STATE OF NEW JERSEY DEPARTMENT OF AGRICULTURE DIVISION OF MARKETING AND DEVELOPMENT P. O. BOX 330, TRENTON, NJ 08625 - 0330 www.nj.gov/agriculture 609-913-6517				STATE USE ONLY Approval Date Reimbursement Data: Date:		
APPLICATION I	FOR ORGANIC CER	RTIFICATION CO	OST REIMBURSEMENT			
<u>]</u> PLEASE PRINT OR	NATIONAL/AMA C <u>TYPE</u>	OST-SHARE PRO	<u>OGRAM</u>	Amount: AMA AMA NATIONAL		
 Total fees paid to cer 	rtifier for organic certi	fication between 10)/1/21 - 9/30/22= \$	(include	e all receipts, etc.)	
Operation Type:	Produce	er (farmer)	Handler/Processor			
Certification Cate	egory: Crops	Wild	Crops Livestock	Processi	ng/Handling	
NJSTART Vendo (REQUIRED FOR REIM Name of Farm / Operation (if applicable)		APPLICANT	INFORMATION			
Name of Applicant						
Business Address	Number & Street		City	State	Zip Code	
Mailing Address (If different)	Number & Street		City	State	Zip Code	
Phone Number	()		Fax Number ()		
E-mail Address			Contact Name			
Certifying Agency	(Company Name)	CERTIFYING AG	ENT INFORMATION			
Address	Number & Street		City	State	Zip Code	
Phone Number	<u>(</u>)		Fax Number ()		
Applicant's Signature				Date		
INVOICE(S) DETAIL PROOF OF PAYME	ING CERTIFICATION NT FOR CERTIFICA	MUST BE INCLU ON COSTS ATION COSTS		TINUATION OF CE ORGANIC CERT	FICATE **	

organic operations. APPLICATIONS MUST BE RECEIVED BY THE NJ DEPARTMENT OF AGRICULTURE NO LATER THAN THE CLOSE OF BUSINESS ON NOVEMBER 1, 2022

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

Email to: organiccostshare@ag.nj.gov or **Mail** to: NJDA, Division of Marketing & Development, Attn: Nichole Steward, PO Box 330, Trenton, NJ 08625. It is your responsibility to verify that your application and supporting documentation have been received by the Department of Agriculture. Completed applications are processed in the order that they are received.