## Certified Naturally Grown™ SUMMARY INSPECTION REPORT

Farm Name: Twin Greeks Farm & Garden	
Grower(s) Name: Sheri-Lynn & Gerald Te Velde	
Inspector: Lindy Ive/Stn	,
Inspection Date: <u>23/88/07</u> Total On-Farm Inspection Time: <u>2 Hour</u>	>
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 acre the above grower wants to have listed as Certified Naturally Grown:	age
I saw no evidence of prohibited insecticides, herbicides, fungicides or prohibited chemical fertilizer use:	A .
The farmer is not irrigating from a water source that I know to be chemically contaminated:	3
The acreage under consideration looks to be surrounded by an adequate buffer to protect from chemical/spray drift contamination:	20 *
Farmer is careful to make sure that no genetically modified or chemically treated seeds are used on this acreage:  Agree / Disagree	×
The Grower(s) demonstrates a commitment to sustainable agricultural practices that seek to maintain and increase the long-term fertility of soils and protect and conserve water resources:	A
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 lister grower(s) and farm	d
be included not be included (please circle one)	
in the Certified Naturally Grown" program.	
Lindy Iverson 23 aug 07	
Signature of Inspector Date	