

Checklist of Inputs for License

1. Seed -
 - a) Seed Dealer License
 Check list
2. Fertilizer -
 - a) Fertilizer Manufacturing License
 Check list
 - b) Fertilizer Dealer License
 Check list
 - c) Fertilizer Wholesale Dealer License
 Check list
 - d) Bio Stimulant Dealer License
 Check list
3. Insecticides -
 - a) Insecticides Manufacture License
 Check list
 - b) Insecticides Dealer License
 Check list

Documents Check List for Seed License

Step -1	Applicant Information
1	Recent Photograph
2	Signature
3	Proof of Education
4	Authorization Letter-
5	Aadhar Card Proof
6	PAN Card Proof
Step - 2	Information Of the Firm /Organtion
1	PAN Card Proof
2	Documents regarding authenticity of the Firm
3	Shop Act License
4	Resolution of Firm/Organization
5	Firm/Organization Declaration as per prescribed format
6	Availability of R&D facility
7	Processing Plant availability or agreement
8	Partner Details/ Director/ Member Details
9	Recent Photograph of Partner
10	Scanned signature of Partner
Step-3	Sale Address Details
	Ownership Document Rent Agreement
Step-4	Storage / seed Processing Plant Address Details
1	Ownership Document
2	Rent Agreement
Step-5	Notified Crop Varieties
	Source of seed
	Breeder Certificate
	Release Order
	Specimen copy of label/pouch
	Seed Production Program Details
	Proforma-IX issued by seed Certificate -
	Non -Notified Varieties (Research Variety)
	Breeder Certificate
	DUS characters
	DNA fingerprinting report
	Sanction letter of Variety
	Seed Production Program Details
	Specimen copy of label/pouch
Step-6	Challan Copy (Rupees) 1000/- Rs New 500/-Rs. Amendment Challan Copy (Rupees) for Cotton 500/- Rs New 100/-Rs. Amendment

Docs for Pesticide Sale License

Step 1: Applicant Information	
1	Recent Photograph
2	Scanned Signature
3	Proof of Education Qualification
4	Authorization Letter of Proprietor/ Resolution of Director body
5	Aadhar Card Proof
6	PAN Card Proof
7	Old License Copy
Step 2: Firm/Organization Information	
1	PAN Card Proof
Partner Details/ Director/ Member Details	
1	Recent Photograph of All Partner/All Directors/Proprietor
2	Scanned Signature of All Partner/All Directors/Proprietor
3	Authority letter or copy of Resolution of Company regarding Director/ Proprietorship/ Partnership
4	Document regarding authenticity of firm - UDYAM/COI
5	Authority letter or copy of Resolution of Company regarding Director/ Proprietorship/ Partnership
6	Document regarding authenticity of firm - UDYAM/COI
Step 3: Responsible Person Details	
1	Recent Photograph
2	Scanned Signature
3	Aadhar Card Proof
4	Name of responsible person (Sec.33(1)) on stamp Rs. 100/- prescribed format
5	Authority letter or copy of Resolution of Company
6	Affidavit of responsible person of manufacturer and dealer
Step 4: Place of Business	
1	Ownership Document
2	Rent Agreement
3	Copy of shop Act license / NOC from Local body
Step 5: Inspection Report - Minimum 2 Inspectors	
Step 6: Challan	
1	Rs.500/- per molecule in Corporation area and max Rs.7500/-
2	Rs.100/- per molecule for Rural area and maximum Rs.1500/-

FORMAT FOR NOMINATION OF RESPONSIBLE PERSON BY COMPANY AS PER SECTION 33 OF I.A.,1968 FOR LEGAL ACTION AGAINST COMPANY.

It is hereby given that Shri. / Smt. ----- (give full name) son / daughter of Shri.----- (give full name) Director / Manager of the ----- company (give full name, detail address of company) has been nominated by the Company by a Resolution passed at their meeting held on ----- at ----- -- to be in charge of and responsible to the said company for maintaining the quality of the pesticides manufactured by the said company and authorized to exercise all such powers and take all such steps as may be necessary or expedient to prevent the commission by the said company of any offence under the Insecticide Act,1968 and Rules, 1971. He is declared as responsible person for the ----- company under section 33 of the Insecticide Act, 1968 for legal actions.

A certified copy of the said Resolution is enclosed.

Place -----

Date -----

Signature
(Name in full)
Managing Director/Secretary
(Name of the Company)

I, Shri. / Smt. ----- (give full Name and address), the undersigned, working as ----- in ----- company accept the above nomination as responsible person in pursuance of the Section 33 of the Insecticide Act, 1968, Rule, 1971 of the rules made there under.

Place -----

Date -----

Signature
(Name in full)
Director / Manager
(Responsible person of the said Company)
(Name of the Company)

If the person declared as responsible U/s 33 of I.A., 1968 & Rules,1971 is not available for any reasons, I will nominate another person immediately and communicate accordingly to the concerned authority or otherwise I, ----- (give name in full), Managing Director of ----- company accept the responsibility that I may be treated as responsible person in that case under the said sections of the Act.

Place -----

Date -----

Signature
(Name in full)
Managing Director / Secretary
(Name of the Company)

Pesticide New Manufacture Docs to Upload

Step 1: Applicant Information	
1	Recent Photograph
2	Scanned Signature
3	Proof of Education Qualification
4	Authorization Letter of Proprietor/ Resolution of Director body
5	Aadhar Card Proof
6	PAN Card Proof
7	Old License Copy
Step 2: Firm/Organization Information	
1	Supporting Documents for selected Firm Type (Type selected in Type of firm organization and mentioned in the text box)
2	PAN Card Proof
3	Document regarding authenticity of firm
4	Undertaking of manufacturers regarding Quality Assurance on stamp paper Rs. 100/- in prescribed format
5	Affidavit of not to Manufacturing, Distribute & Sale of Certain prohibited/ banned Pesticides
Step 3: Responsible Person Details	
1	Photograph
2	Signature
3	Aadhar Card Proof
4	Proof of Education qualification
5	Affidavit in prescribed format regarding responsible person as Insecticide act 1968 (Sec.33(1)) on stamp Rs. 100/-
Step 4: POM (Place of Manufacture)	
1	Ownership Document Format: PDF Size: 10 - 300 KB
2	Rent Agreement
Step 5: Details of Insecticide (Documents required of Every Insecticide)	
1	Attested copy of valid Registration Certificate issued by CIB & RC
2	Labels and Leaflets Approved by CIB & RC
3	Specimen copies of Labels and Leaflets printed
4	Production Flow Chart
5	Method of Analysis
Step 6: MPCB and DIC of Manufacturer	
1	MPCB consent to operate certificate
2	DIC certificate/ Udyam Adhar Certificate
Step 7: Experts Staff Details of Manufacture	
1	Proof of Education qualification
2	Appointment Letter
3	Aadhar Card Proof
Step 8: GRAS Challan	
1	GRAS Challan Rs. 2000/- per product Max. 20000/-
Joint Team Inspection Report	

**Undertaking for Not To Manufacture, Distribute And Sale Of Certain Banned/
Prohibited Pesticides on Rs. 100/-stamp paper Notarized**

To,

Licensing Authority
Director Of Agriculture (Input & Quality Control)
Maharashtra State, Pune

1. I Shri./ Smt. -----, Age ----years, Residing- -----
-----District:-----, Pin Code ----- Proprietor/Director of
the insecticide manufacturing firm M/ s. -----, Address:-
Administrative/ Corporate office & Factory-----
-----District:-----, Pin code -----, hereinafter
referred as Said Firm, on behalf of the Said Firm submit the following undertaking,
2. The Said Firm is fully aware that it is legally bound to Manufacture and Sell the
Insecticides in conformity with the standards as prescribed by Central Insecticide Board
and Registration Committee, Govt. of India.
3. The Said Firm is fully aware that it is Not To Manufacture, Distribute And Sale Of Certain
Banned/ Prohibited Pesticides.
4. I, Shri./ Smt. -----, Age ----- years, the undersigned, is
submitting this undertaking on behalf of the Said Firm as person authorized by the Said
Firm, willingly without any prejudice and under no pressure.

SEAL of the Said Firm

Signature

Proprietor Name
Proprietor
Address :

UNDETAKEING QUALITY ASSURANCE

(To be submitted on Rs.100/- bond paper)

I, Shri. / Smt. -----(Name in full), Age ----- years, Residing at ----- (Give full address with PIN No.) Proprietor / Director of the insecticide manufacturing firm M/s -----, Address : Administrative / Corporate office -----, Factory ----- (Give detail address with PIN No.), hereinafter referred as Said Firm, on behalf of the Said Firm submit the following undertaking,

Said Firm is holding Insecticide Manufacturing License No.-----, Valid upto -----, / Applied for new Insecticide Manufacturing License, / Applied for sell of insecticides in Maharashtra for the manufacturer located out of Maharashtra State (*Strike out whichever is not applicable*), as required under Section 13 and Rule 9, 10 of the Insecticide Act, 1968 and Rules, 1971, hereinafter referred as Said Act. As a license holder, Said Firm is fully aware of all provisions under Said Act and legally bound to follow the same critically. The Said Firm hereby gives the undertaking to follow following Terms and Conditions,

1. The Said Firm is bound to regularly submit the reports about the details of Insecticides Manufactured and Sold in Maharashtra State as prescribed in,

- a. Monthly Returns of Insecticides made to the Bulk Consumers reports Form XIV (See Rule 15)
- b. Monthly Return / Statement of Technical Grade Insecticides Imported / Manufactured in Form XV-A (See Rule 15)
- c. Monthly Return / Statement of Formulated Insecticides in Form XVI-A (See Rule 15)

The Said Firm is bound submit the above mentioned “c” report giving details about districtwise sells in Maharashtra State, and whenever the information is required in other formats as prescribed by the Licensing Authority. Said Firm is fully aware that non-submission of these reports will lead to contravention under the Said Act and the Licensing Authority will initiate the necessary legal action against the License of the Said Firm.

2. The Said Firm is bound submit the above mentioned “c” report giving details about district wise sells in Maharashtra State, to the district level authorities i.e. District Superintending Agriculture Officer and Agricultural Development Officer of the concerned Zilla Parishads. The Said Firm is aware that the reports will be submitted regularly to the Authorities by the 10th of next month and non-submission of the said report will be treated seriously under the provisions of the Said Act and necessary legal action will initiated against the Said Firm.

3. The Said Firm is bound to maintain the updated record of Insecticides Manufactured and sold in the prescribed formats,

- a. Register of sales made to the Bulk Consumers, Insecticide wise in Form XIII (See Rule 15)
- b. Stock register of Technical Grade Insecticide in Form XV (See Rule 15)
- c. Stock register of Formulated Insecticide in Form XV-A (See Rule 15)

The Said Firm is legally bound to produce the records for inspection as and when required by any authority. Apart from that record about “Register of persons engaged in connection with insecticides and their periodical medical examination” in Form XXII (See Rule 37) be maintained.

4. The Said Firm will not carry out any activity about Manufacturing / Selling of any insecticides or other products in the Licensed Premises that are not mentioned in the License of the Said Firm. The Said Firm hereby undertake to inform that it will not undertake any activity in contravention of Sec. 17 and 18 of the Said Act and will disclose all relevant information as required under Section 23 of the Said Act and cooperate with the legal authorities to carryout their duties.

5. The Said Firm undertake to inform that it will not do any business in illegal and unethical manner that leads to contravention under Section 9, 13 and Rules 6, 9, 10, 12, 13, 14, 15, 16, 17, 18, 19, 20, 35 ,36, 37, 38, 39, 41, 42 and 44 of the Said Act. The Said Firm will not recommend any insecticides without prior approval of label claim from Central Insecticide Board and Registration Committee.

6. The Said Firm hereby authorizes the following persons (maximum two names only, the authorized person should not be below the rank of Manager in the Said Firm) to submit the documents, reports, letters etc. on behalf of the Said Firm. The documents signed by these Authorized Persons be treated as signed by legally signed by the Said Firm. The Said Firm is bound to inform the Licensing Authority about any change in name of these persons immediately, or otherwise, till then the names submitted will be treated legal and it will be the sole responsibility of the Said Firm about further legal matters, if any.

Format for submitting information about Authorized Person

Sr. No.	Full name of the person authorized	Designation	Age	Detail address for communication (Phone No. Cell phone No.)	Signature
1	2	3	4	5	6

7. The Said Firm is fully aware that any change in address of Office, Factory, Stocking points, Selling points etc. will not be done without the prior permission of the Licensing Authority.

8. The Said Firm is fully aware that it is legally bound to Manufacture and Sell the Insecticides in conformity with the standards as prescribed by Central Insecticide Board and Registration Committee, Govt. of India.

9. The Said Firm is fully aware that as per Section 2 of the Said Act application of other laws is not barred and the Said Firm will fully abide by the Rules and Regulations of the other relevant Acts like Pollution Control, Industries Deptt., Labour Laws, Factories Act, etc. under enforcement from time to time.

The Said Firm is fully aware and will carry out the business of Insecticide Manufacturing and Selling for the benefit of farmers' in general and whole agrarian community in specific as a social responsibility. The Said Firm is fully aware that any act of the Said Firm that leads to contravention of any provisions of the Said Act will lead to stoppage of business of the Said Firm in the state of Maharashtra.

The Said Firm is aware that this Undertaking will remain legally valid till the date of expiry of the License and will be renewed thereafter.

I, Shri. / Smt. -----(Name in full), the undersigned, is submitting this undertaking on behalf of the Said Firm as person authorized by the Said Firm, willingly without any prejudice and under no pressure.

SEAL of the Said Firm

Signature
Name in full
Address

FORMAT FOR NOMINATION OF RESPONSIBLE PERSON BY COMPANY AS PER SECTION 33 OF I.A.,1968 FOR LEGAL ACTION AGAINST COMPANY.

It is hereby given that Shri. / Smt. ----- (give full name) son / daughter of Shri.----- (give full name) Director / Manager of the ----- company (give full name, detail address of company) has been nominated by the Company by a Resolution passed at their meeting held on ----- at ----- -- to be in charge of and responsible to the said company for maintaining the quality of the pesticides manufactured by the said company and authorized to exercise all such powers and take all such steps as may be necessary or expedient to prevent the commission by the said company of any offence under the Insecticide Act,1968 and Rules, 1971. He is declared as responsible person for the ----- company under section 33 of the Insecticide Act, 1968 for legal actions.

A certified copy of the said Resolution is enclosed.

Place -----

Date -----

Signature
(Name in full)
Managing Director/Secretary
(Name of the Company)

I, Shri. / Smt. ----- (give full Name and address), the undersigned, working as ----- in ----- company accept the above nomination as responsible person in pursuance of the Section 33 of the Insecticide Act, 1968, Rule, 1971 of the rules made there under.

