

(**TNOCD)** FORM – I A3

## TAMILNADU ORGANIC CERTIFICATION DEPARTMENT (TNOCD) APPLICATION FORM FOR REGISTRATION OF CORPORATE/BUSINESS CATEGORIES (OWN FARM)

C/ (1200)(1	.23 (31111711117)	
	REGISTRATION NO:	TNO(C)
<ol> <li>Name &amp; Address of the Corporate company Phone No. /Fax No. (e-m</li> </ol>	nail)	
Location of the Farm		
2. Certification Requirement	☐ Crop Production	☐ Honey
and other Livestock Products	☐ Wild Collection	□Dairy
3. Certification Requirement under which standard?	□ NPOP □ NOP	□ JAS □EU
	☐ Others if any ple	☐ Others if any please specify
4. Total area of (operation)Fa	rm	
Survey No. MAP	Attac	hed
5. Total No. of Plots/seaments	5	

- 6. Cropping system followed
  - (i) Name of the Crops
  - (ii) Extent of each crop grown
  - (iii) Rotation followed
- 7. Inputs applied to previous crops
- 8. Buffer zone details
- 9. Boundary of the farm

- 10. Plant Protection measures followed
- 11. Source of manure
- 12. Source of seed
- 13. Soil type
- 14. Specify, if soil problems any



16. Source of Irrigation		
	Well	
	Canal	
	Tank	
	Rain fed	
17. Contamination risk if any		
18. Equipment details	Hired	Own
Ploughing		
Weeding		
Harvesting		
Thrashing		
19. Drying yard facility		
20. Storage facility		
21. Animal Husbandry details	5	



## 22. Other details

## **DECLARATION**

I declare that I shall abide by the rules and regulation of TNOCD and carry out the Organic Production according to the norms prescribed by TNOCD  $\,$ 

Signature of farmer. Enclosures: 1. Farm general details 2. Field Map 3. Copy of Soil test analysis 4. Copy of water test analysis 5. Annual Plan 6. TNOCD Agreement 7. Copy of Incorporation certificate (Registration with Registrar of Companies) FOR OFFICE USE ONLY Date of receipt: Registration No Allotted: TNO(C) Allotted to OCI: Tentative Inspection Date: Fees remitted details: Bill No date Amount Verified by:

Signature of the Quality Manager