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|  | **NATIONAL ORGANIC CONTROL UNIT (NOCU)****SRI LANKA EXPORT DEVELOPMENT BOARD****REGISTRATION OF SUPERMARKETS SELLING ORGANIC AGRICULTURE PRODUCTS** |  |

1. **Name of the Supermarket:**

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1. **Address:**

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| **Business Address** | **Address of the Processing Plant/Warehouse:** |
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1. **Name of the Contact Person & Designation:**

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1. **Contact Details:**

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| --- | --- | --- | --- |
| **Tel:** | **Fax:** | **E-mail:** | **Web-site:** |
|  |  |  |  |

1. **Legal Status:**
2. Business Registration No:
3. Type of Registration:

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|  | **Proprietor**  |  | **Partnership** |  | **Public Quoted** |

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| --- | --- | --- | --- | --- | --- |
|  | **State-owned** |  | **Private Limited** |  | **Other** |

1. **Names of the Directors/Owners :**

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1. **Types of Organic products sold at the supermarket:**

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1. **How the products are sourced:**

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| --- | --- | --- | --- | --- | --- |
|  | **Own Production**  |  | **Importers** |  | **Out-Grower System** |

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| --- | --- | --- | --- | --- | --- |
|  | **Suppliers**  |  | **Farmer Association** |  | **Other, please specify** |

1. **Please provide the product(s) source information if the source is a local party:**

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| **Name of the Supplier** | **Address** | **GA Division** | **Contact Details** | **Products** | **Annual Supply** |
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1. **Do you consider an Organic Certification is a pre-requisite to register or supply products to your supermarket; Yes/No**

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1. **If yes, provide a list of suppliers and corresponding certificate details (Please attach the copy of certificates)**

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| **Name of the Supplier** | **Name of the Certification Body** | **Validity Period** | **Scope of Certification** |
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1. **If you import Organic products, please provide the following information**

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| **Name of the Supplier & Address** | **Importing Country**  | **Types of Products** | **Quantity Imported** | **Applicable Certificate** |
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Please include the following

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1. Name & Address of the Certification Body
2. Scope of Certification

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1. Period of validity

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1. **Do you do any value addition to the products? Yes/No**

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* 1. If yes, explain the details
1. **Remarks**

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Name: Signature:

Designation: Date: