



2018 Supplier Declaration Form

1. Supplier (fruit producer or purchaser)

.....

2. Source of Supply

.....

(Grove name and location)

Declare that the following answers given are a true history of the management of the above mentioned grove.

3. Spray History

Have any of the following spray groups been applied to any area of the above mentioned grove at any time during the **15 days** prior to harvest?

<i>Fungicides</i>	YES	NO (circle one)
<i>Pesticides</i>	YES	NO
<i>Copper</i>	YES	NO
<i>Stroby</i>	YES	NO
<i>Foliar Fertilizer</i>	YES	NO
<i>Other</i>	YES	NO

If 'other', please state.....

.....

(what)

(when)

Note: we confirm that we keep a spray diary which is available upon request for inspection. We acknowledge that we must respect the Maximum Residue Limits of Agriculture Compounds:

<http://www.foodsafety.govt.nz/elibrary/industry/register-list-mrl-agricultural-compounds.htm>

Declaration

I accept responsibility for checking the condition of the processed oil upon collection from The Olive Press Limited. I understand that no responsibility will be taken by The Olive Press Limited for product damaged or contaminated once it leaves the processing plant. I confirm I have read and accept TOP's Terms of Trade, as per the company's website.

Signed..... Dated.....

Please return this form completed with, or prior to, fruit delivery to The Olive Press.