1/2

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|  | [ ]  New Application, [ ] Annual Renewal Application-Certified by ADITI since ­­­­­­­­­­­­­­­­­­Year: \_\_\_\_\_\_\_\_\_[ ]  Amendment, [ ]  First time with ADITI (CB Transfer)  |
| **1** | **Name of Individual (As per PAN)** |       |
| **1a** | **Company Name (If any)** |  |
| **1b** | **Legal Status of the Company/Indivual** | [ ]  Sole proprietorship [ ]  Partnership [ ]  Limited Liability Company (LLC) [ ]  Limited Liability Partnership (LLP) [ ]  Corporation [ ]  Non-profit organization [ ]  Private limited Company [ ]  Others Mention: |
| **2** | **Postal address** |
| City/Town /Village:  | Taluka/Mandal: District:       |  State:        |
| Postal Code:       | Country:       |  |
| **Contact Number:**       | **Email:**       | **Website:**       |
| **2a** | **GPS Coordinates of the area** (in decimal degrees) | Latitude:      Longitude:      *Use a GPS-enabled device or mobile app to record accurate coordinates with at least 4 decimal places. (e.g., latitude: 12.9716, longitude: 77.5946)* |
| **3a** | **Name of the responsible Person for signing the contract with ADITI (**details will be used in tracenet eportal registration) | NameDesignation: **Contact Number: email Id:**   |
|  | *The Login credentials generated through tracenet will be sent to the Contact Person Phone number and email.* |
| **3b** | Responsible person  | Name:Designation:Contact Number: Email Id:  |
| **4** | **Goods and Service Tax (GST) Number (if any):**  |
| **5** | **Wild collected Product List, Details of harvested quantities, resource assessment etc., Fill Form Species Spreadsheet-F 4.3.3.1 and Form 4.3.3.3** |
| **6** | **Wild collection-Site details (Attach Map)** |
| **6a** | **Details of the Collection site**  |
|  | **Sl. No.**  | **Collection site details (Name/ Location-State, District etc.)**  | **Total approximate collection area (km2):**  | **No. of collectors:** | **No. of local wholesalers:** |
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|  |  |  |  |
| **6b** | Distance from collection area to address given under (2) above: Total area in sq. km |
| **6c** | Any Processing activity (e.g., freezing, drying, heating, etc.) involved? No [ ]  Yes [ ]  Mention Activities: |
| **6d** | Location of processing units: |
| **6e** | Wild species-Collectors List-Fill and Attach Aditi Form 4.3.3.6 (Ref. EU regulation 848/2018 Annex II 2.2) |
| **7** | Standard(s) for which you wish to become certified:[ ]  **NPOP**, Government of India https://npop.apeda.gov.in/sites/default/files/2024-10/NPOP\_Eight\_Edition\_2024.pdf[ ]  **NOP**, for the organic US-market: <http://www.ams.usda.gov/nop/NOP/standards.html>[ ]  **COS,** for the Canada Market: <https://www.inspection.gc.ca/organic-products/eng/1526652186199/1526652186496> [ ]  **COS** with **U.S. Organic Equivalency Arrangement:** [https://inspection.canada.ca/organic- products/equivalence-arrangements/uscoea-overview/eng/1328068925158/1328069012553](https://inspection.canada.ca/organic-%20products/equivalence-arrangements/uscoea-overview/eng/1328068925158/1328069012553)[ ]  **Aditi Private Std.:** <http://www.aditicert.net>[ ]  **Regulation (EU) 2018/848** [EUR-Lex - 32018R0848 - EN - EUR-Lex (europa.eu)](https://eur-lex.europa.eu/legal-content/en/TXT/?uri=CELEX:32018R0848) [ ]  **Others:** specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **8** | Do you have a copy of the standard(s) according to which you request certification? Hardcopy: [ ]  Access through the internet: [ ]  No copy: [ ]  |
| **9** | Last year's Organic turnover: Quantity      MT, Currency       |
| **10** | Have the **above-mentioned units/products** ever been inspected and/or certified before in any country? If so, Please enclose all information regarding the previous CB, inspection(s) and/or certification(COR, NPOP,USDA NOP, EU, JAS etc ), including reports of findings etc.[ ] No, NA [ ] Yes, Details:       What was the reason for the termination of the contract concerning the inspection and/or certification mentioned above? Details:       |
| **11** | **Required Documents: Legibly seen and Size within 1 MB, Format Jpeg/pdf**[ ]  PAN Card[ ] Aadhaar Card of Authorised or Contact Person[ ]  Passport size photo of Authorised or Contact Person[ ]  Permit to collect the wild forest products (Forest Department/Revenue Department)(Including Detail/s: Name of the Forest Circle, Name of the Forest Division, Name of the Forest Range, Name of the Forest Beat, Total Area (Ha) of the wild collection and MOU/Forest permit date (From and to)[ ]  Forest License No. with validity[ ]  Business Registration Documents[ ]  Authorisation Letter (if authorised person is different from Company Owner/Partner)[ ]  Valid Mobile No. of the Responsible person and email Id (Tracenet Login details will be sent to this)[ ]  Species spreadsheet – (Aditi document No. F- 4.3.3.1)[ ]  Resource assessment form- (Aditi document No. F- 4.3.3.3)[ ]  Wild species-Collectors list-(Aditi document No. F- 4.3.3.6)[ ]  Map of Collection area (preferably 1:25.000 or 1:50.000, not smaller than 1:250.000)-Forest map with Geo coordinate of the collection area approved by forest department[ ]  In case of private forest, RTC copy of the forest is required[ ]  Agreement with local operator**Note:** 1. “The certification process involves the following steps: Application submission → Preliminary review → Cost estimate → Client approval & payment → Contract execution → Registration → Submission and review of the Organic Management Plan (OMP) → External inspection → Corrective and Preventive Actions (CAPA) where applicable → Certification decision (grant or refusal) by the Certification Committee.”2. Please provide all applicable details to facilitate accurate cost estimation for inspection and certification. |
| **12** | **Operator declaration: Declaration on the following details as per EU requirements**[ ]  I Will provide all the description of the activities performed in applied unit for organic and in-coversion products**[ ]** I hereby declare that all the details provided in this document are true and with the latest information on implementation of organic management plan**.****[ ]** I hereby accept to transfer the controlled file in the case of change of control body.**[ ]** I hereby accept in the case of withdrawal of organic production, the CB to maintain the control file for at least 5 years. **[ ]** I hereby accept for the exchanges of information among those CBs in the event that subcontractors are controls by different CBs.[ ]  I hereby declare that I/ group of operators have not been certified by any other CB in relation to activities carried out in the same country regarding the same category of the products at different stage of production, preparation, or distribution. |

 Date:       Signature of owner/authorized person and Company stamp:

 2/2

 **For Office use only**

**This part has to be filled in by ADITI!** Examination of the application

|  |  |
| --- | --- |
| **1** | The certification requirements have been defined clearly: Yes [ ]  No [ ]  |
| **2** | Any differences between applicant and ADITI about cert. procedure have been cleared: Yes [ ]  No [ ]  |
| **3** | ADITI is able to perform the cert. service (incl. aspects like domi­cile, language, and any other specific requirements) and application is accepted: Yes [ ]  No [ ]  |
| **4** | Comments (Mandatory Section):       |
| **5** | Application Status: [ ]  Accepted [ ]  Not accepted |
| **6** | If application is not accepted, state the reasons there of : |

Date:       Date:

Reviewed by: Approved by: