



# Change Report

**CONFIDENTIAL**

**Instructions:** Answer all questions. Multiple products can be reported on this form *ONLY* if they are all undergoing the same changes. All changes on this form must apply to all products listed on this form. Required supplemental forms can be found on the Individual Forms and Checklists web page located in the Applicant Menu when you log in to OMRI.org. Contact OMRI's application support team if you have questions at (541) 343-7600 x105 or apply@omri.org.

## General Information

**Company Name:**

**Product Name(s) for all of your company's OMRI Listed products affected by this change:**

**Detailed description of the change(s):**

**What is the current status of the change(s)\*?**

- Impacted products will not be sold in the marketplace until the change is approved by OMRI.
- Changes will be implemented regardless of OMRI approval. Date modified product will enter the marketplace: \_\_\_\_\_
- Changes have already been made and the product has entered the marketplace.

\* Product change reviews are given the highest priority at OMRI; however to ensure compliance we require notification at least 60 days in advance of a modified product's appearance in the marketplace.

## Administrative Changes

**1. Is the product or company changing ownership?**

- No.
- Yes. OMRI will contact you for additional information.

**2. Are you changing the product name?**

- No.
- Yes. Select one:
  - This product will no longer be sold under its current name and that name can be removed from the *OMRI Product List*<sup>®</sup>, *OMRI Canada Products List*<sup>®</sup> and/or the *OMRI Mexico Products List*<sup>®</sup>.
    - Submit labels featuring the new product name. Label effective date: \_\_\_\_\_
  - This product will be in the marketplace under both names, and OMRI listing is needed for each at this time.
    - Submit a *Repackaged Product Application* for the new name in lieu of this form.

**3. Are you changing the company name?**

- No.
- Yes. Provide the following:
  - *Company Contacts form*.
  - *Supplier Agreement*.
  - Updated labels showing new company name. Label effective date: \_\_\_\_\_
- This product will be in the marketplace under both names and OMRI listing is needed for each at this time.
  - Submit a *Repackaged Product Application* for the new name in lieu of this form.



### Looking for additional forms?

Additional copies of all application documents (e.g., *Total Ingredient List*, *NOP*, *COR* or *LPO Excluded Methods Declaration*, *Organic Process Controls* form) can be downloaded from the Individual Forms and Checklists page ([OMRI.org/suppliers/forms-checklists](http://OMRI.org/suppliers/forms-checklists)) when you log in to the OMRI website. If you need assistance locating the correct documents to submit with this *Change Report*, please contact OMRI's application support team at (541)343-7600 x105 or [apply@omri.org](mailto:apply@omri.org).

#### 4. Are you changing the product label(s)?

- No.
- Yes. Provide the following:
- All product labels in use. Effective date for new label: \_\_\_\_\_
  - For bulk distribution, provide all materials you would give to a buyer such as an invoice, specification sheet or brochure.

#### 5. Are you adding or changing manufacturing, packaging or storage locations?

- No.
- Yes:  Adding  Changing
- Provide the name, mailing address, and phone number of the new site. \_\_\_\_\_
  - Do you manufacture, package or store High Nitrogen Liquid Fertilizers (HNLFs) at this new location? \_\_\_\_\_
- No.
- Yes. Provide the following: ( ) \_\_\_\_\_ - \_\_\_\_\_ Country code \_\_\_\_\_
- An updated *Organic Process Controls* form for the new facility.
  - Attach a separate sheet indicating the hours of operation, seasonal closures and name of authorized contact for your company who will be available during announced on-site inspections.

#### 6. Are you removing suppliers of ingredients? Previously approved suppliers can be kept on file even if not currently in use.

- No.
- Yes. Provide the following:
- Updated *Total Ingredient List* for the final product. If this product is a registered pesticide, you may submit the *OMRI Registered Pesticide Supplement* in lieu of a *Total Ingredient List*.

### Technical Changes

#### 7. Is the formulation or manufacturing process for any of the ingredients (or any of the microbial substrate used) changing?

- No.
- Yes. If the ingredient is not already OMRI Listed®, provide the following:
- *Total Ingredient List* for the altered ingredient. If this ingredient is a registered pesticide, you may submit the CSF/SPSF and the *OMRI Registered Pesticide Supplement* (or a signed statement that the CSF/SPSF is current) in lieu of a *Total Ingredient List*.
  - Updated *Excluded Methods Declaration* (specific to NOP, COR and/or LPO).
  - Written description of the complete manufacturing process for the ingredient(s).

#### 8. Are you changing the manufacturing process of the final product?

- No.
- Yes. Provide the following:
- Written description of the complete manufacturing process for the final product.

#### 9. Are you changing the ingredient proportions in the final product?

- No.
- Yes. Provide the following:
- Updated *Total Ingredient List* for the final product. If this product is a registered pesticide, you may submit the CSF/SPSF in lieu of a *Total Ingredient List*.

#### 10. Are you removing ingredients?

- No.
- Yes. Provide the following:
- Updated *Total Ingredient List* for the final product. If this product is a registered pesticide, you may submit the CSF/SPSF in lieu of a *Total Ingredient List*.



## 11. Are you adding or substituting an ingredient in your product?

- No.  
 Yes:  Adding  Substituting

Provide the following:

- Updated *Total Ingredient List* for the final product. If this product is a registered pesticide, you may submit the CSF/SPSF in lieu of a *Total Ingredient List*.
- Updated *Excluded Methods Declaration* (specific to NOP, COR and/or LPO).
- Proof of purchase (i.e., invoices, receiving logs, letter from ingredient supplier of intent to sell).
- Written description of the complete manufacturing process for the final product.
- Written description of the manufacturing process for each new ingredient.
  - If the new ingredient is OMRI Listed or 100% of one allowed synthetic substance, you are exempt from the ingredient manufacturing process requirement.

## 12. Are you adding or substituting a supplier of an ingredient in your product?

- No.  
 Yes:  Adding  Substituting

Provide the following:

- Updated *Total Ingredient List* for the final product. If this product is a registered pesticide, you may submit the *OMRI Registered Pesticide Supplement* in lieu of a *Total Ingredient List*.
- Updated *Excluded Methods Declaration* (specific to NOP, COR and/or LPO).
- Proof of purchase (i.e., invoices, receiving logs, letter from ingredient supplier of intent to sell).
- Written description of the manufacturing process for each new supplier.
  - If the new ingredient is OMRI Listed or 100% of one allowed synthetic substance, you are exempt from the ingredient manufacturing process requirement.

## 13. Are you submitting an additional formulation or manufacturing process for the final product (also known as an alternate formulation)?

An alternate formulation is a variation of a product marketed under the same name that is manufactured differently, contains different ingredients, and/or contains the same ingredients in different proportions.

- No.  
 Yes. Select all that apply:

Adding formulation. Provide:

- *Total Ingredient List* for the additional formulation of the final product. If this product is a registered pesticide, you may submit the CSF/SPSF in lieu of a *Total Ingredient List*.
- Updated *Excluded Methods Declaration* (specific to NOP, COR and/or LPO)
- Written description of the complete manufacturing process for the final product.

Adding manufacturing process. Provide:

- A complete written description for the additional manufacturing process.

## Listing Change

## 14. Do you want to change or add another OMRI Listed Category?

- No.  
 Yes:  Changing  Adding

See the *OMRI Generic Materials List*<sup>®</sup>, *OMRI Canada Standards Manual*<sup>®</sup> or *OMRI Mexico Standards Manual*<sup>®</sup> for Category choices.

Indicate Category choice(s) here: \_\_\_\_\_

## 15. Do you want to change OMRI Use Class?

- No.  
 Yes:

Indicate new Class choice(s) here: \_\_\_\_\_

**Note: If you are interested in having this product reviewed to an additional standard (NOP, COR or LPO) or Use Class, please complete a product application using our online application system, in lieu of a *Change Report*. In some cases, changing the Class of a product will require additional documentation such as lab analyses in order to complete the review.**



## Fee Payment

Choose the highest fee that applies to your change(s):

**Administrative Changes.**  
\$ \_\_\_\_\_ \$0. All administrative changes have no charge.

**Technical Changes.**  
\$ \_\_\_\_\_ \$200. All technical changes. Pay this fee once for all technical changes submitted on the same business day.

**Changing or Adding an OMRI Category.**  
\$ \_\_\_\_\_ \$0. There is no charge for changing your Category.  
\$ \_\_\_\_\_ \$200. Add an additional Category.

**Changing an OMRI Use Class.**  
\$ \_\_\_\_\_ \$295. Change a product's Use Class.

For more information about product change fees, see the OMRI website. Depending on the details of your change, OMRI may need additional information such as lab analyses or other documentation to complete the review.

**Note: Unreported changes discovered by OMRI will be charged \$495 (\$200 change fee + \$295 penalty).**

## Affirmation

**The undersigned declares under penalty of perjury that all information provided for this product change is complete and accurate to the best of his or her knowledge.** The Company agrees to abide by all OMRI policies as contained in the most current version of the *OMRI Policy Manual*, *OMRI Standards Manual(s)* and accompanying instructions. The undersigned represents and warrants that he or she is authorized to act for the Company relating to this document. **(A typed signature is acceptable when form is submitted via email by an approved contact.)**

Name (type or print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Submit Your Change

If you have any questions, please contact the OMRI application support team at [apply@omri.org](mailto:apply@omri.org) or (541)343-7600 x105.

- Include a cover letter with any necessary explanations or comments.
- All required information and fees must be received before the change can be processed.
- Payments may be submitted with application documents or separately online at: [www.omri.org/fee-payment](http://www.omri.org/fee-payment). Checks can be made payable to OMRI.

Submit your application by mail, email or fax using one of the following:

Email (preferred):	Shipping Address:	Mailing Address:	Fax:
<a href="mailto:apply@omri.org">apply@omri.org</a>	OMRI 2649 Willamette Street Eugene, OR 97405-3134	OMRI PO Box 11558 Eugene, OR 97440-3758	(541)343-8971

Thank you for completing the Change Report.