



AVOCO Grower Group Food Act Registration Consent Form

Avocado growers wishing to register under Section 40 Template Food Control Plan (Food Act 2014) through the AVOCO Group (Bulk registration) scheme are required to complete details in the following form.

Orchard Details

Orchard Name: TECHO's Backyard Limited

Grower Contact Name: (First and last name) Owen Robertson

Orchard Physical Address: 19 Snodgrass Road, RD4, Tauranga 3174

Orchard Postal Address: PO Box 16425, Bethlehem, Tauranga 3147

Council (That your site falls under): Western BOP

PPINS: (Covered by this application) 97152

Email address: baldrover@hotmail.com

If applicable, New Zealand Business Number (NZBN): 9429047213630

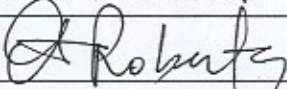
(If yours is a Limited Liability Company then you must provide a NZBN.)

AUTHORISATION

- I agree that the information supplied is accurate and truthful to the best of my knowledge;
- I agree to this information and any additional information relevant to the requirements of the Food Act (2014) that I provide to AVOCO to be transferred to and retained by MPI or approved Food Act service providers for information assurance and record keeping purposes.

This permission will remain in force until I notify AVOCO in writing that the permissions are revoked or I cease supplying AVOCO.

- I certify that I am authorised to sign this form on behalf of the individual or entity named in the form and that the information is correct.

Name	Owen Robertson
Signature	
Date	3/2/19