Place -----

Date -----

Signature
(Name in full)
Director / Manager
(Responsible person of the said Company)
(Name of the Company)

If the person declared as responsible U/s 33 of I.A., 1968 & Rules,1971 is not available for any reasons, I will nominate another person immediately and communicate accordingly to the concerned authority or otherwise I, ----- (give name in full), Managing Director of ----- company accept the responsibility that I may be treated as responsible person in that case under the said sections of the Act.

Place -----

Date -----

Signature
(Name in full)
Managing Director / Secretary
(Name of the Company)

**Check list of documents for obtaining new letter of Authorization (Sale Licence)
for Self Manufactured /Imported Biostimulants**

Sr No.	Particular	Documents to be uploaded
1	Duly filled form A-1 (See clause 8 of FCO 1985)	Signed Copy
2	Online Challan / Challan paid across bank counter in MTR Form no.6 Under Head Crop husbandry (Fees under Fertilizer Control Act 1985)	Rs 2250 for Dealer
3	Name of responsible person (Not below rank of Manager) and his acceptance on Rs.500/- stamp paper (see clause 24 of FCO 1985)	Original Notarized
4	Copy of valid certificate of manufacture issued by District Industries Center and or Certificate of Manufacture issued by Registering Authority	Self attested
5	For the Biostimulants self declaration affidavit on Rs 500 Stamp Paper.	Attested
6	Matter to be printed on Biostimulant bag/container (See Clause 21 of FCO 1985).	Self Attested
7	For selling of self imported Biostiumulant, (a) Certificate of origin (for each grade) (b) Certificate of analysis (for each grade) (c) Certificate of import (Import Export Code) (d) Certificate of Consent to supply (e) Matter to be printed on Biostiumulant bag/container(See Clause 21 of FCO 1985).	Self attested Self Attested Self Attested
8	Attested copies of documents of ownership of sale point/ godown premises such as A) 7/12 Or B) Proprty tax receipt etc. C) If manufacturing premises is on rental basis, then registered rental agreement with Index-II on Rs.500/- stamp paper D) NOC of local body GP.MC	Attested by Gazzetted Officer
9	A)If the firm is partnership firm then attested copy of partnership deed. B1) If the firm is Ltd. company then attested copy of certificate of registration under Company Act-1956 B2) Memorandum of Association and Articles of Association C)if the firm is cooperative society then attested copy of Registration Certificate from Department of cooperation.	- Self Attested - -
10	Notarized undertaking of manufacturer regarding Quality Assurance on Rs.500/- stamp paper about the quality of Biostiumulant.	Original Notarized
11	Production Supervisor Affidavit on Rs 500 Stamp Paper	Original Notarized
12	Joint Inspection report of Manufacturing Unit / Sale point /Storage Point in prescribed form of any two of concern jurisdiction of fertilizer Inspector.	Joint Inspector Signed
13	Last Three Years Production and Sale Data. (If)	Self Attested

Form A 1

MEMORANDUM OF INTIMATION

(see clause 8 (2))

1. Details of the Notified Authority to whom application is submitted.

Designation of Notified Authority:

Place :

State of

2. Details of the applicant :

a) Name of the applicant :

b) Name of the concern

c) Postal address with telephone number

3. Place of business (Please give full address)

i) For Sale

ii) For Storage

4. Whether the application is for-

Manufacturer

Importer

Pool Handling Agency

Wholesale Dealer

Retail Dealer

(Tick mark whichever is applicable)

5. Details of Biostimulant and their source in form "O"

Name of Biostimulant

Whether certificate of source in form "O" is attached

(i)

Yes

No

(ii)

Yes

No

(iii)

Yes

No.

(Please tick Mark whichever is applicable)

6. I have deposited the registration fee of Rs.-----vide challan-----No.-----
 Dated----- in the Bank/ Treasury----- or enclose Demand Draft
 No.----- Dated----- Dated----- for Rs.----- Drawn
 on----- in favour of -----
 Payable at----- towards registration fees.
7. Whether the intimation is for an authorization letter or a renewal thereof. Note: In case the intimation is for renewal of authorization letter , the acknowledgement in Form A2 should be submitted for necessary endorsement thereon.)
8. Any other relevant information.

I have read the terms and conditions of eligibility for submission of Memorandum of intimation and undertake that the same will be complied by me and in token of the same, I have signed the same and is enclosed herewith.

Date

Place

Signature of applicant

*Attach a separate sheet if the number exceeds three.

TERMS AND CONDITION OF AUTHORISATION

- 1) I shall comply with the provisions of the Fertilizer (Control) Order, 1985 and the notification issued there under for the time being in force.
- 2) I shall from time to time report to the Notified Authority and inform about change in the premises of sale depot and godowns attached to sale depot.
- 3) I shall also submit in time all the returns as may be prescribed by the State Government.
- 4) I shall, not sell fertilizers for industrial use.
- 5) I shall file a separate Memorandum of Intimation for, where the storage Point is located outside the area jurisdiction of the Notified Authority where the sale Depot is located.
- 6) I shall file a separate Mol for each place when the business of selling Fertilizers is intended to be carried on at more than one place.
- 7) I shall file separate MOI if I carry on the business of fertilizers both as retail and wholesale “dealer.
- 8) I confirm that my previous certificate of Registration or Authorization is not under Suspension or Cancellation or debarred from selling of Fertilizers.

DECLARATION

I/we declare that the information given above is true to the best of my/our knowledge and belief and no part thereof is false or no material information has been concealed.

Date:

Signature of the Applicant (s)

Place:

CERTIFICATE

Certified that we have nominated Shri..... an officer responsible for that compliance of the Fertilizer (Control) Order as required under Clause 24 of the Fertilizer (Control) Order, 1985 and that he will represent our organization in the event of any legal affair against our organization. In case the designated responsible person resigned or left the organization. I here by admit that , I will be responsible for his presence in honorable court , If in case of failure , I will be responsible for any contravention of FCO 1985.

The details are as below

1. Full Name :-
2. Post held
3. Address of the office :
and Tel. & Mobile number
4. Full address of residence :-
Tel. & Mobile number
5. Age of person :-
6. Qualification :-

Authorized Signatory with
Rubber Stamp of the company

ACCEPTANCE

Certified that I the undersigned Shri. -----have been appointed as responsible person by M/s.....I have no objection for the same and I agree to work as responsible officer under Fertilizer Control Order 1985. In case ,I left or resigned from the organization for contravention committed during my tenure, I will be responsible for the same and will remain present in court without fail.

Place -
Date-

Signature of responsible person

SELF DECLARATION AFFIDAVIT ON RS.500 STAMP PAPER

- 1) I.....holding the post of authorized signatory of firm.....(.....address). I am aware about the bio-stimulants that added under 20C clause and schedule-VI of Fertilizer Control Order,1985.

- 2) As per Central Government Standing Order 3922 (E) 12th September, 2024 the 11 bio-stimulant grades are added under the Fertilizer Control Order, 1985. But, the method of analysis, specification of production machinery and lab equipment requirement are yet to be defined by Central Government. So, whenever the specific requirement of lab equipment & production machinery is notified by Central Government, it will be arranged mandatorily by us at the manufacturing unit. If those requirements not fulfilled, we will be held solely responsible and are aware that appropriate action by the competent authority as FCO 1985 may be taken against us.

- 3) As on today we are using the following production machinery and lab equipments for Biostimulants.
 - a) Production machinery list.
 - 1)-----
 - 2)-----
 - 3)-----

 - b) Lab Equipment list.
 - 1)-----
 - 2)-----
 - 3)-----

- 4) The above declaration made in this affidavit by me on behalf of my firm(name) on(date) will remain obligatory on my firm.

