



Label Approval Request

Complete and submit this form for any new or modified label. **PLEASE NOTE: Label reviews and approvals only apply to the organic claims made on the label or package.** All claims that are other than organic claims are the responsibility of the operator. The organic product packaging and labelling certification remains in effect for a period of 12 months beginning on the day on which it is granted.

Comments:	The grey sections are for office use only.		
	Approved by TCO Cert for the following jurisdiction(s): <input type="checkbox"/> Canada <input type="checkbox"/> Quebec <input type="checkbox"/> USA	Reviewer # Reviewer # Reviewer # Reviewer #	Approval Dates Initial: 2nd year 3rd year
Applicant/Company Name:	Operator ID:	Date (dd/mm/yyyy):	
Brand Name:	Product Name (as per Product List):	Package Size:	
LBL ID/SKU #:	Formula Name or Product Name (as per OPI, could be the same as above) :		
Select the reason for submitting this Label Profile form:			
<input type="checkbox"/> label for new product from existing formula <input type="checkbox"/> label for new product from new formula <input type="checkbox"/> modified label for existing product			
Check the labeling category requested for this product: <input checked="" type="radio"/> organic (≥95% organic ingredients) <input type="radio"/> made with organic (≥70% organic ingredients) <input type="radio"/> organic ingredients listing (<70% organic ingredients)	Check the type of labeling: <input type="checkbox"/> retail <input type="checkbox"/> shipping <input type="checkbox"/> non retail <input type="checkbox"/> bulk	Market where product will be sold: <input type="checkbox"/> Canada <input type="checkbox"/> USA <input type="checkbox"/> EU <input type="checkbox"/> Quebec <input type="checkbox"/> Japan <input type="checkbox"/> other(s):	
Is this product custom manufactured by another company for you? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is this product custom manufactured for another entity? <input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> PLLA forms in file <input type="checkbox"/> SUPN not required	SUPN:
Check type of packaging material used: <input type="checkbox"/> paper bag <input type="checkbox"/> foil bag <input type="checkbox"/> metal <input type="checkbox"/> waxed paper <input type="checkbox"/> jute bag <input type="checkbox"/> other: <input type="checkbox"/> cardboard <input type="checkbox"/> cardboard drum <input type="checkbox"/> plastic container <input type="checkbox"/> glass <input type="checkbox"/> stainless steel			Food Grade Statement ? <input type="checkbox"/> Yes <input type="checkbox"/> No
Describe the lot numbering or date code system?			

*** Attached copy of the new or revised label (or a draft or sketch of the proposed new or revised label if not completed).**

The following information must be included with this Label Profile form for each new product's label submitted:

If this is a new product (previously uncertified), please submit a *TCO Cert Additional Processed Product/Production Line/Program Affidavit* with this form

Submit an *Organic Product Ingredients form (OPI)* for any new product from new formula

If this is a custom manufactured product for another entity and your certified processing or packaging facility is NOT indicated on the label, please submit a Private Label Licensing Agreement and a Private Label Licensing Application forms (PLLAs) or contact your file coordinator for more details.

If this is a custom manufactured product for another entity and TCO Cert is not the certifying body listed on the label, please submit verification of approval for this label from your client's certification body.

If this is a custom manufactured product for you, submit copy of your supplier organic certificate showing equivalency to the COR (if applicable) with the Product Listing.

Submit a food grade statement for the packaging.

I would like this product's label to be approved and added on my Product Listing Addendum. I affirm that all statements made in this Label Approval Form are true, correct, and complete. I affirm that I understand that the TCO Cert Label reviews and approvals only apply to the organic claims made on the label or package. I also affirm that I understand the standards/regulations for the specific program(s) that the label(s) represent(s).

Company Representative Name	Company Representative Signature	Date (dd/mm/yyyy)