

**APPLICATION FOR LICENCE FOR REPACKING AND
SALE OF PESTICIDES**

Date:-----

To.

Director General
Department of Agriculture

1. Name of applicant: -----
2. National Identity Card/ National Registration/ Foreigner's Registration No: ---

3. Professional qualification: -----
4. Permanent address: -----
5. The address, of the premises in which the pesticides will be re-packed, stored
and distributed:-----
 - (a) type of building: -----
(roof/wall/floor)
 - (b) building area: -----
 - (c) sanitation and protective facilities: -----

6. Name of pesticide, Registration or amended registration no., name of
manufacturer/ importer:-----

7. The approximate amount of pesticide to be re-packed yearly:-----

8. Number and qualification of employees: -----

Attachments:

- (1) Receipt for payment of licence fee (original)
- (2) The sample of containers packing materials and their labels (instructions)
- (3) The consent of the holder of registration and manufacturer of the pesticide
- (4) The persons who involved in repacking work shall be attached the copy of
certificates in Certified Pesticide Applicator and First-aid training.

Signature of applicant