

## RETROACTIVE RECOGNITION REQUEST

<b>Operator's Name</b>	Type
<b>Operator's Code</b> <i>(N/A for initial submissions)</i>	Type
<b>Name, Surname</b>	Owner or legal representative

<b>1</b>	<b>Applicable conditions for the recognition of the conversion period</b>			
1.1	<b>Condition A:</b> The parcels were natural or agricultural areas that were not treated with products not authorized for organic production. This condition applies to the below sub-conditions, <b>(section 3 is mandatory)</b>			<input type="checkbox"/>
	a.	Virgin land (land that has not been cultivated in the past).		<input type="checkbox"/>
	b.	Fallow/uncultivated land of a specified time period.		<input type="checkbox"/>
1.2	<b>Condition B:</b> The land parcels were subject to measures defined in an official national organic standard.			<input type="checkbox"/>
	Name of Official national organic standard		Type	
	Name of the Control Body/ Authority		Type	Website Type
	Date of the initial contract with the Control Body/ Authority		Click to enter a date	

<b>2</b>	<b>Farm/ parcel details in correlation with the submitted List of Fields (ICS-BIO3C-D1.8)</b>			
Parcel code/ name	Applicable to condition	Requested period, if <b>A</b>	Date of registration, if <b>B</b>	Satellite map link
Type	Choose	Choose	Click to enter a date.	Type
Type	Choose	Choose	Click to enter a date.	Type
Type	Choose	Choose	Click to enter a date.	Type
Type	Choose	Choose	Click to enter a date.	Type
Type	Choose	Choose	Click to enter a date.	Type

<b>2</b>	<b>Documentation</b>		
2.1	Documentation for the parcel(s) applicable to <b>Condition A,</b>		
a.	Ownership/ renting contract		<input type="checkbox"/>
b.	Satellite maps that indicate the farm borders and the neighboring risks		<input type="checkbox"/>
c.	A recent declaration from a local competent authority that visited and identified that the land has not been cultivated for the requested period (dated not more than 30 days from the date of request)		<input type="checkbox"/>
d.	Photos of the virgin/ uncultivated land (with date of picture)		<input type="checkbox"/>
e.	Soil laboratory analysis (nutrients/ herbicides/ pesticides)		<input type="checkbox"/>
f.	Other		<input type="checkbox"/>
2.2	Documentation for the parcel(s) applicable to <b>Condition B,</b>		
a.	Ownership/ renting contract		<input type="checkbox"/>
b.	Satellite maps that indicate the farm borders and the neighboring risks		<input type="checkbox"/>
c.	A recent declaration from the control body or control authority (dated not more than 30 days from the date of request)		<input type="checkbox"/>
d.	Copy of the initial contract with the Control Body/ Authority		<input type="checkbox"/>
e.	Copy of the certificate obtained by the Control Body/ Authority		<input type="checkbox"/>
f.	Copies of the certification decision(s) applicable to the requested period (e.g. for 3 years, the decisions of the last 3 years)		<input type="checkbox"/>
g.	Copy of the last inspection report		<input type="checkbox"/>
h.	Crop program of the previous period		<input type="checkbox"/>
i.	List of inputs and active substances used in the previous years (provide substances used for seed treatments)		<input type="checkbox"/>
j.	List of cultivation practices that were applied by the operator in the past and may have harmed or endangered the protection of the environment		<input type="checkbox"/>
k.	Laboratory analysis (nutrients/ herbicides/ pesticides)		<input type="checkbox"/>
l.	Other		<input type="checkbox"/>

\* Documents in local language must be submitted also with an English translation.

<b>3</b>	<b>Techniques and inputs used to convert the virgin land into farmland</b>					<input type="checkbox"/> Applicable / <input type="checkbox"/> Non-Applicable
3.1	Machinery used for the implementation of the above techniques,					
	<input type="checkbox"/> Excavators/ Bulldozer	<input type="checkbox"/> Motor grader	<input type="checkbox"/> Fertilizer distributor	<input type="checkbox"/> Tractor		
	<input type="checkbox"/> Backhoe/ Crawler loader	<input type="checkbox"/> Dump truck	<input type="checkbox"/> Manure/ Compost distributor	<input type="checkbox"/> Tiller/ Cultivator / Plow		
	<input type="checkbox"/> Stone crusher	<input type="checkbox"/> Other	<input type="checkbox"/> Sprayer	<input type="checkbox"/> Other		
3.2	<b>Installation of irrigation system</b>				<input type="checkbox"/> Yes / <input type="checkbox"/> No	
a	If yes, which is the origin of the water? (E.g., public streams, river, lake, pond, drainage ditches, well, spring, etc.)				Type	
b	Type of irrigation system, <input type="checkbox"/> Drip irrigation   <input type="checkbox"/> Sprinkler Systems   <input type="checkbox"/> Surface irrigation <input type="checkbox"/> Other					
c	Is the quality of the water analyzed?				<input type="checkbox"/> Yes / <input type="checkbox"/> No	
3.3	<b>Use of Manure, <input type="checkbox"/> Yes / <input type="checkbox"/> No</b>					
	<b>Manure type</b>	<b>Manure origin</b>	<b>Upcoming Crop(s)</b>	<b>Quantity (kg/ha)</b>	<b>Fermentation period</b>	<b>Date (month)</b>
	Choose	Choose	Type	Type	Type	Type
	Choose	Choose	Type	Type	Type	Type
3.4	<b>Use of Compost, <input type="checkbox"/> Yes / <input type="checkbox"/> No</b>					
	<b>Type/composition</b>		<b>Upcoming Crop(s)</b>	<b>Quantity (kg/ha)</b>	<b>Surface (ha)</b>	<b>Date (month)</b>
	Type		Type	Type	Type	Type
	Type		Type	Type	Type	Type
<i>In case the operator uses manure as part of the compost composition, record the manure information in table 7.4.</i>						
3.5	<b>Use of fertilizers and soil conditioners (Annex I, A CERT Organic Standard), <input type="checkbox"/> Yes / <input type="checkbox"/> No</b>					
	<b>Commercial name</b>	<b>Composition</b>	<b>Crop(s)</b>	<b>Quantity (kg/ha)</b>	<b>Surface (ha)</b>	<b>Date (month)</b>
	Type	Type	Type	Type	Type	Type
	Type	Type	Type	Type	Type	Type
3.6	<b>Short description of the virgin land conversion procedure</b>					
	Description					
3.7	<b>Precautionary measures to avoid contamination from the machinery,</b>					
	<input type="checkbox"/> Cleaning the equipment with record-keeping		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
	Is the effectiveness of the cleaning measures also monitored and recorded?					<input type="checkbox"/> Yes / <input type="checkbox"/> No

Date: Date

Name/ Surname: Owner or legal representative

Signature: