

GOVERNMENT OF MAHARASHTRA
Department of Agriculture

To,
M/s. ANNAPURNA BIOTECH,
S.no. 122/2, Laxmi Township, Building B, Flat No. 302, Kalas,, Pune, Pin: 411015, Tahsil: Haveli,
District: Pune, State: Maharashtra

Sub: Issuing New Fertiliser License No. **LCFDW10010608**. Validity: **12/01/2019** to **11/01/2022**

Ref : Your letter no. **FWD334558** dated : **31/10/2015**

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. : **LCFDW10010608** dated :**12/01/2019**.

Valid For : **12/01/2019** to **11/01/2022** 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 **11/01/2022**.

Responsible Person Details:

Name: **Avinash Bapurao Kadu**, Age:**50**, Designation: **Proprietor**

Office Address: **S.No. 122/2, Laxmi Township, Building B, Flat No. 302, Kalas,, Pune, Taluka:Haveli,**
District: **Pune**, State: **Maharashtra**, Pincode: **411015**, Mobile: **9822326154**, Email:
avinashkadukadu@gmail.com

Name: **Avinash Bapurao Kadu**, Age:**50**, Designation: **Proprietor**

Residential Address: **S.No. 122/2, Laxmi Township, Building B, Flat No. 302, Kalas,, Pune,**
Taluka:**Haveli**, District: **Pune**, State: **Maharashtra**, Pincode: **411015**, 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. : LCFDW10010608

Date of Issue : 12/01/2016

Valid From : 12/01/2019

Valid Upto : 11/01/2022

1. Received from M/s **Annapurna Biotech** a complete Memorandum of Intimation along with Form O, fee of Rs. **2250** by Chalan bearing number **MH004593009201516E** dated **31/10/2015**.
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. : LCFDW10010608

Date of Issue: 12/01/2016

Validity: 12/01/2019 to 11/01/2022

M/s ANNAPURNA BIOTECH

Name of Firm & Proprietor/Manager/ Partner	Location of Sales Depot	Location of Godown(s) attached to sale depot	Type of Fertiliser	Source of supply
1	2	3	4	5
Annapurna Biotech Name of Proprietor : Avinash Bapurao Kadu	S.No. 122/2, Laxmi Township, Building B, Flat No. 302, Kalas,, Pune Taluka : Haveli District: Pune	S.No. 122/2, Laxmi Township, Building B, Flat No. 302, Kalas,, Pune Taluka : Haveli District: Pune	Encl: Form 'O'	Encl: Form 'O'

Encl:Form 'O'

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

Date: 04/04/2019

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

Seal: