CleanFarms
NIGERIA OBSOLETE PESTICIDE COLLECTION CAMPAIGN

BOOKING FORM
FOR UNWANTED AND OBSOLETE PESTICIDES

Please read the guidance and safety notes before completing this form.

Return the completed form to the nearest Extension Office or Agro-Input Dealer.

Name		**State**	
Address, Town/ Village		**Cellphone**	
		E-mail Address	

I agree to the use of this data for the purposes stated in the guidance notes **Signed:** **Date:**

Product		**Packaging**			**Total**		
Full Product Name	**Manufacturer**	**Type** (steel, plastic, glass, bag or other)	**Size** (kg / litres)	**Condition** (sound or leaking)	**Number of full / partly filled containers**	**Estimate total quantity**	
						kg	**litres**

Product	**Package**				**Total**
Full Product Name Manufacturer	Type (steel, plastic, brass, bag or other)	Size (Kg / litres	Condition (sound or leaking)	Number of full / Partly filled containers	Estimate total quantity

Register of Empty Pesticide Containers

Container Type (steel, plastic, glass, bag or other)	Container Size (kg/litres)	Number of Containers (count or estimate)	Triple Rinsed (Yes or No)