

West Virginia Department of Agriculture

Code No. 6696-9492

Attn: Administrative Services Division
1900 Kanawha Blvd., East
Charleston, West Virginia 25305-0170
Phone: 304-558-2226 FAX: 304-558-3594

FedEx/UPS Delivery Address:

217 Gus R. Douglass Lane
Charleston, WV 25312

APPLICATION FOR REGISTRATION AS A SEEDSMAN

Registration Period January 1 through December 31

Pursuant to WV Code 19-16-3(a),...No person may distribute any agricultural, vegetable, tree and shrub seeds or seed potatoes without a valid certificate of registration issued by the Commissioner.

- INSTRUCTIONS:
- (1) Check application for accuracy. Make any corrections, deletions or additions, as necessary;
 - (2) Remit a check or money order for **\$125.00** made payable to the West Virginia Department of Agriculture;
 - (3) Return completed application with payment to the above address.

Corporate Name: _____ **FEIN:** _____

Address for Mailing Registrations:

PO Box/Street *City* *State*
Phone Number: _____ **FAX:** _____
Email: _____
Registration Contact Person: _____

Address for Mailing Poundage Reports:

PO Box/Street *City* *State*
Phone Number: _____ **FAX:** _____
Email: _____
Poundage Contact Person: _____

Location (if different):

Street *City* *State*

Form of Organization (Check):

Individually owned Partnership Other
 Cooperative Association Corporation chartered in the state of _____

KINDS OF SEEDS TO BE SOLD, OFFERED FOR SALE, EXPOSED FOR SALE OR DISTRIBUTION DURING THE REGISTERED YEAR (please check):

- | | |
|--|--|
| <input type="checkbox"/> Vegetable | <input type="checkbox"/> Lawn Grasses |
| <input type="checkbox"/> Vegetable (Pkgs. 8 oz. or less and sold from display units) | <input type="checkbox"/> Forest (Trees and Shrubs) |
| <input type="checkbox"/> Agricultural Crop Seeds (Grain, etc.) | <input type="checkbox"/> Tobacco |
| <input type="checkbox"/> Field Grasses, Clover, Alfalfa, etc. | <input type="checkbox"/> Seed Potatoes |

I certify that the above information is true and correct. I hereby give the Commissioner of Agriculture consent to inspect and audit all sales invoices and records in order to carry out his duties. I understand that the Commissioner shall cancel any certificate of registration upon receiving satisfactory evidence that any provision of West Virginia Code 19, Article 14 or any rules and regulations issued by the Commissioner have been violated.

Signature of Authorized Representative **Printed or Typed Name** **Date**