



BUSINESS RENEWAL APPLICATION UPDATE

Instructions: Please complete this form and disclose which aspects of your operation have changed since your previous application was submitted. Provide an explanation for each issue as needed and instructed throughout the form. Section numbers throughout this renewal form reference the full Business Application for Food Justice Certification.

Basic Information:

Name of Certified Operation:

Date this form completed:

Contact information for person completing this form.

Name:

Phone number:

Email:

Annual gross sales: (last fiscal year)

Section 1

Have there been any changes in the certification contact, billing contact, business location, legal description, structure, owners or ownership, physical location of business or the number of locations?

Yes No

Using the Food Justice Certified Mark or Claim:

- I am aware that I need certifier approval for any new products labeled prior to printing.
- I am aware that any products labeled must include ingredients from Food Justice Certified farms, and meet origin of raw materials and processing and manufacturing requirements (Table 2 of the FJC Policy Manual for Use of Mark or Claim on Products).

I Agree to the above list.

Have there been any changes in certifications of your operation/business (i.e. certified organic or certified to any other social justice programs)?

Yes No

Have any activities changed or new activities started on your operation? (i.e. re-packing or co-packing, livestock production, wild harvesting, food service, processing, retail sales, agricultural production, restaurant, or other?)

Yes No

If you checked YES to any of the above, provide an explanation of the changes from last year and attach explanation to this form.

Section 2, 3 & 4

Attach a list of all farms or grower groups your business has purchased from since your last submitted application. Indicate which farms or grower groups are Food Justice Certified.

List attached.

Your relationships with all farmers and grower groups from whom you purchase products: I agree to:

- Respect farmers' right to Freedom of Association and related rights.
- Engage in collective bargaining with farmer groups if they so wish.
- Support all farmers' right to talk with organizations that assist farmers in exercising their rights.
- Recognize and negotiate with representatives chosen freely by farmers.
- Allow farmers access to the files we hold on them if they ask to see them
- Always allow farmers to talk with each other about contracts
- Treat farmers fairly without discriminating based on race, creed, national or ethnic origin, nationality, gender, gender identity, age, handicap or disability (including HIV status), union or political activity, immigration status.
- Terminate contracts or agreements with farmers only for just cause.
- Respect farmers' right to have a representative of their choosing present during any agreement or contract interview or renewal.
- Not pit farmers against each other for the purpose of driving prices down, including, but not limited to, spreading inaccurate or misleading information.
- Not use a discriminatory ranking system to determine payments to farmers.
- Not excessively dock farmers' for low quality or take unwarranted deductions.
- Pay farmers per terms of our agreements and not pay farmers late.

I Agree to the above list.

I agree and abide by the following ADDITIONAL conditions in my relationships ONLY with Food Justice Certified Farmers and Grower Groups from whom I purchase products. I agree to:

- Not require binding arbitration with Food Justice Certified farmers
- Use the FJC conflict resolution process if a conflict with a Food Justice Certified farmer is not resolved through the conflict resolution process we agreed to follow as part of our purchase agreement.
- Share complete costs and pricing formulas if farmer is not satisfied with price.
- Allow Food Justice Certified farmers the right to recover damages if they are harmed by misleading or incomplete information.
- Allow farmers to collect on significant capital investments (including remaining mortgages) that were required by me as part of purchase agreement if I cancel for no fault of the farmer.
- Compensate or reinstate contracts that are determined through FJC conflict resolution process to have been terminated for unjust cause.
- Pay court costs and attorney fees if I am found to be in violation of the law.

I Agree to the above list.

Regarding Pricing, I agree to:

- Fair pricing to farmers and pricing established through fair and open negotiations in good faith based on (Standards 1.2.1.a & 1.2.1.b):
 - Farmer and buyer costs
 - Value added based on additional market qualities
 - Fair margin for profit and investment and ability to pay fair wages and other benefits

I Agree to the above list.

OR:

If you are unable to provide fair pricing to farmers based on economic realities (Standard 1.2.4.a.b.c), I agree to provide:

- My business financial records to farmers
- Determine price through negotiated process
- Implement a plan and timeline for reaching fair pricing
- Documentation of this during Food Justice Certified inspection

I Agree to the above list.

