| Caucascert Ltd | NOP and GC/EU Application Processing | Code GC/DM/APL/HAN-3.1.2 |
|----------------|--------------------------------------|--------------------------|
| | & Handling and Wild | NOP-EU -APP-PRO-HAN 001- |
| | | 28052007 |

| Note to Applicants: this form should be used for both processing/handling and wild crops. In case if you are not involved in harvesting of wild crops for your further processing activities, please do not fill in the table 5.3 | | | | | | | |
|--|--|--|----------------------------------|------------------|-------------|------------------|--|
| 1. Name of App | licant: | | | | | | |
| Please indicate the | | | | | | | |
| Address: | | Phone: | | | | | |
| Zip Code and Town | : | | E-mail: | | | | |
| 2. Name of Ope | ration or Business name: | | | | | | |
| Address: | | | Phone: | | | | |
| Zip Code and Town | : | | E-mail: | | | | |
| Name of and Conta | act information of Person in Cha | rge of Organ | ic Management: | : | | | |
| Address: | | | Phone: | | | | |
| Zip Code and Town | : | | E-mail: | | | | |
| Please list all dba's | (doing business as) and brand n | ames: | | | | | |
| | | | | | | | |
| Do you process conventional products or organic products under regulations other than you apply for in this application in your facility? Yes □ No □ If yes, please indicate the approximate percentage for each category: Conventional: NOP: GC/EU: | | | | | | | |
| Has the operation ever applied for organic certification according to NOP or GC, equivalent EU 834/2007, 889/2008? YES □ No □ If yes, please provide the following: Name(s) of Certifying Agent(s): | | According to which norm: Year(s) of Application: Outcome of submission, including, if appropriate, copies of any notifications of noncompliance or denial of certification Please provide a description and evidence (copies of letters from the certification agent etc.) of all corrective measures implemented. | | | | | |
| 3. Scope of Certification | | | | | | | |
| | CERTIFICATION ACCOR | DING TO W | HICH STANDA | ARD IS REQUEST | TED? | | |
| GC, EQUIVALENT EU-REGULATION | | | | NAL RULE 🗖 | ONLY NATION | VAL 🗖 | |
| 4. Products for | Certification | | | | | | |
| Please list all produ | cts to be certified (according to whi | ich norm). Be | as specific as po | ssible. | | | |
| 1. | · • | | Expected amount to be certified: | | | | |
| 2. | | | Expected amount to be certified: | | | | |
| 3. | | Expected amount to be certified: | | | | | |
| 4. | | Expected amount to be certified: | | | | | |
| 5. | | Expected amount to be certified: | | | | | |
| 6. | | Expected amount to be certified: | | | | | |
| 7. | | | Expected amount to be certified: | | | | |
| Prepared by: N. Darbinyan/wf Date: 28.05.07 | Revised by: ND, EP Date: 24.08.2021 NOP: ND, EP date: 24.08.2021 | Approved b Date: 24.08 NOP: QM, 24.08 2021 | .2021 | Non-Confidential | Edition 007 | Pages: 1 of 3 | |

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& Handling and WildCode
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| 8. | | | Expected amount to be certified: | | | | |
|--|--|--|---|------------------|------------------------|---------------------------|------------------|
| | 5. INFOI | RMATI | ON ABOU | JT THE FAC | ILITY(IES) | | |
| 5.1 Next International Airport and estimated time (or distance) to reach the facility: | | 5.2 Additional Facity (if applicable) (if wild crop harvesting is taking place list collection ppoints and communities, fill in table below for wild crops) | | | | | |
| 5.3 table for wild c | rops harvesting | | | 1 | | | |
| Wild crop name, Armenian/English | /Russian | Botanio | cal name | Sales name of | ready product | Other names, important | if |
| | | | | | | | |
| | ructure (please describe the stances from processing failed. | | | | | | |
| 5.5 Accessibility ar separate facilities | nd Distances and Travel (| times bet | ween | 5.6 Export Un | it Address (if differe | ent from main fa | cility) |
| | System and Availability omplete, computerized, bu | | | 5.8 Processing | and Handling meth | nods to be empl | oyed: |
| I, the applicant for the above mentioned facility (facilities), declare to be legally entitled to request certification for handling and processing of organic products according to the USDA NOP Final Rule and/or GC/EU and other norms. | | | | | | | |
| Signature of Operator Name and Tit | | | le Date | | | | |
| | For certificati | on use o | only (applic | ants to not inte | rfere part below) | | |
| | | Revi | iew traceab | ility recording | | | |
| For transitioning Please describe th | g from other CB: e reason for changing th | ne CB, if | any: | | | | |
| NCs from perviou | s CB obtained 🛛 via A | pplicant | 🗖 via CB | , at which da | te: | | |
| Communication w | with CB was possible to | establish | n 🗖 , at whic | ch date: | | | |
| | be requested is in line wi | | • | | | | |
| Is there any confli | ct of interest with applie | cant dete | ected by \overline{CB} | , which makes i | mpossible acceptai | nce of applicati | on |
| Prepared by: N. Darbinyan/wf Date: 28.05.07 | Revised by: ND, EP Date: 24.08.2021 NOP: ND, EP date: 24.0 | 8.2021 | Approved t Date: 24.08 NOP: QM, 24.08.2021 | 3.2021 | Non-Confidential | Edition 007 | Pages: 2 of 3 |

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|---|---|--|--|--|--|
| Any comment: | | | | | |
| Additional checks, add dates ar | nd identify ch | ecks: | | | |
| Review staff personnel and dat (fill in to the right as many time was conducted): | | | | | |
| Decision on application if negative or conditional (to the right) and add date. | | Date: Denial 🗖 Reason: | | | |
| Application accepted by Caucascert Ltd | | Yes No Accepted conditional Additional information Additional actions from applicant corrective actions from applicant Due date for conditional (see above): | | | |
| Signature | | Name, Title | Date | | |

| Prepared by: | Revised by: ND, EP | Approved by: QM | Non-Confidential | Edition 007 | Pages: |
|-----------------|------------------------------|-------------------|------------------|-------------|---------|
| riepuieu oy. | Revised by 11D, EI | rippioted by. Qui | Tion connacinati | Lattion 007 | I uges. |
| N. Darbinyan/wf | Date: 24.08.2021 | Date: 24.08.2021 | | | 3 of 3 |
| N. Daronyan/wi | Date: 24.00.2021 | Date: 24.00.2021 | | | 5015 |
| Date: 28.05.07 | NOP: ND. EP date: 24.08.2021 | NOP: OM, date: | | | |
| Date. 20.03.07 | NOF. ND, EF uale. 24.06.2021 | NOP. QIVI, date. | | | |
| | | 24.09.2021 | | | |
| | | 24.08.2021 | | | |