

PROFORMA

CHECK LIST FOR VERIFYING BONAFIDES OF THE APPLICANT SEEKING REGISTRATION  
UNDER SECTION 9(4) FOR MANUFACTURE OF TECHNICAL GRADE  
PESTICIDES/FORMULATIONS.

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1. Name of the Applicant :
2. Detailed Address :
3. Is the proposed factory located in industrial area ? :
  - a) Size of the proposed industrial plot :
  - b) Covered area for proposed manufacturing unit :
  - c) Covered area for proposed storage :
4. Address of the immediate neighbouring Industrial unit :
5. Proposed number of personnel being employed by the applicant (detail in following format) (attach extra sheet, if required)

<u>Number</u>	<u>Name of the person</u>	<u>Designation</u>	<u>Qualification</u>	<u>Working since</u>
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6. Proposed laboratory facilities (List of Laboratory equipments and instruments Available for in house quality control) :
7. Proposed manufacturing facilities (giving information on manufacturing/ formulation equipments/machineries as well as equipments for packaging of pesticides) :
8. Proposed effluent treatment method :
9. Proposed medical facilities :
10. Proposed arrangements of First Aid Measures :
- RECOMMENDATION :

Place:

Dated:

NOTE:

Name and Designation  
With Seal

Manufacturing Licence shall be issued only after verification of the actual facilities by the concerned State Department of Agriculture.

**FORM III**  
**(See Rule 9)**

**Application for the grant of license of manufacture of Insecticides**

Name, address and status of the applicant

Address of the premises where the manufacturing activity will be done:

Name of the insecticides with Name of the Registration No Date

Their registration number and Insecticides

Date for which manufacturing 1.

License is applied (enclose copies 2.

of certificate of registration duly 3.

Signed by the applicant)

Whether any registration is Provisional, if so give particulars.

Details of full time expert staff	Name	Qualification	Experience
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Connected with the manufacture	1		
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and testing of he insecticides in	2		
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The above unit	3		
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Whether all the facilities required

Under Chapter VIII of the Rules have

Been provided, Give full details

In a separate sheet

Particulars of the fee deposited.

Signature of the applicant

VERIFICATION

I \_\_\_\_\_ s/o \_\_\_\_\_  
do hereby solemnly verify that to the best of my knowledge and belief the information given in the application and the annexure and statements accompanying it, is correct and complete.

I further declare that I am making this application in my capacity as \_\_\_\_\_ and that I am competent to make this application and verify it by virtue of \_\_\_\_\_; a photo/attested copy of which is enclosed herewith.

Date:

Signature with seal

Place:

**FORM IV**  
**[See Rule 9 (1)]**

**Application for renewal of license to manufacture insecticides**

- a. I/We \_\_\_\_\_ of \_\_\_\_\_ hereby apply for the renewal of the license to manufacture insecticides on the premises situated \_\_\_\_\_ (License No. and date to be given).
- b. The other details regarding the manufacture of the insecticide continue to remain the same.
- c. Particulars of the fee deposited.
- d. The license is enclosed herewith.

Date: \_\_\_\_\_

Signature

VERIFICATION

I \_\_\_\_\_ S/o \_\_\_\_\_; do hereby solemnly verify that what is stated above is true and correct to the best of my knowledge and belief.

I further declare that I am making this application in my capacity as (designation) and that I am competent to make this application and verify it, by virtue of \_\_\_\_\_; A photo / attested copy of which is enclosed.

Date:

Signature with Seal

Place:

Note: If there is any change in details of manufacture or conditions of license subject to which the license is required to be renewed, the same may be indicated here.

**DOCUMENT REQUIRED FOR THE INSTALLATION OF MANUFACTURING UNIT FOR  
FORMULATION/TECHNICAL OF PESTICIDES.**

1. Proof of Ownership in favour of the firm either owned or rented site/plot/land where the Manufacturing unit of pesticides is to be proposed for establishment.
2. Original/Attested copies of the Insecticide/ Insecticides registered by Central Insecticides Board and Registration Committee, Govt. of India, Ministry of Agriculture, (Department of Agriculture & Co-operation) Directorate of Plant Protection, Quarantine & Storage, N.H.IV, Faridabad (Haryana) of the products desired to be formulated in the Unit/Factory.
3. Detail of minimum infrastructure facilities to be created/made-as per the guidelines issued by Ministry of Agriculture, (Department of Agriculture & Co-operation) Directorate of Plant Protection, Quarantine & Storage, N.H.IV, Faridabad (Haryana) for the minimum infrastructure to be created by the manufactures of pesticides and their formulations to meet the requirement for the issue of licence by respective State Government ( Licencing Authority )
4. Application for the grant or renewal of a licence to manufacturing any insecticide/ insecticides shall be made in form -III or form-IV as the case may be to the licensing officer.
5. Fee of Rs 50/ for the grant /renewal of licence for every insecticide/ insecticides subject to maximum of Rs 500/
6. No Objection Certificate/ consent for Air, water & HWM from Pollution angle issued by competent authority/ Board/ Department.
7. List of members of the board with proof of complete address and identification.
8. Copy of resolution passed by the board of directors to authorizing a person for submitting papers in the office under his signature.
9. Proof of registration of the unit with the small scale industries department.
10. Affidavit from Director/Proprietor to undertake the responsibility of Chemist Responsible for quality control and person responsible for conduct of business under section 33 of the insecticides Act,1968 in case leave /retires /left over the firm or terminated from the firm ,and authorized or nominate other person and also take responsibility to appear in the court.
11. Affidavit from responsible person to maintains quality of products under section 33 of the insecticides Act, 1968. With copy of resolution passed by the board of directors along with proof of address & identification.
12. List of Plant / Machineries.
13. List of laboratory equipments.
14. Consent of Medical Doctor required under Rules 37 of Insecticides Rule, 1971.
15. List of first-aid measures required under Rules 38 of Insecticides Rules, 1971.

Proforma for inspection of insecticides manufacturing units in Haryana state.

1.	Name of the manufacturing unit	
2.	Location/Address of the unit	
3.	<b>Purpose</b>	
	a) New Licence	
	b) Renewal of Licence	
	c) Addition of new products/ items	
	d) Annual/ Surprise Inspection	
	e) Any other	
4.	Is the Unit registered with DGT/Department of Industries & Commerce ?	
	If so, the Number and Year of Registration	
5.	Is the Unit certified by the Authority under Factories Act ?	
6.	<b>Infrastructural Facilities:</b>	
(a)	(i)	Whether sufficient provisions have been made for storage of raw material and finished products of EC, WP, DP, Weedicides etc separately.
	(ii)	Has the Unit separate sheds and machinery required for the formulation of EC, WP, DP, Weedicides etc ?
	(iii)	Is the machinery in working order ?
(b)	<b>Details of Machinery (List to be attached)</b>	
	(i)	For EC formulation.
	(ii)	For DP formulation.
	(iii)	For WP formulation.
	(iv)	For Weedicides.
	(v)	For any other.
7.	<b>Laboratory</b>	
	Is the Laboratory equipped as per ISI requirements (List of equipments to be given)	
	1	
	2	
	3	
	4	
	5	
8.	<b>Internal analysis of pesticides carried out:</b>	
	Year	Name(s) of product(s)
		Standard
		Misbranded
	Frequency of analysis of different chemicals and their results.	
9.	Whether Bathroom/Toilet facilities have been provided at the site.	

10.	Has the Unit made adequate arrangements for fire-fighting devices ? If yes, details of systems provided.	
11.	Details of arrangements made for discharge of dust particles, fumes, effluents etc. If yes, details of systems provided.	
12.	Expert staff connected with the manufacturing:	
	a) Name	
	b) Qualification	
	c) Experience	
	d) Residential Address	
	e) Other staff	
13.	Responsible Person nominated:	
	a) Name	
	b) Father's Name	
	c) Qualification	
	d) Experience	
	e) Residential Address	
14.	Are they doing any contract formulation ? If yes, for whom and for which items.	
15.	Are the products manufactured by the Unit marketed by any other agency? If so, name & address thereof.	
16.	Source of procurement of TGM (Technical Grade Material)	
	Quality assurance for TGM (Technical Grade Material)	
	i) Testing facilities for TGM	
	ii) No. of tests carried out for TGM	
	iii) Frequency of tests.	
17.	Quantity of pesticides (product-wise) formulated (attach list) during the period ..... to .....	
18.	<b>Has the Unit adequate &amp; proper facilities like:</b>	
	a) Sufficient area for formulation & storage.	
	b) Separate sections for liquid/ power/ granules/ herbicides.	
	c) Vessels fitted with stirrers, filter, storage tanks for solvents for liquid formulation.	
	d) Filling & packing lines for powder, WP formulation, grinding mill Pulverizer, jet mill etc with blenders.	

	e)	Filling & sealing line for formulation and granules, granulated plant with accessories.	
	f)	Sufficient technical manpower (Details).	
19.		How are the used containers/ packing and washing disposed off?	
20.		Is drinking water facility sufficient for the workers at the factory premises ?	
21.		Are the workers being trained in safety measures and handling of savoury equipments etc?	
22.		Has the Unit provided protective clothing to the workers? Detail of protective clothing & respiratory devices being used.	
23.		Has the Unit made arrangements for adequate power supply (Electricity).	
24.		Has the firm valid Air/Water consents from Pollution Control Board, Haryana? If so, the dates of their validity.	
	1-	Air	
	2-	Water	
25.		<b>Has the Unit applied for</b>	
	a)	Registration of new products to the Registration Committee, Ministry of Agriculture, Govt. of India. If so, No. & date of application.	
	b)	Securing a licence to manufacture and sale to the Licensing Officer notified/appointed by the State other than Haryana. If so, name of the State.	
	(1)	Manufacturing State(s)	
	(2)	Selling State(s)	
26.	a.	Are the medical facilities available in the factory premises?	
	b.	Has the Unit ISI standard book on symptoms of poisoning and treatment?	
	c.	Are the workers being examined medically periodically? If yes, at what intervals?	
	d.	Is the Unit maintaining sickness record of its employees?	
	e.	Number of persons affected by the pesticides within three years.	
	f.	Is the medical expert of the Unit familiar with pesticide poisoning?	
	g.	Name of Medical Officer with qualification.	
	h.	How far his clinic is situated.	
	i.	What are the arrangements to take the patient to the doctor, if doctor is part-time?	
	j.	Are the antidotes readily available and facilities for first aid measures including artificial respiration?	

27.	Any other item which is not covered above.	
28.	Recommendation of the inspecting officers.	

Date:

Signatures of Inspecting Officers with Seal



**(C) 2.1**

**Guidelines for minimum infrastructure facilities to be created by the manufacturers of microbial biopesticides (Antagonistic fungi, Entomopathogenic fungi, Antagonistic bacteria, Entomotoxic bacteria).**

**(as approved in 297<sup>th</sup> meeting of RC held on 29-01-2009)**

Sl.No.	MANPOWER REQUIREMENT
1.	Quality Control Biologist
2.	Sufficient personnel to supervise production, maintenance, stores etc.
	<b>GENERAL REQUIREMENT</b>
1.	Production, Mixing & Drying Room and Formulation Unit for Antagonistic fungi/ Entomopathogenic fungi
2.	Inoculation, Fermentor, & Sterilization Room and Formulation unit for Antagonistic bacteria/ Entomotoxic bacteria.
3.	Packaging and storage room
4.	Quality Control laboratory
5.	Protective clothing
6.	Respiratory devices
7.	First Aid Measure
8.	Waste disposal arrangement in compliance with Pollution Control norms
	<b>PLANT EQUIPMENT REQUIREMENT</b>
1.	Plant Fermentor with all accessories / Bioreactor / Shaker
2.	Steam Boiler
3.	Chilling plant
4.	Air compressor
5.	RO/ Softener (water treatment plant)
6.	Distillation Unit
7.	Micro centrifuge
8.	Magnetic stirrer
9.	300 $\mu$ and 160 $\mu$ Sieves
10.	Electronic Weighing Balance
11.	Blender/Homogenizer
12.	Vortex
13.	Vibro-screen
14.	Autoclavable bag
15.	Large air tight container
16.	Pouch sealing machine

