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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)** | | *(Note: Certificate will be issued in this name)* | | | | Father/Husband Name: | |
| **1a** | **Company Name (if any)** | |  | | | | | |
| **1b** | **Legal Status of the Company** | | Sole proprietorship  Partnership  Limited Liability Company (LLC)  Limited Liability Partnership (LLP)  Corporation  Non-profit organization others Mention: | | | | | |
| **2** | **Postal address of above:**  City/Town/Village: Taluka/Mandal: District: State:  Postal Code: Country: | | | | | | | |
| **Contact Number: Email: Website (if any):** | | | | | | | |
| **2a** | **GPS Coordinates of the unit**  (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)* | | | | | |
| **3** | **Responsible Personnel:** | | | | | | | |
| **3a** | **Responsible Person for signing contract with ADITI** (details will be used in tracenet eportal registration) | | | | Name:  Designation: : NA    **Contact Number: email Id :** | | | |
| *Note : The Login credentials generated through tracenet will be sent to the above mentioned contact number and email.* | | | | | | | | |
| **3b** | **Name and Contact Number of Farm responsible:** | | | | Name:  Designation:  **Contact Number: Email Id:** | | | |
| **4** | **Goods and Service Tax (GST) Number (if any):** | | | | | | | |
| **5** | **Crop Production** | | | | | | | |
| **5a.** | **Farm Details:** | | | | | | | |
|  | **Farm Address:**  City /Town Village: Taluka/Mandal: , District: , State:    Postal Code: | | | | | | | |
| Number of farms:       Total area (Ha):       Organic Area (Ha)  Distance from farm(s) to address given under (2) above: ­--------km | | | | | | | |
| **5b.** | **Cropping Pattern:** | | | | | | | |
|  | Annex 4.5.5.6A : Complete Cropping Details-Individual or details with similar data as attachment | | | | | | | |
|  | **Crop** | **Main/Inter crop** | | **Hectares** | | | | **Approx. quantity harvested per year** |
|  |  |  | |  | | | |  |
|  |  |  | |  | | | |  |
|  | **Annual Turnover (MT):** | | | | | | | |
|  | **Annual Turnover (Currency):** | | | | | | | |
| **5c.** | **Any on farm processing:** | | | | | | | |
|  | **Crop/Product** | | | **Processing activity** | | | | **Approx. processed quantity** |
|  |  | | |  | | | |  |
|  |  | | |  | | | |  |
| **6** | Complete F 4.5.1.1 for Retroactive Recognition of Conversion Period (If Applicable) | | | | | | | |
| **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)  **Bio Suisse,** <https://www.bio-suisse.ch/>  **Naturland,** https://www.naturland.de/en/naturland/what-we-stand-for/quality/naturland-standards.html  **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, Mention: | | | | | | | |
| **8** | Do you have a copy of the standard(s) according to which you request certification?  Hardcopy:  Access through the internet:  No copy: | | | | | | | |
| **9** | 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: | | | | | | | |
| **10** | Emudhra E-Sign Registration Completed | | | | | Yes  No | | |
| **11** | **Required Documents: Legibly seen and Size within 1 MB, Format Jpeg/pdf**  Aadhaar Card of of Authorisedor Contact Person  PAN Card  Passport size photo of Authorisedor Contact Person  Farm Map  Farm Ownership record in Business Name (If applicable)  Tenancy and Crops (RTC)/ Records of Rights/Land Records/Patta copy (Individual)  Form 4.5.5.6 A cropping details (Format as attached) or with similar data.  Valid Mobile No. of the Responsible person and email ID (Tracenet Login details will be sent to this)  Last year's harvest details (Applicable for annual renewal)  Authorization letter if the application is signed by an employee of the company  **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 a 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 the exchanges of information among those CBs if subcontractors are controlled by different CBs.  I hereby declare that I/ group of operators have not been certified by any other CB concerning activities carried out in the same country regarding the same category of products at different stages of production, preparation, or distribution. | | | | | | | |

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

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**For Office use only**

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

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| --- | --- |
| **1** | The certification requirements have been defined clearly: Yes  No |
| **2** | Any differences between applicant and ADITI about certification procedure have been cleared: Yes  No |
| **3** | ADITI is able to perform the certification 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: