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**Karnataka State Organic Certification Agency
(Govt. of Karnataka Undertaking)**

Application form for Input Approval

Section 1: General Information	
Company Name:	
Name in which certificate is required:	
Name of the applicant:	
PAN card No:	
Address:	
Ph/ Mob. No:	
Fax:	e-mail:
Responsible person for the input manufacturing section:	
Have you applied for input approval earlier, <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, kindly submit copies of previous certificate with annexes / inspection report.	
Briefly describe about the company's main activities:	
No. of production units for input manufacturing:	
Location of these production units:	
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Section 2: Information on the inputs


Please list all products for approval:

Sl. No.	Product Name	Type of input	Remarks
		<input type="checkbox"/> Fertilizer / soil conditioner <input type="checkbox"/> Pesticide / Repellent <input type="checkbox"/> Other:___	
		<input type="checkbox"/> Fertilizer / soil conditioner <input type="checkbox"/> Pesticide / Repellent <input type="checkbox"/> Other:_____	
		<input type="checkbox"/> Fertilizer / soil conditioner <input type="checkbox"/> Pesticide / Repellent <input type="checkbox"/> Other:_____	
		<input type="checkbox"/> Pesticide / Repellent <input type="checkbox"/> Pesticide / Repellent <input type="checkbox"/> Other:_____	
		<input type="checkbox"/> Fertilizer / soil conditioner <input type="checkbox"/> Pesticide / Repellent <input type="checkbox"/> Other:_____	

If your product has been registered under government regulation, please provide the registration number:


Product Name	Registration No

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Do you have any subcontracted service: Yes: <input type="checkbox"/> No: <input type="checkbox"/>			
If yes, please list all companies (along with address) that further process/ package your products			
Subcontractor		Subcontracted Service	
After signing the contract and confidentiality agreement I will submit the following documents;			
Document	Yes	No	Remarks
Complete list of Ingredients (including sources)			
Government Registration Documents.			
Chemical Analysis Report..			
Contract with Subcontractor			
During the inspection, I will submit the following documents			
Site Maps			
Flow Chart for Processing			
Receipt / Invoice of all Ingredient			
Receipt/bill of all Sold Product			
Sample of all Packaging Materials			
Import Certificates for the Imported Products			

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Declaration of the manager:

The signatory declares that –

- The information given in this application form is true, changes or deviations from the given information will be immediately communicated to KSOCA.
- He/ she informs himself or herself in details about the requirements of the referring standards.

Place, date

Signature

For Office Use:		Operator Code:		
Application received on:		Application taken by Quality Manager on: __/__/__		
Amount Collected	75%	100%	<p>“Approved”</p> <p>Quality Manager KSOCA, Bangalore</p>	
C.R. No Date:		Name of the Inspector allotted: Inspection to be conducted on or before: ---/---/---		
C.R. No Date:				
Application verified and recommended for approval on; --/--/--				
Evaluator KSOCA, Bangalore				

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