

Name	
Postal Address	
Farm Address	

General Orchard Practices

1.	Do you maintain an on-farm approved supplier program (e.g. AMS Approved Supplier, Freshcare)?	Yes	No	
2.	Have you attended a Food Safety Training Course?	Yes	No	
3.	Are recommended AMS's Code of Sound Orchard Practices (COSOP) followed?	Yes	No	
4.	Do you practice a farm recording & documentation system e.g. Manual or Macman?	Yes	No	

Orchard Management

5.	Do domestic animals graze in harvested section of the orchard?	Yes	No	
6.	If Q.5 is yes how long between removal of animals & harvest?			N/A
7.	Is properly composted animal manure or nut husk from heaps applied at least 4 months prior to mature nut drop?	Yes	No	N/A
8.	Are animal manure or fertilizer stockpiles stored to avoid potential for runoff into watercourses or orchard?	Yes	No	N/A
9.	Are registered rat baits used in approved bait stations, are they regularly monitored & results recorded?	Yes	No	N/A
10.	Is orchard regularly monitored for pests & diseases, & monitors well trained with up to date systems?	Yes	No	
11.	If irrigating, is irrigation water of good quality to minimise microbial contamination risk.	Yes	No	N/A
12.	Does selected orchard avoid contaminated sites (e.g. dip site)?	Yes	No	
13.	Are only registered (or permitted for use on macadamias by the Australian Pesticides & Veterinary Medicines Authority (APVMA)) chemicals used?	Yes	No	
14.	Are pesticide label directions and withholding periods observed?	Yes	No	N/A
15.	When was your spray equipment last calibrated? Date: / /			N/A
16.	Are chemical users appropriately trained & accredited (including contractors)?	Yes	No	N/A

Harvest and Post Harvest Management

17.	Are harvest containers inspected before use & cleaned as necessary?	Yes	No	
18.	Is harvest equipment maintained in a sound, clean condition (including contractors)?	Yes	No	
19.	Is harvest equipment & other machinery cleaned when shifting between orchards (including contractors)?	Yes	No	
20.	Is post harvest building & equipment maintained in a neat, sanitary condition?	Yes	No	
21.	Do all staff handling NIS observe hygienic practices?	Yes	No	N/A
22.	Is vermin activity monitored & steps taken to prevent access where necessary?	Yes	No	N/A
23.	Are registered rat baits used in approved bait stations, are they regularly monitored?	Yes	No	N/A
24.	Is there any risk of contamination of the NIS from glass or other foreign matter?	Yes	No	N/A
25.	Is drying & storage equipment kept clean & in good working order?	Yes	No	N/A
26.	NIS is stored using the following: (circle appropriate) Floor. Rack. Bins. Silo. Drying Bunkers.			
27.	What storage vessel conditions are used? (circle appropriate) Time Clock. Manual Control. Humidity Control. Continuous Air. Heated Air. Dehumidified. Ambient Air. Cool. Rack.			
28.	Has a risk assessment been conducted on your water quality for flotation?	Yes	No	N/A
29.	If flotation system used, is water bath emptied & hosed out every 4 hours & sanitised at the end of the each day?	Yes	No	N/A
30.	Do you intend to tree shake and/or use Ethrel for harvest purposes?	Yes	No	

MD – CHEMICAL APPLICATION RECORD

Business/Grower Name:					Crop/Variety:			Year/Season:	
Date / Time	Block / Row	Crop stage / Target	Product	Dilution rate	Application rate	Equipment used	Date safe to harvest / WHP	Comments (e.g. weather)	Operator

To the best of my knowledge, the information provided on this record is correct.

Name:	Signature:	Date:
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MD – FERTILISER AND SOIL APPLICATION RECORD

Business/Grower Name:						Year/Season:	
Date / Time	Crop / Variety	Block / Row	Product	Application rate	Date safe to harvest / WHP	Comments (e.g. weather)	Operator

To the best of my knowledge, the information provided on this record is correct.

Name:	Signature:	Date:
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'OTHER' CROP APPLICATION INFORMATION (If applicable)

Grower Name: _____

Please record the name of Adjoining Crop & Chemical Used within appropriate box

List of Applications

Crop	Pesticide/Fungicide	Herbicide

OFFICE USE ONLY

Meets Approved Application Criteria? YES NO Corrective Action: _____

Signature: _____