

**GOVERNMENT OF MAHARASHTRA**  
**Department of Agriculture**

To,  
M/s. **FINIX CROP CARE**,  
**S.no. 114/3, Memane Vasti,, Uruli Devachi**, Pin: **412308**, Tahsil: **Haveli**, District: **Pune**, State:  
**Maharashtra**

Sub: Issuing New Fertiliser License No. **LCFDW10010374**. Validity: **09/04/2015** to **08/04/2018**

Ref : Your letter no. **FWD245299** dated : **07/01/2015**

Sir,

With reference to your application for **New Fertilizer** license.

We are pleased to inform you that your request for the same has been granted.

License No. : **LCFDW10010374** dated :**09/04/2015**.

Valid For : **09/04/2015** to **08/04/2018** is enclosed here with.

This license is issued under **Fertilizer Control Order,1985**

The terms and conditions are mentioned in the license.

You are requested to apply for the renewal of the license on or before **08/04/2018**.

**Responsible Person Details:**

Name: **Deepak Bandu Patil**, Age:**33**, Designation: **Director**

Office Address: **S.No.114/3, Memane Vasti, Uruli Devachi**, Taluka:**Junnar**, District: **Pune**, State:  
**Maharashtra**, Pincode: **412308**, Mobile: **9403095556**, Email: **finixcrop@gmail.com**

Name: **Deepak Bandu Patil**, Age:**33**, Designation: **Director**

Residential Address: **H.No.9, Pachora Road, Jamner**, Taluka:**Jamner**, District: **Jalgaon**, State:  
**Maharashtra**, Pincode: **424206**, Mobile: , Email:

**Chief Quality Control Officer**  
**Commissionerate Of Agriculture**  
**Pune**

Encl. :License.

Copy to

- 1) Divisional Joint Director of Agriculture(All)
- 2) District Superintendent Agriculture Officer(All)
- 3) Agriculture Development Officer(All)



Original

**GOVERNMENT OF MAHARASHTRA**

Wholesale Dealer State Level

**FORM 'A2'**

**ACKNOWLEDGEMENT**

(See Clause 8(3))

**License No. : LCFDW10010374**

**Date of Issue : 09/04/2015**

**Valid From : 09/04/2015**

**Valid Upto : 08/04/2018**

1. Received from M/s **Finix Crop Care** a complete Memorandum of Intimation along with Form O, fee of Rs. **2250** by Chalan bearing number **MH005028268201415E** dated **06/01/2015**.

2. This acknowledgement shall be deemed to be the letter of authorisation entitling the applicant to carry on the business as applied for, for a period of 3 years from date of issue of this Memo of acknowledgement unless suspended or revoked by the competent authority.

**Date: 04/04/2019**

**Notified Authority**  
**Director Of Agriculture ( Input & Quality Control)**  
**Pune**

**Seal:**

**Statement - 1**

License No. : LCFDW10010374

Date of Issue: 09/04/2015

Validity: 09/04/2015 to 08/04/2018

**M/s FINIX CROP CARE**

<b>Name of Firm &amp; Proprietor/Manager/ Partner</b>	<b>Location of Sales Depot</b>	<b>Location of Godown(s) attached to sale depot</b>	<b>Type of Fertiliser</b>	<b>Source of supply</b>
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Finix Crop Care</b> <b>Name of Partner :</b> <b>Deepak Bandu Patil,Vishnu Supadu Patil,Vivek Ramesh Patil</b>	<b>S.No.114/3, Memane Vasti, Uruli Devachi</b> <b>Taluka : Haveli</b> <b>District: Pune</b>	<b>S.No114/3, Memane Vasti, Uruli Devachi</b> <b>Taluka : Haveli</b> <b>District: Pune</b>	<b>Encl: Form 'O'</b>	<b>Encl: Form 'O'</b>

Encl:Form 'O'

Sr. No. Source of Supply as per Form 'O'

1. M/s. Ambience Fertchem Pvt Ltd, Pune

Date: 04/04/2019

**Notified Authority**  
**Director Of Agriculture ( Input & Quality Control)**  
**Pune**

Seal: