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# 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 and compliance to other applicable food labelling requirements are the responsibility of the operator.

<b>Comments:</b>	<b>The grey sections are for office use only.</b>	Approval Dates
	In compliance to the Canada Organic Regime: Signed by: _____	Initial: _____
	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	2nd year: _____
		3rd year: _____

<b>Applicant/Company Name:</b>	<b>Operator No.:</b>	<b>Date (dd/mm/yyyy):</b>
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<b>Brand Name:</b>	<b>Product Name (as per Product List):</b>	<b>Package Size:</b>
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<b>LBL ID/SKU #:</b>	<b>Formula Name or Product Name (as per OPI, could be the same as above) :</b>
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**Select the reason for submitting this Label Profile form:**

label for new product from existing formula     label for new product from new formula     modified label for existing product

<b>Check the labeling category requested for this product:</b>	<b>Check the type of labeling:</b>	<b>Market where product will be sold:</b>
<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)	<input type="checkbox"/> retail <input type="checkbox"/> shipping <input type="checkbox"/> non retail <input type="checkbox"/> bulk	<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): _____

<b>Is this product custom manufactured for another entity?</b>	<b>Is this product manufactured for a non-certified entity?</b>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> PLLA forms on file	<b>SUPN:</b>	<input type="checkbox"/> SUPN not required
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<b>Check type of packaging material used:</b>	<b>Food Grade Statement ?</b>
<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	<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 which is not certified 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 which is certified 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).

<b>Company Representative Name</b>	<b>Company Representative Signature</b>	<b>Date (dd/mm/yyyy)</b>
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