



Form C
Government of India
Food Safety and Standards Authority of India
License under FSS Act, 2006



अनुज्ञप्ति संख्या / License Number: **10718045000170**



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|---|--|
| 1. Name & Registered Office address of Licensee / अनुज्ञप्तिधारी के पंजीकृत कार्यालय का नाम और पता: | PRIMITIVE CORPORATION
11, Madhav park industrial area, opp podar international school, veraval-somanth bypass road, veraval, Gir Somnath, Gujarat-362266 |
| 2. Address of Authorized Premises / प्राधिकृत परिसरो का पता: | 11, Madhav park industrial area, opp podar international school, veraval-somanth bypass road,, Gir Somnath, Gujarat-362266 |
| 3. Kind of Business / कारोबार का प्रकार: | Manufacturer - General Manufacturing
Manufacturer - Vegetable oil and processing units
Trade/Retail - Retailer
Manufacturer - Exporter - Manufacturer |
| 4. Dairy Business Details / डेयरी कारोबार विवरण हेतु : | No |
| 5. Category of License / अनुज्ञप्ति का वर्ग: | Central License |

This license is granted under and is subject to the provisions of FSS Act, 2006 all of which must be complied with by the licensee. / यह अनुज्ञप्ति खाद्य संरक्षा और मानक अधिनियम, 2006 के अधीन अनुदत्त की गई और वह अधिनियम के उपबंधों के अध्यादीन है जिनका अनुज्ञप्तिधारी द्वारा अवश्य पालन किया जाना चाहिए.

Place / स्थान: FSSAI Mumbai
Issued On / दिनांक: 24-11-2021 (Modified License)
Valid Upto: / वैधता: 23-08-2024 (For details, refer Annexure)

Designated Officer
नामित अधिकारी

Annexures:

- [1. Product Annexure](#)
- [2. Validity Annexure](#)
- [3. Non-Form C Annexure](#)
- [4. Conditions Of License](#)

Note:

- Application for renewal of License can be filed as early as 180 days prior to expiry date of License. You can file application for renewal or modification of License by login into FSSAI's Food Safety Compliance System(<https://foscos.fssai.gov.in>) with your user id and password or call us at 1800112100 for any clarification.**
- This License is only to commence or carry on food businesses and not for any other purpose.**
- This is computer generated license and doesn't require any signature or stamp by authority.**