

Application for Approved Organic Input Certification

Check all that apply	Proce	ssor	U Wholesaler	🗆 Reta	iler 🗆 Im	porter	Packer
Applicant(s) legal name in full, appear on the certificate. For example company, partner sole trader name.							
Trading As							
Brand Names							
ABN							
Postal Address							
Location/s of facility							
Phone				Fax			
Mobile				Website			
Email address							
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Total % of Approved Organic Input Production Approximate Approved Organic Input Utrover (\$) Processing rates eg volumes of production, rates etc Outline your intended Approved Organic Input production Operational Days of Week Contact Person Name Email Address Phone Mobile Exporting – If yes list possible destinations below. You cannot export to the EU. Briefly describe any neighbouring activities which may impact adversely on your ability to maintain the approved organic input integrity of the products you intend to produce.							
turnover (\$) Processing rates eg volumes of production, rates etc Outline your intended Approved Organic Input production Operational Days of Week Contact Person Name Email Address Phone Phone Mobile Exporting – If yes list possible destinations below. You cannot export to the EU. Briefly describe any neighbouring activities which may impact adversely on your ability to maintain the approved							
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Include all products that will be included under the scope of your certification. All products to be labelled Approved Organic Input will need to have the formulations and labels approved by OFC prior to production and sale of product.							
Approved Organic Input Name Description for manufacturing processing and Volume synapted to							
Approved Organic Input Name Decription for manufacturing, processing and preparation. Volume expected to be processed							
Image: Constraint of the second se							

PREVIOUS AND/OR OTHER APPROVED ORGANIC INPUT CERTIFICATION

If your operation is currently certified by another organisation please advise the following

If your operation is currently certin	ed by another organisation please advise the following
Certifier Name	
Cartification Number /a	
Certification Number/s	
Expiry Dates	
certifier listed above.	ments or information relating to the certification of my operation from the
certifier listed above.	
If you have been but are no longer	certified with another organisation, please include the following
Certifier Name	certified with another organisation, please include the following
Old Certification Number/s	
Contification overing data	
Certification expiry date	
Why are you no longer certified	
Any outstanding corrective actions or issues	
actions of issues	
Other previous certifications	

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Declaration:

I _______, hereby make an application to become a client of The Organic Food Chain Pty Ltd (OFC) for the purpose of becoming a certified Operator. I have read and understand the *OFC Certification Policies For Operators*. I agree to abide by the requirements of the OFC & the *National Standard for Organic and Bio-Dynamic Produce*.

I provide the above information on the understanding that it is confidential and will only be used by OFC for the purposes of this application. I understand that if the information I have supplied is incorrect, incomplete or untrue my application will be null and void.

I also grant permission for the OFC to the release of confidential information as required to Third-Party Government and accreditation authorities.

I understand that it is a requirement of certification that my certification details are made publicly available on the OFC website.

Upon acceptance of this application, the applicant will formally be in a contract with OFC for Certification Services.

The applicant will at all times disclose to OFC information that pertains to their certification and to their business structure. EG: Name, Address, Phone,etc

Operators can be subject to unannounced inspections as part of their Approved Organic Input Certification as per section 4.1.5 of the *National Standard for Organic and Bio-Dynamic Produce*.

The applicant will at all times comply with the requirements under the *National Standard for Organic and Bio-Dynamic Produce*.

Signed____

_____ Date____

Office Use Only	/							
Application Received	Signa	ature					Date	
Application	YES		NO		RR	Comments	·	
Accepted								
Signature							Date	
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