**Application Form for a License for the sale of Chemical Fertilisers**

(Chemical Fertiliser Control Act, 1980)

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| **1.** | **Surname (Mr/Mrs/Miss):** | **……………………………………………………………………………** **(IN BLOCK LETTERS)** |
| **2.** | **Other Names:** | **……………………………………………………………………………** **(IN BLOCK LETTERS)** |
| **3.** | **Address (Residence):** | **……………………………………………………………………………** |
| **4.** | **Telephone Number:** | **…………………………………** |
| **5.** | **Address of premises in respect of which the application is made:** **……………………………………………………………………………………………………………** |
| **6.** | **Fertilisers in respect of which application is made:****……………………………………………………………………………………………………………** |
| **7.** | **Type of license applied for:** | **Wholesaler**  | **Retailer**  |
| **8.** | **State whether arrangements have been made to store fertilisers separate from foodstuffs and pesticides.** **Yes No**  |
| **9.** | **State whether scales have been provided exclusively for the weighing of fertilisers, in the case of an application for a retailer license:** **Yes No**  |
| **10.** | **State whether chemical fertilisers may safely be sold on the premises in respect of which application is made:** **Yes No**  |
| Date:……………………..  |  ….…………………………………………….. Signature of applicant or person authorized to sign on behalf of the applicant |

 Tick where appropriate

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| **For Official Use Only** |
| **Date of Inspection of premises:…………….** |  |
| **Premises:** Approved/Not Approved | **License No: ………………………………** |
| **Date: ……………………………** | **Signature of Officer: ……………………** |