Date:

**Product conforming to:**

NPOP/EU: National Programme for Organic Production,

**Export:** Country:…………………………..

**COI** : Individual Producer ICS Processor Trader Wild

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name licensee: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| NPOP Scope Certificate Number | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Exporter:  (Name, Address & E-mail) | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Producer/Processor:  (Name, Address & E-mail) | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Importer:  (Name, Address & EORI number) | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Buyer's CB/Certifier  (Name and E-mail) | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| First Consignee in the union:  (Name, Address) | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Country of clearance/Point of Entry:  (Name and Address) | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Country of origin: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Country of export: | | | | | | | | | |  | | | | | | | | | Country of destination: | | | | | | | |  | |
| Issued NPOP TC number: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| IEC No. | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Invoice No. and date | | |  | | | | | | | Invoice Value (in dollars/other units): | | | | |  | | | | | | Invoice Value in INR: | | | | | |  | |
| Lot/Batch No/s.: | | | | |  | | | | | | | | | | | | **FOB Value -** | | | | |  | | | | | | |
| Product Name: | | | |  | | | | | | | | Trade Name  of Product: | |  | | | | | | | | | | CN Code: | | | |  |
| If Processed/Wild Collection product: | | | | | | | Name of Raw Material: | | | | | | | | HS Code: | | | | | | | | | | | Quantity(MT): | | |
| Sourced Date: | | | | | | Processing Unit/Wild Collection Area Name: | | | | | | | | | | | | | | Recovery% from Raw Material: | | | | | | | | |
| Has lab analysis done for the representative sample? | | | | | | Yes | | | | | | | | | | | | | | No | | | | | | | | |
| Enclose lab analysis report. | | | | | | Yes | | | | | | | | | | | | | | No | | | | | | | | |
| Production/Processing year: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Status | | | | | | | | | | NPOP/EU:  organic in conversion to organic | | | | | | | | | | | | | | | | | | |
| Label: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| EU | Reference to Organic Production Method ,  Producer Name, Exporter Name,  India Organic Logo, USDA Seal , ADITI Logo Batch/Lot Number  Net Weight  Product of India, ADITI Licensee Number (IN-ORG-01),  Non EU product | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Gross and net mass/Wt. (Kg) | | | | | | | | | | Gross- Net- | | | | | | | | | | | | | | | | | | |
| Packed or bulk | | | | | | | | | | Packed  ; bulk , packed in units of : (Wt. X No’s)…..................... | | | | | | | | | | | | | | | | | | |
| Type of Packing: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Mode Of Transport: **Air**  **Ship:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Air** | | | Flight No.: | | | | | |  | | | | | | | | | Flight Date: | | | | | | |  | | | |
| Airway Bill No.: | | | | | | | | | | | | | Airway Bill Date: | | | | | | | | | | Airway Container No.: | | | | | |
| **Ship:** | | Vessel No.: | | | | | | |  | | | | | | | Vessel Name: | | | | | | |  | | | | | |
| Vessel Date: | | | | | |  | | | | |  | | | | | B/L No: | | | | | | |  | | | | | |
| Vessel Container No.: | | | | | | | |  | | | | | | B/L Date: | | | | | | |  | | | | | | | |
| Shipping Bill No: | | | | | | | |  | | | | | |  | | | | | | |  | | | | | | | |
| **Seal number:** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Send original certificate to: | | | | | | | | | | exporter  importer  first consignee  other : | | | | | | | | | | | | | | | | | | |
| Send original certificate by: | | | | | | | | | | Registered post  courier | | | | | | | | | | | | | | | | | | |
| Payer of the TC with Address (Rs. 2500/-) | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |

**This form has been completed truthfully and to the best of my knowledge. I have conveyed all the information required and I have also enclosed copies of:**

**🞏 Invoice 🞏 Label/s 🞏 Packing List 🞏 Transport documents 🞏Source TC involved**

Date:

Place: Name and signature client/authorised person:............................................