



Regulating Pesticides in Malawi

Our Reference No: /PCB/CAL/2015
Your Reference No:

PESTICIDES (AMENDMENT) ACT, 2018

Application for a Commercial Applicator’s Licence

Reg. 17 (1)

**The Registrar of Pesticides
Pesticides Control Board
P.O. Box 51300
Limbe. Malawi**

I/We.....
of.....

CropLife - Malawi Registration Number:
desiring to apply for gain pesticide (s) belonging to the type/types specified below at

.....
.....
.....

(Address of Premises)

do hereby apply for Commercial Applicator’s Licence under section 26 of the Pesticides Act, 2000.

This application is for.....

- (a) a new licence
 - (b) renewal of licence
- (Indicate with a tick)*
- Current licence No.....

Period of licence: From.....to..... (annually)

The type of pesticides I/We desire to apply are-

- (a) Fumigants;
- (b) Insecticides;
- (c) Acaricides;
- (d) Nematicides;
- (e) Fungicides;
- (f) Herbicides;

The intended purpose-

- (a) Fumigation of produce;
- (b) Field crops;
- (c) Household pests;
- (d) Termite proofing;
- (e) Weed control

I/We* also forward a certified copy of Competence Fumigation Certificate No.....
Whose date of issue is.....belonging to.....

I/We* also forward account payee bank draft/cash/ money order/postal order to the
value of..... made payable to Pesticides Control Board as the
application fee.

Declaration

I/We* declare that all the information given in this application is true and correct.
Signature or thumbprint of the applicant/person duly authorised.....

.....
(Means of identification)
for and on behalf of
(Affix seal or stamp of applicant)

Date
Address:

For Official Use only

Application received by..... on
Fee paid MK.....
Date.....

Registrar
Pesticides Control Board