

FORM VI-A
(See Rule 10(3A))
Application for the grant of license to stock and use restricted insecticide(s)
For commercial pest control operation(s)

To

The Licensing Authority,
.....
.....

1. Full name of the applicant (Block letters) _____
2. Address :
 - a) Registered Officer : _____
 - b) Zonal Office _____
 - c) Premises for which application is made _____
3. Is the applicant already in business or newcomer _____
4. Qualification of responsible technical person
 - a) Educational Qualification _____
 - b) Training in pest control operations _____
 - c) Experience in using restricted insecticide(s) (Attach proof in respect of claims) _____
5. If in the trade, give full particulars of the names of restricted insecticide(s) handled and categories of operations undertaken, the period and the place(s) at which the trade was carried on.
6. Quantity(s) of each restricted insecticide in possession of the date of application (Give details of place(s) where it is stored). _____
7. Details of persons engaged or proposed to be engaged (Attach separate sheet, duly authenticated)
8. Details of safety application available alongwith antidotes and all other facilities required under chapter will be stored for use. _____
9. Situations of the branch offices and depots where the restricted insecticide(s) will be stored for use. _____
10. Name(s) of restricted insecticide(s) which the applicant desires to use. _____
11. Category(s) applied for : _____
12. Particulars of the fee(s) deposited. _____
13. Whether technical expertise approved by the plant protection Adviser to the Government of India for undertaking Pest control operations (Attach proof). _____
14. Whether permission obtained from Plant Protection Adviser to the Government of India for undertaking fumigation (Attach Proof & validity) _____

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 ofa photo or attested copy of which is enclosed herewith.

Date : _____

Place: _____

Signature with seal