



SL-GAP (Rice) Certification Application Form

1.	1. Full Name of Applicant:																							
	New Applicant □					Renewal \square																		
2	Activ	e Ph	one l	Num	ber/s	s:								Fa	x Ni	ımb	er:					•••••		
3.	Appli	cant	's Na	ation	al II) Nu	ımb	er:	• • • • • •						••••									••••
4.	Posta	l Ado	dress	S:	•••••			•••••	•••••		••••	•••••	•••••					. .				••••	•••••	•••••
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	Distri																							
	Name			_																				
	Field																							·····•
	Appli										=			illica	ue (i	n En	igiis	n C	ари	aı L	ene	rs)	•	
Na	ıme w	itn 1	nıtıa	IS:	Kev	″. ⊔	/	IVII	`. ⊔	/	IV.	IS. ∟	_											
Fa	rm ad	ldres	s (Pa	artici	ılar a	addr	ess	for (each	pa	ıddy	y fie	ld th	at ca	n be	Ide	ntifi	ed:	<u> </u>	<u> </u>				
																					1			
GP	S Co	ordin	ates	of tl	ne pa	addy	fie	ld:		N:							E: .		• • • •					
10.	Have	you	prev	ious	ly oł	otair	ed S	SL-0	GAP	(R	lice	e) cei	rtific	atio	1?			Y	es 🗆]		N	√o []
	a	. If	yes,	prov	ide t	he C	Certi	fica	tion	Nu	ımb	oer: .							••••					
11.	Nat	ure o	of ow	ners	hip:	De	eed	own	er 🗆] /	Te	enan	t ow	ner [] /	Ren	t or	lea	seho	old []/			
	Oth	er 🗆	()	Pleas	se sp	ecif	y)				••••							•••••						
	Other \square (Please specify)																							

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12. Do you familiar	with the SL-GAP	(Rice) stand	ards?	Yes □	No □
,	Rice) checklist for anagement Plan fo	•	on of the farm	? Yes □ Yes □	No □ No □
14. Crop Details: a. Crops and	Varieties Applied	for Certifica	tion:		
	on: (Yala □ / Mah (Yala □ / Maha [,	Year: Year:		
Plot/Field	Extent (Ac)	Curre	nt Season	Next	Season
Number	, ,	Crops	Varieties	Crops	Varieties
15. Do you have any	proof documents	for cultivated	l crop varieties	? Yes □	No 🗆
	•		-		
16. Are there any cro	ops cultivated that	are not cover	red under SL-G	iAP (Rice) certii	ication?
				·····	
17. Indicate the type	of seeds or planting	ng material ol	otained:		
i.	Certified by DO	A:		\boxtimes	
ii.	Certified by other	er certificatio	n agencies:		
iii.	Own farm seeds	:			
iv.	Other:			☐ Specify:	
b. If certified	, specify the certif	fying organiza	ation:		
c. Indicate th	e place of purchas	se and supplie	er name:		
	-				
18. Soil and Fertiliz	er Management				
a. How do you m	nanage fertilizers o	on your farm?	,		
i.	Based on soil te	st base recom	mendations:	Yes □	No □
ii.	Based on DOA	fertilizer reco	ommendations:	Yes □	No □
iii.	Other: Yes, □	No □	Specify:		
b. Do you ad	d organic manure	to your farm/	paddy field?	Yes □	No □
•	If yes, specify th	•			
19. Water source:	<i>j</i> - 2, 2 , 20011 j ti				
	ion: Minor Irri	gation: □ R	ain fed: □ Ot	her:□ specify	:
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	a. I	Oo you have a water quality testing report for irrigation w	ater? Yes □	No □
	b. I	f yes, frequency of water quality testing:		
20.	Has the	farmland been used for non-agricultural purposes before	? Yes □	No □
	a. If	ves, for what purpose?		
	••••			
	b. Sta	te the activities carried out on the farmland during the last	st two years.	
	Year	Activity	Field/Plot Number	Extent (Ac.)
	c. Do	es your farm include both SL-GAP and non-GAP paddy/	′crops? Yes □	№ □
	d. Ha	ve you identified any hazards from adjoining land?	Yes □	No □
	e. Do	you have proper storage facilities for,		
		i. Fertilizers?	Yes □	No □
		ii. Pesticides?	Yes □	No □
		iii. Harvested paddy?	Yes □	No □
21.	Pest and	d Disease Management:		
	a. Have	e you followed proper Integrated Pest Management (IPM)) practices on y	our farm?
			Yes □	No □
	b. Is we	eed control a considerable threat to your farm management	nt? Yes □	No □
22.		rvest Practices:		
	_	ou have a proper temporary storage facility for paddy? our packaging materials contain the SL-GAP logo and Q	Yes □ R code?	No □
			Yes □	No □
23.		s' Training and Safety:		
		re they provided with basic needs, including first aid, ma		
		ad welfare?	Yes \square	No 🗆
		ave workers been trained in Good Agricultural Practices	•	_
	na	andling of produce, and pesticide application?	Yes □	No □
Th	e follow	ing documents should be attached to the application:		
	1. A c	opy of the National Identity Card (NIC):		
		lity management plan (at least one year from the date of	application):	
	3. A c	omplete layout plan of the Yaya showing location of you	r field:	
		relevant document for proving the crop/paddy variety gr	rown:	
	5. Peri	mission letter/document to prove the cultivation write:		

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Road Map to Your field/farm:	
	r farm, including main roads, byroads, lanes, landmarks,
and written plot numbers, along with dire	ectional details.)
Declaration of the farmer:	
	on is accurate and complete to the best of my knowledge. I riewed and considered for SL-GAP Rice certification.
Applicant's/ farmer's Signature:	
Designation:	
Date:	
———For	r official use only—
Date application received:	
Observations and recommendations:	
Name:	
	Date:
Signature:	Date

Contact Information:

SL-GAP Certification Division, Seed Certification Service, Department of Agriculture Telephone: 081-2388414 | Fax: 081-2388414 | Email: <u>slgapcertification@gmail.com</u>

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