

**FORM AFA/FCD/C2
(r. 12(8), r. 32(3))**

AGRICULTURE AND FOOD AUTHORITY

THE CROPS (FIBRE CROPS) REGULATIONS, 2020



INSPECTION REPORT

1. Applicant information

Name:
Registration No.
Address: Postal Email
Telephone: Mobile:
Inspection report period from: to.....
Date:

2. Inspection report for (please state):

- a) Field (farm)
- b) Produce
- c) Product
- d) Factory
- e) Collection center
- f) Warehouse
- g) Other (specify)

SN	AREA OF CONFORMITY /PARAMETER	OBSERVATION	REMARK
1			
2			
3			
4			

Comment:
.....
.....

Inspector details:

Name

Designation.....Station

Sign Date