FORM – 18

APPLICATION FOR REGISTRATION OF PESTICIDE MANUFACTURING / FORMULATION PLANT

1. Name & Address of the applicant.

2. Type of Plant **i) Liquid (EC, SL, SC, EW, OD, ZC, SE, AS, WSL & FS)**
ii) Powder (WP, WS, SP, WDG, DS, ST, WSP & WSG)
iii) Granules (Gr)

3. Location / address
(Away from populated area)

4. Area
(i) Covered (ii) Uncovered

5. Major processing equipment **(List at annexure-I and II)**

6. Details of each member of the technically qualified staff.
(At least one chemical engineer/mechanical/ diploma holder)

7. Details of semi – skilled employees

8. Plant Safety.

(I) Safety Officer

(II) Ventilation

(III) Fire – fighting equipment

(IV) Emergency shower, eyewash **& change room**.

(V) Protective equipment

(VI) Protected / explosion proof electrical installations.

(VII) Emergency exit plan.

9. (i) Analytical quality control Lab. (Analytical facilities exist on site)

(ii) Laboratory staff

(iii) [Details of equipment (relevant equipment for testing of the product for physical and chemicals) (List at annexure-II)]

10. Filling Facilities

I) For liquids

a) Pneumatic or ex-proof automation.

b) Accurate measured quantity automatic dispensing.

c) Safety device on main opening of filling unit.

d) Automatic / semi automatic heat sealing **/ capping** system.

II) For Powder

a) **automatic measured quantity dispensing.**

b) **Semi automatic measured quantity dispensing.**

III) For Granules (formulation plant including repackaging plant)

11. Warehouse & Storage of pesticides

I) Type of storage

(Brick / Concrete / Sheets / Wood)

Floors: Pervious / impervious

II) Capacity **(covered area)**

III) Maintenance **(Plant)**

IV) Safety & fire fighting equipment

V) Ventilation

12. Occupational Health

Site medial probationers (Full time / Part time)

(Agreement on company letter head with hospital or doctor and employees health record)

13. Environmental Control

I) Effluent & waste water disposal system (given details)

II) Solid waste disposal system (given details)

III) Emission monitoring system (given details)

IV) In-house incinerator **or agreement with approved incinerator facilities)**
(Detail of obsolete pesticides incinerated shall be provided regularly after six months to the Department of Plant Protection).

14. Registration fee – Rs. _____

15. Any other additional information

Date: Signature of the applicant

Designation: