SRA PRESCRIBED APPLICATION FORM REGISTRATION OF BIOETHANOL PRODUCER/MANUFACTURER

Crop Year _____

BUSINESS NAME:			
DATE ESTABLISHED:			
DATE TO START COMMERCIAL OPERATION:			
ESTIMATED NUMBER OF FACTORY WORKERS:			
FEEDSTOCK/s:			
RATED CAPACITY :Tons Cane per day (TCD):			
Tons Molasses per day (TMD):			
Liters Ethanol per day (LED):			
ESTIMATED NO. OF OPERATING DAYS PER YEAR:			
ESTIMATED COGENERATION CAPACITY, MW (If applicable):			
PROJECTED ANNUAL BIOETHANOL PRODUCTION:			
		Mala	[amala]
PROPRIETOR/s:			
		7000	
PLANT/OPERATIONS MANAGER:			
ESTIMATED ANNUAL AREA REQUIREMENT, (if applicable) Hectares:			
From Existing Sugarcane Plantations: From Expansion Areas:			
TOTAL ESTIMATED FEEDSTOCK PRODUCTION AREA (HECTARES):			
ESTIMATED ANNUAL MOLASSES REQUIREMENT (MT):			
PREPARED BY:	DATE PREPARED:		
(NAMED & SIGNATURE OF AUTHORIZED REPRESENTA			
CONTACT NUMBER(s)/CELPHONE NUMBER(s):			
I hereby certify to the correctness of the above infor suspension/cancellation or revocation of the SRA Registration the imposition of a fine for non-observance or violation of its ru	of Bioethanol P	roducer	/Manufacturer in lieu thereof,
		DRF	SIDENT
	Sign		ver Printed Name
	0.8.	id ture o	ver i inited ivanie
SUBSCRIBED AND SWORN to before me this	day of		Affiant exhibited to me his/
her Government ID No	Issued on _		at
and valid until			
			NOTARY PUBLIC
Doc No:			
Page No:			
Book No:			
Series No:			

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