

FORM 3

APPLICATION FOR RE-REGISTRATION OF PESTICIDE

1. Proprietary name of Pesticide _____

2. Registration Number _____

3. Physical form _____

4. Packagings _____
(size and type of containers)

5. Full name and address of manufacturer _____

6. Name and address of applicant _____

7. Details of uses of the pesticide _____

Signature of Applicant

Date

FOR OFFICIAL USE ONLY

TO BE COMPLETED BY THE REGISTRAR

Date registered or refused by Authority _____

Registration number _____

Reason for refusal _____

Signature of Registrar

Date