

Completed applications must be postmarked by **October 31, 2024:**
PA Dept. of Agriculture
ATTN: Michele Brookins



FEDERAL ORGANIC COST-SHARE PROGRAM APPLICATION

ADMINISTERED BY THE PENNSYLVANIA DEPARTMENT OF AGRICULTURE

Certified organic operations receiving valid certification or continued certification issued by a USDA-accredited certifying agent with eligible costs paid during the period of **October 1, 2023**, through **September 30, 2024**, may apply for cost-share reimbursement. **PLEASE PRINT OR TYPE IN BLUE OR BLACK INK ONLY- READ INSTRUCTIONS ON REVERSE SIDE**

1. Applicant's Name: _____ 2. Title _____

3. Payee(s)'s Name: **PLEASE COMPLETE ONLY ONE: A or B**

A. Applying under Business Name _____

BUSINESS EIN#

B. Applying as individual(s) *All individuals whose name appears on the organic certificate must be listed if completing this section, along with their social security number (SS#)*

Payee 1: _____

SS#

Payee 2: _____

SS#

Payee 3: _____

SS#

Payee 4: _____

SS#

4. Owner (s): _____

5. Company/Farm Name: _____

6. Address: _____ County _____

7. City: _____ State _____ Zip _____

8. Phone #: (_____) _____ 9. Fax: (_____) _____ 10. Email: _____

11. Cost-share scope(s) (Circle each scope for which you are certified)-Crops || Wild Crops || Livestock || Processing/Handling ||

12. Circle reimbursement for: First certification or Renewal 13. Certificate Number: _____

14. Certification or Re-Certification Costs \$

Please attach proof of payment for certification costs if not certified thru PCO.

15. To Payee: (1) Are you responsible for the payment of the incurred certification fees? YES NO*

(2) Are you paying certification fees for any other organic farms? YES* NO

*If no to #1, explain on back of application. If yes to #2, list farms and addresses on back of application.

16. Certification Agent/Agency

<input type="checkbox"/> Global Organic Alliance	<input type="checkbox"/> NOFA-NY	<input type="checkbox"/> NOFA-NJ	<input type="checkbox"/> OEFFA	<input type="checkbox"/> Oregon Tilth
<input type="checkbox"/> OCIA	<input type="checkbox"/> Pennsylvania Certified Organic	<input type="checkbox"/> QAI	<input type="checkbox"/> QCS	<input type="checkbox"/> Other (please specify on reverse)

I hereby apply to the Pennsylvania Department of Agriculture for reimbursement fees under the Federal Organic Cost-Share Program given under the authority of the Federal Crop Insurance Act (7U.S.C. 1501 et seq.) and Agricultural Risk Protection Act of 2000. I verify that the information I provided on this application is true and correct. False statements are subject to penalties for unsworn falsifications to authorities (18 Pa. C.S.A. Section 4904).

17. Applicant(s)'s Signature:

1. _____ Date: _____ 2. _____ Date: _____

3. _____ Date: _____ 4. _____ Date: _____

Please see the reverse side of this document for instructions and important changes to the application procedure

INSTRUCTIONS

- 1-2. Name and Title of **individual completing this application.**
3. Names of **ALL** persons listed on organic certificate or renewal certificate who will receive reimbursement payments in equal division of the total reimbursement amount must be completed in section B. If certificate is for business, please complete section A.

SS# or business FEIN# that matches the Payee(s) listed in item 3.
- 4-10. Owner contact information. This is where any and all correspondence as well as the reimbursement check will be mailed.
11. Organic operations may receive one reimbursement per certificate or scope of certification per year. The NOP currently recognizes four scopes of certification: crops, wild crops, livestock, and processing/handling. This means that operations with more than one certification scope may be eligible for more than one reimbursement.
12. Circle **Certification** if this is your first certification year or **Renewal of Certification** if your certification was renewed this year. **IMPORTANT: You DO NOT need to send a copy of your certificate with the application!**
13. This is the unique certification number as it appears on the certificate you receive from your certification agency. Contact your certification agency if you do not know this number.
14. **Please include the dollar amount for the total costs of your certification or renewal certification for this cost share year. Invoices and proof of payment should be included with your application if you are not certified thru PCO. Please remember, the cost share year is on or between October 1, 2023, and September 30, 2024.**

ALLOWABLE COSTS:

- Application Fees
- Inspection Fees, including Travel Costs and Per Diem for Organic Inspectors
- Certification Costs, including fees necessary to access international markets with which AMS has equivalency agreements or arrangements
- User Fees/Sale Agreements
- Postage

UNALLOWABLE COSTS:

- Inspections due to violations of USDA Organic regulations
- Charges related to non-USDA organic certifications
- Transitional Certifications
- Other labeling program
- Materials, Supplies, Equipment
- Late Fees
- Membership Fees
- Consultant Fees

****NOTICE TO OPERATIONS CERTIFIED BY PENNSYLVANIA CERTIFIED ORGANIC (PCO)-YOU**
STILL MUST FILL OUT THE APPLICATION IN IT'S ENTIRETY, THE ONLY THING YOU ARE NOT
REQUIRED TO PROVIDE IS AN AMOUNT OR PROOF OF PAYMENT. PCO WILL PROVIDE THE
ALLOWABLE COSTS ASSOCIATED WITH YOUR CERTIFICATION.**

15. (1) Check yes or no in answer to the supplied question. If you answered **NO**, please explain below.

(2) Check yes or no in answer to the supplied question. If you answered **YES**, please list farms below and attach additional sheet(s) if necessary.
16. Name and contact information for your certifying agency. **If you checked Other**, please fill out information below:

Certification Agent/Agency: _____
Address: _____
Phone#: _____ Fax: _____ Email: _____
17. **Signature of all payees as listed in item 3.**

*Applications postmarked after **October 31, 2024**, may not be processed. If you have any questions, or need additional information, please contact Michele Brookins. Additional applications may also be filled in and printed out from our website: https://www.agriculture.pa.gov/Business_Industry/Financial%20Assistance/Pages/default.aspx and submitted via e-mail to RA-AgBusiness@pa.gov, **please do not e-mail applications to mbrookins@pa.gov.**

Contact Information:

Michele Brookins
Pennsylvania Department of Agriculture
2301 North Cameron Street
Harrisburg, PA 17110
Ph: 717-787-5319
Fax: 717-787-5643
Email: mbrookins@pa.gov