Section 5: Continual Improvement for Trade Relations (*Section named: Other Practices, Policies, and Relationships in full Business Application)

5.3 Describe your effort in the last year to improve the fairness and equity in your relationship with farmers and grower groups. (STANDARD 1.5. on page 17)

5.3.1 Was progress made by this effort? Yes No

5.3.2 If progress was not achieved please describe the following here or on an additional sheet.
 Attached

5.3.2.1. The efforts you engaged in during the year:

5.3.2.2. The reasons it did not work:

5.3.2.3. The revised plan for improvement for the next year:

Section 6: Employee Information

6.1. Provide full list of employees/workers over the age of 18 (regardless of immigration status), who were hired, fired, quit, or were laid off since your last submitted application. For all fired employees attach a full description of the reason and warnings given. If you do not have a copy of your last submitted employee list, request a list from your certifier. Attach additional sheets if necessary. Attached

NAME OF EMPLOYEE	AGE	LANGUAGES SPOKEN BY WORKER	POSITION	NATIONALITY	INITIAL STARTING WAGE	CURRENT WAGE	EXEMPT OR HOURLY	SEASONAL WORKER	NUMBER OF YEARS AT BUSINESS	HEALTH AND SAFETY TRAINING RECEIVED (TYPE RECEIVED)	PROVIDED WORKERS COPY OF FJC STANDARDS WORKER'S PAMPHLET? (TYPE RECEIVED)	LIVING IN EMPLOYER PROVIDED HOUSING? IF YES, FILL OUT & SUBMIT ATTACHMENT A	FULL TIME	WORK ENDED	For official use only Interviewed?
					yr started			<input type="checkbox"/> yes <input type="checkbox"/> no				<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>
					yr started			<input type="checkbox"/> yes <input type="checkbox"/> no				<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>
					yr started			<input type="checkbox"/> yes <input type="checkbox"/> no				<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>
					yr started			<input type="checkbox"/> yes <input type="checkbox"/> no				<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>
					yr started			<input type="checkbox"/> yes <input type="checkbox"/> no				<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>
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					yr started			<input type="checkbox"/> yes <input type="checkbox"/> no				<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>

SECTION 6: Employee Information

- 6.3 Have all new workers been provided with a copy of the personnel policies/manual or written contract/agreement? (STANDARD 4.1.4.a) Yes No
- 6.7 Are policies and contracts in language(s) all workers can understand?
(STANDARD 4.1.4.a) Yes No
- 6.32. Have you added to NEW workers' files information on wages and benefits/compensation package, performance reviews, disciplinary actions taken, duration of employment?
(STANDARD 4.1.4.d) Yes No
- 6.36. Have you used a recruitment agency since your last application was submitted? (STANDARD 4.1.8.a)
Yes No
6.41.1. If yes, How do you ensure they are compliant with all relevant legal requirements? (STANDARD 4.1.8.a)
- 6.42. Has any complaint been submitted to owner/manager or supervisors by an employee or intern since your last application was submitted? (STANDARD 4.1.3.a) Yes No
- 6.43. Have you been cited for a minor or major labor violation since your last application was submitted?
Yes No

If yes, please describe fully including date of incident and citation, issue, remedy or settlement.
Additional Sheet(s) Attached

SECTION 7: Worker Trainings

Training on Worker Rights under the FJC Standards:

7.2. Have you presented these rights to all NEW workers orally with an opportunity for them to ask questions? (STANDARD 4.1.14.a, e) Yes No

7.2.1. If yes, please attach documentation of this training (for example, sign in sheet).

Attached

7.2.2. If no, have you made arrangements for training to take place? Yes No Dates of future training: Training to be provided by:

Training on Employee Legal Rights

7.3. Have all your NEW workers been provided with written and oral training in their legal rights related to employee status? (STANDARD 4.1.14.a) Yes No

7.3.1. If yes, training was provided by:

7.3.2. If yes, please attach documentation of this training (for example, sign in sheet).
Attached

7.3.3. If no, have you made arrangements for this training to take place?

Yes No

Dates of future training:

Training to be provided by:

SECTION 8: Employee Wages and Benefits

- 8.1. Are you unable to pay all workers a living wage?
(STANDARDS 4.3.1.a and 3.3.1.b) Yes No
- 8.2. Have there been any changes to the employee wages and benefits since your last submitted application? Yes No

If you checked yes, provide an explanation and attach it to this form. You may be required to fill out the corresponding section of the full application.

