



agriculture, forestry & fisheries

Department:
Agriculture, forestry & fisheries
REPUBLIC OF SOUTH AFRICA

CONFIDENTIAL

**APPLICATION FORM FOR THE REGISTRATION OF
CONCENTRATE FOR RUMINANT FEED
FERTILISERS, FARM FEEDS, AGRICULTURAL REMEDIES
AND STOCK REMEDIES ACT, 1947**
Registrar Act 36 of 1947
Agriculture Building, Beatrix Street, Pretoria
Private Bag X343, Pretoria, 0001

Instructions: This application form must be completed in duplicate. It must only be signed by the applicant, employee of the applicant in case of a business or a person who has been given power of attorney by the applicant to sign on his/her and such proof must accompany this application. Only South African residents or employees of a business that has a South African office and address can complete this application form

APPLICANTS DETAILS	
<i>Particulars to be supplied</i>	<i>Complete this side</i>
Applicants name	
Company registration number	
Identity number (if its an Individual)	
<i>Contact details</i>	
Postal address	
Postal code	
Street/Physical address	
Telephone number	
Fax number	
E-mail address	
APPLICANT CATEGORY	<i>Tick relevant category</i>
1. Importer for own use	
2. Importer to sell/retail	
3. Importer for own use and to sell/retail	
4. Manufacturer for own use	
5. Manufacturer to sell/retail	
6. Manufacturer for own use and sell/retail	
7. Local trader/distributor/seller	



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Instructions: *If the manufacturer is outside the Republic of South Africa, proof of compliance by the manufacturer with local authorities/ legislation in the country of origin must be supplied.*

MANUFACTURER DETAILS

If more than one manufacturer and/or manufacturing site supply this information by duplicating this page

Name	
Postal Address	
Street/Physical Address	
Telephone number	
Fax number	
E-mail address	
Country	
Facilities accreditation/ licensing (information)	
Sterilization installation registration (<i>if applicable</i>)	
<i>Details of Responsible Person</i>	
Name and surname	
Qualifications	
Professional registration	



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Instructions: If the product deviates from the regulations supporting data must be supplied and in terms of data that is generally available, only data from books, journals and other recognised publications will be accepted. Printing details or label must be attached for each product. In case of imported feed containing genetically modified organisms, proof of authorisation must be attached and in case of animal protein products and their by-products health clearance and/or compliance certificates must be attached. Medicated feed labels and non-medicated feed labels must be supplied for each feed

ANIMAL/ SPECIE:			CLASS/KIND OF FEED:		
Trade Name	Description of Packaging	Quantities to be sold/used	Please indicate one: <i>Medicated/ Non-medicated/ Both</i>	Office use only V-number/s	
MANDATORY GUARANTEED ANALYSIS TO BE DECLARED FOR CONCENTRATE					
Nutrients	Minimum	Maximum	Units	Actual (if applicable)	Office use only
Crude protein					
Protein ex NPN			%		
Moisture					
Crude fat					
Crude fibre					
Calcium					
Phosphorus					
Copper <i>(where applicable)</i>					
ADDITIONAL GURANTEES TO BE DECLARED (where applicable)					
ME(Cattle/Sheep)					
Vitamin A					
Vitamin D					
Vitamin E					
Vitamin K					
Thiamine					
Riboflavin					
Biotin					
Folic Acid					
Pantothenic Acid					
Niacin					
Choline					



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MANDATORY GUARANTEED ANALYSIS TO BE DECLARED IN THE FINAL MIX *(duplicate where necessary)*

