

GOVERNMENT OF MAHARASHTRA
Department of Agriculture

To,
M/s. **KRUSHITEK PVT LTD,**
275 Chandan Nagar Additional M.i.d.c. Satara, Satara, Pin: 415004, Tahsil: Satara, District: Satara,
State: **Maharashtra**

Sub: Issuing New Fertiliser License No. **LCFDW10010810**. Validity: **02/07/2016** to **01/07/2019**

Ref : Your letter no. **FWD391950** dated : **23/05/2016**

Sir,

With reference to your application for **New Fertilizer** license.

We are pleased to inform you that your request for the same has been granted.

License No. : **LCFDW10010810** dated :**02/07/2016**.

Valid For : **02/07/2016** to **01/07/2019** is enclosed here with.

This license is issued under **Fertilizer Control Order,1985**

The terms and conditions are mentioned in the license.

You are requested to apply for the renewal of the license on or before **01/07/2019**.

Responsible Person Details:

Name: **Jalindar Shirang Shinde**, Age:**53**, Designation: **Director**

Office Address: **275 Chandan Nagar Additional M.I.D.C. Satara, Satara, Taluka:Satara, District: Satara, State: Maharashtra, Pincode: 415004, Mobile: , Email:**

Name: **Jalindar Shirang Shinde**, Age:**53**, Designation: **Director**

Residential Address: **275 Chandan Nagar Additional M.I.D.C. Satara, Satara, Taluka:Satara, District: Satara, State: Maharashtra, Pincode: 415004, Mobile: , Email:**

Chief Quality Control Officer
Commissionerate Of Agriculture
Pune

Encl. :License.

Copy to

- 1) Divisional Joint Director of Agriculture(All)
- 2) District Superintendent Agriculture Officer(All)
- 3) Agriculture Development Officer(All)



Original

GOVERNMENT OF MAHARASHTRA

Wholesale Dealer State Level

FORM 'A2'

ACKNOWLEDGEMENT

(See Clause 8(3))

License No. : LCFDW10010810

Date of Issue : 02/07/2016

Valid From : 02/07/2016

Valid Upto : 01/07/2019

1. Received from M/s **Krushitek Pvt Ltd** a complete Memorandum of Intimation along with Form O, fee of Rs. **2250** by Chalan bearing number **MH001260166201617E** dated **25/05/2016**.
2. This acknowledgement shall be deemed to be the letter of authorisation entitling the applicant to carry on the business as applied for, for a period of 3 years from date of issue of this Memo of acknowledgement unless suspended or revoked by the competent authority.

Date: 04/04/2019

Notified Authority
Director Of Agriculture (Input & Quality Control)
Pune

Seal:

Statement - 1

License No. : LCFDW10010810

Date of Issue: 02/07/2016

Validity: 02/07/2016 to 01/07/2019

M/s KRUSHITEK PVT LTD

Name of Firm & Proprietor/Manager/ Partner	Location of Sales Depot	Location of Godown(s) attached to sale depot	Type of Fertiliser	Source of supply
1	2	3	4	5
Krushitek Pvt Ltd Name of Manager : Balaji Arun Pawar	275 Chandan Nagar Additional M.I.D.C. Satara, Satara Taluka : Satara District: Satara	275 Chandan Nagar Additional M.I.D.C. Satara, Satara Taluka : Satara District: Satara	Encl: Form 'O'	Encl: Form 'O'

Encl:Form 'O'

Sr. No. Source of Supply as per Form 'O'

1. M/s. Healthveda Herbals, Satara

Date: 04/04/2019

Notified Authority
Director Of Agriculture (Input & Quality Control)
Pune

Seal: