



## Private Label Agreement

### Instructions:

Complete this form if you pack the products that you handle, process, manufacture or market into another company's label. Complete one form for each private label client. All product documentation and labels must be submitted to VOF for review/approval prior to use.

**Private label client business name:** \_\_\_\_\_

<b>Product/Formula</b> (as listed on the VOF Organic Product Profile)	<b>Client's Brand Name</b> (as it appears on the label)	<b>Production Location</b> (Name and location of operation where this product is manufactured/packaged/labeled)
<i>Ex. Wheat Bread</i>	<i>B's Bread</i>	<i>A&amp;B Co-Packing 123 Co-Packers Ct. Town, VT 12345</i>

*Attach a separate page if more space is needed.*

*As the certified operation, you understand and agree to the following:*

- You shall establish and maintain an audit trail consistent with the approved Organic System Plan for all products covered under this agreement.
- You shall be responsible for ensuring that all labels used on the products covered under this agreement have been submitted to VOF for review/approval prior to use.

- You shall be responsible for all communication with VOF regarding the product(s) covered under this agreement.
- You shall only supply the product(s) covered under this agreement to operations that are certified organic or exempt from certification under [NOP §205.101](#).
- You shall ensure that any VOF approved label for products covered under this agreement is applied by your operation or another operation that is certified organic.
- No product may be sold under this private label agreement until the agreement has been approved by VOF and all new products have been added to the VOF certified operations' organic certificate and addendum.

**VOF Producer Statement:**

*I hereby confirm understanding of the terms outlined above. Per NOP [§205.100\(c\)\(2\)](#), any person falsifying statements to an accredited certifying agent shall be subject to the provisions of section 1001 of title 18, United States Code.*

\_\_\_\_\_  
VOF Producer Name

\_\_\_\_\_  
Business Name of VOF certified operation

\_\_\_\_\_  
VOF Producer's Authorized Signature  
(Digital, Ink, or E-Verified)

\_\_\_\_\_  
Date