

Application for use of off-farm input products for fertilizing and soil conditioning

Project name:		
Project No.:		
A) Soil inputs		
Product (name, type, composition)		
Quantity (kg)		
Field number; Area (Ha)		
Crops		
Application Rate (kg/Ha)		
Time of Application (mm-yy)		
Supplier (name, full address)		
B) Reasons for request		
1. Soil is deficient in plant nutrients (attach soil test report)		Yes / No
2. Previous crop has been exhaustive (example, sugarcane, maize etc) (attach details)		Yes / No
To balance nutrients for better crop growth and improve crop yield		Yes / No
Test to be defined for section drop growth and improve drop yield		1007110
Other		
Other:		
Please attach soil test report, product label.		
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I declare that this form is filled in truthfully and that I will notify GSCI in due time if any changes occur in the issues described in this form.		
Representative of client:		
Signature & Date		

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For GSCI OFFICE ONLY!!!	
☐ Request approved Reasons/Conditions:	☐ Request not approved
The approval is valid till (dd/mm/yyyy):	
Signature & Date	

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