## Application Form for UTZ Certification

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| **How to fill in the form:** |
| *If you see a grey field after the title or text, such as this one****,*** *please click with the mouse on this grey field and write your text there- it will be written in the right font. In tables please use simply the empty lines and add additional table lines if necessary (table/add/lines). In the selection-boxes, simply click or on your selection and an “X” will appear.**Complete this form in print, typed or any other electronic format and send it to* *applications@africertlimited.co.ke* *and* *info@africertlimited.co.ke* |

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| **1** | **Name of the operator / Co-operative / company applying for certification:** |       |
| **2** | **Contact Person (relationship to operator/ Co-op):** |       |
| **3** | **Address:** |
| Road°:       | P.O. Box:       |
| Postal Code:       | City:       |
| Email::       | Country:       |
| Phone:       | Fax:       | Mobile:       |
| **4** | Legal status (Ownership of farm)       | Registration number of company:       |
| Name and address of Holding company\*:      \* If the applying company is a part of a holding company |
| Countries where the products are intended to be traded:       |
| **5** | **Scope applied for**: | UTZ Code of Conduct [ ]  Chain of Custody [ ] Version       |
| **6** | Type of Service: : Pre-inspection [ ]  Certification Audit [ ]  Annual Audit **[ ]**  |
| **7** | Previous certification with another certification body for UTZ? No: **[ ]** Yes: **[ ]**   |
| **8** | UTZ GIP Producer Member Number       |
| **9** | **I am applying for certification for the areas/ sites:** (Co-operatives skip to 11) |
| Estate /Farm/Crop | Size (ha) | Location |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
| **10** | ProcessingName of the entity which performs activity | Ownership: | Chain of custody certification: |
| 1. |       | [ ] certificate holder [ ] subcontracted | [ ] Yes [ ] No[ ] In process |
| 2. |       | [ ] certificate holder [ ] subcontracted | [ ] Yes [ ] No[ ] In process |
| 3. |       | [ ] certificate holder [ ] subcontracted | [ ] Yes [ ] No[ ] In process |
| **11** | **For Co-operatives Please attach the following** **Farmers list with the headings as shown in AC01l Annex 1 UTZ Registry of Group Members.** |
| **12** | **Disclosure of information:**Upon acceptance of a formal contract and by signing this document, Producer:**[ ]** Authorizes **[ ]** Does not authorize UTZ to distribute the summary report to Utz Certified buyers. |
| **13** | **Note**: Operators applying for certification must have access to the applicable standards (valid version) this can be downloaded free of charge from [www.UTZ.org](http://www.UTZ.org)Or obtained from the information pack from AfriCert Ltd (delivery and printing cost charged to the client). |

Client:

Date:       Name (Authorised Signatory):       Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company stamp:

**FOR AFRICERT’S USE ONLY:**

| Application reviewed and approved by: |   |
| --- | --- |
| Date of final review and approval: |       |