**1. CLIENT / FIELD DETAIL**

|  |  |
| --- | --- |
| TRADING NAME |  |
| BUSINESS REGISTRATION # |  |
| APPLICATION TYPE | [ ]  NEW [ ]  RENEWAL [ ]  EXTENSION OF CERTIFICATION |
| OPERATION TYPE | [ ]  AGRICULTURAL FARMING PRODUCT[ ]  LIVESTOCK[ ]  MANUFACTURER/PROCESSOR [ ]  ORGANIC PROCESSED FOOD[ ]  ORGANIC PROCESSED FOOD NOT INTENDED FOR HUMAN CONSUMPTION[ ]  HANDLER[ ]  IMPORTER[ ]  EXPORTER |
| POSTAL ADDRESS |  |
| REPRESENTATIVE NAME |  |
| TELEPHONE |  |
| EMAIL  |  |
| FIELD/FACILITY ADDRESS |  |
| FIELD AREA (Ha)No. OF LIVESTOCKFACILITY AREA (m2) |  |
| **AGRICULTURAL FARMING PRODUCT / LIVESTOCK ONLY SECTION** |
| PRODUCTION PLAN(e.g.: livestock, cropping) | TYPE(e.g.: beef, wheat) | FIELD AREA (Ha) OR No. OF LIVESTOCK | MAX.ANNUAL PRODUCTION VOLUME (specify units) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **ORGANICALLY PROCESSED FOOD / HANDLER ONLY SECTION** |
| APPLICATION ITEMS | MAIN INGREDIENTS | PRODUCT MANUFACTURING START DATE | ESTIMATE OF ANNUAL PRODUCTION CAPACITY (specify units) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**2. AGREEMENT**

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| --- |
| I, the undersigned, hereby apply for certification in accordance with Articles 20 and 21 (Article 34) of the Act on Promotion of Environmentally-friendly Agriculture and Fisheries and Management of and Support for Organic Food, etc. and Articles 10, 16, and 41 (1) of the Enforcement Rule of the same Act under the Ministry of Agriculture, Food and Rural Affairs (hereinafter referred to as the “Rule”).Date: Applicant: (sign or seal)  |

**3. REQUIRED DOCUMENTS**

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| --- |
| I understand that I have to prepare the following required documents prior the audit for becoming certified. |
| 1 | Certified product production plan / Food Manufacture Report or equivalent/ Organic Handling Plan | [ ]  YES |
| 2 | Farming and livestock materials information / Ingredients and Additives information | [ ]  YES |

**4. PREVIOUS CERTIFICATION**

|  |  |  |
| --- | --- | --- |
| 1 | Have you ever been certified for Korean organic certification – environment-friendly agricultural product certification- previously? (If yes, write down the year you were/have been certified and the certification agency) |  |
| 2 | Have you ever received a non-compliance of the certification? |  |
| 3 | Has the non-compliance been corrected? Please write down the details. |  |

**5. COMPANY TO BE INVOICED.**

|  |  |  |
| --- | --- | --- |
| 1 | Company Name |  |
| 2 | Company Address |  |
| 3 | Contact details (email/phone) |  |

**I HEREBY DECLARE THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND CORRECT.**

NAME:

TITLE:

SIGNATURE:

DATE: