**APPLICATION FORM FOR**

**ASC FEED MILL STANDARD CERTIFICATION**

**INSTRUCTIONS TO THE APPLICANT**

* This application must be completed and returned to the Control Union office in order to generate an offer.
* Sign the last page, in the section "Applicant's Declaration".
* The applicant has read the ASC Feedmill Requirements for Unit of Certification (RUoC) available in ASC website.

1. **APPLICANT INFORMATION**

|  |  |  |
| --- | --- | --- |
| **Legal entity name**  Including organization type: Ltd., Inc., SAC, SA, SARL, BV) | : |  |
| **Company address**  (Street, postal code, city, province, country, P.O. box) | : |  |
| **Legal representative name** | : |  |
| **Contact person**  (Name, function) | : |  |
| **Position in the UoC**  Job title |  |  |
| **E-mail(s)** | : |  |
| **Telephone number** | : |  |
| **Fax number** | : |  |
| **Registration Number/Tax number**  (RUC / RUT / VAT / NIT / RFC / RNC, etc.) | : |  |

1. **TYPE OF APPLICATION**

|  |  |
| --- | --- |
|  | Initial certification: our company applies for the first time |
|  | Scope extension/modification: our company would like to indicate changes/update our existing project information. |
|  | Transfer of CB: our company is certified with another CAB and wants to transfer to CU. |
|  | Recertification: our company applies for recertification. |
|  | Other (please specify): |

1. **SELECT THE CERTIFICATION OPTION YOU WISH TO APPLY FOR:**

|  |  |  |
| --- | --- | --- |
| **ASC Feed Mills v1.01** | **Certification type** | **Production Model** |
| Single-site1  Multi-site2; \*  (Number of sites): \_\_\_\_\_\_ | Segregation Model  Mass Balance Model  Both |

**1Single Site:**

1. The UoC is formed by one (1) production site.
2. The Client is capable of signing a binding contract that is legally enforceable.
3. The Client is the owner of the ASC product
4. The Client is the only entity authorized to sell ASC product.

**2Multi Site:**

1. The UoC consists of more than one site and all sites are clearly identified.
2. The Client has an identified central function in charge of assuring the compliance against the ASC Requirements of all sites within the UoC and sites are either owned or subcontracted by the Client.
3. The Client is responsible for compliance to ASC Requirements at all sites.
4. The Client is capable of signing a binding contract that is legally enforceable.
5. The Client is the only entity authorized to sell ASC products from all sites.
6. All sites are located within the same country.
7. All individual sites and associated facilities shall be audited.

\*Please, provide organizational structure and relationships between the sites.

1. **SITE INFORMATION**
   1. **UNITS OF CERTIFICATION**

The Unit of Certification (UoC) is a feed manufacturer. If it is a single site, identify the site and fill the information needed. If it is a Multi-site, please identify each feedmill site. In case of changes please complete the corresponding column.

|  |  |  |  |
| --- | --- | --- | --- |
| **Site Name** | **Address** | **Latitude (N,S)**  **(WGS 84)** | **Longitude (E,W)**  **(WGS 84)** |
|  |  |  |  |
|  |  |  |  |

\*Geographical coordinates of the sites shall be provided in decimals, using the World Geodetic System 84 (WGS84).

* 1. **ACTIVITIES**

|  |  |  |  |
| --- | --- | --- | --- |
| **Site Name** | **Site – Certificate Holder relationship** | **Activities included in the scope of the UoC** | **Outsourcing Activities** |
|  | Owned by CH  Subcontracted  Contract farm | Production  Storage  Transport  Packing  Other activities: | Production  Storage (Type of Storage) – External? – Internal?  Transport  Packing  Other activities: |
|  | Owner  Subcontracted  Member | Production  Storage  Transport  Packing  Other activities: | Production  Storage  Transport  Packing  Other activities: |

\*Add more rows if necessary.

**5. PRODUCTION INFORMATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Site Name** | **Address** | **Aquafeed products** | **Aquaculture specie target** | **Non-Aqua feed Products** | **New ;**  **Changed ; Withdrawn** |
|  |  | Pellet  Extrude  Both | Tilapia  Shrimp  Monodon  Salmon  Trout  Seabass  Other: | Livestock  Poultry  Dog food  Cat food  Other | New  Changed  Withdrawn |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

\*Add more rows if necessary.

1. **ADDITIONAL INFORMATION**

|  |  |  |
| --- | --- | --- |
| **Does your company is the owner of the product that apply for certification?** | : | Yes  No ; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  If not, Please declare who is the owner of the product and what is your relationship with that company/entity. |
| **Did you have been in operation no less than six (6) months?** |  | Yes  No |
| **Does your company have a functioning Ingredient Accounting System (IAS) in place that can monitor the volumes of incoming Eligible Ingredients and account for the volumes of outgoing ASC feed produced under the Mass Balance Production Model?** | : | Yes; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  No |
| **Do you have conducted at least one Ingredient Accounting System balancing exercise resulting in accurate calculation prior to the initial audit? (Records of the exercise shall be maintained).** | : | Yes; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  No |
| **Do you have implemented a Code of Conduct requirements?**  **(i.e., the Feedmill only sources from Ingredient Manufacturers which have declared that they meet the Code of Conduct).** |  | Yes; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  No |
| **Do you have completed Due Diligence processes for both Ingredient Manufacturers and Primary Raw Material Production as required by the standard in the last twelve (12) months?** |  | Yes; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  No |
| **Do you have calculated its Majority Sustainability Level (MSL) Entry Level?** |  | Yes; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  No |
| **Do you have conducted at least one internal audit in the last six (6) months against the ASC Feed Standard and Feed RUoC?** |  | Yes; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  No |
| **Do you have open court cases related to environmental or social compliance violations or any allegations of fraud in connection with the ASC Requirements?** |  |  |
| **Do you have any charge for, or admission to, cases related to the question above, within the last 36 months?** |  |  |
| **Do you have any open cases or successful prosecution in the last twenty-four (24) months related to: fraudulent activities; Child labour, slavery, human trafficking or forced labour?** |  |  |

1. **STAKEHOLDERS**

Please make a list of all your potential stakeholders. CU office will invite them to participate in the initial audit. (NGO, neighbor, governmental authorities, veterinary authority, environmental authority, etc.)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Stakeholder Type** | **Name of company/ organisation** | **Contact person – Name** | **Country where stakeholder is based** | **Phone number** | **Email** |
| **Authorities** |  |  |  |  |  |
| **Communities** |  |  |  |  |  |
| **Competitors** |  |  |  |  |  |
| **Clients** |  |  |  |  |  |
| **Government** |  |  |  |  |  |
| **Labour unions** |  |  |  |  |  |
| **Neighbour** |  |  |  |  |  |
| **NGO – environmental** |  |  |  |  |  |
| **NGO – social** |  |  |  |  |  |
| **Standar Scheme Owner** |  |  |  |  |  |
| **Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |  |  |  |  |

Add more rows if necessary.

**Does your feedmill have current Unions?**

**Yes: How many?:**

1. **SOCIAL INFORMATION**

**COUNTRY INFORMATION**

|  |  |  |
| --- | --- | --- |
| **Official Language** |  |  |
| **Local Language of the farm´s city** |  |  |

**EMPLOYEE INFORMATION**

|  |  |  |
| --- | --- | --- |
| **Total number of workers** |  |  |
| **Total number of workers Living on site** |  |  |
| **N° subcontracted workers** |  |  |
| **N° Permanent workers** |  |  |
| **N° Temporary Workers** |  |  |
| **N° Local workers** |  |  |
| **Native Languages of local workers** |  |  |
| **N° of foreign workers** |  |  |
| **Nationalities and languages of foreign workers** |  |  |

1. **PLANNING INFORMATION**

Important: the audit shall be arranged to occur at a time that the site is operational and where possible, producing ASC product.

|  |  |  |
| --- | --- | --- |
| **How long the unit of certification has been in operation?** | : | At least 06 months  None; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Does the project have available records of performance data covering the periods of time specified in the ASC Feed standard?** | : | Yes  No  If NO, please mentioned the number of months available: |
| **Does the ASC feed products will be in production during the audit? or Eligible Ingredients will be stored in the UoC?** | : | Yes  No |
| **Does the company can ensure that only product intended for sale (no trial or mock production) will be evaluated?** | : | Yes  No |
| **Does the company Allow the CAB to evaluate other activities within the scope of the UoC such as loading, even when they are implemented by subcontractors, or production of non-aquafeed, if applicable.** | : | Yes  No |
| **Document information: Has the documents of the project in English?** | : | Yes  No; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  If NO, please mention the language of the documents. |
| **Does the project have an ASC certificate withdrawn or has failed an ASC certification audit within the previous twelve (12) months?** | : | Yes; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  No  If YES, please mention dates of certificate withdrawn or date of the farm has failed. |
| **Does the loading activities including subcontractors can be witnessed under the control of the UoC?** | : |  |
| **Please indicate the estimated travel time between the units to the nearest airport** | : |  |

1. **CERTIFICATION STATUS**

Has your organization or any of its production/process units ever been certified by another Certification Body (CB) for the certification scheme you are applying for or any other certification program?  YES NO.

If yes, please complete the following table:

|  |  |
| --- | --- |
| **Name of the previous CB** |  |
| **Certification program** |  |
| **Certificate validity** |  |
| **Reason for CB change** |  |
| **Contact person Previous CB** |  |
| **Transfer process in the current certificate cycle** | First transfer process  More than one transfer process |

1. **DECLARATION BY THE APPLICANT**

The undersigned declares that he/she has completed the application with truthful information.

|  |  |
| --- | --- |
| **Company name** |  |
| **Legal representative name** |  |
| **Date and signature** |  |

Based on the above information, CU will send you a non-binding offer.

Please confirm if you want to receive the offer: English Local language

1. **ANNEX 1**

|  |  |  |
| --- | --- | --- |
| **Is designated a central office?** | : | Yes, Name of the central office: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  No |
| **Is there an annual management review?** | : | Yes, Date of the last one: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  No |
| **Does a full internal audit, covering all sites and central office, conducted?** |  | Yes, Date of the last internal audit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  No |
| **Do All sites in the unit of certification operate within the same jurisdiction or within neighbouring jurisdictions that share the same relevant regulations?** |  | Yes  No |
| **Please give the name of the internal auditor** |  |  |