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APPLICATION FORM FOR INPUT APPROVAL

1.	Name & address of the company/individual/firm:	
	Village:	City/Town :
	District:	State:
	Pincode:	Phone No.
	Fax No.:	Email ID:
2.	Legal status	<input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Society <input type="checkbox"/> Non Governmental Organization (NGO) <input type="checkbox"/> Limited Company <input type="checkbox"/> Others _____
3.	Registration No.:	
4.	Details of responsible person for input manufacturing section	Name: Designation: Contact No.: Email ID:
5.	Project Head	: <input type="checkbox"/> Owner <input type="checkbox"/> Partner <input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> Manager <input type="checkbox"/> Other
6.	No. of production units for input manufacturing and their locations:	
7.	Annual turnover of the company:	
8.	Have you applied for input approval earlier	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes; please submit copies of previous certificates and inspection report)		

9. Did you have any Non Conformity (NC) from last year certification Yes No
If yes, provide the details of Non-conformity

10. Input approval as per the standard: NPOP

11. Do you have copy of NPOP Standards Yes No

12. Type of operation to be certified

- | | |
|---|--|
| <input type="checkbox"/> Manure from Animal husbandry | <input type="checkbox"/> Compost production |
| <input type="checkbox"/> Industrial waste | <input type="checkbox"/> Laboratory for bio-control agents |
| <input type="checkbox"/> Bio-fertilizers | |
| <input type="checkbox"/> Others _____ | |

13. Registration details

Unit Name	License No.& validity (FCO/Other)	Additional Certification (ISO, HACCP, OTHER)	Installed Capacity (MT / Day)	Annual Estimated Production (MT)	Address (in MT)

14. List of products to be certified :

S. No	Name of Input	Brand Name	Product Category (Manure/Bio-fertilizer/ Bio-pesticide /Herbal preparation)	Sub Category (Vermin-compost/ Biodynamic Preparation/ NAEDAE Compost)	Validity period of Product

Declaration

I hereby declare that all the above information given in this form is true to the best of my knowledge.

Place:

Date:

Signature of Operator

Enclosures:

1. PAN& Aadhaar card of operator
2. Legal document for ownership
3. Registrates certificates
4. FCO/Other Certificate
5. Quality Manual
6. List of Product
7. List of Machinery/ Equipment.
8. Flow chart of the processing
9. List of ingredients.
10. Source of raw materials.
11. Composition of Products
12. Chemical analysis or Test Report (if any)
13. MSDS Sheet
14. Annual and per day capacity (in MT)
15. Site plan, Location Map & Map of production site.

For office use only

1. Date of receipt :
2. Registration No. allotted :
3. Allotted to Organic inspector :
4. Verified by_____

Signature of Registration officer

Signature of Quality manager