|  |  |
| --- | --- |
| Contact name |  |
| Telephone number |  |
| Email address |  |
| Trading name |  |
| Address of premises to be registered |  |
| Annual turnover (not used in fee calculation) |  |
| Number of staff involved in organic operations |  |

**Scope required for organic certification**

**(please tick as appropriate and fill out the relevant questions)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Exporter |  | | | | |
|  |  | Yes |  | No |
|  | | | | |
| Importer |  | | | | |
|  |  | Yes |  | No |
|  | | | | |
| Non Food |  | | | | |
|  |  | Yes |  | No |
|  | | | | |
| Producer |  | | | | |
|  |  | Yes |  | No |
|  | | | | |
| Aquaculture |  | | | | |
|  |  | Yes |  | No |
|  | | | | |
| Arable |  | | | | |
|  |  | Yes |  | No |
|  | | | | |
| Livestock |  | | | | |
|  |  | Yes |  | No |
|  | | | | |
| Processor |  | | | | |
|  |  | Yes |  | No |
|  | | | | |
| Storage / Bulk Distribution |  | | | | |
|  |  | Yes |  | No |
|  | | | | |
| Trader / Wholesaler |  | | | | |
|  |  | Yes |  | No |
|  | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Please answer the following questions** |  | | | | |
| Have you been certified by another organic certification body? |  | | | | |
|  |  | Yes |  | No |
|  | | | | |
| Is “yes” which body? |  | | | | |
|  | | | | |
| Have you ever been refused certification? |  | | | | |
|  |  | Yes |  | No |
|  | | | | |
| If “yes” please explain why on a separate sheet? |  | | | | |
|  | | | | |
| Have there been any prosecutions within the last 12 months or pending which could affect organic certification?  If “yes” please include full written details and use a separate sheet if necessary |  | | | | |
|  |  | Yes |  | No |
|  | | | | |
| How did you hear about the Federation? |  | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Hectrage and crops |  | | | | |
| Livestock type and numbers |  | | | | |
| Number of aquaculture cages |  | | | | |
| Production site area in square metres |  | | | | |
| Name of products and weekly average weight  **(products added after the quotation is issued may incur extra cost)** |  | | | | |
| Does the storage facility have organic certification? |  | | | | |
|  |  | Yes |  | No |
|  | | | | |
| Countries of origin of organic imports |  | | | | |

|  |  |
| --- | --- |
| On behalf of (company) |  |
| Position |  |
| Date |  |
| Print name |  |
| Signed |  |

**Please return this form to the address or email below.**

**Your quotation will be based on this document. Any additional scopes / range of products not mentioned will be charged accordingly.**