FERTILIZERS, FARM FEEDS, AGRICULUTRAL REMEDIES AND STOCK REMEDIES ACT,1947 (ACT 36 OF 1947)
WET OP MISSTOWWE, VEEVOEDSEL, LANDBOUMIDDELS EN VEEMIDDELS, 1947 (WET 36 VAN 1947)

REGISTRAR: ACT 36 OF 1947
Agriculture Building, Beatrix Street
Private Bag X343
PRETORIA
0001
Republic of South Africa

APPLICATION FOR RENEWAL OF REGISTRATION AS A PEST CONTROL OPERATOR
AANSOEK OM HERNUWING VAN REGISTRASIE AS 'N PLAAGBEHEEROPERATEUR

1. Submit only a single application together with the correct application fee./ Die aansoek moet slegs in enkelvoud ingedien word met die korrekte aansoekgeld.
2. Complete only the information that has changed in the spaced available. / Voltooi slegs die inligting wat verander het in die plek voorsien.

SURNAME /VAN:

FULL NAMES/VOLLE NAME:

IDENTITY NUMBER/IDENTITEITSNOMMER:

REGISTRATION NUMBER/REGISTRASIE NOMMER

POSTAL ADDRESS/POSADRES: Complete if changed

NAME AND ADDRESS OF BUSINESS/
NAAM EN STRAATADRES VAN BESIGHEID: Complete if changed

RESIDENTAL ADDRESS/WOONADRES: Complete if changed

Tel. No.: Dialing Code:

Dialing Code / Skakelkode: _____ Tel No.: _____(B)

Dialing Code / Skakelkode: _____ Tel No.: _____(H)

Dialing Code / Skakelkode: _____ Fax No.: _____

e-mail/e-pos: _____ Cell/Sel No: _____

Ingevolge die bepalings van Wet 36 van 1947, soos gewysig en die regulasies daarkragtens uitgevaardig, doen ek hiermee aansoek om hernuwing van registrasie as 'n Plaagbeheeroperateur en sertifiseer ek dat die besonderhede wat in hierdie aansoek verstrek is, na die beste van my wete waar, juis en volledig is.
In terms of the provisions of Act 36 of 1947, as amended and the regulations promulgated thereunder, I do hereby apply for registration as a Pest Control Operator and certify that the particulars furnished in this application are to the best of my knowledge true, correct and complete.

_____ _____
SIGNATURE/HANDTEKENING DATE/DATUM