

for renewal of Spice House Certificate or for a new certificate (Please ☞ where appropriate)

Renewal New

7. If for renewal, indicate

Certificate No.

Date of Issue

8. Particulars of processing unit

a. Status of the premises (Please ☞ where appropriate) [attach copy of ownership deed/ lease agreement]

Own Leased

b. Address of the processing unit

Building No.

Building Name

Street

City PIN

State

Tel.

Mobile

Fax

Email

9. Building housing the processing unit

a. Is the building of permanent nature Yes No

b. Covered Area Sq. Feet

c. Type of construction (Please ☞ where appropriate)

	Cemented	RCC	Others	Specify
Wall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Floor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Roof	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

10. General hygienic facilities Available (Please ☞ where appropriate) (Please read the schedule attached before filling)

- | | | |
|---|------------------------------|-----------------------------|
| i) Washing facilities | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ii) Detergents | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| iii) Towels | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| iv) Dressing room for workers | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| v) Toilet facilities for males | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| vi) Toilet facilities for females | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| vii) Head gears for workers | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| viii) Mouth cover for workers | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ix) Facilities for disposal of waste material | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| x) Any other facilities (specify) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

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11. Product for which Spice House Certificate is applied for (Separate application for each spice product is required)

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12. Facilities available

Furnish details of facilities with equipment/machinery. If required attach additional sheet.

A. Cleaning	
B. Drying	
C. Processing	
D. Grading	

E. Packaging		
	Unit weight of packs	
	Packing material	
E. Ware housing		
F. Quality control		
G. Others (specify)		

DECLARATION

I/We, declare that the information given above are true to the best of my/our knowledge and belief. I/We have carefully read the provisions of the Spices Board Rules, 1987, and shall abide by them.

Signature

Name

Place:

Date:

Designation”;