



**REGISTRATION OF PLASTIC PRODUCTS PRODUCTION INDUSTRY**

**PART A -DETAILS OF CLIENT/PRODUCER**

Name of proponent.....  
Physical Address.....  
TIN.....  
Contact Person (Name).....  
Telephone.....  
Email Address.....

**PART B-DETAILS OF THE FACILITY**

Name of the facility.....  
Facility location: Region.....  
District.....  
Ward.....  
Village/Mtaa.....

Type of plastic products being produced.....  
.....

Size (micron- for plastic packaging).....

Capacity of the facility.....

Date Operations started.....

Uses of the packaging material produced.....  
.....  
.....

Types/quantity and sources of Raw Materials .....  
.....  
.....



.....  
.....

**PART C: DETAILS OF THE CUSTOMER/S FOR THE PRODUCED PLASTIC PACKAGING MATERIAL (Attach contract)**

Name of the customer 1.....

Product being packed.....

Amount required per Month.....

Physical Address.....

TIN.....

Contact (Phone).....

Email.....

Location of the industry where the packaging operations are conducted:

Region/Municipality.....

District.....

Ward/Village.....

Name of the customer 2.....

Product being packed.....

Amount required per Month.....

Physical Address.....

TIN.....

Contact (Phone).....

Email.....

Location of the industry/Facility where the packaging operations are conducted:

Region.....

District/Municipality.....



Ward/Village.....

Name of the customer 3.....

Product being packed.....

Amount required per Month.....

Size (micron).....

Physical Address.....

TIN.....

Contact (Phone).....

Email.....

Location of the industry/Facility where the packaging operations are conducted:

Region.....

District/Municipality.....

Ward/Village.....

*( Add separate sheet in-case of more than 3 customers)*

**PART D: CERTIFICATION**

1: Environmental Impact Assessment (EIA)/Environmental Audit Certificate (Attach copy of certificate)

Certificate No.....

Date Issued.....

Date last Annual Self Audit Submitted to the Council.....

2: Tanzania Bureau of standards (TBS) Certification (Attach copy of Certification)

TBS certification No.....

Date Issued.....

Expired Date.....



**PART E: DECLARATION BY THE CLIENT/PRODUCER**

I hereby certify that the particulars given above are correct and true to the best of my knowledge.

Name..... Position.....

Signature.....

On behalf of.....

Date.....

(Company name and Seal)

**PART F: DECLARATION BY THE CUSTOMERS**

**CUSTOMER 1**

Name (individual/Company).....

Position.....Signature.....

On behalf of.....(for Company)

Date.....

(Company name and Seal)

**CUSTOMER 2**

Name (individual/Company).....

Position.....Signature.....

On behalf of.....(for Company)

Date.....

(Company name and Seal)



Note: The Council will conduct inspection after receipt of the complete filled form to verify the information contained in this Form

Clearance letter will be provided after the inspection and satisfaction of the Council and the clearance letter will be accompanied with the additional conditions to the certificate

Upon completion of filling this form, scan to pdf as single document and send to [decefeedback@nemc.or.tz](mailto:decefeedback@nemc.or.tz)