

APPLICATION FORM

BIO-DYNAMIC RESEARCH INSTITUTE

APPLICATION FOR REGISTRATION FOR CERTIFICATION TO THE NATIONAL STANDARD FOR ORGANIC AND BIO-DYNAMIC PRODUCE

The completed application form, the signed undertaking and a non-refundable application fee of \$836 (incl. GST) to be sent to the Bio-Dynamic Research Institute, Post Office, Powelltown, Victoria. 3797.

INDICATE TYPE:

FARM MANUFACTURER RETAILER WHOLESALER EXPORTER

INDICATE TYPE: *(Please tick appropriate block)*

ORGANIC AND BIO-DYNAMIC TO THE NATIONAL STANDARD
 ORGANIC ONLY TO THE NATIONAL STANDARD

NAME OF FARM OPERATION: _____

ADDRESS OF FARM: _____

POSTAL ADDRESS: _____

(if different from above) _____

TELEPHONE NUMBER: _____ MOBILE NUMBER: _____

FACSIMILE NUMBER: _____ EMAIL ADDRESS: _____

THE GOODS FOR REGISTRATION:

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

APPLICATION FORM

The following information is required:

1. Do you have any conventional Produce on the Farm? *YES / NO

*If yes please provide a list:

2. Have you and/or the area related to this application been previously or are currently certified to the National Standard for Organic and Bio-Dynamic Produce by another Certifying body

*YES/NO

If YES – Please provide the following details:

Certifying body: _____ Cert #: _____ Current? Y/N

Address / business name of area previously/currently certified: _____

3. If such certification (in 2) is no longer current, indicate if certification ceased due to de-certification or sanctions imposed by the Organic certification body.

4. Provide the Business Entity name and indicate the legal status of this business.

5. This application, along with any supporting documentation, must contain a signed declaration confirming all aspects of the application request are true and correct.

6. If you are a **Farmer**, please provide BDRI with **all the inputs** used on the Farm / Operation during the last 12 months. (e.g. soil conditioners).

7. Please provide a **Farm Management Plan and a Farm Map / Floor Plan**. A proforma plan is available should you not already have a comprehensive ORGANIC and BIO-DYNAMIC Management Plan.

8. If you are a **manufacturer**, please fill in the attached RAW MATERIALS data sheet and provide us with copies of all your certificates

UNDERTAKING

I agree that:

A. This Application, when accepted by the Bio-Dynamic Research Institute (BDRI), will constitute a contract between myself and the BDRI.

B. I have read the current version of the **National Standards For Organic and Bio-Dynamic Produce** (download from www.demeter.org.au or the DOA website) and

APPLICATION FORM

understand the conditions outlined in this Standard in particular that Production units can only be certified as in-conversion after at least one year under organic management practices.

- C. During normal working hours, to permit a proper official of the BDRI to inspect my operation and types of goods for Certification purposes to ensure that I meet the requirements set out in the **National Standards For Organic and Bio-Dynamic Produce**.
- D. If required by the BDRI, samples of soil, water or produce may be taken for analyses at a cost to myself.
- E. I will undertake my operations in accordance with the the **National Standard for Organic and Bio-Dynamic Produce** as it applies to Organic and/or Bio-Dynamic produce and to abide by the standards and the requirements of such Standard.
- F. I will notify the BDRI (as the Certification Body), without delay, **of any changes to my operation and/or management plan** that may affect the ability to conform with the National Standard for Organic and Bio-Dynamic Produce requirements.
- G. I undertake to maintain **accurate and up-to-date records** of all purchases, production, processing, handling, transport, storage and sale of products, and to supply any such records to the BDRI at their request.
- H. I will pay the annual fee for registration, the amount of which is indicated in the Institute's Certification Fee Schedule (attached), to cover administration and inspection costs.

Signed: _____

Name: _____ Date: _____