

# REGISTRATION for GRASP add-on

GLOBALG.A.P. Risk Assessment on Social Practice



NZGAP Number:

*(If currently NZGAP certified)*

GGN:

*(GlobalG.A.P. growers)*

If you do not have an NZGAP number, please provide some company information and contact details

**Business Name:**

*(Legal entity)*

**Trading Name:**

*(This name will appear on your certificate)*

**Business Owner:**

*(Full Name)*

**Responsible Manager/ Contact Person:**

*(Full Name)*

**Contact Details:**

*(Telephone Number)*

*(Mobile Number)*

*(Email Address)*

**Postal Address:**

*(Street Address, Suburb/Area, City/Region)*

*(Postcode)*

**Choose your Auditor:** (select one)

AsureQuality

SGS

**Please select your business type to calculate your GRASP application cost:** (select one)

*Please note that this is only the registration fee. You will also be invoiced by the selected certification body for your audit.*

Growing - NZGAP GLOBALG.A.P. Equivalent ..... \$50 incl. GST

Growing - GLOBALG.A.P. Option 1 ..... \$176 incl. GST

Labour contracting ..... \$250 incl. GST

Packing for others ..... \$250 incl. GST

**Select your payment method:**

**Direct Credit**

Payee: **Horticulture NZ**  
Bank Account: **02-0500-0793676-00**  
Particulars: **Your "Trading Name"**  
Code: **Your "NZGAP Number" (if known)**  
Reference: **NZGAP**

**Cheque**

I enclose a cheque for the above amount made out to **Horticulture NZ Inc. (not "NZGAP")**

On completion this form becomes your GST invoice.  
**GST No:** 093-098-412

**Remember to keep a copy for your records.**

DATE:     
*Day Month Year*

SIGNED:   
*Once completed click to sign electronically or print and sign*

**Submit the completed form:**

Please email completed form to:  
[info@hortnz.co.nz](mailto:info@hortnz.co.nz)

Or post to: Horticulture New Zealand,  
Freepost 729, PO Box 10232,  
The Terrace, Wellington, 6143

**OFFICE ONLY**  
NZGAP NUMBER

v2 July 2017