**APPLICATION FORM FOR THE ASSESSMENT OF COLORANTS AND TEXTILE AUXILIARIES ACCORDING TO GOTS STANDARD Version 7.0**

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| **1.0 Operator/Client Details** | | | |
| **Operator /Company Name:** |  | | |
| **Legal Address of Operator /Company:** |  | | |
| **Name of manufacturing/Formulating/Subcontracting Unit** |  | | |
| **Address of manufacturing/Formulating/ Subcontracting Unit** |  | | |
| **Phone/Mobile:** |  | | |
| **Fax:** |  | | |
| **Web Site:** |  | | |
| **Operator /Company Legal Representative Name:** |  | **Contact Person :** |  |
| **E-mail:** |  | **Designation:** |  |
| **Phone:** |  | **E-mail:** |  |
| **Mobile:** |  | **Phone:** |  |
| **Operator /Company VAT Number:** |  | **Mobile:** |  |
| **Consultant Name if any:** |  | **No of Workers** |  |

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| **2.0 Further Details for Only Operator:** |
| **2.1- Please state the desired chemical input approval option** |
| **GOTS V 7.0** **(applicable only for trader)**  **GOTS V 7.0** **with on-site audit** |
| **2.2 please select the validity of the letter of approval** |
| valid for 12 months  valid until a new GOTS version is implemented |
| **2.3 Any other Quality Certification/ Initiative credentials** |
| Any On-site third-party audit for environmental management and safety is performed regularly;  if yes, the last audit date and certificate validity date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ECO PASSPORT by OEKO-TEX®  Bluesign  ZDHC Level 3 Product Conformance  Any other standards or Initiatives (like ISO 14001, ISO 45001, etc)  Standard/ Initiative**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  NOTE 1: If you are certified against any such standard(s) which are mentioned above, please submit all the valid certificates along with the last audit report and test report. |
| **2.4 OPERATOR NATURE OF ACTIVITY** |
| Chemical Manufacturing  Trading  Formulation Other (please describe):  Subcontracting |
| **2.5- Has your approval or certificate been suspended/withdrawn before:**  Yes  No  If Yes, please state the details  Note: This question refers standards/ Initiatives mentioned in 2.2 in addition to GOTS standard. |
| Details: |
| **2.6- Whether another Certification Body has denied GOTS letter of approval.**  Yes  No  If Yes please state the reason |
| Reason: |
| **2.7 GOTS requirements for the applied chemcial inputs are understood by us and the applied inputs are compliant to the best of our knowledge** |
| Yes  No |
| **2.8 Confirm that SDS for each applied chemical input is prepared according to any one of the below listed recognized norms or directives** |
| [ANSI Z400.1](https://share.ansi.org/Pages/Welcome.aspx)/Z129.1:2010  ISO 11014-1  EC 1907/2006  EC 2020/878  EC 2015/830  GHS (Global Harmonised System)  JIS Z 7253:2012 |
| **2.9 Agree to inform GCL about any relevant changes as mentioned below related to applied or already approved input(s), such as: Yes**  **No** |
| change in supplier or raw materials used,  change of production method / technology used or both,  change of (concentration of) raw materials / ingredients used  Any other information which might affect the GOTS Approval criteria. |
| **2.10-** **Have you been contracted, audited or approved as per GOTS standard from another CB within the preceding 2 years?** |
| Yes  No  If yes, please send the previous audit report as the results of the previous audit will be considered, and any open non-conformities will remain applicable |
| **2.11 Do you handle approved and non-approved products (parallel production)?** |
| Yes  No |
| **2.12 Has the operator granted GCL the right to exchange information with other certification bodies, accreditation bodies and the Global standard gGmbH to verify the authenticity of the information ?** |
| Yes  No |

**SUBMISSION**

**After completing the Application Form, please submit it directly GCL head office or to your nearest local GCL Office: To check the nearest GCL Office in your area, please go to** [**www.gcl-intl.com**](http://www.gcl-intl.com)

PCAF02 Version 5, 10/01/2024

We hereby request the assessment by GCL International Limited of the following Colourants / Textile Auxiliaries to verify compliance with the chemical requirements of the Global Organic Textile Standard:

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| --- | --- | --- | --- | --- |
| **Sr. No.** | **Name of chemical input** | **Utilisation of substance** | **Safety Data Sheet added? yes/No** | **Existing/Added/Withdrawn** |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |
| 5. |  |  |  |  |
| 6. |  |  |  |  |
| 7. |  |  |  |  |
| 8. |  |  |  |  |
| 9. |  |  |  |  |
| 10. |  |  |  |  |

|  |  |
| --- | --- |
| No. of new products added |  |
| No. of Old products available |  |
| No. of old products withdrawn |  |
| Total No. of products |  |

**PLEASE NOTE THE FOLLOWING:**

The assessment will be done using the CHECKLIST FOR APPROVAL FOR COLOURANTS AND TEXTILE AUXILIARIES. All necessary documents like Safety data sheets, Test reports, Technical Data Sheets and other relevant documents like no intentional use declarations, sources of data for hazard and toxicity etc shall be sent for each chemical input.

Undersigned declares that all the given details are correct and true.

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| **Applicant Operator** |
| **NAME, DATE & SIGNATURE**  **(Authorized representative of the Applicant)**  **Date: / /**  **Note: Signature to be done by Director/Proprietor or authorised person. If signed by authorised/legal representative, authorisation letter shall be submitted** |

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| **GCL USE ONLY** | |
| **Date: / /** | **SIGNATURE**  **(GCL Application and Contract Reviewer)** |