



# 2016 Supplier Declaration Form

## 1. Supplier (fruit producer or purchaser)

.....  
(Surname) (Given name) OR Business Name

## 2. Source of Supply

.....  
(Grove name and location)

I/We 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)

## Declaration

I/We accept responsibility for the above declarations and acknowledge that I/We have read and understand the Terms of Trade of The Olive Press Ltd and we accept them.

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

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