| OQPC 3: Grow-Out | Regulation (EU) 2018/848; 2020/427; 2021/716; 2020/464; 2021/1165 |
| --- | --- |
| A. Grow-out General Description   1. Please confirm species used: 2. Please provide either a simple flow chart or brief narrative of your shrimp grow-out operating from postlarvae reception to final harvest:  Attached 3. Total area available for shrimp production: 4. Total number of ponds: 5. Have mangroves been destroyed to construct any section of your grow-out facility?  Yes  No 6. How long is your production cycle (days)? 7. Average production (kg) per production cycle 8. Total production in metric tonnes per year:      . *If production is above 20 metric tonnes per year, please present an environmental assessment.*  Attached 9. Provide a complete map of your grow-out farm depicting all production areas (e.g., nursery area if applicable, ponds, raceways, non-organic production section) including non-production areas (e.g., natural vegetation, feed storage area, inputs storage, pumping station(s), quarantine, office(s), etc.). 10. Please attach sustainable management plan  Attached 11. Please attach health care management plan  Attached 12. Do you run a nursery as part of your grow-out facility? (2018/848 Art 3: *Nursery means a place where an intermediate aquaculture production system in applied between the hatchery and grow-out stages*).  Yes  No   If yes, complete Section B. | |
| B. Grow-out Nursery Area (if applicable)  1. Describe type of rearing unit used (raceway, ponds):  2. Number of units used:  3. Density per unit:  4. Mortality rate:  5. Average time animals spend in this nursery area:  6. Feed/feeding:  6.1 Do you provide a feed ration sufficient to meet species-specific nutritional requirement?  Yes  No  6.2 List of feed used during nursery in the table below (2021/1165 Annex III). Attach certificates, labels, non GMO1 declaration as applicable (see Annex I).   |  |  |  |  | | --- | --- | --- | --- | | **Feed name** | **Manufacturer** (attach organic certificate) | **Supplier** (if different than manufacturer) | **Is the supplier certified organic?** | |  |  |  | Yes: Attach certificate.  attached  No Attach Declaration (Annex II).  attached | |  |  |  | Yes: Attach certificate.  attached  No Attach Declaration (Annex II).  attached | |  |  |  | Yes: Attach certificate.  attached  No Attach Declaration (Annex II).  attached | |  |  |  | Yes: Attach certificate.  attached  No Attach Declaration (Annex II).  attached |   **Grow-out Nursery Feed Additives and Supplements (2018/848, Article 24)**  7.List all feed additives and supplements used in nursery (e.g., vitamin, provitamin, trace elements, minerals)   |  |  |  | | --- | --- | --- | | **Product Name as it Appears on Label** | **Manufacturer** | **Function** | |  |  |  | |  |  |  | |  |  |  |   **Grow-out Nursery Feed storage unit**  9.Complete the table below to describe how all feed **(both organic and conventional)** used by your operation is stored and be sure to show feed storage units on Grow-out facility maps.   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Storage Unit code** | **Description** | **Capacity** | **Location** | **Use (check all that apply)** | |  |  |  |  | Organic  non-organic source | |  |  |  |  | Organic  non-organic source | |  |  |  |  | Organic  non-organic source |   **Grow-out Nursery Housing & Husbandry Practices** (2018/848 Annex II Part III, 3.1.5)   1. Does your system offer water quality and temperature ranges, light conditions and sufficient space to guarantee the welfare of the animals according with the species requirements?  Yes  No 2. How is water quality maintained and monitored?   Attach diagram of water quality system  Attached   1. Do you keep records of water quality?  Yes  No 2. Is any water artificial heating or cooling system used?  Yes  No 3. Described lighting conditions and regime 4. How frequently raceways/tanks are cleaned and disinfected? 5. List all inputs used for cleaning and disinfection of ponds, cages, tanks, raceways, building or installationsbelow.  None   **Equipment and Facility Cleaners/Sanitizers used** (2018/848 Article 24; 2021/1165 Annex III)  Attach labels and SDS.   |  |  |  |  | | --- | --- | --- | --- | | **Product Name as it Appears on Label** | **Manufacturer** | **Reason for use** | **Frequency of use** | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  |   **Grow-out Nursery Health Care/Veterinary Treatments** (2018/848 Annex II Part III, 3.1.4)   1. What preventive health care measures are practiced?   Adequate quality/quantity of feed  Nutritional supplements/probiotics  Clean water  Collecting uneaten feed, dead animals  Other, specify:   1. How do you monitor the effectiveness of preventative health care practices, and how often are you monitoring? 