

STATE OF NEW JERSEY
DEPARTMENT OF AGRICULTURE
DIVISION OF MARKETING AND DEVELOPMENT
P. O. BOX 330, TRENTON, NJ 08625 - 0330
www.nj.gov/agriculture
609-292-5576

APPLICATION FOR ORGANIC CERTIFICATION COST REIMBURSEMENT

NATIONAL/AMA COST-SHARE PROGRAM

PLEASE PRINT OR TYPE

STATE USE ONLY	
Approval Date	_____
Reimbursement Data:	
Date:	_____
Amount:	_____
Program:	<input type="checkbox"/> AMA
	<input type="checkbox"/> NATIONAL

• Total fees paid to certifier for organic certification between 10/1/18 - 9/30/19 = \$ _____ (include all receipts, etc.)

Operation Type: Producer (farmer) Handler/Processor

Certification Category: Crops Wild Crops Livestock Processing/Handling

NJSTART Vendor ID Number: _____

APPLICANT INFORMATION

Name of Farm /
Operation
(if applicable) _____

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 AGENT INFORMATION

Certifying Agency
(Company Name) _____

Address
Number & Street _____ City _____ State _____ Zip Code _____

Phone Number () _____ Fax Number () _____

Applicant's Signature

Date

IMPORTANT

THE FOLLOWING DOCUMENTATION MUST BE INCLUDED WITH THIS APPLICATION:

CERTIFICATION COST RECEIPT(S) OF PAYMENT
PROOF OF CONTINUATION OF CERTIFICATION **

PHOTOCOPY OF ORGANIC CERTIFICATE **

** For renewal applicants - These forms are not required if your operation is listed in the USDA's database of certified organic operations.

**APPLICATIONS MUST BE RECEIVED BY THE NJ DEPARTMENT OF AGRICULTURE NO LATER
THAN THE CLOSE OF BUSINESS ON FRIDAY NOVEMBER 15, 2019.**

Mail to: NJDA, Division of Marketing & Development, Attn: Nichole Steward, PO Box 330, Trenton, NJ 08625 or fax to: (609) 984-2508 or email to: nichole.steward@ag.nj.gov