

ANNEX 1

**of System of Grant of Ayush Quality Mark to Cultivators/Collectors of Medicinal Plants/
Herbs/Botanicals As Raw/Starting Materials**

**Application for Grant of Ayush Quality Mark to Cultivators/Collectors of Medicinal Plants/
Herbs/Botanicals as Raw/Starting Materials**

Sl. No	Item	Description
1.	Name of Cultivator/Collector <i>(Complete name as mentioned in document establishing the entity)</i>	
2.	Address of Cultivator/Collector <i>(Complete address with City, Pin Code & Sate/U.T., Country)</i>	
3.	Address of Regd. Office/Office (if different from 2 above) <i>(Complete address with City, Pin Code & Sate/U.T., Country)</i>	
4.	Location(s) of the farms/collection areas where cultivation/collection activities are carried out <i>(Complete address with City, Pin Code & Sate/U.T., Country)</i>	
5.	Contact Details of Cultivator/ Collector <i>(Give Telephone No., Mobile Nos., Email Id)</i>	
6.	Type of Firm & Legal Identity of Cultivator/Collector <i>(Proprietorship, Partnership, Ltd. Pvt. Ltd., LLP, Govt., PSU etc.)</i>	
7.	Scale of Firm	
a)	Large Scale/MSME	
b)	In case of MSME, mention Udhyam/ other relevant Registration Nos. & Date	
8.	Management of Cultivator/Collector <i>(Name & Designation of Top Management & Key Functionaries)</i>	
9.	Whether the Cultivator/Collector has In-house laboratory for testing and assuring quality <i>(Yes/No)</i>	
10.	Quality Control Personnel <i>(Mention Names & Designations of Head of QA/ QC)</i>	
11.	List of Medicinal Plants/Herbs/Botanicals As Raw/Starting Materials which are Cultivated/Collected	

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12.	List of Medicinal Plants/Herbs/Botanicals as Raw/Starting Materials for which recognition is sought	
13.	Credentials in support of seeking recognition for products at 12. above	
a)	Compliance with any importing country regulations related to starting material of herbal origin/medicinal plants/ herbs/ botanicals etc. <i>(Copy of certificate with scope & details to be attached with all details)</i>	
b)	Compliance with GAP and GFCP through NMPB-QCI voluntary certification scheme for medicinal plant produce (VCSMPP) or equivalent <i>(Copy of certificate with scope & details to be attached with all details)</i>	
c)	Compliance with organic standards like National Standard for Organic Production (NSOP) under National Program for Organic Production (NPOP) of APEDA or equivalent. <i>(Copy of certificate with scope to be attached with all details)</i>	
15.	Adverse reporting/action by the regulatory/ certifying body, if any <i>(Give details, if any action imposed)</i>	
16	Name and Address of Consultancy Firm/ Consultant engaged, if any for Any cultivation/collection related activities	
17	Payment of Application Fees <i>(Give details like Amount, Mode of Payment, Txn Id, Payment Date, Cheque No & Bank etc.)</i>	
18	Any other Information <i>(Give additional information, if any, which the applicant may like to submit in support of and relevant the application)</i>	
19	Declaration – <i>It is hereby declared that the information, as provided above are true and the documents attached in support of the application pertain to us and are authentic. I undertake to inform</i>	

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	<i>AYUSHEXCIL, in case there is change in status in respect of any information or the attached document(s).</i>	
	<i>Stamp/Seal of the Firm</i>	<i>Signature Name Designation* Date</i>

** Application to be signed by Proprietor, Partner, Managing Director, Director, CEO etc. or in his absence, by his authorized representative.*