

## RE- REGISTRATION APPLICATION FORM

1. Name and address of the Registrant		
2. Trade Name		
3. Common Name		
4. Strength		
5. Type of Formulation		
6. Use category	Insecticide/Fungicide/Weedicide/Acaricide/Biocide/Others	
7. Use classification	Agro /Household/Public Health/Veterinary/Ware house/Others	
8. Source information		
a. Manufacturer		
b. Formulator		
c. Supplier		
9. Registration information		
a. Registration/ Code No.		
	b. Data of expiry current registration	
10. Container sizes approved		
Additional requests		
11. Container type approved		
Additional requests: (Please provide specific detail and specimen)		

12. Additional technical Information attached Yes  No

13. Cheque No:  Date  Value

Signature:

Date:

Note

1. All item listed above shall be **duly** completed. The application will be returned if not complete
2. Copies of printed label must be enclosed
3. If the previous registration is lapsed for more than 03 months afresh application for registration should be submitted with necessary fees
4. When this form is reproduced please do not alter any parameter of the format.

**FOR OFFICE USE ONLY**

Cheque: CREDIT/RETURN/HOLD

Reasons:

Fresh / revalidated cheque received  Date  Cheque No

Registration status: Licence / Provisional Permit from

1. Import / local purchase /of technical material/Formulation / Finished product, formulate/ pack/ repack /label at own / authorized facility and sale offer to authorized institutions / CRI / TRI, own use / indenting purpose only.
2. Product is restricted for: Not applicable/.....
3.
  - None/ Third party registration of (Reg. No ..... )M/s.....
  - .Date of the expiry of the original registration.....

Remark on the printed label: