

**Certified Naturally Grown™
SUMMARY INSPECTION REPORT**

Farm Name: Colvin Family Farm
Grower(s) Name: Steve and Val Colvin
Inspector: Pamala Sarrell
Inspection Date: 9/22/06 Total On-Farm Inspection Time: _____

Please circle YES or NO and *initial* the line next to the question.

To the best of my abilities and based on my observations and interview with the grower(s), I feel confident in making the following declarations about the farm acreage the above grower wants to have listed as Certified Naturally Grown™:

I saw no evidence of prohibited insecticides, herbicides, Agree / Disagree _____
fungicides or prohibited chemical fertilizer use:

The farmer is not irrigating from a water source that I Agree / Disagree _____
know to be chemically contaminated:

The acreage under consideration looks to be Agree / Disagree _____
surrounded by an adequate buffer to protect from
chemical/spray drift contamination:

Farmer is careful to make sure that no genetically Agree / Disagree _____
modified or chemically treated seeds are used on this
acreage:

The Grower(s) demonstrates a commitment to Agree / Disagree _____
sustainable agricultural practices that seek to maintain
and increase the long-term fertility of soils and protect
and conserve water resources:

I certify that to the best of my abilities, observations, and based on my personal interview with the grower(s), I feel confident in recommending that the above listed grower(s) and farm

be included **not be included** (*please circle one*)

in the Certified Naturally Grown™ program.

Pamala Sarrell
Signature of Inspector

9/22/06
Date