|  |  |  |  |
| --- | --- | --- | --- |
| **1** | **Name of Company**  |  | **Tracenet ID (if available)-** |
| **2** | **Legal Status of the Organization**  | ❑Sole proprietorship ❑ Partnership ❑ Private Limited ❑ Limited Liability Company ❑ Society ❑ Non-profit organization ❑others Mention: |
| **3** | **Company Registered Address** | **State:** **District:** **Country:** **Pin code:**  |
| **4** | **Company Corresponding Address** | **State:** **District:** **Country:** **Pin code:** |
| **5** | **Trading Unit Address with GPS Coordinates**  | **State:** **District:** **Country:** **Pin code:****Latitude:       Longitude:** |
| **6** | **GST Number**  |  |
| **7** | **FSSAI Licensee Number** |  |
| **8** | **Pan Card** |  |
| **9** | **Legal Person Name:**  **Email ID –** **Contact Number:** |
| **10** | **Responsible Person Name**: **Email ID:****Contact Number:** |
| **11** | **Project Location (How far from the nearest railway station and Bus station**  |  |
| **12. Certification required under standards:** ❑NPOP ❑ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **13. Certification History:****13.1**. This is your first application for organic certification: ❑ YES ❑ NO If No, please provide the following details.* Name of Previous Certification Body: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* You have ever denied for certification earlier: ❑YES ❑ No ❑ Not Applicable.

 If yes give details\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **14. List of the product to be certified:**

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| --- | --- | --- | --- | --- | --- |
| **S. No.** | **Product Name** | **Status of Products (Single / multi-ingredient)** | **Trading Activity** | **Estimation (MT)** | **Supplier name / Scope Certificate No.** |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
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| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |

If insufficient use separate sheet. |

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| **15. Details of Trading Unit:****15.1 Is conventional activity carried out in the unit (Trading of conventional products):** ❑ YES ❑ No **15.2 If YES then give the details how you maintain the integrity of organic products:** |
| **16- Unit Description**

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| --- | --- | --- | --- | --- | --- |
| **Unit Name** | **Handling/ Exportation**  | **Unit Address** | **FSSAI License**  | **Capacity of unit (MT)** | **Additional Certification (ISO 22000, BRCGS etc)** |
|  |  |  |  |  |  |
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**Remarks:**  |
| **17. Cleaning:** |
| **Mode of cleaning** | **Cleaning Agent Used** | **Frequency of cleaning** | **Remark**  |
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| **17. Provide details of the packing material:** |
| **17.1 Provide details of the size of packing and type of packaging (Manual or automatic used?** |

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| **18. Storage** |
| **Sr. No.** | **Address of storage unit** | **Type of storage. Own/ subcontracted** | **Capacity of storage (MT)** | **Is organic and conventional material stored in the same place?** | **If yes, type of separation measure** | **Frequency and type of cleaning measures** |
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| **19. Pest Control Measures for Factory premises and Storage places:** |
| **Type of pest** | **Control Measure** | **Frequency of Operation** |
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| **20. Transportation.** |
| **20.1 Is organic raw material or finished product transported in a separate and dedicated vehicle?**❑YES ❑ No  |
| **20.2 Are the vehicles cleaned prior to loading of organic material?**❑YES ❑ No  |
| **20.3 Can the lots be identified during transportation?** ❑YES ❑ No **What is the identification means?** |
| **20.4 Do you maintain purchasing record including transaction certificate, storage record and dispatch record for each and every material handled on site?** **20.5. Define traceability and stock reconciliation System:** |
| **20.6. Do every lot is accompanied with transportation document? (Bill, LR, Invoice, Label)**❑YES ❑ No  |

**21. Required Documents:**

* Aadhaar Card
* PAN Card
* Passport size photo
* Unit/Firm Registration document or Record of Rights, Tenancy and Crops (RTC)
* Valid Mobile No. of the License and Responsible person
* Valid Email Id
* FSSAI Licence
* Process Flow Chart
* Product details
* Factory / Storage Map
* Filled Vender List with vails suppler scope certificates.

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| **22. Declaration of the Operator:**I do hereby affirm that all information provided to Imperial Bio Solutions Pvt. Ltd. (IBSPL) is true and accurate. I affirm my commitment to meet the respective Organic Standards as indicated in section 1. If the organic production rules are violated, I agree to be sanctioned according to the IBSPL Scale of Sanctions. If major changes in the organic operations occur, I will inform IBSPL immediately. I agree not to release any products resulting from these changes until the certification body has notified me accordingly. I agree to keep a record of complaints about my organic activities, take appropriate action with respect to such complaints and document the action taken.**Name of Client :****Position In the Organisation : --------------------------------** **Date and Place : Seal & Signature of Client** |
| **23. This part filled by Imperial Bio Solutions Pvt. Ltd. (IBSPL):**Review of the application and reviewer’s remarks1. The certification requirements have been defined clearly: Yes ❑ No ❑
2. Any differences between applicant and IBSPL about certification. procedure have been cleared: Yes ❑ No❑
3. IBSPL can perform the cert. service (incl. aspects like domi­cile, language, and any other specific requirements) and application is accepted: Yes ❑ No ❑
4. Date of receiving the Application :

**Application review Remarks :****Name of the Reviewer** **…………………….** **Date and place : Signature and seal of reviewer** |