



PRIOR LAND USE DECLARATION (PLUD)

MOSA producer seeking certification for this land: _____

If you are requesting certification for crops growing on land that has not been under your management for the past 36 months, have the previous manager of the land complete and sign this form. Attach a map for new land, showing adjoining land use.

The land listed below was under my management from _____ to _____
(month/day/year) (month/day/year)

Previous manager's Field #	Acres	Location or physical address	How land was used during this period

Check boxes below as applicable to your situation. Fill in the blanks and submit information as directed. FSA Crop reports are encouraged.

☐ This land was certified organic by _____ (name of certifier) from _____ to _____.
If not certified by MOSA, submit a copy of the most recent organic certificate.

☐ This land was woods, fallow, or was in hay or pasture, and no seeds or inputs were used from _____ to _____.

☐ This land was farmed conventionally:

☐ The last planting of treated seed was on _____ (date);

☐ The last planting of GMO seed was on _____ (date);

☐ The last prohibited input (fertilizer/herbicide/pesticide, etc.) was applied on _____ (date).

Provide a field history for the land from the date the last prohibited input or seed was used. The field history should include all crops grown, seeds used, and inputs applied. Receipts for seed and inputs are required.

☐ The land was managed organically and to the best of my knowledge, acceptable inputs for organic production were used. *Provide a field history for the land. The field history should include all crops grown, seeds used, and inputs applied. Receipts for seed and inputs are required.*

☐ Alfalfa was planted on this land after January of 2011 and is still in production. *Submit a non-GMO statement for the alfalfa seed.*

☐ Manure was not applied, or, manure was applied but contained no bedding or additives.

☐ Manure was applied and contained the following bedding or additives:

☐ I authorize the Farm Service Agency to release field history records to MOSA for the purpose of verifying production described above.

Signed _____ Print Name _____ Date _____

Email _____ Phone _____

Address _____ City _____ State _____ Zip _____