

## **State Seed Laboratory**

(575) 646-3407 nmdeptag.nmsu.edu

## **Seed Sample Submission SL-F02**

Submit samples to:

New Mexico Department of Agriculture State Seed Laboratory

P.O. Box 30005; MSC 3-LD

Physical Address:

973 Agriculture Way

Las Cruces, NM 88003

## PRODUCT NOT INTENDED FOR HUMAN OR ANIMAL CONSUMPTION

| TRODUCT NOT INTERDE  |                         | IAIT OR AITHUAL     | consolul field |
|--|-------------------------|---------------------|----------------|
| Company Name:  |                         |                     |                |
| Customer Name:   |                         |                     |                |
| Address:   |                         |                     |                |
| City:  | State:                  | Zip:                |                |
| Phone:   | Email:                  |                     |                |
| Kind of Seed:  |                         |                     |                |
| Variety Claimed:   |                         |                     |                |
| Lot Number:  |                         | Year Grown:         |                |
| Test Requested:  |                         |                     |                |
| Complete I (purity, germination and no   | xious weed)             | Noxious Weed Exam   |                |
| Complete II (purity and germination)   |                         | TZ Test - Viability |                |
| Germination Only   |                         | Vigor/Cold Test     |                |
| Purity Only  |                         | Other - Specify:    |                |
| Certification Information: New Mexico only   | <i>1</i> .              |                     |                |
| Foundation Class   | Certified Class         |                     |                |
| Registered Class   | Non-C                   | Non-Certified       |                |
| Treatment Information: List all products used, and for each include the following. |                         |                     |                |
| Product Name   | EPA Registration Number |                     | Treatment Rate |
| 1  |                         |                     |                |
| 2  |                         |                     |                |
| 3  |                         |                     |                |
| 4  |                         |                     |                |
| 5  |                         |                     |                |
|  | NMDA Office Use Only    |                     |                |

Received by:

Date Received: