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**FERTILIZER, FARM FEEDS AND REMEDIES ACT (CHAPTER 18:12)**

**Pesticides Regulations, 1977**

**Information to be submitted, in triplicate, to the Registering Officer in respect of Experimental Pesticides.**

**1. Name of applicant:**

**2. Address of applicant-**

**a) Postal:**

**b) Business:**

**3. Code name or number of pesticide:**

**4. Type of pesticide (fungicide, herbicide, insecticide. etc):**

**5. Chemical group:**

**6. Toxicological data, if available**

**a) Humans and Animals.....**

**b) Symptoms of poisoning.....**  
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.....

**c) First aid.....**  
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**7. Mass or volume of pesticide imported:**

**8. Suggested use:**

**9. Location of trials:**

**10. Plot- size:**

**11. Person conducting the trials:**

Date:

Signature of applicant.....