



Fairtrade America Company Application

This form is part of the procedure for registering for permission to use the FAIRTRADE Mark. On receipt of this form with ALL sections completed, we will aim to assess your application within 2 - 3 weeks before sending you a contract for signature. Incomplete forms may delay your application. Fairtrade America guarantees full confidentiality for all confidential business information. If you have any questions, please contact Fairtrade America at license@fairtradeamerica.org

Please note that you are not considered registered until you have received your copy of the Fairtrade License Contract signed by both parties. Once registered, all packaging and promotional materials on which you wish to use the FAIRTRADE Mark must be submitted for our approval prior to printing, subject to the product being licensed.

Please email back the completed form or mail it to Fairtrade America, 1400 Eye Street, NW Suite 425, Washington, DC 20005.

Please print clearly. All sections are mandatory.

COMPANY INFORMATION			
Registered Name			
Trading name (if different from above)			
FLO ID (if already registered with FLO)			
Status	Limited Company <input type="checkbox"/>	Partnership <input type="checkbox"/>	Sole Trader <input type="checkbox"/>
Company Registration No			
Contact Name			
Job Title			
Email Address			
Address for Correspondence			
Company's Registered Address			
Company's Tax number			
Phone Number			
Fax Number			
Website			
Will at least 95% of your total sales volume be Fairtrade Certified? <input type="checkbox"/>			
<i>(Organizations who meet this criteria qualify for a 50% discount on their license fees)</i>			



CONTACT INFORMATION

Please provide contact details for the person(s) responsible for the roles defined below. Please help us keep our records up-to-date by letting us know if any contact details change in the future.

The authorised signatory to the Agreement <i>(This must be either a Director, Partner or Company Secretary.)</i>	Name	
	Job title	
	Telephone	
	Email	
Fairtrade Officer <i>(Fairtrade America requires a person to be identified as the primary contact for all Fairtrade business matters.)</i>	Name	
	Job title	
	Telephone	
	Email	
Quarterly Fairtrade sales reports	Name	
	Job title	
	Telephone	
	Email	
Payment of quarterly license fee invoice	Name	
	Job title	
	Telephone	
	Email	
Packaging and other artwork. <i>All artwork (packaging and promotional material) must comply with the Trademark Use Guidelines</i>	Name	
	Job title	
	Telephone	
	Email	
Sales	Name	
	Job title	
	Telephone	
	Email	
Marketing	Name	
	Job title	
	Telephone	
	Email	
Sourcing / purchasing	Name	
	Job title	
	Telephone	
	Email	



BUSINESS OVERVIEW

Please check as appropriate	Brand Owner <input type="checkbox"/>	Manufacturer <input type="checkbox"/>	Importer <input type="checkbox"/>	Other <input type="checkbox"/>
If other, please provide details:				
Please provide an overview of your business including				
<ul style="list-style-type: none"> • Any additional roles your company performs in the supply chain • Details of parent company (if any). 				
Please give an estimate of your turnover:				
Where did your interest in Fairtrade originate from?				
Please estimate how much of your business will be Fairtrade in the next year:				
Please state which market(s) you are selling to:				
USA <input type="checkbox"/>	CANADA <input type="checkbox"/>	UK <input type="checkbox"/>	Other <input type="checkbox"/>	
If other, please provide details:				
Please list the name of brands and/or private labels that you currently sell/produce:				
Please tell us which retailers and/or wholesalers you are selling to (optional):				
What is your route to market – centralized distribution or wholesaling or other? (optional)				



For which Fairtrade products do you wish to apply?

Please also indicate in the table below which function your company will have in the Fairtrade supply chain. Check as many as apply. Packaging is included in 'Manufacturer'. If you move into additional product categories in the future, please contact us so that we can update our records.

PRODUCT	FUNCTION						
	Importer	Manufacturer	Distributor	Brand Holder	Other		
Cocoa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Coffee	<input type="checkbox"/>	<input type="checkbox"/> (Roaster)	<input type="checkbox"/>				
Dried Fruit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Flowers	<input type="checkbox"/>	-	<input type="checkbox"/>				
Coconut	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Fresh Fruit	<input type="checkbox"/>	<input type="checkbox"/> (Ripener)	<input type="checkbox"/>				
Fresh Vegetables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Fruit Juices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Grains (Rice, Quinoa)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Herbs & Spices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Honey	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Agave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Nuts & Oil Seeds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Precious Metals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Soybeans & Pulses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Sports Balls	<input type="checkbox"/>	-	<input type="checkbox"/>				
Sugar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Tea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Wine	<input type="checkbox"/>	-	<input type="checkbox"/>				
Cosmetics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Cotton	Dyer <input type="checkbox"/>	CMT* <input type="checkbox"/>	Embellisher <input type="checkbox"/>	Knitter <input type="checkbox"/>	Spinner <input type="checkbox"/>	Distributor <input type="checkbox"/>	Other

* Cut Make Trim



PRODUCT INFORMATION

Please check if you are a member of the GS1 (UPC) system: <input type="checkbox"/>	
What percentage of your product range is certified as organic?	
Where do you source your product from? Please specify the countries/companies.	

OPPORTUNITIES

What (other) opportunities can you see within your business as Fairtrade in the future?
New Products
New Distribution

CHALLENGES

Can you foresee any challenges in manufacturing/sourcing Fairtrade ingredients? If yes, please provide details.



DECLARATION AND SIGNATURE

I, the undersigned, have completed this application to become registered with Fairtrade. I have been diligent in seeking out the required information and to the best of my knowledge the information herein is accurate and complete. I agree that Fairtrade, as a certification body may contact suppliers, customers and other organizations if the need should arise to verify any of the above given application information. However Fairtrade ensures full confidentiality for all confidential business information.

NAME:	
POSITION HELD IN APPLICANT ORGANIZATION:	
SIGNATURE: _____	DATE: ____