National Committee on Urban Pest Control [NCUPC]
Manila

APPLICATION FOR REGISTRATION/ APPROVAL OF AN ACTIVE INGREDIENT

[Application for registration/ approval for each active ingredient must be made on a separate application form]

1. Select a menu choice	New Active Ingredient to be used in the formulation of: _____ The application is linked to an application to register a new pesticide product. Please provide the pesticide product name: _____

2. Is the Active Ingredient a Genetically Modified Organism [GMO] or manufactured using Genetically Modified [GM] materials?	

3. Common Name	
4. IUPAC Name	
5. Chemical Abstract Name	
6. CAS Number [if applicable]	
7. Minimum Purity	
8. Fee Included	PhP
9. Manufacturer's Name And Business Address	
10. Manufacturing Site Address [Physical Address]	
11. Country of Manufacture	

Note: If there is insufficient space for any item, please attach a separate sheet with the active constituent name at the top of each page. Any supporting documentation should also have the active constituent name on the front page.

12. Applicant/ Approval [Company Name/ Individual]	
13. Overseas Equivalent	
14. Application Contact Person	
15. Phone Number	
16. Facsimile Number	
17. Applicant's/ Approval Holder's Street Address	
18. Applicant's/ Approval Holder's Postal Address	

19. APPROVED PERSON DECLARATION [MUST BE COMPLETED]			
I hereby declare that the information provided with this application is complete and correct.			
20. Full Name of Approved Person [Can be a Company]			
21. Name of Contact Person in Company [if 20 is a Company]		22. Position or Title	
23. Signature		24. Date	

25. PROTECTED DATA	
26. Submitted Data Are data provided with this application? If yes, ensure you've attached s Data List	
27. Access To Protected Data Is access to Protected Data required? Is the protected data related to: Chemical Review?: TRIPS?: Application protected data?:	

28. Authorizing Parties

NAME:	Consent Required?*	Provided with Application	To Be Provided Separately
1.			
2.			

* Not required when the applicant is the Authorizing Party

29. Notary Public

Subscribed and sworn to before me this _____ day of _____ 20 ___ at _____. Affiant applicant/ registrant exhibited to me his Community Tax Certificate No. _____ issued at _____ on _____.

_____
Notary Public

Doc. No.: _____
Page No.: _____
Book No.: _____
Series of 20 _____

30. Chemistry inquiries to:

Phone: [02] 536-8980

Fax: [02] 484-0208/ [02] 521-5645

E-Mail Address: ncupc_manila@yahoo.com