**Request for Input Evaluation**

**Cert-IN-01-Eng**

**Introduction**

This document allows the applicant to submit all the necessary information regarding its input to Primus Auditing Ops specialists in order know the composition, origin and process of elaboration of all the raw materials and the final product.

The applicant commits to submitting all the information requested, in a complete and truthful form and any other information required during the evaluation process of the input. The applicant also accepts to and may be subject to an on-site verification during the evaluation process or during the validity period of the approval at any time.

Primus Auditing Ops is responsible for the CONFIDENTIALITY of all information provided and is committed NOT to DISCLOSE such information in any way. The service is provided under the principles of confidentiality and impartiality and within the framework of the Service Agreement that governs’ the Input Evaluation Program

Remember that this document constitutes an affidavit and is valid only if it’s signed by the legal representative of the applicant company and has been submitted to Primus Auditing Ops along with the corresponding Service Agreement.

**Complete the application at its entirety. This section is the initial information in order to calculate your service. Please do not leave any blank spaces (N/A if not applicable).**

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| 1. **General information of the applicant company:**
 |
| Name: |  |
| Legal ID:  |  |
| Address: |  |
| Phone (s) / fax: |  |
| Legal representative name: |  |
| Legal representative ID: |  |
| Email of legal representative: |  |
| Authorized contact name**\*** : |  |
| Email(s)**\*\*** : |  |
| Website: |  |
| **\***Authorized and responsible person for communication during the input evaluation process. **\*\***Email(s) to receive all the information regarding the input evaluation process, including the results. |

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| 1. **General information of manufacturing Company (only if different from applicant company):**
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| Name: |  |
| Address: |  |
| Phone (s) / fax: |  |
| Email: |  |
| Website: |  |

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| 1. **Evaluation Type**
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| Initial evaluation |  [ ]   |
| Annual renewal |  [ ]   |
| Reevaluation |  [ ]   |
| Preevaluation |  [ ]   |
| Identical brands inclusion |  [ ]   |
| Presentations inclusion |  [ ]   |

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| 1. **State under which standards the input evaluation should be made:**
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| Nacional Organic Program (NOP/USDA): |  Yes [ ]  No [ ]  |
| European Organic Regulation (CEE 889.2008): |  Yes [ ]  No [ ]  |
| Japanese Agricultural Organic Standards (JAS/MAFF): |  Yes [ ]  No [ ]  |
| Costa Rican Organic Agriculture Regulation 29782: |  Yes [ ]  No [ ]  |
| Mexico Organic Products Law (LPO): |  Yes [ ]  No [ ]  |

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| 1. **Input Information:**
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| Registered Trademark (s): |  |
| Classification / use: |  |
| Country (s) and registration number (s): |  |
| Observations (combinations and restrictions of use): |  |

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| 1. **Product composition information (add additional lines if necessary):**
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| **6.1 Active Ingredients within the composition of the final product:** |
| Generic name of the raw material  | Name or trademark and manufacturing Company name (if applicable) | Origen and extraction method | Function within the final product |
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| **6.2. Inert \* ingredients within the composition of the final product:** |
| Name | CAS registry number \*\* | Name or trademark and manufacturing Company name (if applicable)  | Origen and extraction method | Function within the final product: |
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\*An inert ingredient is a product or substance that serves as a solvent, adjuvant, emulsifier, dispersant, adherent or preservative and is not the last of the application of an input

\*\*Número CAS: identificación numérica única para compuestos químicos, polímeros, secuencias biológicas, preparados y aleaciones.

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| 1. **Affidavit of Ingredients:**
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| The input contains or was made from one or more ingredients or processes generated by Genetically Modified Organisms. |  Yes [ ]  No [ ]  |
| Any of the components of the input has been subjected to ionizing radiation. |  Yes [ ]  No [ ]  |
| The input contains non-treated sewage. |  Yes [ ]  No [ ]  |
| The input was evaluated and rejected by another evaluation body (if applicable, present the current reference document). |  Yes [ ]  No [ ]  |
| The input has been evaluated and accepted by another evaluation body. |  Yes [ ]  No [ ]  |

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| 1. **Description of the manufacturing process (Diagram)\*:**
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\*The description must be clear and complete as possible. Indicate all steps from obtaining the raw material to obtaining the final product. All documents must match and the chart should list all the raw materials as mentioned in sections 5 of this document. Use additional sheets if necessary

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| 1. **Methods or process aids during manufacturing (for instance: heat, steam, forced air, etc.):**
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| **Method applied and involved factors:** | **Function within the process:** |
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| 1. **Additional Requirements**
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| Copy of product label (mandatory)\* |  Yes [ ]  No [ ]  |
| Recent chemical analyss and heavy metals  |  Yes [ ]  No [ ]  |
| Recent microbiological analyzes  |  Yes [ ]  No [ ]  |
| Affidavit of not containing or being elaborated with genetically modified organisms. |  Yes [ ]  No [ ]  |
| Commercial sample of the product. |  Yes [ ]  No [ ]  |

\*Except for inputs that by their nature are sold in bulk.

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| 1. **Affidavit on the information presented in this form**
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| I Haga clic o pulse aquí para escribir texto., with identification document: Haga clic o pulse aquí para escribir texto., legal representative of the company: Haga clic o pulse aquí para escribir texto. **I declare under oath** , all the information entered in this form referring to the input: Haga clic o pulse aquí para escribir texto. is **true and complete**. Furthermore, I confirm to provide access to Primus Auditing Ops as the control body to the facilities and all documentation related to this input to perform any **onsite** inspection when necessary. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of the legal representative Date |

**\* Note**: please consider additional information may be required for the evaluation.