

Application Form for Fertilizer Distribution License

Date -----

To,

Region/ State Officer

Department of Agriculture

----- Township

Subject: Applying for a Fertilizer Distribution License

I would like to apply to issue the Fertilizer Distribution license.

1. Applicant'

(a) Name -----

(b) Shop Name -----

2. NRC No./ FRC No.-----**3. Professional skills**

(a) Qualifications -----

(b) Work Experience -----

4. Permanent Residence Address -----**5. Address of the building**

where the fertilizers are distributed -----

(a) Type of building (roof, wall, floor) -----

(b) Area of building -----

6. Fertilizers to be distributed

				Packing Material		Net wt.
No.	Name	Specification	Kinds of material	Size of bag	of	
(1)	_____					
(2)	_____					
(3)	_____					
(4)	_____					
(5)	_____					

Applicant's signature