

GRENADA BUREAU OF STANDARDS

AGROPROCESSORS REGISTRATION FORM

1. Business name _____

2. Contact person _____ 3. Position _____

4. Business Location _____

5. Mailing Address _____

6. Contact telephone # s _____

7. Fax #, if any _____

8. Email address, if any _____

9. Products manufactured _____

10. Business category (Please tick)

Home based

Cottage type

Factory

11. Destination of products

Local market

Regional market, please specify _____

Extra regional market, please specify _____

12. What type of packaging materials do you use?

Size

_____ Glass Jars _____

Size

_____ Glass Bottles _____

_____ Plastic bags _____

_____ Squeezable bottles _____

_____ Other, Please specify _____

13. How much will you need per month? _____

14. Where do you get your packaging materials from? _____

15. What training programme have you attended? _____

16. What kind of training do you need? _____

17. Will you be willing to attend training programmes organized by the Bureau of Standards?

Yes

No

18. Any additional comments _____
