

**APPLICATION FORM FOR ORGANIC CERTIFICATION  
GROWER GROUP**

**Date of Application -:**

| S. No | Particulars  | Details  |
|-------|--|--|
| 1     | <b>Name of the Grower Group</b><br><br><b>No. of farmers in the Group</b><br><br><b>Villages covered</b><br><br><b>Distance between the villages</b> |  |
| 2     | <b>Legal Status of the Grower group</b>  | Registered Society<br>Cooperative (including PACS/ FPO)<br>FPO/FPC under Companies Act |
| 3     | <b>Name of authorized Person (ICS Manager)</b>   |  |
| 4     | <b>Address with Geo coordinates</b>  |  |
|       | Village<br>Taluk<br>Distric<br>t State<br>Postal Code:   |  |
|       | <b>Mobile No. (of ICS Manager)</b>   | <b>Email:</b>  |
|       | <b>GPS Location of ICS office</b><br><br><b>(Distance from the villages covered)</b>   | Longitude<br>Latitude  |
| 5     | <b>ICS Managed by:</b>   | <b>Self</b>  |
|       | <b>If service provider, then please fill the following:</b>  |  |
|       | <b>Provide a copy of Contract agreement</b>  |  |
|       | <b>Address of Service provider</b><br><b>Village/town</b>  |  |

|   |  |  |  |         |
|---|--|--|--|---------|
|   | <b>District:</b><br><b>Postal Code:</b>            |  |  |         |
|   | <b>Mobile No.</b><br><b>Email</b>                  |  |  |         |
| 5 | Language   | Hindi  | English                                  | Other   |
|   |  | Remarks if any:  |  |         |
| 6 | Production System                                  | Grower group<br>Total area of Cultivation (Ha):<br>Total area offered for organic certification:<br>Number of Farmers in grower group:<br>(attach list of farmer with land details as separate sheet)<br>Total number of farmers having less than 4 ha area:<br>Total number of farmers having equal or more than 4 ha area:<br><br>Location of farms: Village, District with Distance<br><br>GPS location of farms                      Longitude.....<br>Latitude..... |  |         |
|   | Crops  | Area (Hectares)  | Approx. quantity harvested per year (MT) |         |
|   | Main Crop  |  |  |         |
|   | Intercrop  |  |  |         |
| 7 | Standard(s) for which you wish to become certified | National Programme for Organic Production (NPOP)   |  |         |
| 8 | Do you have a copy of the NPOP Standard?           | Please tick the below option   |  |         |
|   |  | Hardcopy   | Access through internet                  | No copy |

|           |  |   |
|-----------|--|---|
| <b>9</b>  | <b>Have the above mentioned farms/farmers ever been inspected and/or certified before? If so,</b>  | Please enclose all information regarding the inspection(s) and/or certification(s), including reports of findings etc.<br>What was the reason for termination of the contract with regard to the inspection and/or certification mentioned above? |
| <b>10</b> | <b>Have you been certified previously for any scope or any other certification body/agency under NPOP? If yes kindly provide details</b> |   |

### Declaration

The above given Information on this form along with supporting documents is true and correct to the best of my knowledge:

### Supporting Documents

1. Legal / Registration Documents
2. Proof of office location
3. Overview map
4. Route map
5. PAN and identity documents
6. Organic system plan
7. Authorized signatory
8. Approved farmer list(AFL) with details

Signature of the applicant

Place:

Date:

|   |                            |
|---|----------------------------|
| APSOPCA/ 01.b Application form for Grower Group | Revision number: 00        |
|   | Revision date : 31.05.2025 |

**This part has to be filled in by CB**

Date of receipt of application:  
Date of disposal of application:  
Status Accepted/ Not accepted:

|          |   |
|----------|---|
| <b>1</b> | The Certification requirements have been defined clearly : Yes /No  |
| <b>2</b> | Any differences between applicant and CB certification procedure have been cleared : Yes/No   |
| <b>3</b> | CB is able to perform the certification service (Incl. aspects like domicile, language and any other specific requirements) and application is accepted: Yes/No |
| <b>4</b> | Comments if any .....   |
| <b>5</b> | If application is not accepted, state the reasons there of :  |

Signature of the CB

official: Place:

Date: