

**FORMAT**  
**FOR SUBMISSION OF RETURNS BY**  
**ORGANIC CERTIFICATION AGENCY WORKING IN THE STATE OF**  
**UTTARAKHAND**  
**(Chap.:4, Section: 9)**

1- Name of the Certification Agency: -----

2- Contact Person & Address: -----

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3- Accreditation No.: -----

4 – Validity of Current Accreditation: -----

5- Scope of Accreditation:-----

6- Registration no. under GST (Please Attach copy): -----

7- PAN of the Agency (Please Attach copy): -----





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Note: Kindly attach copy of all scope certificates along with approved farmers list issued

**Verification**

I, -----, Designation-----solemnly declare to the best of my knowledge and belief, the information given in the return is correct and complete and the no. of farmers and area and other particulars shown therein are truly stated and are in accordance with the provision of the "Uttarakhand Organic Agriculture Act-2017".

<b>Signature:</b>		<b>Date:</b>		<b>Place:</b>	
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