

## **National Parks Board**

**CUGE Industry Development** 

Singapore Botanic Gardens
1 Cluny Road, Singapore 259569

## PESTICIDE USAGE DECLARATION FORM

Control of Plants Act. Control of Plants (Cultivation of Plants) (Licensing & Certification) Rules

Farm Name Reference No.						
Farm Address						
INICIDECTION CI	UFC// ICT					
INSPECTION CH	HECKLIST			Yes	N.a	
1 Daakidala					No	
	age carried out / supervised by certified oper	ator.				
	rtified Pesticide Operator:					
Certificate No.: Expiry Date:  Protective clothings worn during spraying.						
. Protective ci 3. Pesticide sto						
I. Registered p						
	h proper labels original containers					
	cide containers & packages properly collected	d for disposal				
	Name of Pesticide		ogistration No	Usage Beend		
	Name of Pesticide	Pesticide N	Pesticide Registration No.		Usage Record	
Pesticides						
In Farm						
hereby declar	e that the contents of the above is true and a	accurate.				
lame of Licens	see / Operator / Representative	Contact No.	Signature & Date			
NSPECTION RE	EMARKS					
Name & Signat	ure of Officer		Date of Inspection	on		
or Director-Ge	eneral, Plant Health					