



# LIVESTOCK EXEMPTION IN AN ORGANIC SYSTEM

## BUSINESS DETAILS

First Name(s): _____	Surname: _____
Trading Name: _____	Certification No: _____ NOT APPLICABLE FOR NEW APPLICANTS

## Address

Address 1	_____
Address 2	_____
Suburb/Town	_____
Country	_____ PC _____

## CONTACT NUMBERS (PLEASE TICK PREFERRED)

<input type="checkbox"/> Phone	_____
<input type="checkbox"/> Mobile	_____
<input type="checkbox"/> Fax	_____
<input type="checkbox"/> Email	_____

## APPLICATION FOR EXEMPTION OF LIVESTOCK

I wish to apply for exemption of livestock in an organic system for the following reasons: (please complete)

## AUTHORISATION

<b>APPLICANT:</b> _____	_____	_____
	Print Full Name Clearly	Signature Date

## OFFICE USE ONLY

### APPLICATION GRANTED

- YES  
 NO

### AS PER CRC MINUTES

Date of Minutes:

### CRC AUTHORISATION

<b>AUTHORISED BY:</b> _____	_____	_____
	Print Full Name Clearly	Signature Date