

Schedule no X

No :

SCS	/	Region	/	Year	/	Serial No
SCS	/	_ _	/	_ _	/	_ _ _ _

Form No: 1



For Office Use only		
Registration No.	New	Ren.

Application for Registration / Renewal of Registration as a Seed Handler in Sri Lanka
under the provisions of Seed Act No. 22 of 2003

(Please refer to the instruction sheet provided separately before completing this application)

1	Have you obtained registration before under the Seed Act?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>																				
	If Yes Date	DD	MM	YYYY																					
	Registration No.	_ _ / _ _ _ / _ _ _ _ _																							
2	Full Name of the Applicant																								
	Name with Initials																								
3	Name of the Business organization																								
4	Designation of the applicant in the above organization																								
5	1. National Identity card No. (Valid Driving Licen/ Pass port/ Senior Citizens Card No.)	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>																							
	2. Business Registration No.	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>																							
6	1. Location of the business organization	District	Divisional Secretariat																						
	2. Adress & Contact number of the business organization	Address		Telephone No.																					
		E-mail																							
	3. Personal adress & the contact numbers of the applicant	Address		Contact Nos.																					
				Fixed	Mobile																				
		E-mail																							
7	Details of other affiliated business orgnizations / institutes																								
	Name of the Institute	Activity	Address	Divisional Secretariat	District	Contact Nos.																			
8	Product name																								

9	Registration requested for Please tick the main request in only one box.			
	1. Seed production <input type="checkbox"/>		3. Importation <input type="checkbox"/>	
	2. Planting material production <input type="checkbox"/>		4. Sales <input type="checkbox"/>	
10	In addition to the above activity are you engaged in other activities mentined above? Yes <input type="checkbox"/> No <input type="checkbox"/>			
10.1	If yes, please indicate 1. 2. 3.			
11	Please tick the appropriate cages with reference to No. 9 and 10			
	1. Seed production	Paddy <input type="checkbox"/>	Vegetables <input type="checkbox"/>	Potato <input type="checkbox"/>
		Fruits <input type="checkbox"/>	Tuber crops <input type="checkbox"/>	Mushroom <input type="checkbox"/>
				OFC <input type="checkbox"/>
				Flower/Foliage <input type="checkbox"/>
	2. Planting material production	Fruits <input type="checkbox"/>	Rubber <input type="checkbox"/>	Cashew <input type="checkbox"/>
		Tea <input type="checkbox"/>	Coconut <input type="checkbox"/>	Medicinal <input type="checkbox"/>
				Flower/Foliage <input type="checkbox"/>
				Export crops <input type="checkbox"/>
				Tissue Cultured Plants <input type="checkbox"/>
	3. Importation	Vegetable Seeds <input type="checkbox"/>	Potato <input type="checkbox"/>	Tissue cultured plants <input type="checkbox"/>
		Planting material <input type="checkbox"/>	Grass Seed <input type="checkbox"/>	Fruit seed <input type="checkbox"/>
		Flower/Foliage plants <input type="checkbox"/>	Flower seed <input type="checkbox"/>	Forest plants <input type="checkbox"/>
	4. Sales	Local Seeds <input type="checkbox"/>	Imported Seeds <input type="checkbox"/>	Planting Material <input type="checkbox"/>
12	Seed sales	Do you have a suitable place for sales	Yes	No
			Wholesale	Retail
				Both
	Planting material sales	Do you have a suitable place for sales	Yes	No
				Retail
				Both

13 Production of seed and planting matirials / Import targets within 2 years period of registration

13.1 Rice/ Other Field Crops/ vegetable/ Seed Potato/ Mushroom Seed/ Fruit Plant/ Export Agriculture Crops/Tea Plant/ Rubber Plant/ Coconut Plant/ Forest Plant/ Medicinal Plant/ Flower & Foliage Leaf, Plant or other..... (Please cut off unnesacerry word)

Crop	Variety	Production area/Location	Production target (Bu)							
			Year-1				Year-2			
			1		2		1		2	
			Extent (Ac)	Product ion (bu, Kg,)	Extent (Ac)	Product ion (bu, Kg,)	Extent (Ac)	Product ion (bu, Kg,)	Extent (Ac)	Product ion (bu, Kg,)

13.2 Imported seed / Planting material target?

Crop	Variety	Importing country	Import targets (bu,kg,number & other)	
			year-1	year-2

14 Sales of seed and planting materials /Local & Imports targets

Rice/ Other Field Crops/ vegetable/ Seed Potato/ Mushroom Seed/ Fruit Plant/ Export Agriculture Crops/Tea Plant/ Rubber Plant/ Coconut Plant/ Forest Plant/ Medicinal Plant/ Flower & Foliage Leaf, Plant or other..... (Please cut off unnesacerry word)

Crop	Variety	Name of the Producer	Sales Targets (bu,kg,number & other)			
			Year-1		Year-2	
			1	2	1	2

15 I have studied the instructions and conditions regarding the filling of the application and hereby declare that the information furnished in this application is true and correct. I agree to adhere to the conditions laid down in the seed act pertaining to the performance of activities mentioned above and will permit the authorized fficers to inspect the relevant activities to draw the samples and to provide required information. I am aware that if the information furnished is found to be untrue/false or if i violate any of the agreed conditions, the registration is liable to be cancelled in addition to being subjected to the penalties mentioned in the seed act.

Date: Signature of the Applicant

16 The premises have been inspected. We are satisfied about the information furnished in the application and as such it is recommended that it is suitable to be registered as a seed handler under the seed act.

Instructions were given to prepare lable & packaging / make payment for registration.

The application cannot be recommended due to the following reasons.

1	2
3	4

Have you rejected his/her application before? Yes No

If yes, application No.

.....

Signature 1	Signature 2
1. Agric. Instructor/Extension Officer (Export Crops)/A (Mahaweli)/	2. OIC/SCS
Name:	Name:
Designation:	Designation:
Address:	Address:

17 **Submittance of labels & packaging prior to print (valid for local and imported seed handlers and planting material producers)**

The specimens of printed coloured labels and packaging, each prepared according to the instruction given, are submitted herewith for your approval.

1
2
3
4

Please be informed that printed labels and packaging each will be submitted to you once it is approved with the registration number under the seed act.

The above specimens of labels and packaging are handed over correctly

Received correctly

.....

Date	Signature of the applicant	Signature of the Authorised Offcer/SCS
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18 Payment for registration

Name of the Bank (Collection account of the Director General of Agriculture)	Bank Branch	Date	Amount (Rs.)
1. Bank of Ceylon - Account NO. 0007042565			
2. Peoples bank - Account No. 057-1001-39027201			

The above bank slip along with the Paying in Voucher (PIV) is submitted herewith.

.....
Date

.....
Signature of the applicant

.....
Signature of the Authorised Officer/SCS

19 Handing over of the application and other items to the office of the seed act

Item	No. handed over	Number received
1. Application		
2. Bank slip		
3. Paying in Voucher (PIV)		
4. Certified copy of NID		
5. Copy of Business Registration		
6. Additional details provided by the applicant (no. of pages)		

Labels & packaging	No. handed over	Number received
1		
2		
3		
4		

The Application and the other items indicated above are handed over correctly / received correctly

.....
Date

.....
Signature of OIC/SCS

.....
Signature of the Authorised Officer (Seed Act Implimentation Unit)

20 Issuing of certificate of registration has been approved/ has not been approved due to the following reasons

1
2
3

Date:

Approved according to the amendments

Director (Seed Certification & Plant Protection) / Head (Seed Certification Service)

.....
Section Head (Seed Act Implimentation Unit)
(use the frank)