AFFIDAVIT

I Shri ----- Proprietor / Director solemnly affirm that, I have obtained / applied for a Dealer Registration Certificate / Biostimulant Manufacturing Certificate in the name of ----- . The said Dealer Registration Certificate / Fertiliser/ Biostimulant Manufacturing Certificate bearing no. ----- is valid till --. The provisions of the Fertiliser Control Order 1985 are known to me and I agree to abide by the said provisions. I also agree to the below mentioned terms and conditions and agree to abide by them.

1. I agree to submit monthly return by the 10th of every subsequent month in the specified format to the Director of Agriculture (I&QC) for the Biostimulant license issued to me.
2. I agree to submit monthly sale report by the 10th of every subsequent month for the Biostimulant license issued to me
3. I undertake to submit a copy of the monthly sale report to the District Agriculture Officer & Superintending Agriculture Officer of the district in which the Biostimulant are sold.
4. I undertake to maintain record of Biostimulant manufactured / sold in the specified format.
5. I undertake not to sell any grade of Biostimulant not mentioned in the Authorization letter.
6. In the event Biostimulant are sold in wholesale in more than one district, a separate sale point and godown will be obtained and separate will be maintained.
7. Stock received from manufacturer will be sold by us to the authorized dealer. Material will not be sold for any purpose other than agriculture.
8. We authorize the following persons to sign documents on behalf of our firm / company and such documents shall be binding on us. Any change in the authorised signatory will be communicated immediately to the Commissionerate of Agriculture. We confirm that the authorised signatory is not below the rank of Manager.

S.No.	Name of Authorised Person	Designation	Age	Address for correspondence	Signature

9. We undertake not to make any change in the address of the sale point, godown without obtaining approval from the Commissionerate of Agriculture.

10. We undertake to sell only those grades of Biostimulant mentioned in the Registration Certificate and as per the specifications mentioned in the Schedule VI of Fertiliser Control Order 1985.

11. We undertake to provide requisite information as per Clause 35 (4) of the Fertiliser Control Order 1985 in respect of imported Biostimulant.

We undertake to manufacture / sell of Biostimulant to the farming community for their benefit and as a social responsibility. I am aware that our manufacturing certificate / dealer registration certificate is liable to be cancelled on account of contravention of the provision of the Fertiliser Control Order 1985. I affirm the above without duress and of my own free will.

Signature :

Name & Address

: CERTIFICATE :

M/s. ----- hereby certify that we have appointed following person as Factory/Production Manager as per Fertilizer (Control) Order, 1985.

<i>Sr. No.</i>	<i>Name of the person</i>	<i>Post held & head quarters.</i>	<i>Academic qualification</i>	<i>Age</i>	<i>Full address of Residence</i>	<i>Telephone Number</i>
						<i>Office & Residence</i>

Place :

Dated :

Authorised Signatory

Rubber stamp of the company

Inspection Report Form for Biostimulant Manufacture / Importer

1) Infrastructure -	
I) Production unit	
1) Situated at -	
2) Total Area -	
3) Status of Land -	
II) Permissions Obtained	
a) DIC/SSI Registration	
b) NOC from Grampanchayat /Municipal Corporation	
III) Production Unit .	
a) Capacity -----(MT/Ltr/Year)	
b) Dimension of Shed	
c) Height of Shed	
d) Area of Shed -- (Sq.Ft or Mtr)	
IV) Storage Area	
a) Dimension of Shed	
b) Height of Shed	
c) Area of Shed--(Sq.Ft or Mtr)	
V) Production Site Office	
a) Area sq.ft .	
VI) Last Three year Production and Sale (QT) If-	
VII) Hazardous effect of the product : care taken by company Yes / No	

2) Machinery for Production (Liquid / Solid)

Sr.No.	Name of Machinery	Capacity	Company Name	Purchase year	Purchase price	Is Machinery in working condition or not ?
1	2	3	4	5	6	7
1						
2						
3						

3) Equipments & other Facilities in Laboratories for testing Samples of Bio Stimulants (Liquid / Solid)

Sr.No.	Name of Equipment	Capacity	Company Name	Purchase year	Purchase price	Is Equipment in working condition or not ?
1	2	3	4	5	6	7
1						

2						
3						

4) Technical Persons/Staff for Production & Laboratory

1. Technically qualified staff full time on monthly wages .
2. Chemist - minimum B.Sc. (Agriculture, Chemistry) with experience in the field full time on monthly wages

Sr.No.	Name of Staff	Post held	Qualification
1			
2			
3			

5) Raw material details

Sr.No.	Name of raw material	Source of raw material
1		
2		

6) Dealers Net work for the sale of Bio Stimulants (Marketing Network)

7) Storage Facilities at dealers level

Sr.No.	Facility Available (storage)	Capacity (MT.)
1		
2		

8) Register maintained

- 1) Analysis of each batch of finished product (record to be maintained batchwise)
- 2) Stock register to be maintained by the manufacturer

CERTIFICATE

I..... and the Fertilizer Inspector here by certified that I have visited the Biostimulants manufacturing / Importing premise owned byand verified all the facts mentioned above on dateand also verified the necessary related documents.

I am recommending / rejecting the premise mentioned above for the allocation of new Biostimulants manufacturing license / renewal of manufacturing license.

Seal

Place :

Stamp and Signature

Date :

IPSPARAM

PROFORMA-IV

Inspection Report of Q.C. Inspector For Premises used for Sale & Storage of
Biostimulant

1	Name & Address of Company	
2	Name of dealer	
3	Address & Contact No	
4	Name of contact person	
5	Phone No.	
6	Whether the premises are used for sale / storage: Sale and storage	
7	Address of sale point/ storage	
8	Address of storage	
9	Diameision- Length (ft) x Breadth (ft)= Area in sq.ft	
10	Capacity M.T.(Approx.)	
11	Whether the premises used for sale /storage are ownership ofthe dealer/or Rental basis	
12	If ownership proof verified	
	1. Property Tax Receipt	2. Telephone Bill
	3. Light Bill	4. Any other please mention
13	If rental basis proofs verified	
	1. If on rental who is owner of premises	
	2. Copy of Agreement or leese deed verified	
	3. Period of lease or agreement	
14	Enclosed the map of the sale/storage point:-----	
15	How is floor of storage / sale point	
16	How is ventilation of storage or sale point	
17	How is Roof of storage or sale point	
18	Wheter electrification is safe for Storage or sale Point: -----	
<p>have physically verified the above mentioned premise on date _____ and found that the premises is or _____ I are not suitable for Biostimulants sale / storage</p> <p align="center">Inspector Signature & Stamp</p>		

Check list of documents for obtaining new letter of Authorization (Sale Licence) for Self Manufactured /Imported fertilizers

