



## APPLICATION FORM FOR ORGANIC INPUTS APPROVAL

Doc No: 5 / Template No: 05

Sub: Certification  
templates

Ref : UHF CRC

Rev no:01

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S.No	COMPANY DETAILS
1	Name of the company/Organization :
2	Name of the responsible person :
3	Address for communication :
4	Address of the production unit :
5	Telephone No : Email Id : Fax :
8	Legal status of the company :
9	Are you following any Quality Management System (Y/N): (If yes mention which standards you are following)
10	Are you aware of UHF Organic Standards : Yes <input type="checkbox"/> No <input type="checkbox"/>

**Note: Enclose following documents to this application**

- A copy of company profile.
- A copy of company license.
- A copy of the quality management certificate (if available).
- Submit complete documentation describing all ingredients (active and inactive),
- Manufacturing Processes, process control information, testing, and other information as required by the material evaluation program.

Registration Form to Commercial Organic Inputs Approval	01	25 <sup>th</sup> Sep.' 2016	Quality Manager	Managing Director
Certification Templates	Revision	Date	Issued	Approved



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### DETAILS OF THE PRODUCTS

10	Total number of products to be approved:						
	Product will be used as? (mark in appropriate Colum)						
	S.No	Product name	fertilizer	Liquid fertilizer	Growth promoter	pesticide	herbicide
11	Product composition:						
	S.no	Trade name	Active component(s)	Inert components			

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Give the source of raw material: (tick below the appropriate source)

S.No	Product name	Plant Source	Animal Source	Microbial	Mineral

Product source:

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S.no	Product name	Estimated production capacity (per annum)	Packaging sizes you are selling

14 Give the list of all compounds using in the production of each product:

S.No	Product name	compounds

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Give the methods are using in the manufacturing:

S.No	Product name	Chemical	biological	mechanical	other

- Enclose the flow chart of the steps involved in the production of the each product

	Do you have license to sell all the above products(Y/N)? (Enclose license copy)
	Are there any Non Organic Inputs being produced :    Yes <input type="checkbox"/> No <input type="checkbox"/>  If Yes, is there separate storage area for the production compounds and final product to prevent co-mingling:    Yes <input type="checkbox"/> No <input type="checkbox"/>
	Are you storing any synthetic nitrogen compounds in the production unit: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes how far you are storing synthetic nitrogen compound from the organic compounds:
	Are any activities subcontracted to any other Company/ Person :    Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, enclose the details of subcontracted Company/Person & also enclose the Subcontract
	Give a brief note on Sanitation procedures adopted & list the materials used in Sanitation: (Annexe)
	Where do you market your Inputs produced  (a )Local <input type="checkbox"/>

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(b) National

(c) International

Have the inputs been Approved by any other Certification Body earlier: Yes  No

### *Declaration by the Applicant:*

I confirm that all information given in this form is true

I shall provide UHFCRC with any required information or products at any time so as to check compliance with the required standards.

*Date:*

*Signature of the Operator*

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