17.	Box strapping machine
18.	Racks and cabinet
<b>LABORATORY EQUIPMENT/ INSTRUMENT REQUIREMENT</b>	
1.	Autoclave
2.	Water bath
3.	Shaking incubator
4.	Refrigerator
5.	Thermo hygrometer
6.	U. V. light
7.	BOD Incubator
8.	Hot Air oven
9.	Laminar Flow
10.	pH meter
11.	Balance (2-3 decimal places)
12.	Vacuum pump
13.	Hot plate
14.	Deep freezer
15.	Spirit
16.	Microscope and all accessories
17.	Glassware viz. Conical Flasks, Test tubes, Beaker etc.
18.	Petri dishes
19.	Titanium inoculating needles
20.	Pipette fillers
21.	Pipettes (0.1 ml to 20 ml)
22.	Haemocytometer
23.	Colony counter

**Note:** These are the general requirements of minimum infrastructure to be created by the manufacturer(s). However, for specific microbial biopesticides formulation(s) and their quantum of production, requirement of manpower, space, equipment/ instrument may be needed.

**(C) 2.2**

**Guidelines for minimum infrastructure facilities to be created by the manufacturers of Baculoviruses (NPV, GV).**

(as approved in 297<sup>th</sup> meeting of RC held on 29-01-2009)

Sl.No.	MANPOWER REQUIREMENT
1.	Quality Control Biologist
2.	Sufficient personnel to supervise production, maintenance, stores etc.
	<b>GENERAL REQUIREMENT</b>
1.	Post culture production room with temperature and humidity control
2.	Moth ovi-position room with temperature and humidity control
3.	Production room with temperature and humidity control
4.	Diet preparation room
5.	Virus processing lab.
6.	Quality control lab.
7.	Formulation unit
8.	Cold storage
9.	Washing and sterilization facility
10.	Stores room
11.	Protective clothing
12.	Respiratory devices
13.	First aid measures.
14.	Waste disposal arrangement in compliance with Pollution Control norms

	EQUIPMENT/INSTRUMENT REQUIREMENT
1.	Diet preparation machine (mixer)
2.	Diet dispenser.
3.	Multi channel pipette
4.	Vacuum pump with an aspirator
5.	Blenders
6.	Multipurpose centrifuges
7.	B.O.D. incubator or an incubator room or an environmental chamber
8.	Scale balance
9.	Digital balance
9.	Haemocytometer shallow depth Counting chamber
11.	Hot air oven.
12.	Compound research microscope.
13.	Zoom microscope.
14.	Vortex mixers
15.	Tally counters

16.	Electric stove.
17.	Autoclave
18.	Shaker.
19.	Water distillation unit.
20.	Air conditioners
21.	Humidifiers
22.	Oviposition iron cage
23.	Washing machine
24.	Racks and cabinet
25.	Refrigerators

**Note:** These are the general requirements of minimum infrastructure to be created by the manufacturers. However, for specific baculovirus formulation(s) and their quantum of production, requirement of manpower, space, equipment/ instrument may be needed.

**(C) 1.****Guidelines for the minimum infrastructure to be created by the manufacturers of pesticides and their formulations to meet the requirements for issue of licence by respective State Governments (Licencing Authority)- as approved in 261<sup>st</sup> RC held on 15-02-2006**

These are the general requirements, However, for individual chemicals, specific requirements are to be installed and additional equipment are to be supplemented to suit the reactions involved in the manufacturing process. Further, other specifications as per the Insecticides Rules viz. medical facilities, protective clothing, respiratory devices, first aid measures, training towards safety precaution and handling safety equipment, safety disposal, etc. are required to be made.

1. **The minimum infrastructure with respect to manpower shall be as under**

<b><u>Sr. No.</u></b>	<b><u>Manpower</u></b>	<b><u>For Technical plant</u></b>	<b><u>For formulation plant</u></b>
1	Production Manager	R	R
2.	Supervisor	R	R
3.	Instrument and process control personnel	R	R*/NR
4.	Maintenance Personnel (Plant and utilities)	R	R
5.	Store Keeper (Raw material and finished products)	R	R
6.	Quality Control Chemist	R	R
7.	Security personnel	R	R

\* In case of automatic plant

2. **Minimum infrastructure with respect to machinery & equipment**A. **For technical plant**

<b><u>Sr. No.</u></b>	<b><u>Equipment</u></b>	<b><u>For Technical plant</u></b>
1	Control console	R
2.	Feed tank for raw material	R
3.	Reactors	R