SECTION 9: Health and Safety Information

- 9.1. Have there been any changes to your business health and safety plan or policies? (STANDARDS 4.5.1.a and 4.5.1.b) Yes No
- 9.2. Have there been any changes in breaks or time off? Yes No
- 9.3. Have there been any changes in toxic materials used at your business place? Yes No
- 9.4. Have there been any changes in access to medical care for the employees? Yes No
- 9.5. Have there been any accidents and injuries at the business since your last submitted application? (STANDARD 4.5.5.a) Yes No
- 9.6. Have there been any changes in record keeping of accidents or injuries since your last submitted application? (STANDARD 4.5.5.c)
Yes No

If you checked yes to any of the above, please provide an explanation and attach the explanation to this form. You may be required to fill out the corresponding section of the full application.

SECTION 10: Employer Responsibilities and Worker Rights

In my business, I agree to:

- Maintain respect and dignity in working relationships within the workplace and with buyers
- Respect employees' right to Freedom of Association and related rights for my employees
- Allow workers to talk with members of a worker organization if they want to
- Keep my business a safe and healthy place of work
- Be transparent in workplace expectations and needs
- Negotiate any changes in employment agreements with employees or their representative
- Work to provide living wages and fair benefits for workers
- Hire, promote, pay and reward fairly without discrimination based on race, creed, national or ethnic origin, nationality, gender identity, age, handicap or disability (including HIV status), union or political activity, immigration status (This standard does not restrict an employer from complying with legally required procedures such as in the USA I-9 verification procedures), citizenship status, marital status or sexual orientation.

- Terminate/discipline workers only for just cause, and
- Continually push to improve the quality of my business and conditions my employees

I agree to all in the list above.

SECTION 11: Continual Improvement in Employee Relations

11.1. Please describe the way in which your business has improved in the past year regarding employment practices related to the principles of the FJC Standards.
(STANDARD 4.6 a, b)

11.2. If improvements planned were not accomplished please describe:
11.2.1. The efforts made:

11.2.2. The reasons improvements were not achieved:

11.2.3. A revised continual improvement plan for employment practices for the next year:
(Attach additional sheets if necessary Attached)

11.2.4. Please also describe any of the optional standards (in italics, throughout STANDARDS) that you choose to implement in addition to that described above:
(Attach additional sheets if necessary Attached)

Checklist

I have answered yes to at least one question in the following sections:

- | | |
|-------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Section 1 | <input type="checkbox"/> Explanation attached |
| <input type="checkbox"/> Section 2 | <input type="checkbox"/> Explanation attached |
| <input type="checkbox"/> Section 3 | <input type="checkbox"/> Explanation attached |
| <input type="checkbox"/> Section 4 | <input type="checkbox"/> Explanation attached |
| <input type="checkbox"/> Section 5 | <input type="checkbox"/> Explanation attached |
| <input type="checkbox"/> Section 6 | <input type="checkbox"/> Explanation attached |
| <input type="checkbox"/> Section 7 | <input type="checkbox"/> Explanation attached |
| <input type="checkbox"/> Section 8..... | <input type="checkbox"/> Explanation attached |
| <input type="checkbox"/> Section 9 | <input type="checkbox"/> Explanation attached |
| <input type="checkbox"/> Section 10 | <input type="checkbox"/> Explanation attached |
| <input type="checkbox"/> Section 11 | <input type="checkbox"/> Explanation attached |

Section 12 Affirmation:

This affidavit is submitted as part of the annual update for the named operation, in order to allow the certifier to assess the ongoing compliance of the certified operation with the Food Justice Certified Standards. I have reviewed each of the aspects of the application previously submitted for Food Justice Certification against the questions listed above and attest that each of the answers submitted is correct and true. For each of the sections in which I have checked "Yes" I have attached the corresponding explanation.

I recognize that certification under the FJC Standards creates a continuing obligation to provide updates to my certifier of changes, additions, and deletions to the operation. By signing this affidavit I further attest that I am either the principal or agent of the operation, authorized to conduct business, make representations, enter into contracts and otherwise conduct business on behalf of the operation for the purposes of Food Justice Certification as a responsibly connected person.

I have read and understand the relevant Food Justice Certified Standards. I consent and agree to the foregoing, and further attest my responses are true, correct and complete:

Name and Title:

Signature:

Date:

(Note: The name of the signing party must be the same as the certification contact list in the full Business Application Form Section 1 on file in the certifier office or as updated and attached to this affidavit.)