

Inspection Visit Appointment Form

NOFA-NY Certified Organic, LLC

Year _____

1. Name: _____
Farm Name: _____
Address: _____
City: _____ State: _____ Zip: _____
County: _____
Phone: _____ Best Hours To Call: _____
Email Address: _____

Inspector Use Only

Appointment Date

Time

2. Indicate which day(s) of the week are **NOT** good for a Field Representative to visit you and your farm:
- _____

Please note: While they will make every effort to accommodate your schedule. Please keep in mind that your inspection is an annual requirement for continued certification. Since our inspectors schedule multiple inspections in one area to keep inspection costs down, it is important that you work with the inspector to arrange a convenient yet timely inspection.

3. Draw a clear map and provide written directions to your farm below: