

COMMON APPLICATION FORM FOR ORGANIC CERTIFICATION

1. Detailed information regarding Applicant:

Name of Firm:	
Unit Address where organic production programme is being run:	Address for correspondence:
Name and designation of contact person / Owner:	Email: Telephone no.: Fax No.
Person (s) responsible for Organic programme:	
Languages known: <input type="checkbox"/> English <input type="checkbox"/> Hindi <input type="checkbox"/> Others (Please specify)	

2. Type of Operation: (Please tick the operation for which you are interested to apply):

S.No.	Operation	Sub Category	Remarks
1.0	Crop production	<input type="checkbox"/> Estate / Individual operation	
		<input type="checkbox"/> Grower Group	
2.0	Processing and Handling	<input type="checkbox"/> Processor / Manufacturer	
		<input type="checkbox"/> Trader	
3.0	Livestock	<input type="checkbox"/> Milk (In Group/Individual)	
4.0	Wild Collection	<input type="checkbox"/> Plant and Plant products	
		<input type="checkbox"/> Honey	
5.0	Input approval	NA	
6.0	Bee Keeping	NA	

3. Standards for which certification is requested

- ☐ NPOP (which are considered equivalent to Council Regulation (EC) No. 834/2007 (Category A & F) and Swiss Organic Farming Ordinance for unprocessed plant products originating in India)
- ☐ NPOP

4. Do you have a copy of current organic standards?

- ☐ Yes ☐ No

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appl/OC/npop/rev0/001	00	22-02-2021	Quality Manager	Management Committee

Shivalik Natural Resources Management Society (SNRMS), Dehradun, Uttarakhand.

5. Have you ever been certified by any certification body?
☐ Yes ☐ No

If yes, give details of the certification agency as.

1. Name:
2. Initial date of certification:
3. Reason for changing the certification Body:
4. Latest status of the project:
5. NOC Approval Number (Attach NOC approval letter):
6. Expiry Date of current certificate (Attach Certificate):

7. Has your organization or Project been declined or refused for certification?
☐ Yes ☐ No if yes, please give details

Name & Signature of the person completing the form/ Authorized Signatory
Place:
Date:

1. The information contained in this form shall be treated as confidential between the applicant and SNRMS and you will be sent an Organic management Plan (OMP) based on your area of operation which has to be completely filled and returned to SNRMS for further certification Process.
2. Fee Structure is also attached with this form for ready reference.
3. Offer Quotation shall be raised on the basis of the filled application form.

**** Note: The other Public Information material (NPOP Chapter 4; 4.2.10) may be distributed to the public as per the requirements:**

1. Inspection & Certification procedure
2. Brochure (to public as and when required)
3. List of Certified Producer/handler (on written request)
4. Registration letter (to operators)
5. Fee structure (on written request)
6. Standards (photocopies on cost)
7. Training material (on cost)
8. Annual report (on request)

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