

c. Contact Email:

		For Official use only:			
Director,					
Ceycert (Private) Limited, <u>certifications@ceycert.com</u>		Date Submitted			
		Reference Number			
		New/ Recertification			
		Reviewed by			
Kindly complete and sign	the application form and retur	n to certifications@ceycert.com.			
New Application □	For Changes □	Recertification □			
1. GENERAL INFORM	ATION				
1. Legal Name of the ap					
z. zegmiromie er me up	h				
2 Parent Organization (If A and a ship .				
2. Parent Organization (11 Applicable):				
3. Address (Head Office):				
4. Country:					
5. Website:					
6. Contact Number:					
7. Contact Email:					
8. Contact Person of the	Organization:				
NT	Č				
a. Name:					
b. Designation:					



Ceycert (Private) Limited					
Application for Product Certification			Document No: CC-PC-FM-01		
Issue No: 01	Revision No:	Revision Date:			
Prepared By: Manager-Certifications	Reviewed and approved by: Director				

d.	Contact N	lumber:				
9.4	Alternate co	ontact person's details				
a.	Name:					
b.	Designation:					
c.	Contact E	mail:				
d.	Contact N	Jumber:				
10.	. Is remote	Audit of site/s/Locations from the	office possible? Yes l	□ No □		
2. (1.	CERTIFIC Select App	CATION SCOPE/ PRODUCTS I propriate:	NFORMATION			
		Crop Production				
		Wild Harvest				
		Apiculture				
		Livestock				
		Processing				
		Trade				
		Other				
2. 1	If it's a Far	rm, Single Farm/Multi Farm:				
3.	Mention th	he products to get certified;				
N	ame of the	e product				
A	dd more ro	ows if necessary				



Ceycert (Private) Limited Application for Product Certification Document No: CC-PC-FM-01 Issue No: 01 Revision No: Revision Date: Prepared By: Manager-Certifications Reviewed and approved by: Director

4. Mention the Production Units to get certified;

Name of the unit	Address of the unit	Land extent/ Area (Ha	Number of farmers
Add more rows if necessary			

5. Mention outsourced products/production units/ sought for certification

Name of the unit	Address of	the unit	Information (Area, Number of Personnel & Processes)
Add more rows if			
necessary			

3. SCHEME AND TYPE OF CERTIFICATION

- Certification Scheme applied for: SLS 1324:2018 REQUIREMENTS FOR ORGANIC AGRICULTURE PRODUCTION AND PROCESSING
- 2. Operational System developed by: External/ Internal Party
- a. If external party; name of the organization/consultant:
- 3. Type of certification: New Certification / Recertification/Scope Extension
- a. If Re-certification:

Date of first certification:

- ii. Validity period of previous certification:



iii.	Scope of previous certi	fication:		
iv. N	Major changes are done in	the OMP d	during the previous	year (if any):
b. H	lave the certification-seek	ting product	ts/production units/	processing units certified before
	y another certification bo	0.1	•	. C
i. ii.	Yes □ N If Yes;	lo □		
Nam	e of the CB			
Reas CB	on/s for changing the			

4. DOCUMENTED INFORMATION

Please submit copies of the following documents along with the filled Application

- 1. Product Specification form/s
- 2. Organic Management Plan/s

5. LEGAL OBLIGATIONS

Please attach the business registration/ legal registration evidence along with this application. (For initial certification only)

6. DECLARATION BY THE APPLICANT

- 1. I am/We are fully informed and agree with the contents of the terms and conditions of Ceycert (Private) Limited;
- 2. Should any initial enquiry be made by the Certifying Authority, I/We agree to extend to the Certifying Authority all required facilities at my/our command and I/We agree to pay all costs involved prior to the grant of the Certificate.
- 3. I/We will not hold liable either Ceycert (Private) Limited or those having a function in its activities for damages resulting from the consideration of the application for certification, including the possible rejection.



Ceycert (Private) Limited Application for Product Certification Issue No: 01 Revision No: Revision Date: Prepared By: Manager-Certifications Reviewed and approved by: Director

Signature:					
Name:					
– Designation :					For
and on behalf of					ror
[Name of t	he Applicant Organiza	ation]			
Signed at					
on this	day of		_20	_	
	W			R	Γ