Nutrients	Minimum	Maximum	Units	Actual <i>(if applicable)</i>	Office use only
Crude protein					
Protein ex NPN			%		
Moisture					
Crude fat					
Crude fibre					
Calcium					
Phosphorus					
Copper <i>(where applicable)</i>					
ADDITIONAL GURANTEES TO BE DECLARED <i>(where applicable)</i>					
ME(Cattle/Sheep)					
Vitamin A					
Vitamin D					
Vitamin E					
Vitamin K					
Thiamine					
Riboflavin					
Biotin					
Folic Acid					
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Niacin					
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NPN % IN THE CONCENTRATE					NPN % IN THE FINAL MIX				
TRADE NAME:					MIXTURE NAME:				
Name	Factor	Units	Max Level	% of Protein	Name	Factor	Units	Max Level	% of Protein
Urea	2.87	g/kg			Urea	2.87	g/kg		
Amm. sulphate	1.33	g/kg			Amm. sulphate	1.33	g/kg		
Uric Acid	2.08	g/kg			Uric Acid	2.08	g/kg		
Amm. Chloride	1.64	g/kg			Amm. Chloride	1.64	g/kg		
Biuret	2.30	g/kg			Biuret	2.30	g/kg		
Urea Phosphate	1.33	g/kg			Urea Phosphate	1.33	g/kg		
Ammonium	5.15	g/kg			Ammonium	5.15	g/kg		
Mon-amm. Phosphate	0.625	g/kg			Mon-amm. Phosphate	0.625	g/kg		
Total NPN					Total NPN				
NPN % IN THE FINAL MIX					NPN % IN THE FINAL MIX				
MIXTURE NAME:					MIXTURE NAME:				
Name	Factor	Units	Max Level	% of Protein	Name	Factor	Units	Max Level	% of Protein
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Amm. sulphate	1.33	g/kg			Amm. sulphate	1.33	g/kg		
Uric Acid	2.08	g/kg			Uric Acid	2.08	g/kg		
Amm. Chloride	1.64	g/kg			Amm. Chloride	1.64	g/kg		
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Urea Phosphate	1.33	g/kg			Urea Phosphate	1.33	g/kg		
Ammonium	5.15	g/kg			Ammonium	5.15	g/kg		
Mon-amm. Phosphate	0.625	g/kg			Mon-amm. Phosphate	0.625	g/kg		
Total NPN					Total NPN				
NPN % IN THE FINAL MIX					NPN % IN THE FINAL MIX				
MIXTURE NAME:					MIXTURE NAME:				
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Ammonium	5.15	g/kg			Ammonium	5.15	g/kg		
Mon-amm. Phosphate	0.625	g/kg			Mon-amm. Phosphate	0.625	g/kg		
Total NPN					Total NPN				



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(Note: Any person who in any application makes any statement which is false in any material respect, knowing it to be false, or fails to disclose any information with intent to deceive, shall be guilty of an offence).

DECLARATION

I hereby certify that the information furnished in this application is to the best of my knowledge true, correct, complete and complies with the requirements of Act No. 36 of 1947; acknowledge my responsibilities in terms of the Act; and grant permission to the Registrar of Act No.36/1947 to cancel this registration in terms of *Section 4* of the Act should it be established that the information supplied in this application and with this application is not true and does not comply with the requirements of the Act.

Initials and Surname.....**Signature**.....

Capacity.....**Date**.....

**DECLARATION TO BE MADE IN THE PRESENCE OF A JUSTICE OF PEACE/COMMISSIONER OF OATHS
VERKLARING WAT VOOR 'N VREDEREGTER/KOMMISSARIS VAN EDE AFGELÊ MOET WORD**

.....
INITIALS AND SURNAME / VOORLETTERS EN VAN

.....
**SIGNATURE OF APPLICANT
HANDTEKENING VAN AANSOEKER**

.....
DATE/DATUM

.....
TEL. NO.

I certify that the deponent has acknowledged that he/she knows and understands the contents of this declaration which was sworn to/affirmed before me and the deponents signature/thumb print/mark was placed thereon in my presence.

Ek sertifiseer dat die verklaarder erken dat hy/sy vertrouwd is met die inhoud van die verklaring en dit begryp. Hierdie verklaring is beëdig/bevestig voor my en verklaarder se handtekening / duimafdruk / merk is in my teenwoordigheid daarop aangebring.

.....
**JUSTICE OF THE PEACE/VREDEREGTER
COMMISSIONER OF OATHS / KOMMISSARIS VAN EDE**



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First names and surname:
Voorname en van:
(BLOCK LETTERS / DRUKSKRIF)

Designation (rank): *Ex Officio* Republic of South Africa
Amp (rang): Republiek van Suid-Afrika

Business address:
Besigheidsadres:
.....
(Street address must be stated / Straatadres moet ingevul word)

Date/Datum..... Place/Plek.....

FOR OFFICE USE ONLY

The Registrar (Act 36 of 1947)

The registration is Recommended..... * Not Recommended.....

Technical Adviser Date.....

* Any reason for not recommending an application for registration or any conditions that should be imposed on the registration must be attached in the form of a minute.

TECHNICAL ADVISER'S COMMENTS:

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

TECHNICAL ADVISER

DATE