##### NOTIFICATION OF INTERNATIONAL PROJECT ACTIVITY

Thank you for completing this document accurately. This information should enable us to better understand your project and evaluate the time required to carry out the control and certification of your products, in accordance with the organic production rules defined by Standard Certisys for non EU organic production and / or National Organic Program 7 CFR Part 205 (NOP).

A quotation will be drawn up based on the estimated time, billing is based on the time actually taken during the mission.

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| **1. General informations** | | | | |
| **1.1 Company Name:** |  | | | |
| Full address : |  | | | |
| Country : |  | | | |
| Responsable person : | Surname : |  | First name : |  |
| Email : |  | | | |
| Phone number : |  | | | |
| Designated interlocutor : | Surname : |  | First name : |  |
| Email : |  | | | |
| Phone number : |  | | | |

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| **1.2 Type of operation affected by the request (please tick) :** | | | |
| 󠄆 Plants production | 󠄆 Wild collection | 󠄆 Processing | 󠄆󠄆 Storage |
| 󠄆 Export | 󠄆 Others : | | |

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| **1.3 Products for which certification is requested :** |

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| **1.4 Are you currently or have you been certified in organic farming in recent months by an organization other than Certisys?** | | | 󠄆 Yes | 󠄆 No |
| If yes, please join the certificate. | | | | |
| Name of the certification body : | Products concerned : | Certificate expiration date: | | |

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| **1.5 Which certification are you requesting (indicate please)?** | | |
| 󠄆󠄆 EU (European market) | 󠄆 NOP (US market) | 󠄆󠄆 BioSuisse (if your Swiss client requests it) |

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| **1.6 If you have been certified by Certisys the previous campaign, have there been any changes?** | | | 󠄆 Yes | 󠄆 No |
| If yes, please indicate at which level and explain. | 󠄆 Plot | 󠄆 Farmer | 󠄆 Product | 󠄆 Other |
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| **2. Description of Plant Production / Wild Collection Activity (if applicable)** | | | | | |
| **2.1** Please fill in the table below**:** | | | | | |
| Name of grower or grower group: | Number of growers concerned | Geographical area / Region | Products grown in organic (for which certification is required) | Surfaces of products grown in organic (ha) | Products grown in non-organic by thegrower (s) |
|  |  |  |  |  |  |
|  | Total: |  |  | Total: |  |

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| **2.2 Is there storage or processing activity at the grower’s level?** | 󠄆󠄆 Yes | 󠄆 No |
| **2.3 Is there intermediate storage activity?** | 󠄆󠄆 Yes | 󠄆 No |
| If yes, please briefly describe (activity, location): | | |

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| **3. Grower group (if applicable)** | | |
| **3.1 Is the purchase of inputs (seeds, phyto products,** amendments, compost, ...) centralized? | 󠄆 Yes | 󠄆 No |
| **3. 2 Do growers also grow other products that are not marketed as organic?** | 󠄆 Yes | 󠄆 No |
| If yes, please describe these cultures: | | |
| **3.3 Is there an internal control system (ICS)?** | 󠄆 Yes | 󠄆 No |

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| **3.4** **Are storage and / or processing sites covered by the ICS?** | 󠄆 Yes | 󠄆 No |
| If yes, please describe: | | |
| **3.5 Is there an updated list of growers and plots (with their GPS location)?** | 󠄆 Yes | 󠄆 No |
| **3.6 Is there a system for recording purchases, sales, stocks?** | 󠄆 Yes | 󠄆 No |
| **3.7 Are all the members of the group audited annually (internal audit)?** | 󠄆 Yes | 󠄆 No |
| **3.8 What is the maximum distance between plots within the same group?** |  | |
| What is the maximum distance between groups? |  | |
| **3.9 Other remarks:** | | |

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| **4. Processing / storage activity (if applicable)** | | | | | |
| **4.1 Please indicate your processing activity:** | | | | | |
| 󠄆 Simple product processing (drying, sorting, packaging, bagging, ...) | 󠄆 Complex processing (multi-ingredient, use of technological aids, ...) | 󠄆 Storage activity | | 󠄆 Other processing | |
| **4.2 Please briefly describe your activity and processed product:** | | | | | |
| **4.3 Do you have a processing activity on several sites?** | | | 󠄆 Yes | | 󠄆 No |
| If yes, please indicate the number of sites and addresses: | | | | | |
| **4.4 Do you have a non-organic processing activity?** | | | 󠄆 Yes | | 󠄆 No |
| If yes, please describe: | | | | | |
| **4.5 Do you have subcontractors or contractors for your activity?** | | | 󠄆 Yes | | 󠄆 No |
| If yes, please write the outsourced activity: | | | | | |
| **4.6 Are you a subcontractor or a manufacturer for one or more clients?** | | | 󠄆 Yes | | 󠄆 No |
| If yes, please detail the activity and contact details: | | | | | |
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| **4.7 Do you have a documented quality system in place? (procedures, instructions, traceability, quality manual, ...)** | | | 󠄆 Yes | | 󠄆 No |

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| **5. Export and marketing (buying / selling)** | | |
| **5.1 Do you market on the local market?** | 󠄆 Yes | 󠄆 No |
| **5.2 Do you export yourself?** | 󠄆 Yes | 󠄆 No |
| If yes, please indicate below the number of planned annual exports and destination countries: | | |
| **5.3 Do you export via another legal structure?** | 󠄆 Yes | 󠄆 No |
| If yes which one ? | | |
| **5.4 Do you know the importers?** | 󠄆 Yes | 󠄆 No |
| If yes, please provide the details below: | | |

**The information contained in this form will be kept in strict confidence between the operator and CERTISYS. The operator declares the information communicated accurate and complete.**

**The operator undertakes to carry out the operations in accordance with EC Regulations 834/2007 and 889/2008, in particular Titles III, IV and V of heading 834/2007 concerning the organic production method, as assessed by Certisys as equivalent.  
The operator declares that he has entrusted the control of his operation to the control body CERTISYS sprl.**

**The operator undertakes to accept, in case of infringement or irregularity, the application of the measures provided for under the organic production rules, as assessed by Certisys as equivalent.**

Place … …………………………… date ........................

Signature .......................................................................