APSOPCA/ 02.d Renewal Application Form for Trader

Revision number: 00

Revision date : 04.06.2025

## RENEWAL APPLICATION FORM FOR TRADER

SECTION 1: General I	nformation				
Name of company or fir	m				
Address:					
Name as required on					
certificate:					
Pin Code					
Mobile					
Email ID					
Section 2: Contact Per	rson & Other D	etai	1(s)		
Name of Contact Person	ı				
Address:					
Designation					
Mobile					
Email ID					
Aadhaar No.					
The certification accord	ing to following		NPOP 🗌	Others $\square$	
standards is requested:					
Please list all locations	where the				
processing, and stocking	g of products				
prior to sales:					
1.4 Short description of	the				
company:(include backs	ground and				
activities of the compan	y, products to	be			
certified, quality assura	nce system				
followed if any,)					
1.5 Organizational char	t:		(Use additi	onal sheets if n	ecessary)
Please draw an organiza	ational chart of				
your company with des	ignations of all	the			
people involved:					
2.1 Information on su	ppliers:	1			1
Name of supplier	Contact	Pro	duct	Certification	Certified as per
	number	sou	ırced	status	NPOP/Others
(Use additional sheets i	f necessary)				
Are relevant, valid organ	nic certificates a	avail	able for all t	the products?	]Yes
□No					
2.2 Products					

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List o	of products you want to label an	d market as organic:		
S1.	Name of the product	Quantity (with units)	Remarks	
No.				
1				
2				
3				
<u>4</u> 5				
6				
_	l ou trade conventional products als	20:	□Yes	□No
	, name the products traded as con			шио
II yes	, name the products traded as cor	rveirieilai		
,	se be aware that all new products	have to be informed to		
APSO	,			
	ubcontracted activities:		□Yes	□No
_	ou subcontract any steps (e.g. pac	king & labelling) to other		
comp	anies / individuals?			
If was	, what are these activities? Please	list all of thom with		
-	, what are these activities? Flease of details on a separate sheet:	nst an of them with		
	ou act as subcontractor for other of	romnanies?	□Yes	□No
Doye	a det as subconfidetor for other c	ompanies.		
If yes	, please give details:			
	leaning			
	are the methods of cleaning the u	unit? List the cleaning		
agent	s used.			
2.5 D	oolzing			
2.5 Pa	acking:			
Pleas	se give a list of packaging material	s used		
1 Icas	se give a not of packaging material	as asca.		
2.6 S	torage:		□Yes	□No
Do yo	ou have separate storage facility fo	r organic and		
conve	entional products?			
_	ou store products anywhere outsic	le your company?	□Yes	□No
Pleas	e give details of external storage:			
Dogge	ribe methods used to control pests	in violin atomoro anoso?		
Desci	tibe methods used to control pests	s in your storage areas?		
2.7 P	revention of co-mingling			
	condition of our minighing			
Desc	ribe how commingling of conventi	onal products with		
	ied products are prevented from re	-		
	al sales.			
$2.8\ \overline{\mathrm{D}}$	ocumentation:		□Yes	□No

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Do you keep proper records/documentation for all activities		
undertaken?		
Are all details of purchase (delivery notes, bills / invoices etc.)	□Yes	□No
available?		
Is there a system in place for verification of incoming goods	□Yes	□No
(tampering)?		
Do you keep records for all outgoing goods?	□Yes	□No
How do you assure individual lots traceable back to the origin		
it?		
Please indicate with which documents the product flow can be		
verified in your company		

## Declaration of the responsible person:

I declare that -

- I agrees to comply with the requirements for certification and to supply any information needed for evaluation of products to be certified
- I do hereby affirm that all information supplied to APSOPCA is true and accurate. I affirm my commitment and responsibility to know the respective Organic Standards as indicated in section 1.3 and also keep updated records for all the activities.
- If the organic standards are violated, I agree to be sanctioned according to the APSOPCA Scale of Sanctions.
- If major changes in the organic system occur, e.g. any change in suppliers, products etc., I will inform APSOPCA immediately. I agree not to release any products resulting from these changes until the certification body has notified me accordingly.
- I agree to keep a record of complaints about the activities, take appropriate action with respect to such complaints and document the action taken.

Place:	
Date:	

Name & Signature of the operator

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<sup>\* -</sup> Please note that the certificate will not be issued without receiving the suppliers list with required details.