FORMAT OF APPLICATION FOR TESTING OF FARM MACHINERY

FARM MACHINERY TESTING CENTRE SKUAST-JAMMU Chatha, Jammu-180009 INDIA

SHER-E-KASHMIR UNIVERSITY OF AGRICULTURAL SCIENCES & TECHNOLOGY OF JAMMU

Phone:0191-2263132

1.	Name and address of the applicant	:		
	Pin Code	:		
	Address (Telegraphic)	:		
	Telephone Number	:		
	Telex number	:		
2.	Name and address of the manufacturer	:		
	Pin Code	:		
	Address (Telegraphic)	:		
	Telephone Number	:		
	Telex number	:		
3.	If the applicant not the manufacturer, capacity in which the testing has been requested to (as authorized importer/ distributor/ designer/ respective manufacturer)	:		
4.	Details of the machine to be submitted for test	:		
	Type Make Model	: : :		
5.	Type of work the machine or component has been designed for & special features of the machine, if any			
6.	Whether the machine submitted for testing is a prototype or commercial model	Prote Impo Prote	genous otype orted otype imercial	
7.	Nature of test (Commercial or confidential)	:	.01	

8.	If confidential specify details of test submitted for	:		
9.	Total number of machines (as in 4 above produced/imported since inception to till date.	:		
10.	Whether all the parts are produced indigenously. If no attach list of imported parts	:	Yes	No
11.	Period suitable for random selection of the machine (in case of machines already in commercial production & sale	:		
12.	a) Type of accessories and attachments	:	Yes	No
	that are sold along with the machine: b) Check for accessories and attachments proposed to be sent with the machines for best i) ii)			
13.	Check for enclosures: a) Specification of machine in duplicate	:	Yes	No
	b) Operator's manual (in duplicate)	:	Yes	No
	c) Service manual (in duplicate)	:	Yes	No
	d) Any other printed literature (to be supplied in duplicate)	:	Yes	No
	e) Printed literatures in respect of various items listed in 12(b) (in duplicate)	:	Yes	No
14.	No. of additional copies of the test report required.	:		
15.	Whether testing expenditure advance is remitted. If yes specify the details of	:	Yes	No
16.	Amount: (Rs Bank Draft No Date) Do you propose to depute	·		
	representative to witness the test	·	Yes	No
17.	Additional information if any: i) Details of letter or indent/	:	Yes	No
	Registration/COB Licence No. and capacity sanctioned by the Ministry of Industry ii) Whether machine has been tested earlier in India/Foreign country (if so attach a copy of the test report) iii) In case of Power Thresher details of safety chute may be indicated on the lines of relevant Indian Standard			

DECLARATION

I have read the Regulations for the Testing of Agricultural Machinery at Testing Center for Farm Machinery at Sher-e-Kashmir University of Agricultural Sciences & Technology of Jammu and hereby agree to abide by all terms and conditions of the test:

	Signature	
	Name of the signatory	
	Designation	
	Address	
Place:		
Date:		