## NEW YORK SEED IMPROVEMENT PROJECT 103C LELAND LAB CORNELL UNIVERSITY, ITHACA, NY 14853 NYSEED.CORNELL.EDU 607-255-9869 607-255-9048 FAX

## APPLICATION FOR TAGS/LABELS

(SEPARATE FORMS ARE REQUIRED FOR EACH LOT AND CLASS OF SEED)

I HEREBY MAKE APPLICATION	N FOR (Check One):			
□ New application for seed p	produced during the cu	irrent season/untagged ca	rry-over seed.	
□ Recleaned seed, original Lot#:				
□ Repackaged seed, original Lot and/or ID#:				
□ Replacement of expired labels or tags ID#:				
SEED LOT DOCUMENTATION:				
Please include copies of <u>SEE</u>	D SAMPLE RECOR	<u>(D(s)</u> with label/tag requ	iest.	
CROP	OPVARIETYLOT #			
FIELD INSPECTION REPOR	2T(S)			
SEED LABORATORY REPO	ORT(S) #			
SEED CLASS (Select one):	CERTIFIED	REGISTERED	FOUNDATION	QA
☐ This application is for the entire lot.				
□ This application is for a portion of this seed lot. There are LBS remaining.				
Item	# Labels/Tags	LBS per unit	Royalty per BU	\$ TOTAL \$
LABELS (Self-Adhesive)				\$
TAGS (Sew On)				\$
BULK SALE CERTIFICATE				\$
SHIPPING/HANDLING		,		\$20.00
TOTAL ENCLOSED (Payable to CORNELL UNIVERSITY)  \$				
% Germination to be printed on Tag/Label (default is on lab report):%				
<ol> <li>I affirm that:</li> <li>Sampling, bagging, tagging as compliance with applicable St as it will be offered for sale.</li> <li>I understand that the actual cowith this application are being</li> <li>I agree to return unused certification.</li> </ol>	ate and Federal laws. The ost of certification tags and scollected by NYSIP as at	e sample submitted to the see d labels is included in my cert athorized by the variety own	d laboratory is representification fee and that there.	ntative of this seed lot
FARM/COMPANY NAME				DATE
APPLICANT/CONTACT NAME SIGNATURE			NATURE	
SHIPPING ADDRESS				

TELEPHONE \_\_\_\_\_ FAX \_\_\_\_\_ EMAIL \_\_\_\_