## 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*](mailto:applications@africertlimited.co.ke) *and* [*info@africertlimited.co.ke*](mailto: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 Producer Number(from GIP Registration) | | | | | | | | | | | | |
| **9** | **I am applying for certification for the areas/ sites:** (Co-operatives skip to 12) | | | | | | | | | | | | |
| Estate /Farm/Crop | | | | | Size (ha) | | | | | Location | | |
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| **10** | Production to be certified (Kg) | | | | |  | | | | | | | |
| **11** | Harvest Period | Main Season: Starts      Ends: | | | | | | | | Small Harvest: Starts      Ends | | | |
| **12** | Processing  Name of the entity which performs activity | | | | | | | | | | Ownership: | | Chain of custody certification: |
| 1. Rooibos Processing | | |  | | | | | | | certificate holder  subcontracted | | Yes No  In process |
| 2. Bagging and/or Bulking | | |  | | | | | | | certificate holder  subcontracted | | Yes No  In process |
| 3. Consumer Blending (if applicable) | | |  | | | | | | | certificate holder  subcontracted | | Yes No  In process |
| 4. Consumer Packing (if applicable) | | |  | | | | | | | certificate holder  subcontracted | | Yes No  In process |
| **13** | **For Co-operatives Please attach the following**  **Farmers list with the headings as shown in AC01l Annex 1 UTZ Registry of Group Members.** | | | | | | | | | | | | |
| **14** | **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. | | | | | | | | | | | | |
| **15** | **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: |  |