**RENEWALS CHECKLIST**

The completed checklist must be submitted with all renewal applications.

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| **The following documents must accompany all applications for the renewal of agricultural remedies** | | |
| **Document** | **Number of copies** | **Included in application: Y/N. No fields may be left blank. Indicate N/A where relevant.** |
| 1. Checklist |  |  |
| 1. Service Request Form |  |  |
| 1. Cover letter |  |  |
| 1. Proof of payment of the prescribed renewal fee (total fee calculated depending on the number of remedies being renewed) |  |  |
| 1. Renewal forms |  |  |
| * 1. Form A – application for renewal | 2 |  |
| * 1. Form B – cancellation form | 2 |  |
| * 1. Form C – declaration | 2 |  |
| * 1. Form D – record of manufacturer(s) of the agricultural remedy active ingredient(s) | 2 |  |
| 1. In the case of a daughter or parallel registration, a copy of the contract, signed and dated within 6 months of the submission of the renewal application. |  |  |
| 1. Copies of the current registration certificates for all remedies being renewed |  |  |
| 1. Where relevant, signed and dated letter from the manufacturing source of the active ingredient(s) issued within six months of renewal submission. |  |  |
| 1. Where relevant, proof of compliance with the Extended Producer Responsibility Scheme for the Pesticide Sector regulation, 2023, as published in Government Notice No. R. 3177 of 23 March 2023. |  |  |
| 1. Where relevant, reports on potentially harmful or unacceptable effects, or a declaration confirming the absence of such reports. |  |  |
| 1. Where relevant, reports on adverse reactions, or a declaration confirming the absence of such reports. |  |  |

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|  | Name | Signature |
| Regulatory manager |  |  |
| Responsible SACNASP registered supervisor |  |  |
| Sign-off date |  | |