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**APPLICATION TO THE DEPARTMENT OF AGRICULTURE FOOD & THE MARINE  
(DAFM) FOR REGISTRATION AS AN ORGANIC OPERATOR\***

**Part 1 to be completed and signed by the applicant and forwarded to the Approved  
Inspection Body nominated at 3 below.**

**Part 1: Details of Applicant: (please use block letters)**

Contact Name: \_\_\_\_\_  
(Legal entity: individual, company, friendly society or partnership)  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Website: \_\_\_\_\_ Fax: \_\_\_\_\_

**Personal Public Service No. (PPSN)** \_\_\_\_\_

**\*\*Herd No./Reference No.** \_\_\_\_\_ (Quote same No. used for BPS declaration where applicable)

Company Registration No. \_\_\_\_\_ (Where applicable)

If in land based farming, are you in **OFS** YES  NO

OFS Planner Name & Address: \_\_\_\_\_ OFS Planner Phone No: \_\_\_\_\_

**Nature of operations and products:**

I am/will be carrying out the following operations involving organic products: (tick as appropriate)

- a) Farming Production: (incl. packing and initial labeling carried out on the holding).
- b) Aquaculture Production:(incl fish & Seaweed)
- c) Preparation: other than at a or b(including importing with EU, processing, storage & distribution).
- d) Importing directly from 3rd Countries:

**Declarations:**

- I hereby undertake to carry out my operations in accordance with Council Regulation (EC) No. 2018/848 as amended.
- I confirm that products, the use of which is not compatible with Council Regulation (EC) No. 2018/848 as amended were last applied on the areas which are for conversion on Date:  
\_\_\_\_/\_\_\_\_/\_\_\_\_.
- I nominate \_\_\_\_\_ (Control Body) to inspect and certify my organic activities.
- I hereby make application to the Department of Agriculture to be registered as an organic operator in accordance with Council Regulation (EC) No. 2018/848 as amended.
- I will provide, on request, the information required in Part 2 and any other information necessary to enable the approved inspection body to complete Part 3.

**I hereby certify that the information provided in relation to this application is truthful and correct.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
*of applicant or on behalf of applicant named above.*

***\*For land based production, a two-year in conversion period must take place  
\*\*Herd/Flock/Cereal number must be supplied where applicable.  
Incomplete / illegible forms will be returned to your OCB.***

**Approved Inspection Body nominated by applicant to complete Part 2 and Part 3**

**Part 2: Organic Certification Body's summary report of holding:**

- 1. Farm Production:
- 2. Preparation Unit other than at 1 or 4
- 3. Importing directly from 3<sup>rd</sup> Countries:
- 4. Aquaculture

**Address of 1, 2, 3, 4 above (Block Caps):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Phone Numbers:**

**Work:** \_\_\_\_\_

**Mobile:** \_\_\_\_\_

<u>Details of Area usage of total production holding (Area-Ha. Aqua-m2)</u>				
Total Area	Fully Organic	In-conversion	Conventional	Other
<u>Details of Production Programme for Organic production unit (Area-Ha. Aqua-m2 )</u>				
Grass/Forage	Cereal/Fodder Crop	Horticulture	Aquaculture (area & tonnage live weight)	Other
<b><u>Licensed activities:</u></b>				
<p><b><u>Crops:</u></b> Cereals, Potatoes, Vegetables, Top fruit, Soft fruit, Salad etc. <b><u>Products:</u></b> wheat flour, biscuits, etc.  <b><u>Livestock:</u></b> cattle, sheep, pigs, poultry etc. <b><u>Products:</u></b> beef, lamb, pork, milk, eggs, cheese, chicken, turkey etc  <b><u>Aquaculture Products:</u></b> Seaweed, Fish - <b><u>Give exact categories as set out in part I-X, Annex II of Commission Implementing Regulation (EU) 2020/464, Other:</u></b> short-term rent (conacre)</p>				

**Part 3. Certification of Approved Inspection Body:**

Date Application recd: \_\_\_\_\_ Operator Licence Number: \_\_\_\_\_

Commencement Date of Licence: \_\_\_\_\_

I hereby certify on behalf of \_\_\_\_\_ (OCB Name) + IE-ORG-\_\_\_\_-EU, that the operations of the applicant named overleaf have been inspected and assessed in accordance with Council Regulation (EC) No. 2018/848 and that the applicant is eligible for entry on the register of organic operators held by the Department of Agriculture, Food & The Marine.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*On behalf of the approved inspection body named above.*

***Incomplete forms will be returned to the relevant OCB.  
Herd No must be supplied where livestock is involved.***

<b><u>Return completed form Org 1 to: Organic Unit, DAFM, Johnstown Castle, Co. Wexford</u></b>	
DAFM Signature: _____	Date: _____