

**Principal Investigator
Farm Machinery Testing Centre
Department of farm machinery and power
College of Technology & Engineering
MPUAT, Udaipur-313001**

**APPLICATION FOR CONFIDENTIAL/COMMERCIAL TESTING OF
AGRICULTURAL MACHINERY**

{To be submitted in Triplicate duly filled in (typed)}

1 Name and address of the applicant

Address :

Pin Code :

Telegraphic Address :

Telephone numbers :

Telex/FAX numbers :

2 Name of the manufacturer:

Address :

Pin Code :

Telegraphic address :

Telephone numbers :

Telex/FAX numbers :

3 If the applicant is not the manufacturer, capacity in which the testing has been requested for (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 test is a prototype or commercial model : Indigenous Prototype

| | |
|-----------------------------|--|
| Imported Prototype | |
| Indigenous Commercial model | |
| Imported Commercial model | |

7 Nature of test : Confidential
Commercial

8 If confidential, specify details of tests requested for :

9 Total numbers of machines (as in 4 above) produced/imported since inception till date :

Whether all the parts are produced indigenously? If no, attach a list of imported parts :

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 that are sold alongwith the machine :

(b)Check for accessories and attachments proposed to be sent with the machines for test

(i)

(ii)

(iii)

13 Check for enclosures

| Enclosures | Yes | No |
|--|-----|----|
| a) Specification of machine (in Triplicate) | | |
| b) Operator's manual (in Triplicate) | | |
| c) Parts' catalogue (in Triplicate) | | |
| d) Service manual (in Triplicate) | | |
| e) Any other printed literature (to be specified) (in Triplicate) | | |
| f) Printed literatures in respect of various items listed in 12(b) (in Triplicate) | | |

14 Number of additional copies of the test report required :

15 Whether testing expenditure advance is remitted? If yes, specify the details of remittance :

- 16 Do you propose to depute a :
representative to witness the tests
- 17 Additional information, if any :
- i) Details of letter of intent/
Registration/ COB license 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
Farm Machinery Testing Centre, MPUAT, Udaipur and hereby agree to abide by all terms and
conditions of the test.

| | | | | |
|-------|---|-----------------------|---|-------|
| Place | : | Signature | : | _____ |
| Date | : | Name of the Signatory | : | _____ |
| | | Designation | : | _____ |
| | | Address | : | _____ |
| | | | : | _____ |
| | | | : | _____ |

PRECONDITIONS FOR SUBMITTING MACHINES FOR INITIAL COMMERCIAL TEST

Make and Model of machine:

- (a) The specification of the machine submitted for test should conform to the production model which the manufacturer proposes to introduce. The manufacturer should certify that the prototype submitted for test will be manufactured under the License/DGTD registration granted to the unit
- (b) The test will be carried out on the machine as it stands together with accessories and attachments essential to the satisfactory performance of the machine. The applicant will not be allowed to introduce alterations or modifications which should affect its normal performance during the progress of test. If any major modification or alteration is considered necessary, the applicant should withdraw the machine and resubmit the machine with fresh application for testing.

I have read above pre-conditions and hereby agree to abide by the same.

| | | | | |
|-------|---|-----------------------|---|-------|
| Place | : | Signature | : | _____ |
| Date | : | Name of the Signatory | : | _____ |
| | | Designation | : | _____ |
| | | Address | : | _____ |
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