



## INITIAL ENQUIRY FORM FOR INSPECTION & CERTIFICATION UNDER VCSMPP

<b>1.</b>	<b>CONTACT DETAILS</b>	
A	Name of company/Farm/Farmer/Producer/Mandator/Collector:	
B	Company/Society/Cooperative Registration Number:	
C	PAN Card Number	AADHAR Number
	GST Number	Others
D	Address :	
	State	District
	Taluk	Village
	Pin Code	Landmark
E	Contact Number	
	Telephone No.	Fax: -
	Mobile-	email-
F	Operation Name (Grower Group/ICS/Collector/Trader/Producer/Farmer): -	
G	Operation Area Address	
	State	District
	Taluk	Village
	Pin Code	Landmark
H	Project Managed by (tick)	
	Self	Contract
I	Project Supported by (Service Provider/Government/Private)	

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J	Address for Contact:		
K	Responsible Person: Name: - Designation: - Telephone No.: - Mobile No.: - (Password and SMS will be sent on this number by system) Email id: - Aadhar No.: - PAN Card: -	Photo of responsible Person	
<b>2.</b>	<b>MANDATORY INFORMATION FOR INSPECTION &amp; CERTIFICATION</b>		
A	Your Organization Currently Certified		
	Yes	No	
	(If Yes mention certification body name and scope certificate number)		
B	Proposed Farm is currently certified		
	Yes	No	
	(If Yes mention certification body name and scope certificate number)		
C	Certification required under which following standards		
	GAP	GFCP	If others mention here
D	Certification Category		
	Level – I	Level – II	If others mention here
	(Compliance to GAP for producers and GFCP for collectors with identification of species by TLC profiling and testing for contaminants.)	(Compliance to the requirements for Level 1 and requirements for medicinal plants as per API/UPI/HPI etc)	



E	Details of certification.	
	You are under certification system management for how long (Please tick)	
	First year	One Year
	Two Year	More than 2years
F	APPLICANT (INDIVIDUAL)	
	Total Land Holding (Individual) =	Land Offered for the Certification =
	Collection Site =	Any other details
G	APPLICANT (GROWER GROUP/ICS)	
	Collection Site =	
	No. of Farmers in Group =	Total land/Area holding of Group
	No. of Collectors =	No. of Local wholesalers
	Any other details	
H	Are you doing any processing: Yes/No	If Yes, On Farm/Off Farm (In case of off farm processing please attach a brief detail of location & processing activity)
	If Yes, describe processing on additional sheet	
I	Manpower	
	Total Number of Field Supervisor/Collectors	Total Number of Internal Inspector
	Managerial Staffs/Officials	Sub-Contracted Staffs/Collectors

Note:- Copy of following documents is mandatory

- i. Document establishing legal entity status
- ii. ID proof (PAN/Cooperative/Society)
- iii. Company Profile
- iv. Permit to collect the wild forest products
- v. Certification Management Systems Plan
- vi. Species Spread Sheet
- vii. Resource Assessment Form
- viii. Collectors List
- ix. Documentation appointing authorized signatory.

Name and Sign of Authorized Responsible Person

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