
| 6. Field Map – *Submit a map clearly showing the parcel, including field boundaries* | Map attached |
| **Section 2: Previous Management Information** | |
| 1. Operation Name: | |
| 2. Parcel Name and Field Numbers/IDs: | |
| 3. Crop(s) grown in previous year, including acreage of each crop: | |
| 4. Previous Land Manager Attestation  *I attest that the information on this form is accurate to the best of my knowledge, and that no prohibited substances (in accordance with NOP §205.202 and §205.105) have been applied to this parcel while managed organically under my control.*  Date:  Name and Title:  Signature (required): | |
| **Section 3: Current Management Information** | |
| 1. Operation Name: | |
| 2. Parcel Name and Field Numbers/IDs: | |
| 3. Crop(s) to be grown/currently growing, including acreage of each crop: | |
| 4. Current Land Manager Attestation  *I attest that the information on this form is accurate to the best of my knowledge, and that no prohibited substances (in accordance with NOP §205.202 and §205.105) have been applied to this parcel while managed organically under my control.*  Date:  Name and Title:  Signature (required): | |