



INITIAL ENQUIRY FORM FOR INSPECTION & CERTIFICATION UNDER NPOP FOR CROP PRODUCTION

1.	CONTACT DETAILS		
A	Name of company/Farm/Farmer/Producer/Mandator:		
B	Address :		
C	Responsible Person Name: (Position/Title)		
D	Operation Name (Grower Group/ICS):-		
E	Operation Area Address		
F	Address for Contact:		
G	Contact Number		
	Telephone No.		Fax:-
	Mobile-		email-
2.	MANDATORY INFORMATION FOR INSPECTION & CERTIFICATION		
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	
	NPOP	If others mention here
D	Certification required under following Scope of Certification	
	Crop Production	If others mention here
E	For organic Certification. You are under organic 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 Organic Certification.
	G	APPLICANT (GROWER GROUP/ICS) Total land holding of Group
G	No. of Farmers in Group =	
	No of Farmers having land holding more than 4 Hectares.	Total Land Holding of Farmers having land holding more than 4 Hectares.
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	

Name and Sign of Authorized Responsible Person