

Form H.

Application for a Temporary Registration of Premises.

*The Control of Agricultural Chemicals Act.*

The Registrar

The Agricultural Chemicals Board

P.O. Box

1. Name of applicant \_\_\_\_\_

\_\_\_\_\_

2. Name and address of person to be issued with the certificate

\_\_\_\_\_

\_\_\_\_\_

3. Full names of partners or directors (where applicable)

\_\_\_\_\_

\_\_\_\_\_

4. Experience of applicant in handling agricultural chemicals although he or she has no documented technical knowledge \_\_\_\_\_

\_\_\_\_\_

5. Nature of occupation (must be either to retail, wholesale for storage or distribution of agricultural chemicals) \_\_\_\_\_

\_\_\_\_\_

6. Distance between the premises in respect of which this application is made and nearest area where agricultural chemicals are dealt with under the supervision of a person with technical knowledge

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\_\_\_\_\_

7. Owner of premises \_\_\_\_\_

8. Plot No. \_\_\_\_\_

9. LR. No. \_\_\_\_\_

10. Location \_\_\_\_\_

11. General business postal address \_\_\_\_\_

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Date of application

Signature of Applicant

*Note—*

1. Premise is in reference to a building, location and place.