

FORM 2  
APPLICATION FOR LICENCE TO IMPORT  
A REGISTERED PESTICIDE

1. Importer's Name: \_\_\_\_\_

2. Importer's Address: \_\_\_\_\_

3. Product name of pesticide and formulation:  
\_\_\_\_\_  
\_\_\_\_\_

4. Quantity and package size: \_\_\_\_\_

5. Manufacture's name and address: \_\_\_\_\_  
\_\_\_\_\_

6. Supplier's name and address: \_\_\_\_\_  
\_\_\_\_\_

7. Address of premises where pesticide is to be stored:  
\_\_\_\_\_  
\_\_\_\_\_

8. Purpose of importation: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**FOR OFFICIAL USE ONLY**

1. Date application accepted or refused \_\_\_\_\_

2. Licence number \_\_\_\_\_

3. Reason for refusal \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Registrar

\_\_\_\_\_  
Date