4.	Distillation towers	R
5.	Evaporators	R
6.	Condenser / heat exchanger / boiler/ extinguisher plant / chilling system / steam plant	R
7.	Crystallizer	R
8.	Centrifuge	R
9.	Drier	R
10.	Phase separator	R
11.	Extractor	R
12.	Storage tank	R
13.	Process water tank	R
14.	Pipelines with conventional colour code	R
15.	Gas plant	R

**B. For Formulation plant**

S.No.	Equipment	Solid, DP, WG, SP, etc	WG/G	Liquid (EC, EW, SL)
1.	Feeding channel / Chute	R	R	R
2.	Jaw Crusher	R	R	NR
3.	Raw material feed tank	R	R	R
4.	Pulveriser	R	R	NR
5.	Blender	R	R	R
6.	Siever	R	R	R
7.	Bag Filter	R	NR	NR

8.	Homogenizer	R	R	R
9.	Ball mill	R	NR	NR
10.	Weighing machine / platform balance	R	R	R
11.	Vessel with stirrer	R	R	R
12.	Drier	R	R	NR
13.	Cooling machine	NR	R	R
14.	Sprayer	NR	R	NR
15.	Water tank for liquid	NR	NR	R
16.	Filter	NR	NR	R

**3. Equipment for quality control laboratory**

1. Analytical weighing balance
2. Hot air oven
3. Refrigerator
4. pH meter
5. Spectro-photometer / colourimeter
6. GLC / HPLC depending on the products analytical process as in the specification.
7. Standard glassware, chemical and general requirements for laboratory
8. Pesticide Repository
9. Specification / BIS standard of the product to be manufactured / formulated
10. Sieve shaker.
11. Fume Hood

12. Distilled water still
13. Flash point apparatus
14. Melting point apparaturs

4. **Packaging plant and equipment**

1. Packaging machinery.
2. Filling machine (automatic / semi automatic).
3. Weighing machine
4. Bagging machine
5. Sealing machine
6. Labeling equipment.



**(C) 2.3**

**Guidelines for minimum infrastructure facilities to be created by the manufacturers of botanical biopesticides (Pyrethrum, Azadirachtin, Cymbopogon etc.)**

(as approved in 297<sup>th</sup> meeting of RC held on 29-01-2009)

Sl.No.	MANPOWER REQUIRMENT
1.	Quality Control Biologist
2.	Sufficient personnel to supervise production, maintenance, stores etc.
	<b>GENERAL REQUIREMENT</b>
1.	Extraction room
2.	Production room
3.	Formulation unit
4.	Packing and storage room
5.	Quality control laboratory
6.	Protective clothing
7.	Respiratory devices
8.	First aid measures
9.	Waste disposal arrangement in compliance with Pollution Control norms
	<b>PLANT EQUIPMENT/INSTRUMENT REQUIREMENT</b>
1.	Phase separation vessels
2.	Decanter
3.	Mixing vessels with stirrer
4.	Centrifuge
5.	Soxhlet apparatus
6.	Electric oven with thermometer
7.	Chemical measuring cylinders
8.	Chemical transfer pumps
9.	Filter pressure pump
10.	Measuring cans
11.	Electric weighing machine
12.	Counter scales
13.	Filtration assembly
14.	Water distillation unit
15.	Wrist action shaker
16.	Blender
17.	Vortex
18.	Large air tight containers
19.	Material filling trays

20.	Storage tank
21.	Filling machine
22.	Sealing machine
23.	Packing accessories
<b>LABORATORY EQUIPMENT/INSTRUMENT REQUIREMENT</b>	
1.	HPLC System
2.	pH meter
3.	Spectrophotometer
4.	Refrigerator
5.	Thermometer
6.	Microscope
7.	Autoclave
8.	U. V. Lamp
9.	Abel flash point Apparatus
10.	Incubator
11.	Glassware viz. Conical Flasks, Test tubes, Beaker, Separating funnel, Funnels, Glass tubes, etc.
12.	Pipette fillers
13.	Pipette
14.	Burette
15.	TLC apparatus & accessories
16.	Micro-syringes

**Note:** These are the general requirements of minimum infrastructure to be created by the manufacturers. However, for specific botanical biopesticides formulation(s) and their quantum of production, requirement of manpower, space, equipment /instrument may be needed.