

**FORM C**

**(See Clause 11)**

**APPLICATION FOR RENEWAL OF THE CERTIFICATE OF REGISTRATION TO  
CARRY ON THE BUSINESS OF SELLING FERTILIZERS IN RETAIL/  
WHOLESALE.**

To

The Registering Authority,

Place:

State:

I/We hereby apply for renewal of the Certificate of Registration to carry on the business of selling fertilizers in retail/ wholesale under the name and style of

The Certificate of Registration desired to be renewed was granted by Registering Authority for the (mention place and state) and allotted registration certificate Number the day of 19 .

2. i. I/We hereby declare that the situation of my/ our premises where fertilizer are

a) stored and

b) sold is as stated below:

(a) (b)

Premises where fertilizers are stored. Premises where fertilizers are sold

ii. I/We hereby declare that the fertilizer (s) in which I/We am/are carrying on the business of selling and the name(s) of manufacturer (s), commodity board (s), State Government (s) and wholesale dealer whome I/We represent are as stated below:

(a) (b)

Name (s) of fertilizers (s) Name (s) of manufacturer (s) commodity board (s)

wholesale dealer (s)

3. I/We enclose a certificate of source from the manufacturer (s), Commodity board (s), State Government(s) wholesale dealer (s) whome I/We represent or intend and from whom fertilizer's) will be obtained by me/ we.

Full name and address of the applicant (s) (in block letters ):

Signature of applicant.

Date:

Place:

Certified that the certificate of registration bearing number granted for the period from to to carry on the business of selling fertilizers in retail/ wholesale at the premises situated at is hereby renewed till the unless previously suspended or cancelled under the provisions of the Fertilizer ( Control) Order 1985.

(a) (b) (c) (d)

Location of sale depot	Location of godowns attached to sale depot where fertilizer will be stored	Name(s) of fertilizer (s) for which certificate of registration is renewed.	Name(s) of manufacturer (s). Commodity Board (s). State Government (s) wholesale dealer (s) whome the dealer represents.
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Date: Registration Authority:

Renewal Number :

Place:

Seal:

State :

**EMBLEM**

**FORM 'D'**

**(See clause 14(2)(a) & 18 (1))**

**FORM OF APPLICATION TO OBTAIN A CERTIFICATE OF MANUFACTURE OF PHYSICAL / GRANULATED MIXTURE OF FERTILIZERS / MIXTURES OF MICRO- NUTRIENT FERTILIZERS/ RENEWAL**

To

The Registering Authority,

Place.....

State of.....

1. Full Name and address of the applicant:

2. Does the applicant possess the qualification prescribed by the State Government under sub-clause (1) of clause (14) of the Fertilizer ( Control) Order, 1985.

3. Is the applicant a new comer? (Say 'Yes' or 'No')
4. Situation of the applicant's premises where physical / granulated mixture will be prepared.
5. Full particulars regarding chemical analysis of the physical/ granulated mixture of fertilizers/ mixture of micro nutrient fertilizers for which the certificate is required and the raw materials used in making the mixture.
6. Full particulars of any other certificate of manufacture, if any, issued by any other Registering Authority.
7. How long has the applicant been carrying on the business of preparing physical/ granulated mixture of fertilizers/ mixture of micro-nutrient fertilizers?
8. Quantities of each physical/ granulated mixture of fertilizers/ mixture of micro-nutrient fertilizers ( in tones) in my/ our possession on the date of the application and held at different addresses noted against each.
9. i. If the applicant has been carrying on the business of preparing physical / granulated mixtures of fertilizers/ mixture of micro-nutrient fertilizers, give all particulars of such mixture handled, the period and the place (s) at which the mixing of fertilizers was done:
  - ii. Also give the quantities of physical/ granulated fertilizer mixtures handled during the past calendar year.
10. If the application is for renewal, indicate briefly why the original certificate could not be acted on within the period of its validity.
  - i. I have deposited the prescribed registration certificate fee/renewal fee.

**Declaration:**

- a. I/We declare that the information given above is true and correct to the best of my/ our knowledge and belief, and no part thereof is false.
- b. I/We have carefully read the terms and conditions of the certificate of manufacture given in form F appended to the Fertilizer ( Control) order, 1985 and agree to abide by them.
- c. I/We declare that the physical/ granulated mixture for which certificate of manufacture is applied for shall be prepared by me/us or by a person having such qualifications as may be prescribed by the State Government from time to time or by any others person under my/our direction, supervisions and control or under the direction, supervisions and control of person having the said qualifications.
- d. I/We declare that the requisite laboratory facility specified by the Controller, under this Order is possessed by me/us.

Name and address of applicant in block letters

Signature of the applicant(s).

Date:

Place:

**EMBLEM**

**FORM 'E'**

**(See Clause 14(2)(b))**

**FORM OF APPLICATION TO OBTAIN A CERTIFICATE OF MANUFACTURE  
FOR SPECIAL MIXTURE OF FERTILIZERS.**

To

Registering Authority,

Place..... State:.....

1. Full name and address of the applicant
2. Does the applicant possess qualifications prescribed by the State Government under sub-clause (1) of 14 of the Fertilizer (Control) Order, 1985.
3. Name and address of the person requiring the special mixture of fertilizers.
4. Particulars of certificate(s) of manufacture already obtained from the same Registering Authority.
5. Situation of the applicants premises where fertilizers are/will be mixed.
6. Full particulars regarding chemical analysis of the special mixture of fertilizers required to be manufactured and the materials used in making the special mixture.
7. I am enclosing an attested copy of the requisition made by the purchaser of the special mixture of fertilizers.
8. I have deposited the prescribed registration certificate fee.

**Declaration:**

- a. I/We declare that the information given above is true and correct to the best of my/our knowledge and belief, and no part thereof is false.
- b. I/We have carefully read the terms and conditions of the certificate of manufacture given in Form 'G' appended to the Fertilizer ( Control) order, 1985 and agree to abide by them.

c. I/We declare that the special mixture for which a certificate of manufacture is applied for shall be prepared by me/us or by a person having such qualification as may be prescribed by the State Government from time to time or by any other person under my/our direction, supervisions and control or under the direction, supervision and control of a person having the said qualifications.

d. I/We declare that the requisite laboratory facility specified by the Controller under this Order is possessed by me/ us.

Name and address of the applicant(s) in block letters

Signature of the applicant(s)

Date :

Place: