****

**APPLICATION AND CHANGE**

**NICE PRODUCTION STANDARD CERTIFICATION**

**APPLICATION FORM**

Please complete this application form and return it to your local Control Union Certification (CUC) office. We will provide you with an offer and discuss the best way to move forward towards a certification audit.

|  |
| --- |
| **INSTRUCTIONS TO APPLICANT** |
| * This Application form must be completed prior to us making an offer
* Kindly complete the form and sign the client declaration
 |

|  |
| --- |
| **CLIENT INFORMATION /RELATION NAME FOR FINANCIALS/** |
|  |  |  |
| Organisation Name | : |  |
| Address | : |  |
| Postcode / Zip code | : |  |
| City | : |  |
| Country | : |  |
| Office Contact No. | : |  |
| Office Fax no. | : |  |
| VAT No, if applicable | : |  |

|  |
| --- |
| **PRIMARY CONTACT PERSON INFORMATION (THE PERSON RESPONSIBLE/IN-CHARGE)** |
|  |  |  |
| Contact’s Name | : |  |
| Position / title | : |  |
| Office Direct Line No. | : |  |
| Mobile No. | : |  |
| E-mail Address | : |  |

|  |
| --- |
| **GUIDANCE TO APPLICANT** |
| Applying for the first time  | **[ ]**  |
| ONLY indicate changes if you are already a CUC client | **[ ]**  |
| 1. **Products**
 |
| **PLEASE DESCRIBE BELOW THE PRODUCTS YOU WANT TO HAVE CERTIFIED. IF IT CONCERNS CHANGES MENTION ALL THE PRODUCTS AND INDICATE WHICH ONE IS CHANGED, ADDED OR WITHDRAWN.** |
| **Name of the product** | **Stay, changed, added, or withdrawn (please select as appropriate)** | **Please attach the filled product specification form per product** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| *Add more rows if necessary* |  |  |
| 1. **Production units /primary production**

(In case of ICS please attach the list of farmers) |
| **PLEASE DESCRIBE BELOW THE ACTIVITIES OF ALL PRODUCTION UNITS.** **IF IT CONCERNS CHANGES MENTION ALL THE UNITS AND INDICATE WHICH ONE IS CHANGED, ADDED OR WITHDRAWN.** |
| **Name and address of unit** | **Number of farmers** | **Size of farm (ha)** | **Distance from the fields to the processing units? \*** | **Status: Changed/added/stay/ withdrawn** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| *Add more rows if necessary* |  |  |  |  |

* **Mandatory to submit .kml files of production area/fields.**

|  |
| --- |
| **Planting Material and Seed** |
| Non-GMO seed  | **[ ]**  |
| GMO seed | **[ ]**  |

|  |
| --- |
| **AUDIT PLAINING INFORMATION:** |
| **Sowing Period:** |  | **Harvest period** |  |
| **Desired date or timeline for audit:**  |  | **Desired date or timeline for certification:** |  |

|  |
| --- |
| 1. **Please provide estimated travel time between all units and from the nearest international airport.**
 |
| **For our orientation, please attach a basic overview map where all the units are indicated thus draft logistics can be estimated.** |
|  |
| 1. **Has the operation/project and any farmers of it ever been registered, inspected or certified before by another Certification Body (CB) for any relating standards (GOTS, Organic, Non-GMO, OCS, GRS)?**
 |
| IF YES, PLEASE MENTION |
|  | **Name of Certification Body** | **Certificate Number** | **Certificate Validity** | **Reason of changing CB** | **Contact details of Certifier** |
| **NPOP** |  |  |  |  |  |
| **NOP** |  |  |  |  |  |
| **GOTS** |  |  |  |  |  |
| **Non-GMO** |  |  |  |  |  |
| **OCS** |  |  |  |  |  |
| **GRS** |  |  |  |  |  |
| *Add more rows if necessary* |  |  |  |  |  |

1. **Along with this signed application form please attach (pdf) copy of the registration at the Chamber of Commerce of your company.**
2. **Please send this document both in electronic (word) format and as pdf with the signature.**

**Thank you.**

|  |
| --- |
| **APPLICANT DECLARATION** |
| **Undersigned declares to have completed this Application Form truthfully.** |
|  |  |  |
| Name | : |  |
|  |  |  |
| Position | : |  |
|  |  |  |
| Signature & Stamp | : |  |
|  |  |  |
| Date | : |  |

**Based on the above information CUC will draw up a non-obligatory offer for a contract and send it to you.**