2. Mortality rate per cycle: 3. Have you used or do you plan to use any homeopathic preparation with plant, animal or mineral substances?  Yes  No   If yes, are homeopathic preparation used only when preventive measures described above have proven insufficient?  Yes  No   1. Have you used or do you plan to use any plants and/or their extracts?  Yes  No   If yes, are these used only when preventive measures and homeopathic preparations described above have proven insufficient?  Yes  No.   1. Have you used or do you plan to use any other substances different from homeopathic preparation, plants and its extract, such as authorized probiotics, natural immunostimulants, trace elements, metals?  Yes  No   If yes, are these substances used only when preventive measures, homeopathic preparations and plants/plant extracts have proven insufficient?  Yes  No   1. Have any animals been treated with chemically synthesized allopathic veterinary products, including antibiotics, when organic methods have failed?  Yes  No   If yes, how are animals treated with these medications identified and segregated from organic stock?   1. Are treatments with chemically synthetized allopathic veterinary products, including antibiotics, ever withheld from a sick animal to preserve its organic status?  Yes  No 2. Does your operation use any allopathic veterinary treatment and parasite treatment that require a withdrawal period  Yes  No 3. Have any chemically synthesized allopathic veterinary products, including antibiotics, and parasiticides used under the responsibility of a veterinarian?  Yes  No 4. Have any animals received parasites treatments when preventive measures and organic methods have failed?   Yes  No   1. How and when you declared/plan to declare any use of veterinary medicinal products to the control authority: 2. List any stock that has been treated with chemically synthesized allopathic veterinary products including antibiotics and parasiticides and list the treatments in the table below.   Not applicable, no animals have been treated with chemically synthetized allopathic veterinary products, (including antibiotics), nor parasite treatments.   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **TREATED STOCK** | **PRODUCT NAME** | **MANUFACTURER** | **CONDITION TREATED** | **TREATMENT DATE** | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  |   14. List all veterinary treatments including homeopathic preparation, plants, plant extracts, authorized probiotics, natural immunostimulants, trace elements, metals. in table below.  None  **Grow-out Nursery Healthcare and Veterinary Treatment Inputs**   |  |  |  | | --- | --- | --- | | **Product Name as it Appears On Label** | **Manufacturer** | **Condition Treated** | |  |  |  | |  |  |  | |  |  |  | |  |  |  | | |
| C. Grow-out Farm   1. Have your ponds been drained or fallowed?  Yes  No   Last date when ponds were drained or fallowed:  Months under organic management:   1. If your ponds cannot be drained, cleaned and disinfected, how many months have been under organic management? 2. Are all ponds built on sterile clay area  Yes  No 3. Total number of ponds available for final grow-out (no nursery): 4. Number of ponds used per production cycle: 5. Production cycle: from PL stocking to harvest (days): 6. Stocking Density per pond: 7. Maximum instantaneous biomass per pond: 8. Mortality rate: 9. Please attach sustainable management plan  Attached 10. Please attach health care management plan  Attached   Feed/feeding:  12a Are animals fed only with feed naturally available in ponds?  Yes  No  If you provide compound feed, what evidence do you have to demonstrate the need to use additional feed:  12 b. Do you provide a feed ration sufficient to meet species-specific nutritional requirements?  Yes  No  12.c. List of feed used during grow-out in the table below. Attach certificates and labels for all feed used.   |  |  |  |  | | --- | --- | --- | --- | | **Feed name** | **Manufacturer** (attach organic certificate) | **Supplier** (if different than manufacturer) | **Is the supplier certified organic?** | |  |  |  | Yes: Attach certificate.  attached  No Attach Declaration (Annex II).  attached | |  |  |  | Yes: Attach certificate.  attached  No Attach Declaration (Annex II).  attached | |  |  |  | Yes: Attach certificate.  attached  No Attach Declaration (Annex II).  attached | |  |  |  | Yes: Attach certificate.  attached  No Attach Declaration (Annex II).  