APSOPCA/ 02.d Renewal Application Form for Trader

Revision number: 00

Revision date : 07.02.2023

RENEWAL APPLICATION FORM FOR TRADER

SECTION 1: General Information								
Name of company or fire	m							
Address:								
Name as required on								
certificate:								
Pin Code								
Mobile								
Email ID	0.011 -							
Section 2: Contact Per		etai	il(s)					
Name of Contact Person	1							
Address:								
Designation								
Designation Mobile								
Email ID								
Aadhaar No.								
The certification accord	ing to following		NPOP	Others				
standards is requested:			111 01					
Please list all locations								
processing, and stockin								
prior to sales:	8 F							
1.4 Short description of	the							
company:(include background and								
activities of the company, products to be								
certified, quality assurance system								
followed if any,)								
1.5 Organizational char			(Use additi	onal sheets if n	ecessary)			
Please draw an organiza								
your company with des	ignations of all	the						
people involved:								
2.1 Information on su			1 .	O	0 .: 0 1			
Name of supplier	Contact		duct	Certification	Certified as per			
	number	sot	ırced	status	NPOP/Others			
/TT 1.1141 1 . 1	<u>(</u>							
(Use additional sheets i	• • • • • • • • • • • • • • • • • • • •	. 11	-1-1 - C11 <i>4</i>	1 1	177			
Are relevant, valid organic certificates available for all the products? □Yes								
□No								
2.2 Products								
List of products you want to label and market as organic:								
Approved by: Director,	APSOPCA				Page 1 of 3			

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Sl.	Name of the product	Quantity (with units)	Remarks	
No.				
2				
3				
4				
5				
6				
	u trade conventional products als	80:	□Yes	□No
If yes, name the products traded as conventional				
	se be aware that all new products	have to be informed to		
APSO	,			□NI -
	ubcontracted activities:	1-: 0 1-111: 1	□Yes	□No
Do you subcontract any steps (e.g. packing & labelling) to other companies / individuals?				
Comp	anics / muividuais:			
If ves.	, what are these activities? Please	list all of them with		
	ct details on a separate sheet:			
	u act as subcontractor for other of	companies?	□Yes	□No
	please give details:			
2.4 C	leaning			
	are the methods of cleaning the used.	anit? List the cleaning		
2.5 Pa	acking:			
Pleas	se give a list of packaging material			
2.6 St	torage:		□Yes	□No
_	u have separate storage facility fo			
conve	ntional products?			
Dorro	u atama mmadulata anyuvih ama alutaid	lo violin componis?	□Yes	ПМо
	u store products anywhere outsic e give details of external storage:	ie your company?	⊔ res	□No
Ticaso	give details of external storage.			
Descr	ibe methods used to control pests			
2.7 Pr	revention of co-mingling			
certifi to fina	ribe how commingling of conventi ed products are prevented from re al sales.	-		
2.8 D	ocumentation:		□Yes	□No
	u keep proper records/document taken?	ation for all activities		

Approved by: Director, APSOPCA Page **2** of **3**

Are all details of purchase (delivery notes, bills / invoices etc.) available?	□Yes	□No			
Is there a system in place for verification of incoming goods (tampering)?	□Yes	□No			
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					
* - Please note that the certificate will not be issued without receivith required details.	eiving the si	appliers list			
Declaration of the responsible person: I declare that –					
 I agrees to comply with the requirements for certification information needed for evaluation of products to be certified. I do hereby affirm that all information supplied to APSOP I affirm my commitment and responsibility to know Standards as indicated in section 1.3 and also keep up activities. 	ied CA is true a the respec	and accurate.			
 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 act action with respect to such complaints and document the 					

APSOPCA/ 02.d Renewal Application Form for Trader

Place: Date:

Name & Signature of the operator

Revision number: 00

Revision date

: 07.02.2023

Approved by: Director, APSOPCA Page **3** of **3**