DOCUMENTS REQUIRED FOR RENEWAL OF MOA (WHOLESALE)

- 1. Covering Letter requesting for renewal
- 2. Application Form in Form A-1 in duplicate.
- 3. List of present Directors in case of Limited/Pvt. Limited company. (Name & complete office & Residential address)
- Power of Attorney/ resolution to appoint responsible person u/c 24 of FCO, 1985, to sign and submit the documents: (One of the Director-by Resolution / one of the partner-nominated by all partners/ or Proprietor himself.
- 5. General affidavit by the applicant authorized by resolution of the firm/partners/prop. himself.(from Sr.No. 1-10) along with photo and residential proof.
- 6. Affidavit of responsible person under clause 24 o f FCO 1985(nominated by resolution /partners/ prop., himself) along with photo and residential proof.
- 7. Attested copy of the R.C. issued by Director Agriculture or competent officer of the Agriculture Deptt.
- 8. Source of supply ("O" form)
 - (i) For self manufacturing: Attested copy of the R.C. and SSI/DIC certificate
 - (ii) For importing : Bill of lading, source of origin, Invoice, analysis report and information u/cl 35(4) of FCO, 1985.
- 9. Quality Performance Report
- 10. Registration Fee.

FORM 'A-1'

MEMORANDUM OF INTIMATION {See Clause 8(2)

1.	Details of the Notified Authority to whom application is .
	Designation of Notified Authority : <i>Joint Director of Agriculture (Inputs).</i> Place : <i>Directorate of Agriculture, Punjab Chandigarh</i> State of : <i>Punjab</i> .
2,	Details of the applicant.
	(a) Name of the applicant. :
	(b) Name of the concern firm :
	(c) Postal address with : telephone number.
3.	Place of business (Please give full address)
	(i) For sale :
	(ii) For storage. :
4.	Whether the application is for:-
	(Manufacturer/ Importer/Pool Handling Agency/ : Wholesale Dealer/ Retail Dealer)
5.	Details of fertilizer and their source in Form "O"
	Name of fertilizer whether certificate of source in Form 'O' is attached.
	(i) Yes No
	(ii) Yes No
	(iii) Yes No
	(iv) Yes No
	(v) Yes No
	(vi) Yes No
	(Please tick mark whichever is applicable)
6.	I have deposited the registration fee of Rs vide Challan
	NoDated in the
	Bank/Treasury Or enclosed Demand Draft No
	Dated for Rs In favour
	oftowards registration fees.
	[contd. P/2]

7. Whether the intimation is for an authorization letter : or a renewal thereof.

(Note: In case the intimation is for renewal of authorization letter, the acknowledgement in Form A2 should be submitted for necessary endorsement thereon.)

8. Any other relevant information.

I have read the terms and conditions of eligibility for submission of Memorandum of Intimation and undertake that the same will be complied by me and in token of the same, I have signed the same and is enclosed herewith.

Place:

Date:

Signature of Applicant.

Terms and conditions of authorization

- (1) I shall comply with the provisions of the fertilizer (Control) Order,1985 and the notifications issued hereunder for the time being in force.
- (2) I shall from time to time report to the Notified Authority and inform about change in the premises of sale depot and godowns attached to sale depot.
- (3) I shall also submit in time all the returns as may be prescribed by the State Government.
- (4) I shall not sell fertilizers for industrial use.
- (5) I shall file a separate Memorandum of Intimation for, where the storage point is located outside the area jurisdiction of the Notified Authority where the sale deport is located.
- (6) I shall file a separate MOI for each placed when the business of selling fertilizers is intended to be carried on at more than one place.
- (7) I shall file separate MOI if I carry on the business of fertilizers both as retail and wholesale dealer.
- (8) I confirm that my previous certificate of Registration or Authorization is not under Suspension or Cancellation or debarred from selling of fertilizers.

DECLARATION

I /We declare that the information given above is true to the best of my/our knowledge and belief and no part thereof is false or no material information has been concealed.

Place:

Date:

Signature of Applicant.

(Affidavit for manufacturing & marketing own fertilizers)

<u>AFFIDAVIT</u>

I,.....R/o......R/o.....working

as.....in M/s

hereby solemnly affirm and declare as under:-

- 1. That our firm is manufacturing/Importing/marketing...... fertilizer under the brand name
- 2. That I have appointed as responsible person u/c 24 of FCO-1985.
- 3. That I shall be responsible person u/c 24 of FCO for the compliance with the provisions of FCO-1985.

Date :

Place:

Deponent.

VERIFICATION

Verified that the above contents are true and correct to the best of my knowledge and belief and nothing has been concealed therein.

Date :

Place:

Deponent

(Affidavit for marketing fertilizers which are to be manufactured/imported by another company)

<u>AFFIDAVIT</u>

I,.....R/o.....R/o.....working as.....in M/s

hereby solemnly affirm and declare as under:-

- 1. That our firm is marketing..... fertilizer under the brand name
- 2. That I have appointed as responsible person u/c 24 of FCO-1985.
- 3. That I shall be responsible person u/c 24 of FCO for the compliance with the provisions of FCO-1985 for marketing fertilizers in the brand name......manufactured / imported by M/s.....

Date :

Place:

Deponent.

VERIFICATION

Verified that the above contents are true and correct to the best of my knowledge and belief and nothing has been concealed therein.

Date :

Place:

Deponent

()	General	affic	davit for renewal of li	cence)				
					AFFI	DAVIT			
1	That	Т	3	am	the	sole	proprietor/partner/Managing	Director	of
	M/s								

- 2. That we are the manufacturing/ Importing/ marketing...... fertilizers under the brand name.....
- 3. That we shall abide by all the terms and conditions laid down in FCO.1985 in this respect and as prescribed by the authorities of State Govt. time to time.
- 4. That none of the relations is in the Agri. Deptt., Punjab.
- 5. That we have not convicted in any offence under FCO.1985 or ECA-1955 within three years immediately proceeding the date of making the application.
- 6. That the monthly sale and stock report will be submitted to the Director of Agriculture Punjab.(with the copy to concerned CAO).
- 7. That the quality of products will be as per the specifications laid down in the FCO.1985.
- 8. That if there is any change in the premises/partnership /any other documents already submitted, department of Agriculture, Punjab will be informed accordingly.
- 9. That issued we have been proper registration certificate by the Registering Authority..... MOI and /Manufacturing license is valid up to.....(Attached copy is enclosed.)
- That Sh......S/o......r/o.....working as.....in the company has been nominated as responsible person under clause 24 of FCO.1985 for compliance of provisions of FCO.1985. If he retires or leaves the company, I shall be responsible for all acts done by him on behalf of the company.
- 10 a. That there is no change in the premises/ map already submitted by the company.
- 11. That the quality control labs., along with the necessary equipment as required under clause 21-A of FCO. 1985 has been installed and list of equipment duly verified by the concerned officer of Agriculture department has been attached with the application.
- 12. That Sh......has been appointed in the labs., for analysis of Fertilizer and his qualification is

Date :

Place:

Deponent.

VERIFICATION

Verified that the above contents are true and correct to the best of my knowledge and belief and nothing has been concealed therein.

Date :

Place:

Deponent.

	Resolution(For res	ponsible person u/c 24 of F0	<u>CO, 1985)</u>
	Resolved that Sh	S/o	
R/o.		working as	in

M/s....., is hereby appointed as responsible person u/c 24 of FCO, 1985 for the compliance with the provisions of FCO-1985 in the state of Punjab, whose signatures are attested below. If he retire or leave the company, the company shall be responsible for all the acts done by him on behalf of the company.

Signature of the responsible person

(1)		
(Name:)	

Sign of the authorized person

Resolution(For appointment of authorized signatory)

Signature of the responsible person

(1)	••
(Name:)

Sign of the authorized person