

**GOVERNMENT OF INDIA  
MINISTRY OF AGRICULTURE (Deptt. Of Agri. & Co-opn)  
CENTRAL FARM MACHINERY TRAINING & TESTING INSTITUTE  
TRACTOR NAGAR BUDNI (M.P.) – 466 445**

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**APPLICATION FOR OECD TESTING OF TRACTOR**  
(To be submitted in triplicate duly filled in and typed)

- 1. Name of the manufacturer :**  
Address :  
Fax / Telephone Nos. :  
E-mail / Website address :  
Name of contact person and his designation :  
Telephone Number(s) /E-mail ID of contact person.

- 2. Name of applicant (If other than manufacturer):**  
Address :  
Fax/Telephone Numbers :  
E-mail / Website address :  
Name of contact person and his designation :  
Telephone Number(s) /E-mail ID of contact person.

- 3. Capacity in which applied for tests:**

- a) Manufacturer :  
b) Division of Manufacturer :  
c) Authorised Importer :  
d) Collaborator :  
e) Assembler :  
f) Authorised Distributor :  
g) R & D Centre :


- 4. Details of tractor proposed to be submitted for test:**

- Make :  
Model :  
Type : 4 WD / 2WD Standard Agricultural Tractor  
Brand name, if any :  
Indian trade name, if any :

Name of Manufacturer/ Applicant	Document No, if any and its Revision status	Name of Testing Agency CFMT&TI, BUDNI (M.P.)
Signature :	Make and Model of Tractor:	Signature :
Name :		Name : <b>C. V. CHIMOTE</b>
Designation :		Designation : <b>TEST ENGINEER</b>
Date :		Date :
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- Country of origin :
- 1<sup>st</sup> Chassis /serial number of Commercial Model :  
 Month and year of manufacture :  
 (Please attach copy of coding system letter as **Annexure-I**)
5. Whether the tractor proposed to be submitted for test is a prototype or Commercial model :
- |                             |                          |
|-----------------------------|--------------------------|
| Imported prototype          | <input type="checkbox"/> |
| Indigenous prototype        | <input type="checkbox"/> |
| Imported Commercial Model   | <input type="checkbox"/> |
| Indigenous Commercial model | <input type="checkbox"/> |
6. Nature of test : OECD Test as per OECD Code 2
7. Details of optional tests requested for may be specified as per OECD Code-2 :
8. Total number of tractors (as in 4 above) imported/produced since inception till date. :
9. State whether design is based on foreign collaboration or Indigenous :
- |                       |                          |                          |  |
|-----------------------|--------------------------|--------------------------|--|
|                       | Yes                      | No                       |  |
| Foreign Collaboration | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Indigenous            | <input type="checkbox"/> | <input type="checkbox"/> |  |
- State full address of collaborator :
10. Whether all the parts are produced indigenously (If no, attach list of imported parts, if any) :
- |  |                          |                          |  |
|--|--------------------------|--------------------------|--|
|  | Yes                      | No                       |  |
|  | <input type="checkbox"/> | <input type="checkbox"/> |  |
11. Period suitable for random selection of tractor in case of machines already in commercial production & ready for sale :
12. Type of implements & other attachment or equipments that are sold along with the tractor with names of their manufacturers (please attach a list) :
13. Whether the tractor is suitable for water proofing test : (Yes/No)
14. **Check list for enclosures:**
- a) Detailed technical specification of tractor as per Application format No.2 (Revised Dec. 2008) (in triplicate) :
- |  |                          |                          |  |
|--|--------------------------|--------------------------|--|
|  | Yes                      | No                       |  |
|  | <input type="checkbox"/> | <input type="checkbox"/> |  |
- b) Conformity to applicable published Indian standards/ Automotive Industry Standards for testing of tractor (Please attach a list) :
- |  |                          |                          |  |
|--|--------------------------|--------------------------|--|
|  | <input type="checkbox"/> | <input type="checkbox"/> |  |
|--|--------------------------|--------------------------|--|

Name of Manufacturer/ Applicant	Document No, if any and its Revision status	Name of Testing Agency CFMT&TI, BUDNI (M.P.)
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Name : Designation : Date :		Name : <b>C. V. CHIMOTE</b> Designation : <b>TEST ENGINEER</b> Date :
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- c) Operator's manual (in duplicate) :
- d) Part's Catalogue (in duplicate) :
- e) Service Manual (in duplicate) :
- f) Any other printed literature (to be :  
Supplied in duplicate)
- g) A list of standard and optional :  
accessories supplied /sold with the  
tractor (please attached list in  
duplicate)
15. No. of additional copies of test reports :  
required in addition to 20 free copies  
(Applicable for commercial report only).
16. Do you propose to depute a representative :  
to witness the test
17. Details of Industry's Registration No :

### **DECLARATION**

I have read the Rules & Regulations for Testing of Agricultural Machinery at Central Farm Machinery Training & Testing Institute, Tractor Nagar, Budni (M.P) and hereby agree to abide by all terms and conditions of the test as stipulated in test regulations in force.

Signature of Applicant/Authorised :  
signatory

Name & Designation :  
Address: :  
Telephone No. :  
Fax No. :  
Date :

Name of Manufacturer/ Applicant	Document No, if any and its Revision status	Name of Testing Agency CFMT&TI, BUDNI (M.P.)
Signature :	Make and Model of Tractor:	Signature :
Name :		Name : <b>C. V. CHIMOTE</b>
Designation :		Designation : <b>TEST ENGINEER</b>
Date :		Date :
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**FOR OFFICIAL USE ONLY**

<b>Details of testing charges deposited :</b>	<b>Test Fee</b>	<b>Service Tax</b>	<b>Test Report Approval charges</b>
Amount	Rs.	Rs.	Euro
Amount in words	Rs.	Rs.	Euro
Drawn on (Name of Bank and Branch)			
Drawee Bank (Name of Bank and Branch)			
Draft No.			
Date			
Signature Office Assistant			

Name of Manufacturer/ Applicant	Document No, if any and its Revision status	Name of Testing Agency CFMT&TI, BUDNI (M.P.)
Signature :	Make and Model of Tractor:	Signature :
Name :		Name : <b>C. V. CHIMOTE</b>
Designation :		Designation : <b>TEST ENGINEER</b>
Date :		Date :
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