Sr No.	Particular	Documents to be uploaded
1	Duly filled form A-1 (See clause 8 of FCO 1985)	Signed Copy
2	Online Challan / Challan paid across bank counter in MTR Form no.6 Under Head Cropland (Fees under Fertilizer Control Act 1985)	Rs 2250 for Dealer
3	Name of responsible person (Not below rank of Manager) and his acceptance on Rs.500/- stamp paper (see clause 24 of FCO 1985)	Notarized.
4	Copy of valid certificate of manufacture issued by District Industries Center and or Certificate of Manufacture issued by Registering Authority	Self attested
5	Certificate of establishment of laboratory facility (See Clause 21 A of FCO 1985). For the Fertilizers mentioned in online application.	Inspector Attested
6	Matter to be printed on fertilizer bag/container (See Clause 21 of FCO 1985).	Self Attested
7	For selling of self imported fertilisers, (a) Certificate of origin (for each grade) (b) Certificate of analysis (for each grade) (c) Certificate of import (Import Export Code) (d) Matter to be printed on fertiliser bag/container (See Clause 21 of FCO 1985).	Self attested Self Attested Self Attested
8	Attested copies of documents of ownership of sale point/ godown premises such as A) 7/12 Or B) Property tax receipt etc. C) If manufacturing premises is on rental basis, then registered rental agreement with Index-II on Rs.500/- stamp paper D) NOC of local body GP.MC	Attested by Gazetted Officer
9	A) If the firm is partnership firm then attested copy of partnership deed. B1) If the firm is Ltd. company then attested copy of certificate of registration under Company Act-1956 B2) Memorandum of Association and Articles of Association C) If the firm is cooperative society then attested copy of Registration Certificate from Department of cooperation.	- Self Attested - -
10	Notarized undertaking of manufacturer regarding Quality Assurance on Rs.500/- stamp paper about the quality of fertilizer.	Original
11	Joint Inspection report of DLC(District Level Committee) for sale point/godown in prescribed form.	Inspector Signed
12	If Wants to Sale the Products through Comarketing agreement 1) Copy of Marketing Agreement - Notarised on Rs 500/- Stamp 2) Copy of Form "O" of manufacturer /Importer / Dealer 3) Manufacture / Dealer Licence Copy of ---//---- 4) Matter to be printed on bag of ---//---- 5) Matter to be printed on bag of marketer.	Attested by Gazetted Officer

Form A 1

MEMORANDUM OF INTIMATION

(see clause 8 (2))

1. Details of the Notified Authority to whom application is submitted.

Designation of Notified Authority:

Place :

State of

2. Details of the applicant :

a) Name of the applicant :

b) Name of the concern

c) Postal address with telephone number

3. Place of business (Please give full address)

i) For Sale

ii) For Storage

4. Whether the application is for-

Manufacturer

Importer

Pool Handling Agency

Wholesale Dealer

Retail Dealer

(Tick mark whichever is applicable)

- 5 .Details of fertilizers and their source in form "O"

Name of Fertilizer

Whether certificate of source in form "O" is attached

(i)

Yes

No

(ii)

Yes

No

(iii)

Yes

No.

(Please tick Mark whichever is applicable)

6. I have deposited the registration fee of Rs.-----vide challan-----No.-----
Dated----- in the Bank/ Treasury----- or enclose Demand Draft
No.----- Dated-----Dated----- for Rs.----- Drawn
on----- in favour of -----
Payable at----- towards registration fees.
7. Whether the intimation is for an authorization letter or a renewal thereof. Note: In case
the intimation is for renewal of authorization letter , the acknowledgement in Form A2
should be submitted for necessary endorsement thereon.)
8. Any other relevant information.

I have read the terms and conditions of eligibility for submission of Memorandum of
intimation and undertake that the same will be complied by me and in token of the
same, I have signed the same and is enclosed herewith.

Date

Place

Signature of applicant

*Attach a separate sheet if the number exceeds three.

TERMS AND CONDITION OF AUTHORISATION

- 1) I shall comply with the provisions of the Fertilizer (Control) Order, 1985 and the
notification issued thereunder for the time being in force.
- 2) I shall from time to time report to the Notified Authority and inform about change
in the premises of sale depot and godowns attached to sale depot.
- 3) I shall also submit in time all the returns as may be prescribed by the State
Government.
- 4) I shall, not sell fertilizers for industrial use.
- 5) I shall file a separate Memorandum of Intimation for, where the storage Point is
located outside the area jurisdiction of the Notified Authority where the sale Depot is
located.
- 6) I shall file a separate MOI for each place when the business of selling
Fertilizers is intended to be carried on at more than one place.
- 7) I shall file separate MOI if I carry on the business of fertilizers both as retail and
wholesale "dealer.
- 8) I confirm that my previous certificate of Registration or Authorization is not under
Suspension or Cancellation or debarred from selling of Fertilizers.

DECLARATION

I/we declare that the information given above is true to the best of my/our knowledge and
belief and no part thereof is false or no material information has been concealed.

Date:

Signature of the Applicant (s)

Place:

CERTIFICATE

Certified that we have nominated Shri. _____ an officer responsible for that compliance of the Fertilizer (Control) Order as required under Clause 24 of the Fertilizer (Control) Order, 1985 and that he will represent our organisation in the event of any legal affair against our organisation. In case the designated responsible person resigned or left the organization. I here by admit that, I will be responsible for his presence in honorable court, If in case of failure, I will be responsible for any contravention of FCO 1985.

The details are as below

1. Full Name :-
2. Post held
3. Address of the office :
and Tel. & Mobile number
4. Full address of residence :-
Tel. & Mobile number
5. Age of person :-
6. Qualification :-

Authorised Signatory with
Rubber Stamp of the company

ACCEPTANCE

Certified that I the undersigned Shri. - _____ have been appointed as responsible person by M/s.....I have no objection for the same and I agree to work as responsible officer under Fertilizer Control Order 1985. In case, I left or resigned from the organization for contravention committed during my tenure, I will be responsible for the same and will remain present in court without fail.

Place -
Date-

Signature of responsible person

AFFIDAVIT

I Shri ----- Proprietor / Director solemnly affirm that, I have obtained / applied for a Dealer Registration Certificate / Fertiliser Manufacturing Certificate in the name of ----- . The said Dealer Registration Certificate / Fertiliser Manufacturing Certificate bearing no. ----- is valid till ----- . The provisions of the Fertiliser Control Order 1985 are known to me and I agree to abide by the said provisions. I also agree to the below mentioned terms and conditions and agree to abide by them.

1. I agree to submit monthly return by the 10th of every subsequent month in the specified format in the Commissionerate of Agriculture for the fertiliser license issued to me.
2. I agree to submit monthly return by the 10th of every subsequent month for the fertiliser license issued to me.
3. I undertake to submit a copy of the monthly return to the District Agriculture Officer & Superintending Agriculture Officer of the district in which the fertilisers are sold.
4. I undertake to maintain record of fertilisers manufactured / sold in the specified format.
5. I undertake not to sell any grade of fertilizer not mentioned in the Manufacturing Certificate from the registered godown mentioned in the Dealer Registration Certificate.
6. In the event fertilisers are sold in wholesale in more than one district, a separate sale point and godown will be obtained and separate will be maintained.
7. Subsidised chemical fertilizer will be sold in the district as per the allocation given by the manufacturer and balance stock if any will be sold outside the district after obtaining permission from the District Agriculture Officer, Zilla Parishad of the respective district.
8. Stock received from manufacturer will be sold by us to the authorized dealer. Material will not be sold for any purpose other than agriculture and also not sold to other fertilizer manufacturing companies.
9. We authorize the following persons to sign documents on behalf of our firm / company and such documents shall be binding on us. Any change in the authorised signatory will be communicated immediately to the Commissionerate of Agriculture. We confirm that the authorised signatory is not below the rank of Manager.

S.No.	Name of Authorised Person	Designation	Age	Address for correspondence	Signature

10. We undertake not to make any change in the address of the sale point, godown without obtaining approval from the Commissionerate of Agriculture.

11. We undertake to sell only those grades of fertilisers mentioned in the Registration Certificate and as per the specifications mentioned in the Fertiliser Control Order 1985.

12. We undertake to provide requisite information as per Clause 35 (4) of the Fertiliser Control Order 1985 in respect of imported fertilisers.

We undertake to manufacture / sell fertilisers to the farming community for their benefit and as a social responsibility. I am aware that our manufacturing certificate / dealer registration certificate is liable to be cancelled on account of contravention of the provision of the Fertiliser Control Order 1985. I affirm the above without duress and of my own free will.

