

FORM III
APPLICATION FOR THE GRANT OF LICENCE TO
MANUFACTURE INSECTICIDES

[Rule 9]

1. Name, address and status of the applicant

2. Address of the premises where the manufacturing activity will be done

3. Name of the insecticide with their registration number and date for which manufacturing licence is applied for (enclose copies of certificate of registration duly signed by the applicant).

Name of insecticide / Registration No./ Date

1 _____

2 _____

3 _____

4. Whether any registration is provisional, if so, give particulars

5. Details of full time expert staff connected with the manufacture and testing of the insecticides in the above unit:_____

Name / Qualification / Experience

1 _____

2 _____

3 _____

6. Whether all the facilities required under Chapter VIII of the rules have been provided. Give full details in a separate sheet._____

7. Particulars of the fee deposited:_____

Signature of the applicant_____

VERIFICATION

I _____ S/o _____ do hereby solemnly verify that to the best of my knowledge and belief the information given in the application and the annexures and statements accompanying it, is correct and complete.

I further declare that I am making this application in my capacity as _____ and that I am competent to make this application and verify it by virtue of _____ a photo/ attested copy of which is enclosed here with.

Date: _____

Place: _____

Signature with seal. _____