

(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 insecticides with their registration number and date for which manufacturing licence is applied for (enclose copies of certificate of registrations)	Name of insecticides	Registration No.	Date
	1.		
	2.		
	3.		

Duly signed by the applicant.

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 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 annexure 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 herewith.

Signature with seal

Place:.....

Date.....