

**Maryland Department of Agriculture
Private Label Use Agreement for Organic Claims
Non-MDA Certified Co-Packing Operation**

Section 205.303 and 205.304 of the USDA National Organic Standards requires a certifier statement to be displayed on packaged products represented as 100% Organic, Organic or Made with Organic.

This private label agreement, when completed and signed by the indicated parties listed below will serve as an agreement for the private label manufacture and the use of an appropriate organic certification statement and/or seal, only for product(s) designated below. An updated organic certificate and organic products list with applicable addendums for the non-Maryland Department of Agriculture (MDA) certified operation must be submitted in addition to this agreement form.

First Party (Private Label Company- MDA Certified Operation)

Company Name:

Certification Number:

Second Party (Co-Packing Operation)

Company Name:

Address:

Certifying Agency:

Products to be private labeled on behalf of the First Party:

Brand name to appear on the private labeled items listed above:

Describe each party's responsibilities for product formulation, label compliance, and handling in production and distribution:

Location address(es) where co-packing will occur. (Note: these locations must be listed on the co-packing company's certificate or certificate addendums):

Second Party Certifying Agency

For the private label products listed above, is the Certifier of the Co-Packing Company listed on the product labels instead of MDA? (Yes / No):

If the answer to the above is No, please provide contact information for a Certifier representative able to sign this document.

Second Party Certifying Agency Name:

Second Party Certifying Agency Representative Name:

Telephone:

Email:

Private Label Agreement Affirmations

MDA_DOC_090_b Private Label Use Agreement- Non-MDA Certified Co-Packing Operation

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First Party Authorized Representative

I affirm that the information listed in this agreement is true and accurate to the best of my knowledge.

Name (please print):

Telephone:

Email:

Title:

Signature:

Date:

Second Party Authorized Representative

I affirm that the information listed in this agreement is true and accurate to the best of my knowledge.

Name (please print):

Telephone:

Email:

Title:

Signature:

Date:

Second Party Certifying Agency Authorized Representative

I affirm that the Second Party listed in this agreement is certified organic by our agency, the products listed in this agreement are within the scope of the Second Party's certification, and the Second Party's locations, as listed in this agreement, wherein the products listed in this agreement will be processed, handled, and/or packaged, are inspected by our agency for compliance with the National Organic Program regulations. I further affirm that our agency will communicate to obtain and share all information necessary to maintain compliance with the National Organic Program regulations with regard to the products listed in this agreement.

Name (please print):

Title:

Signature:

Date: