DEPARTMENT OF AGRICUTLTURE PLANT HEALTH AND QUALITY CONTROL SERVICE PLANT HEALTH CONTROL SECTOR

APPLICATION FOR REGISTRATION TO THE OFFICIAL REGISTRY

ATTENTION: DIRECTOR OF DEPARTMENT OF AGRICULTURE DEPARTMENT OF AGRICULTURE

Registration of producers, exporters, importers, of plants and plant products in the Official Registry and authorization to issue Plant Passport according to National Legislation and the EU Directives 92/90/EEC and 93/50/EEC.

I	Registration	No	
Ш	Additional application- amendments	No.	
A	DETAILS OF ENTERPRISE	1) R.N.:	
A1	TITLE / NAME OF ENTERPRISE:		
A2	ADDRESS OF ENTERPRISE:		
A3	Person responsible for phytosanitary matters:		
	Name and Surname:		
	ID Number/Passport No.:		
	Home address:		
	Tel.: E – Mail:	Fax:	
A4	Tel.: E – Mail: Description of activities of enterprise:	Fax:	
A4		Fax:	
A4	Description of activities of enterprise:	Fax:	
A4	Description of activities of enterprise:	Fax:	
A4	Description of activities of enterprise: α)	Fax:	
A4	Description of activities of enterprise: α)	Fax:	
A4	Description of activities of enterprise: α) b)	Fax:	
A4	Description of activities of enterprise: α) b)	Fax:	
A4	Description of activities of enterprise: α) b) c)	Fax:	

В	DETAILS OF ESTABLISHMENT		
B 1	Activities of Establishment I :		
	α)		
	b)		
	b)		
	d)		
B1.1	Postal address:		
B 1.2	Tel: E Mail: Fax:		
B 2	Activities of Establishment II :		
	α)		
	b)		
	c)		
	d)		
D0 4			
B2.1	Postal address:		
B 2.2	Postal address: Tel: E Mail: Fax:		
B 2.2	Tel: E Mail: Fax:		
B 2.2	Tel: Fax: Activities of Establishment III :		
B 2.2	Tel: E Mail: Fax:		
B 2.2	Tel: Fax: Fax: Activities of Establishment III : α) b)		
B 2.2	Tel: E Mail: Fax: Activities of Establishment III : α) b) c)		
B 2.2 B 3	Tel: E Mail: Fax:		
B 2.2 B 3	Tel:		
B 2.2 B 3	Tel: E Mail: Fax:		
B 2.2 B 3	Tel: E Mail:		
B 2.2 B 3	Tel:		
B 2.2 B 3	Tel: E Mail:		
B 2.2 B 3	Tel:		
B 2.2 B 3	Tel:		

FOR OFFICIAL USE

Ш	Name and surname – Signature of Authorized Inspector examining the application Date:		
E 1	Results of examination of application	Approved	Not - Approved
	Date:	Signature: Director of Department Agriculture	artment of

Directions for completing the application form

Columns in form	
I, II	Completed by the applicant using a √ on the respective square. Where No., the Registration Number and date is recorded by the competent authority, Department of Agriculture receiving the application.
(A)	R.N. (Registration Number): The Registration Number is completed by the competent authority.
(A4)	 (a) Details of activities of enterprises that are related to the production, movement, trade, import, export of plants and plant products (b) Storage houses, packing houses, dissemination centers and other related activities of plants and plant products (c) Production area (ha), storage area, size of cold refrigerators, packing houses in square meters (d) Quantity of production, trade, import, export of plants and plant products during the last calendar year.