


COMPANY FILE

(Write in block letters or computers or typewriters)

Company Name: _____	
Company Name <i>(only if different)</i> : _____	
Kind of company: <input type="checkbox"/> agricultural <input type="checkbox"/> commercial <input type="checkbox"/> cooperative	
Name/Surname of the Holder: _____	
Name/Surname of the Founder: _____	
Name/Surname of the agronomist: _____	
Name/Surname of the commercial manager: _____	
Foundation year: _____ N. partners <i>(only Cooperatives)</i> : _____	

Company Address: _____	
Nation: _____	City: _____
Place: _____	
Postal Code.: _____	Prov.: _____
Tel. 1: _____	Tel. 2: _____ Fax: _____ Cellular: _____
E-mail: _____	Web: _____
VAT number _____	Tax Code _____

Direct Sales: <input type="checkbox"/> YES <input type="checkbox"/> NO	On-line Selling: <input type="checkbox"/> YES <input type="checkbox"/> NO
Gift Package: <input type="checkbox"/> YES <input type="checkbox"/> NO	
Educational activities: <input type="checkbox"/> YES <input type="checkbox"/> NO	
Export oil abroad: <input type="checkbox"/> YES <input type="checkbox"/> NO	
Accommodation Availability: <input type="checkbox"/> YES <input type="checkbox"/> NO	n. rooms: _____
Restaurant: <input type="checkbox"/> YES <input type="checkbox"/> NO	n. covers: _____
Farmhouse: <input type="checkbox"/> YES <input type="checkbox"/> NO	n. rooms: _____
Bed & Breakfast: <input type="checkbox"/> YES <input type="checkbox"/> NO	n. rooms: _____
Visitors are accepted: <input type="checkbox"/> YES <input type="checkbox"/> NO	write _____ date _____ and _____ time _____
Table Olives production: <input type="checkbox"/> YES <input type="checkbox"/> NO	
Other products: <input type="checkbox"/> YES <input type="checkbox"/> NO	such _____ as: _____

Company production:	
<input type="checkbox"/> own olive trees	<input type="checkbox"/> olive purchase kg. _____ <input type="checkbox"/> oil purchase
<input type="checkbox"/> oil mill owned	<input type="checkbox"/> toll manufacturing
<input type="checkbox"/> proprietary bottling	<input type="checkbox"/> toll bottling

the mandatory fields are highlighted in yellow

Eco - sustainability:

- Green building Use of alternative energies CO₂ emission control
 Use processing residue Separate waste Use of light glass
 else (*specify*) _____

Own olive grove area: _____ (ha); **olive grove area for rent:** _____ (ha)

Total firm area: _____ (ha); **total number of olive trees:** _____

Cultivation:

- Conventional YES NO n. Hectares _____
 Biological YES NO n. biological hectares _____ n. hectares in conversion

 Byodynamic YES NO n. byodynamic hectares _____ n. hectares in reconversion

 PDO/PGI YES NO n. Hectares _____

Farmland: medium mixture; gravelly; rocky; silty/clay; melted/sandy Else

Olive grove cultivation: high plain; low hill; medium hill; high hill; foothills; mountain

Type of Breeding:

- Promiscuous (*olive trees + else*)
 Specialized *only olive trees*
 Promiscuous and specialized
 Beating

Modalità di Raccolta:

- hand picking
 Mechanics
 Hand and mechanical picking
 2 phases 3 phases
 hand beating and picking

Metodo di estrazione:

- Tradizional pressing
 Sinolea
 continuous cycle:
 Mixed continuous cycle

Form of breeding: jar; monocone; globe; shrub; hedge; palmetta; ypsilon; else

Olive variety: (*insert the name of the main variety in full*): _____

Own olives for oil production: _____ (kg) **Olives purchased:** _____ (kg)

Total oil production: _____ (kg) – **oil purchased:** _____ (kg) **Average yield in oil:** _____ (%)

Conservazione olio:

- stainless steel tanks: YES NO porcelain basins: YES NO vitrified concrete tanks: YES NO
 Saturation with inert gas: YES NO nitrogen argon Else, such as: _____
 Oil filtration: YES NO
 Filtration system: in cartons cotton else, such as: _____

the mandatory fields are highlighted in yellow

OIL SHEET

(Write in block letters or computers or typewriters)

SAMPLE n. _____

COMPETITION CATEGORY IN WHICH YOU WANT TO PARTICIPATE (*put an x on one category only*)

- PDO/PGI**
 BIOLOGICAL
 SINGLE VARIETY
 100% ITALIAN
 INTERNATIONAL
 FLAVORED
 EVOO TOP WINNERS

Name of the Extra Virgin Olive Oil: _____

Quantity produced: _____ (kg or _____ (liters)

PDO/PGI and subzone (*only if on the label*): _____

From biological agriculture (*certified*) **Control Body:** _____

In conversion to organic

Byodynamic

Flavored for: maceration infusion else _____

Variety of olives in percentage (*insert the name of the variety in full*):

1 - _____ (..... %); 2 - _____ (..... %); 3 - _____ (..... %)

4 - _____ (..... %); 5 - _____ (..... %); 6 - _____ (..... %)

7 - _____ (..... %); 8 - _____ (..... %); 9 - _____ (..... %)

Fruity intensity indicated by the company:

Light fruity Medium fruity Intese fruity

Retail price:

Euro _____ 0,250 L Euro _____ 0,500 L

Euro _____ 0,750 L Euro _____ 1 L

Euro _____ 3 L Euro _____ 5 L

Price to the dealer (will be 50% higher in the catalog):

Euro _____ 0,250 L Euro _____ 0,500 L

Euro _____ 0,750 L Euro _____ 1 L

Euro _____ 3 L Euro _____ 5 L

Tipo confezioni:

glass tin bag in box else _____

the mandatory fields are highlighted in yellow

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Stamp and Signature of the company for acceptance
