



State of Hawaii
 Department of Agriculture
 Quality Assurance Division
 Commodities Branch

**APPLICATION FOR CERTIFICATION OF
 QUALITY AND CONDITION
 APPLICANT'S DECLARATION OF ORIGIN
 GREEN COFFEE BEANS**

Part I must be completely filled in and signed. Response is **required** to obtain certification service.

PART I I understand that the Hawaii Department of Agriculture uses the following information in its certification of quality and condition of green, natural and mixed natural coffee beans. I agree and understand that utilizing a certification that is based on any misstatements I provide herein may constitute a violation of Chapter 147, Hawaii Revised Statutes (HRS), or Title 4, Subtitle 7, Chapter 143, Hawaii Administrative Rules (HAR), and may result in the penalties set forth in Section 147-2, HRS and/or Section 4-143-8, HAR.

I certify that the following lot/s of green, natural or mixed natural coffee beans offered for certification were produced in the geographic region of _____, as defined in Section 4-143, HAR on the island of _____, tax map key nos. _____.

GREEN (WASHED)	NATURAL	MIXED NATURAL	GRADE	NO. OF SACKS	NET WEIGHT (LBS.)

Applicant/Address:

Remarks:

Signature Coffee Owner/Representative _____ Date _____

Applicant's Phone No. _____

Print Name _____

Print Company Name _____

Part II I understand that the Hawaii Department of Agriculture uses the following information in its certification of quality and condition of green coffee beans. I agree and understand that utilizing a certification that is based on any misstatements I provide herein may constitute a violation of Chapter 147, Hawaii Revised Statutes (HRS), or Title 4, Subtitle 7, Chapter 143, Hawaii Administrative Rules (HAR), and may result in the penalties set forth in section 147-2, HRS and/or section 4-143-8, HAR.

I certify that the _____ pounds of **cherry/parchment** coffee offered for milling to **parchment/green beans** were produced in the geographic region of _____, as defined in Section 4-143-3, Hawaii Administrative Rules, on the island of _____, tax map key nos. _____.

Signature Coffee Owner/Representative _____ Date _____

Print Name _____

Print Title _____

Print Company Name _____