To, The ICS Manager (Quality Manager/Service Provider/Mandator)

Farmer name:						- O -			
Village name:						Farmer Code:			
Farmer address & Contact details						(To be filled by ICS Office)			
									Farm(No. of field
Khasra No./GPS	Aroo in	Main	Intor	Main Cran	Into	r Cron	l ist all	I the inpute used for	
No.	Hectares			Main Crop (Kharif)	Inter Crop (Kharif)		List all the inputs used for Organic farming		
(similar on field			Rabi)	` '	(,	3		
map))							
Total									
l Otal									
		Note	s on 1	field situatio	n in (organic			
O	.:			crop					
Organic holding i		multipi	e own	ers, no clear	oorae	ers ————			
All owners are or	ganic								
Field is clearly separated from other fields by									
Other:(describe)									
Declaration of the	ne farmer								
I, the farmer, dec the conditions for								I have understood CS contract.	
Date:	•			Signature					
Place: of farmer:									
I, the ICS manag	er, confirm	that the	e abov	ve mentioned	infor	mation is	correct		
Date:	Signature of the								
Discour				ICS Manager for					
Place:				acceptance					

Note: NPOP Standard owner – APEDA. Visit for latest updates: www.apeda.gov.in