Signature :

Name & Address

INSPECTION REPORT OF FERTILISER MANUFACTURING UNIT

1. Name & address of manufacturing unit :

2. Type of fertilizer manufactured & Brand name

Sr. No.	Name of the Grade	Brand name
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3. Manufacturing License No :
Date of Issue :
Validity :

4. Authorization No (DRC) :
Date of Issue :
Validity :

5. DIC Registration certificate no :
Date of issue :
Validity :
Products included :

6. MPCB consent No :
Date of Issue :
Validity :

7. Product wise raw material used in manufacturing

8. Manufacturing process in Short :

9. List of Machineries

Sr. No.	Name of the machinery	Year of Purchase	Working or Not
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10. Facilities for ensuring Quality Control

Sr. No.	Name of Instrument Or Equipment	Year of Purchase	Working or Not
---------	---------------------------------	------------------	----------------

11. Availability of Qualified Technical Staff

Name	:
Post	:
Qualification	:

12. Regarding Records (Whether maintained or not)
Register of the raw material
Whether raw material is analyzed prior to manufacturing
Batch wise manufacturing register
Whether batch wise register is maintained
Whether batch wise Guard samples have been preserved
Stock register
Sale register

13. Whether printed matter on bag is as per FCO 1985

14. Details of sample drawn by fertilizer inspector during inspection in last years.

Sr. No.	Grade	No. of samples drawn	Standard	Non standard
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15 Details of sample drawn by fertilizer inspector during inspection current years.

Sr. No.	Grade	No. of samples drawn	Standard	Non standard
---------	-------	----------------------	----------	--------------

16 Grade wise production details of last 4 years

17 Whether monthly report of production / sale is submitted to the Notified Authority.
If yes reference no. and date of monthly reports submitted.

18 Remarks regarding the manufacturing unit

Whether the premises is recommended for allocation of the new license /
Renewal of the license

CERTIFICATE

I..... the Fertilizer Inspector
here by certified that I have visited the manufacturing premise owned by
..... and verified all the facts mentioned above on date
.....and also verified the necessary related documents.

I am recommending / rejecting the premise mentioned above for the allocation
of new manufacturing license / renewal of manufacturing license.

Seal

Place :

Stamp and Signature

Date :

PROFORMA-IV

Inspection Report of Q.C. Inspector For Premises used for Sale & Storage of FERTILISER

1	Name & Address of Company	
2	Name of dealer	
3	Address & Contact No	
4	Name of contact person	
5	Phone No.	
6	Whether the premises are used for sale / storage: Sale and storage	
7	Address of sale point/ storage	
8	Address of storage	
9	Diameision- Length (ft) x Breadth (ft)= Area in sq.ft	
10	Capacity M.T.(Approx.)	
11	Whether the premises used for sale /storage are ownership ofthe dealer/or Rental basis	
12	If ownership proof verified	
	1. Property Tax Receipt	2. Telephone Bill
	3. Light Bill	4. Any other please mention
13	If rental basis proofs verified	
	1. If on rental who is owner of premises	
	2. Copy of Agreement or leese deed verified	
	3. Period of lease or agreement	
14	Enclosed the map of the sale/storage point:-----	
15	How is floor of storage / sale point	
16	How is ventilation of storage or sale point	
17	How is Roof of storage or sale point	
18	Wheter electrification is safe for Storage or sale Point: -----	
<p>have physically verified the above mentioned premise on date _____ and found that the premises is _____ or _____ I are not suitable for FERTILISER sale / storage</p> <p align="center">Inspector Signature & Stamp</p>		

**Check list of documents for obtaining new Certificate of Manufacture
Micronutrient mixture fertilizers.**

Sr No.	Particular	Documents to be uploaded
1	Duly filled form “D”(See clause 14 of FCO 1985)	Signed Copy
2	Copy of Certificate of registration issued by District Industries Centre	Self Attested
3	Online challan / Challan paid across the bank counter. Under Head Crophusbandry (Fees under Fertilizer Control Act 1985)	Rs 1000/-
4	A copy of Certificate of qualification as per Clause 14 of FCO 1985.If the applicant is not having prescribed qualification, then detail appointment order of production supervisor alongwith certified copy of qualification certificate	Self Attested
5	Name of responsible person (Not below rank of Manager) and his acceptance on Rs.500/- stamp paper along (see clause 24 of FCO 1985)	Notarized
6	Joint Inspection report of DLC(District Level Committee) for sale point/godown in prescribed form.	Inspector Signed
7	Certificate of establishment of laboratory facility (See Clause 21 A of FCO 1985). For the Fertilizers mentioned in online application.	Self Attested
8	List of machinery and instrument available for manufacturing of fertilizer (Name of machinery ,capacity, numbers and year of purchase)	Self Attested
9	Matter to be printed on fertilizer bag (See Clause 21 of FCO 1985).	Self Attested
10	Undertaking of manufacturer on Rs.500/- stamp paper about the quality of fertilizer.	Original
11	Copies of documents of ownership of Manufacturing premises such as A) 7/12 Or B) Property tax receipt etc. C) If manufacturing premises is on rental basis, then registered rental agreement with Index-II on Rs.500/- stamp paper D) NOC of local body GP.MC	Self Attested
12	A)If the firm is partnership firm then attested copy of partnership deed. B1) If the firm is Ltd. company then attested copy of certificate of registration under Company Act-1956 B2) Memorandum of Association and Articles of Association C)if the firm is cooperative society then attested copy of Registration Certificate from Department of cooperation.	- Self Attested - -

FORM 'D'
[See Clause 14(2)(a)& 18(1)]

**FORM OF APPLICATION TO OBTAIN A CERTIFICATE OF MANUFACTURE OF
PHYSICAL / GRANULATED MIXTURE OF FERTILISERS (S.O.354(E) dated
June3, 1993) / RENEWAL**

To,

**The Registering Authority &
Commissioner Agriuculture
Maharashtra State, Pune**

(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 specification ** of the physical /granulated mixture of fertilisers/* for which the certificate is required and the raw material 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 fertilisers/* mixture of micronutrient fertilisers?	
(8)Quantities of each physical/granulated mixture of fertilisers/* mixture of micronutrient fertilisers (in tonnes) 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 fertilisers/* mixture of micronutrient fertilisers,give all particulars of such mixtures handled,the period and the place(s) at which the mixing of fertilisers was done; (ii)Also give the quantities of physical/granulated fertiliser mixture 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.	
(11) I have deposited the prescribed registration certificate fee / renewal fee	

Declaration

(a)I/we declar 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 Fertiliser (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 other person under my/our direction,supervision and control or under the direction,supervision 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:

On Rs. 500/- Stamp Paper

: CERTIFICATE :

M/s. ----- hereby certify that we have appointed following personel as Factory/Production Manager as required under clause 14 of the Fertilizer (Control) Order,1985, having educational qualification as prescribed by the government of Maharashtra, vide their Notification No. Rakhate/3189/2433/CR-56/10A, Dated 21 st February,1990.

<i>Sr. No.</i>	<i>Name of the person</i>	<i>Post held & head quarters.</i>	<i>Academic qualification</i>	<i>Age</i>	<i>Full address of Residence</i>	<i>Telephone Number</i>
						<i>Office & Residence</i>

Place :

Dated :

Authorised Signatory
Rubber stamp of the company

On Rs. 500/- Stamp Paper

CERTIFICATE

Certified that we have nominated Shri. _____ an officer responsible for that compliance of the Fertilizer (Control) Order as required under Clause 24 of the Fertilizer (Control) Order, 1985 and that he will represent our organisation in the event of any legal affair against our organisation. In case the designated responsible person resigned or left the organization. I here by admit that , I will be responsible for his presence in honorable court , If in case of failure , I will be responsible for any contravention of FCO 1985.

The details are as below

- 1. Full Name :-
- 2. Post held
- 3. Address of the office :
and Tel. & Mobile number
- 4. Full address of residence :-
Tel. & Mobile number
- 5. Age of person :-
- 6. Qualification :-

Authorised Signatory with
Rubber Stamp of the company

ACCEPTANCE

Certified that I the undersigned Shri. - _____ have been appointed as responsible person by M/s.....I have no objection for the same and I agree to work as responsible officer under Fertilizer Control Order 1985. In case ,I left or resigned from the organization for contravention committed during my tenure, I will be responsible for the same and will remain present in court without fail.

Place -
Date-

Signature of responsible person

On Rs. 500/- Stamp Paper

AFFIDAVIT

I Shri ----- Proprietor / Director solemnly affirm that, I have obtained / applied for a Dealer Registration Certificate / Fertiliser Manufacturing Certificate in the name of ----- . The said Dealer Registration Certificate / Fertiliser Manufacturing Certificate bearing no. ----- is valid till ----- . The provisions of the Fertiliser Control Order 1985 are known to me and I agree to abide by the said provisions. I also agree to the below mentioned terms and conditions and agree to abide by them.

1. I agree to submit monthly return by the 10th of every subsequent month in the specified format in the Commissionerate of Agriculture for the fertiliser license issued to me.
2. I agree to submit monthly return by the 10th of every subsequent month for the fertiliser license issued to me.
3. I undertake to submit a copy of the monthly return to the District Agriculture Officer & Superintending Agriculture Officer of the district in which the fertilisers are sold.
4. I undertake to maintain record of fertilisers manufactured / sold in the specified format.
5. I undertake not to sell any grade of fertilizer not mentioned in the Manufacturing Certificate from the registered godown mentioned in the Dealer Registration Certificate.
6. In the event fertilisers are sold in wholesale in more than one district, a separate sale point and godown will be obtained and separate will be maintained.
7. Subsidised chemical fertilizer will be sold in the district as per the allocation given by the manufacturer and balance stock if any will be sold outside the district after obtaining permission from the District Agriculture Officer, Zilla Parishad of the respective district.
8. Stock received from manufacturer will be sold by us to the authorized dealer. Material will not be sold for any purpose other than agriculture and also not sold to other fertilizer manufacturing companies.
9. We authorize the following persons to sign documents on behalf of our firm / company and such documents shall be binding on us. Any change in the

authorised signatory will be communicated immediately to the Commissionerate of Agriculture. We confirm that the authorised signatory is not below the rank of Manager.

S.No.	Name of Authorised Person	Designation	Age	Address for correspondence	Signature

10. We undertake not to make any change in the address of the sale point, godown without obtaining approval from the Commissionerate of Agriculture.
11. We undertake to sell only those grades of fertilisers mentioned in the Registration Certificate and as per the specifications mentioned in the Fertiliser Control Order 1985.
12. We undertake to provide requisite information as per Clause 35 (4) of the Fertiliser Control Order 1985 in respect of imported fertilisers.

We undertake to manufacture / sell fertilisers to the farming community for their benefit and as a social responsibility. I am aware that our manufacturing certificate / dealer registration certificate is liable to be cancelled on account of contravention of the provision of the Fertiliser Control Order 1985. I affirm the above without duress and of my own free will.

Signature :

Name & Address

INSPECTION REPORT OF FERTILISER MANUFACTURING UNIT

1. Name & address of manufacturing unit :

2. Type of fertilizer manufactured & Brand name

Sr. No.	Name of the Grade	Brand name
---------	-------------------	------------

3. Manufacturing License No :
Date of Issue :
Validity :

4. Authorization No (DRC) :
Date of Issue :
Validity :

5. DIC Registration certificate no :
Date of issue :
Validity :
Products included :

6. MPCB consent No :
Date of Issue :
Validity :

7. Product wise raw material used in manufacturing

8. Manufacturing process in Short :

9. List of Machineries

Sr. No.	Name of the machinery	Year of Purchase	Working or Not
---------	-----------------------	------------------	----------------

10. Facilities for ensuring Quality Control

Sr. No.	Name of Instrument Or Equipment	Year of Purchase	Working or Not
---------	------------------------------------	------------------	----------------

11. Availability of Qualified Technical Staff

Name	:
Post	:
Qualification	:

12. Regarding Records (Whether maintained or not)

Register of the raw material
Whether raw material is analyzed prior to manufacturing
Batch wise manufacturing register
Whether batch wise register is maintained
Whether batch wise Guard samples have been preserved
Stock register
Sale register

13. Whether printed matter on bag is as per FCO 1985

14. Details of sample drawn by fertilizer inspector during inspection in last years.

Sr. No.	Grade	No. of samples drawn	Standard	Non standard
---------	-------	----------------------	----------	--------------

15 Details of sample drawn by fertilizer inspector during inspection current years.

Sr. No.	Grade	No. of samples drawn	Standard	Non standard
---------	-------	----------------------	----------	--------------

16 Grade wise production details of last 4 years

17 Whether monthly report of production / sale is submitted to the Notified Authority. If yes reference no. and date of monthly reports submitted.

18 Remarks regarding the manufacturing unit

Whether the premises is recommended for allocation of the new license / Renewal of the license

CERTIFICATE

I..... the Fertilizer Inspector here by certified that I have visited the manufacturing premise owned by and verified all the facts mentioned above on dateand also verified the necessary related documents.

I am recommending / rejecting the premise mentioned above for the allocation of new manufacturing license / renewal of manufacturing license.

Seal

Place :

Stamp and Signature

Date :

**Check list of documents for obtaining new Letter of Authorisation (State level
wholesale dealer)**

Sr No.	Particular	Documents to be uploaded
1	Duly filled A-1 (See clause 8 of FCO 1985)	Signed Copy
2	Online Challan / Challan paid across bank counter in MTR Form no.6 Under Head Crophusbandry (Fees under Fertilizer Control Act 1985)	Rs 2250 for Dealer
3	Name of responsible person (Not below rank of Manager) and his acceptance on Rs.500/- stamp paper along (see clause 24 of FCO 1985)	Notarized.
4	Attested copies of documents of ownership of sale point/ godown premises such as A) 7/12 Or B) Property tax receipt etc. C) If manufacturing premises is on rental basis, then registered rental agreement with Index-II on Rs.500/- stamp paper D) NOC of local body GP.MC	Attested by Gazetted Officer
5	Copy of Form "O" Complete in all respect.	Self Attested
6	A)If the firm is partnership firm then attested copy of partnership deed. B1) If the firm is Ltd. company then attested copy of certificate of registration under Company Act-1956 B2) Memorandum of Association and Articles of Association C)if the firm is cooperative society then attested copy of Registration Certificate from Department of cooperation.	- Self Attested - -
7	GST Registration Certificate from GST Department	Self Attested
8	Quality Assurance certificate on Rs. 500/- stamp paper in prescribed format.	Original
9	Joint Inspection report of DLC(District Level Committee) for sale point/godown in prescribed form.	Inspector Signed
10	If Wants to Sale the Products through Comarketing agreement 1) Copy of Marketing Agreement - Notarised on Rs 500/- Stamp 2) Copy of Form "O" of manufacturer /Importer / Dealer 3) Manufacture / Dealer Licence Copy of ---//---- 4) Matter to be printed on bag of ---//---- 5) Matter to be printed on bag of marketer.	Attested by Gazetted Officer

Form A 1

MEMORANDUM OF INTIMATION

(see clause 8 (2))

1. Details of the Notified Authority to whom application is submitted.

Designation of Notified Authority:

Place :

State of

2. Details of the applicant :

a) Name of the applicant :

b) Name of the concern

c) Postal address with telephone number

3. Place of business (Please give full address)

i) For Sale

ii) For Storage

4. Whether the application is for-

Manufacturer

Importer

Pool Handling Agency

Wholesale Dealer

Retail Dealer

(Tick mark whichever is applicable)

- 5 .Details of fertilizers and their source in form "O"

Name of Fertilizer

Whether certificate of source in form "O" is attached

(i)

Yes

No

(ii)

Yes

No

(iii)

Yes

No.

(Please tick Mark whichever is applicable)

6. I have deposited the registration fee of Rs.-----vide challan-----No.-----
Dated----- in the Bank/ Treasury----- or enclose Demand Draft
No.----- Dated-----Dated----- for Rs.----- Drawn
on----- in favour of -----
Payable at----- towards registration fees.
7. Whether the intimation is for an authorization letter or a renewal thereof. Note: In case
the intimation is for renewal of authorization letter , the acknowledgement in Form A2
should be submitted for necessary endorsement thereon.)
8. Any other relevant information.

I have read the terms and conditions of eligibility for submission of Memorandum of
intimation and undertake that the same will be complied by me and in token of the
same, I have signed the same and is enclosed herewith.

Date

Place

Signature of applicant

*Attach a separate sheet if the number exceeds three.

TERMS AND CONDITION OF AUTHORISATION

- 1) I shall comply with the provisions of the Fertilizer (Control) Order, 1985 and the
notification issued thereunder for the time being in force.
- 2) I shall from time to time report to the Notified Authority and inform about change
in the premises of sale depot and godowns attached to sale depot.
- 3) I shall also submit in time all the returns as may be prescribed by the State
Government.
- 4) I shall, not sell fertilizers for industrial use.
- 5) I shall file a separate Memorandum of Intimation for, where the storage Point is
located outside the area jurisdiction of the Notified Authority where the sale Depot is
located.
- 6) I shall file a separate Mol for each place when the business of selling
Fertilizers is intended to be carried on at more than one place.
- 7) I shall file separate MOI if I carry on the business of fertilizers both as retail and
wholesale "dealer.
- 8) I confirm that my previous certificate of Registration or Authorization is not under
Suspension or Cancellation or debarred from selling of Fertilizers.

DECLARATION

I/we declare that the information given above is true to the best of my/our knowledge and
belief and no part thereof is false or no material information has been concealed.

Date:

Signature of the Applicant (s)

Place:

CERTIFICATE

Certified that we have nominated Shri. _____ an officer responsible for that compliance of the Fertilizer (Control) Order as required under Clause 24 of the Fertilizer (Control) Order, 1985 and that he will represent our organisation in the event of any legal affair against our organisation. In case the designated responsible person resigned or left the organization. I here by admit that, I will be responsible for his presence in honorable court, If in case of failure, I will be responsible for any contravention of FCO 1985.

The details are as below

1. Full Name :-
2. Post held
3. Address of the office :
and Tel. & Mobile number
4. Full address of residence :-
Tel. & Mobile number
5. Age of person :-
6. Qualification :-

Authorised Signatory with
Rubber Stamp of the company

ACCEPTANCE

Certified that I the undersigned Shri. - _____ have been appointed as responsible person by M/s.....I have no objection for the same and I agree to work as responsible officer under Fertilizer Control Order 1985. In case, I left or resigned from the organization for contravention committed during my tenure, I will be responsible for the same and will remain present in court without fail.

Place -
Date-

Signature of responsible person

AFFIDAVIT

I Shri ----- Proprietor / Director solemnly affirm that, I have obtained / applied for a Dealer Registration Certificate / Fertiliser Manufacturing Certificate in the name of ----- . The said Dealer Registration Certificate / Fertiliser Manufacturing Certificate bearing no. ----- is valid till ----- . The provisions of the Fertiliser Control Order 1985 are known to me and I agree to abide by the said provisions. I also agree to the below mentioned terms and conditions and agree to abide by them.

1. I agree to submit monthly return by the 10th of every subsequent month in the specified format in the Commissionerate of Agriculture for the fertiliser license issued to me.
2. I agree to submit monthly return by the 10th of every subsequent month for the fertiliser license issued to me.
3. I undertake to submit a copy of the monthly return to the District Agriculture Officer & Superintending Agriculture Officer of the district in which the fertilisers are sold.
4. I undertake to maintain record of fertilisers manufactured / sold in the specified format.
5. I undertake not to sell any grade of fertilizer not mentioned in the Manufacturing Certificate from the registered godown mentioned in the Dealer Registration Certificate.
6. In the event fertilisers are sold in wholesale in more than one district, a separate sale point and godown will be obtained and separate will be maintained.
7. Subsidised chemical fertilizer will be sold in the district as per the allocation given by the manufacturer and balance stock if any will be sold outside the district after obtaining permission from the District Agriculture Officer, Zilla Parishad of the respective district.
8. Stock received from manufacturer will be sold by us to the authorized dealer. Material will not be sold for any purpose other than agriculture and also not sold to other fertilizer manufacturing companies.
9. We authorize the following persons to sign documents on behalf of our firm / company and such documents shall be binding on us. Any change in the authorised signatory will be communicated immediately to the Commissionerate of Agriculture. We confirm that the authorised signatory is not below the rank of Manager.

S.No.	Name of Authorised Person	Designation	Age	Address for correspondence	Signature

10. We undertake not to make any change in the address of the sale point, godown without obtaining approval from the Commissionerate of Agriculture.

11. We undertake to sell only those grades of fertilisers mentioned in the Registration Certificate and as per the specifications mentioned in the Fertiliser Control Order 1985.

12. We undertake to provide requisite information as per Clause 35 (4) of the Fertiliser Control Order 1985 in respect of imported fertilisers.

We undertake to manufacture / sell fertilisers to the farming community for their benefit and as a social responsibility. I am aware that our manufacturing certificate / dealer registration certificate is liable to be cancelled on account of contravention of the provision of the Fertiliser Control Order 1985. I affirm the above without duress and of my own free will.

Signature :

Name & Address

PROFORMA-IV

Inspection Report of Q.C. Inspector For Premises used for Sale & Storage of FERTILISER

1	Name & Address of Company	
2	Name of dealer	
3	Address & Contact No	
4	Name of contact person	
5	Phone No.	
6	Whether the premises are used for sale / storage: Sale and storage	
7	Address of sale point/ storage	
8	Address of storage	
9	Diameision- Length (ft) x Breadth (ft)= Area in sq.ft	
10	Capacity M.T.(Approx.)	
11	Whether the premises used for sale /storage are ownership ofthe dealer/or Rental basis	
12	If ownership proof verified	
	1. Property Tax Receipt	2. Telephone Bill
	3. Light Bill	4. Any other please mention
13	If rental basis proofs verified	
	1. If on rental who is owner of premises	
	2. Copy of Agreement or leese deed verified	
	3. Period of lease or agreement	
14	Enclosed the map of the sale/storage point:-----	
15	How is floor of storage / sale point	
16	How is ventilation of storage or sale point	
17	How is Roof of storage or sale point	
18	Wheter electrification is safe for Storage or sale Point: -----	
<p>have physically verified the above mentioned premise on date _____ and found that the premises is or _____ I are not suitable for FERTILISER sale / storage</p> <p align="center">Inspector Signature & Stamp</p>		