

Form - 1A1

APPLICATION FORM FOR REGISTRATION OF ORGANIC FARM UNIT

		REGISTRATION NO: TNO (F)
1.	Name & Address of the Organic Producer Phone No. / Fax No. (E-mail)	
	Revenue Village :	Adhaar No :
	Block :	PAN No. :
	Taluk :	
	District :	Pincode :
	Location of the Farm :	
2.	Certification Requirement	Crop production Honey Wild Collection Dairy and other Live stock Products
3.	Certificate Requirement under which standard?	NPOP NOP JAS EU Others if any please specify
		Others if any product opening
4.	Total area of (operation) Farm	
	Survey No.	Map attached
5.	Total No. of Plots / Segments	



	(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.	Sour	rce of seed			
13.	Soil	type			
14.	Spec	cify, if any soil problems			
15.	Wee	ed management practices followed			

Cropping system followed



16.	Source of	f Irrigation			
			Well		
			Canal		
			Tank		
			Rain fed		
17.	Contamir	nation risk if any			
18.	Equipme	nt details		Hired	Own
	a.	Ploughing			
	b.	Weeding			
	C.	Harvesting			
	d.	Thrashing			
19.	. Drying yard facility				
20.	. Storage facility				
21.	Animal Husbandry details				
22.	. Other details				
23.	Details of	f fee Remittance		Cash / Demand Draft	
	Bank			Date	



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.

Date		Signature of the farmer				
	ures : Farm general details Field Map					
3.	Copy of Soil test analysis					
	Copy of water test analysis					
	Annual Plan (3 copies)					
	TNOCD Agreement (3 copies)					
	Land Document (Computer Chitta) PAN card copy					
	Aadhar card copy					
	Passport size Photo - 2 Nos.					
•••••••••						
	FOR OFFICE USE ONLY					
Date of rec	eipt					
Registration	n No. Allotted : TNO(F)					
Allotted to OCI :						
Tentative Inspection Date :						
Fees remitt	ed details :					
Bill No.	Date:	Amount :				
Area Appro	ved for Registration in ha :					
Verified by						