



APPLICATION FORM FOR ORGANIC INPUTS APPROVAL

Doc No: 5 / Template No: 05

Sub: Certification
templates

Ref : UHFCRC/ Hygienic World

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 UHFCRC/HW 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	15 th Feb.' 2017	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

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Product source:

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)

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	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"/> (b) National <input type="checkbox"/> (c) International <input type="checkbox"/>
	Have the inputs been Approved by any other Certification Body earlier: Yes <input type="checkbox"/> No <input type="checkbox"/>

Declaration by the Applicant:

I confirm that all information given in this form is true

I shall provide UHF CRC/HW 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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