

# ASC Farm Producer Application Form

Section 1: Organization Information		
<b>Company Name:</b>		
<b>Trade Name/DBA:</b>		
<b>Company Address</b>		
Street		
City		
State/Province		
Postal Code		
Country		
<b>Contact Person</b>		
<b>Title/Position</b>		
<b>Telephone</b>		
<b>Email</b>		
<b>Website</b>		
<b>Has your organization worked with SCS previously?</b>	If so, which service did you use?	
<input type="checkbox"/> Yes <input type="checkbox"/> No/Don't know		
Employee Information		
# of Employees	# Living on Site	# Used at Harvest
Description of Client Organization and Farm Operations:		

## Section 2: Certifications Requested

<input type="checkbox"/> Is this a transfer of an existing ASC farm certification? If so, current certificate code:	<input type="checkbox"/> Has your organization held ASC farm certification in the past 2 years? If so, name of certifying body:
Is this a request for a Full Assessment or Pre-Assessment? <input type="checkbox"/> Full <input type="checkbox"/> Pre	Has your organization undergone a formal pre-assessment? <input type="checkbox"/> Yes <input type="checkbox"/> No

**Mark the box of the species certification your organization is interested in.**

<input type="checkbox"/> Abalone <input type="checkbox"/> Bivalve <input type="checkbox"/> Freshwater Trout <input type="checkbox"/> Pangasius <input type="checkbox"/> Salmon <input type="checkbox"/> Seabass, Seabream, Meagre	<input type="checkbox"/> Seaweed (ASC/MSC) <input type="checkbox"/> Seriola and Cobia <input type="checkbox"/> Shrimp <input type="checkbox"/> Tilapia <input type="checkbox"/> Tropical Marine Finfish (i.e. grouper, snapper, pompano, Barramundi or croaker)
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**List the *Latin species name* of species in production**

Does your organization require or is interested in more information about ASC Chain of Custody?

Yes    No

Is the farm certified against other standards (e.g. GLOBALG.A.P., BAP, etc.)	
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### Section 3: Systems Description

**Production Methods** (Describe production system and intensity of production, market size, feed supplier, (flow-through, recirculation, cages, etc.))

**List of Farm Site(s) and Geographic Location** (Feel free to submit a map separately in lieu of list)

Farm/Concession Name	Latitude and Longitude Coordinates

**Farming Operation(s)**

Size of Farm (Area, # cages, etc.)	Annual Production	Current Cycle Stocking Date	Estimated Harvest Date

## Section 4: Government and Regulatory Agencies

List those responsible for aquaculture regulations and what they are responsible for.

Agency	Responsibilities

## Section 5: List of Potential Stakeholders

SCS will not be reaching out to any of these stakeholders until a certification project has publicly commenced.

Name of Stakeholder/Organization	Contact details (email if known)

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## Section 6: Affirmation

I affirm that the information provided herein is true and correct to the best of my knowledge, and that I am duly authorized to sign this application. Should our company decide to pursue certification, I agree to supply any information that is deemed necessary for the audit of the operation and/or products to be certified.

Name:

Title/Position:

Date:

Signature (electronic, stamp or typed accepted):

Please return this application to:

[jswecker@scsglobalservices.com](mailto:jswecker@scsglobalservices.com)

direct: +1 (510) 452-8043 fax: +1 (510) 452-6882