attached |   **Grow-out Feed Additives and Supplements (2018/848, Article 24)**  List all feed additives and supplements used during grow-out (e.g., vitamin, provitamin, trace elements, minerals). Attach labels and Non GMO declaration, as applicable (Annex I)   |  |  |  | | --- | --- | --- | | **Product Name as it Appears on Label** | **Manufacturer** | **Function** | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  |   **Grow-out feed storage**  Complete the table below to describe how all feed **(both organic and conventional)** used by your operation is stored and be sure to show feed storage units on Grow-out facility maps.   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Storage Unit code** | **Description** | **Capacity** | **Location** | **Use (check all that apply)** | |  |  |  |  | Organic  non-organic source | |  |  |  |  | Organic  non-organic source | |  |  |  |  | Organic  non-organic source |   **Grow-out Housing & Husbandry Practices** (2018/848 Annex II Part III)   1. Does your system offer water quality and temperature ranges, and sufficient space to guarantee the welfare of the animals according with the species requirements?  Yes  No 2. Do you monitor and keep records of the flow rate in the inflowing and out-flowing water?  Yes  No 3. Attach diagram of water quality system showing all type of filter, settlement ponds used  Attached 4. Do you monitor effluent water quality?  Yes  No 5. How frequently do you monitor effluent water quality? 6. Do you keep records of water quality on effluent?  Yes  No 7. Do you keep records of water quality?  Yes  No 8. Are at least 10% of the land-water perimeters covered with natural vegetation?  Yes  No.   *Make sure it is clearly indicated in the map(s)*   1. Do you use any predator control system and have a deterrence plan in place?  Yes  No.   If yes, describe:   1. Do you use any containment systems to minimize risk of escape incidents  Yes  No.   If yes, describe:   1. Do you monitor and keep records of escapes?  Yes  No. 2. List all inputs used for cleaning and disinfection of ponds, cages, tanks, and any equipment.  None   **Equipment and Facility Cleaners/Sanitizers** (2018/848 Article 24; 2021/1165)   |  |  |  |  | | --- | --- | --- | --- | | **Product Name as it Appears on Label** | **Manufacturer** | **Reason for use** | **Frequency of use** | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  |   **Grow-out Health Care/Veterinary Treatments, Animal Welfare** (2018/848 Annex II Part III, 3.1.4)   1. Are your personnel trained in basic knowledge regarding animal health and welfare?  Yes  No 2. Do you maintain records of personal training?  Yes  No 3. What preventive health care measures are practiced?   Adequate quality/quantity of feed  Nutritional supplements/probiotics  Clean water  Collecting uneaten feed, dead animals  Monitoring for parasites  Other, specify:   1. How do you monitor the effectiveness of preventative health care practices, and how often are you monitoring? 2. Mortality rate per cycle:   **Pests and Predators**   1. Are insect or rodent pests a problem on your operation?  Yes  No   If yes, describe your control methods:  Insect traps  Insect zappers  Fly tape Rodent traps  Rodent baits  Other   1. Are predators a problem in your operation?  Yes  No   If yes, describe your control methods:   1. How do you monitor the effectiveness of preventative pest and predator control practices, and how often are you monitoring? 2. Are inputs used to control pests or predators only when physical and mechanical controls fail?   Yes  No  N/A (none used)   1. Please list all pest/predator control below:   **PEST AND PREDATOR CONTROL INPUTS**  List all inputs used to control pests and predators on the livestock operation.  None   |  |  |  |  | | --- | --- | --- | --- | | **Product Name as it Appears on Label** | **Manufacturer** | **Pest or Predator Controlled** | **Where/How it is applied** | |  |  |  |  | |  |  |  |  | |  |  |  |  |  1. Are all baits in tamper proof containers to prevent contact with aquatic animals and water?  Yes  No  N/A (none used) If yes, please show the location of all bait stations on the map.   **Veterinary Treatments**   1. Have you used or do you plan to use any homeopathic preparation with plant, animal, or mineral substances?  Yes  No   If yes, are homeopathic preparations used only when preventive measures described above have proven insufficient?  Yes  No.   1. Have you used or do you plan to use any plants and/or their extracts?  Yes  No   If yes, are these used only when preventive measures and homeopathic preparations described above have proven insufficient?  Yes  No.   1. Have you used, or do you plan to use, any other substances different from homeopathic preparation, such as authorized probiotics, natural immunostimulants, trace elements, metals?  Yes  No   If yes, are these substances used only when preventive measures, homeopathic preparations and plants/plant extracts have proven insufficient?  Yes  No   1. Have any animals been treated with chemically synthesized allopathic veterinary products, including antibiotics, when organic methods have failed?  Yes  No   If yes, how are animals treated with these medications identified and segregated from organic stock?   1. Are treatments with chemically synthetized allopathic veterinary products, including antibiotics, ever withheld from a sick animal to preserve its organic status?  Yes  No 2. Does your operation use any allopathic veterinary treatment and parasite treatment that require a withdrawal period?   Yes  No   1. Have any chemically synthesized allopathic veterinary products, including antibiotics, and parasiticides used under the responsibility of a veterinarian?  Yes  No 2. Have any animals received parasites treatments when preventive measures and organic methods have failed?  Yes  No 3. How and when you declared/plan to declare any use of veterinary medicinal products to the control authority: 4. List any stock that has been treated with chemically synthesized allopathic veterinary products including antibiotics and parasiticides and list the treatments in the table below.   Not applicable, no animals have been treated with chemically synthetized allopathic veterinary products, (including antibiotics), nor parasite treatments.   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **TREATED STOCK** | **PRODUCT NAME** | **MANUFACTURER** | **CONDITION TREATED** | **TREATMENT DATE** | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  |  1. List all in Veterinary treatments including homeopathic preparation, plants, plant extracts, authorized probiotics, natural immunostimulants, trace elements, metals. in table below.  None   **Grow-out Healthcare and Veterinary Treatment Inputs.** Attach labels and SDS   |  |  |  | | --- | --- | --- | | **Product Name as it Appears on Label** | **Manufacturer** | **Condition Treated** | |  |  |  | |  |  |  | |  |  |  | |  |  |  |   **Grow-out Shrimp Harvest/Transportation** Describe harvest methods used:   1. Describe slaughter method used: 2. Describe steps taken to protect organic aquatic animals from commingling and contamination during harvest. 3. Choose scenario that best applies to your operation:  50a. An organic processing entity provides the materials (holding/transportation containers, ice) to be used ***in situ*** during harvesting and ownership of organic shrimp is transferred to the processing entity.  Yes  No   50b. A processing entity that is part of your legal entity providing the material (holding/transportation containers, ice) to be used ***in situ*** for harvest.  Yes  No If yes, this facility needs to be certified organic to maintain product organic status. If the facility is not certified organic, you may contact QCS for more information.  50c. Your entity provides all material (containers, ice) used for harvest  Yes  No  If yes, answer below:   1. Are containers new or used?  New  Used 2. If used, what did they contain prior to organic use? 3. Are the containers used for organic aquaculture only?  Yes  No 4. What is the source of the ice used: 5. Do you add any substance to the harvesting tanks  Yes  No.   If yes, describe:   1. Describe potential contamination or commingling problems you have with harvest of aquatic animals.   None  Describe:  **Harvested Organic Shrimp Transportation/Sale**  Who is responsible for arranging transportation of harvested organic shrimp?  Certified Organic buyer  Processing facility that is part of your legal entity.  This facility needs to be certified organic to maintain organic status. (Contact QCS if you need information)  Self: Complete information below  **If your entity maintains ownership of organic shrimp after harvest, and is responsible for transportation:**   1. Describe how organic products are transported. 2. Which is the source of ice used during transportation: 3. Do you add any substance to transportation units:  Yes  No. If yes, describe: 4. What potential contamination or commingling problems do you have with the transport of organic aquatic animals? None  Describe: 5. What steps are taken to protect the integrity of organic products during transport?   Dedicated organic only  Inspecting transport units prior to loading  Cleaning transport units prior to loading  Use of Clean Truck Affidavits  Letter/contract with transport company stating organic requirements  Other (specify):         1. Which type of documents accompany your transportation units? (e.g., bill of lading, invoices, labels)      1. What records of transportation documentation do you keep?      1. How is the ownership of organic shrimp transferred from your certified organic entity to the next entity on supply chain (e.g., invoice, non-retail label, retail label)? | |