



Division of Regulatory Services
103 Regulatory Services Building
Lexington, KY 40546-0275
859-218-2468
Fax 859-257-7351

AGRICULTURAL SEED DEALER REGISTRATION FORM

(FULL NAME AND ADDRESS OF FIRM)

Dealer Identification No. _____

Application is hereby made for registration as an agricultural seed dealer. The applicant agrees to distribute only agricultural seed labeled in accordance with the Kentucky Seed Law, and to keep and maintain records of purchases and sales for a period of two (2) years at the registrant's address. All records shall be accessible for inspection by the director during customary business hours.

This application made this _____ day of _____, for and on behalf of the above named firm.

Printed name and title of person making application: _____

Phone: _____ Fax: _____ Date: _____

Signature: _____ Email: _____

Please make check payable to *University of Kentucky* and mail this application with a \$25 registration fee to Division of Regulatory Services, 103 Regulatory Services Building, Lexington, Kentucky 40546-0275. A copy of the approved application will be returned to the applicant

The above application is hereby approved and registration granted as provided by the Kentucky Seed Law.

Effective Date: January 1, 20____ By: _____ Date: _____

Director Fertilizer & Seed Programs

Termination Date: December 31, 20____

Do Not Write in This Space -- For Use of Division of Regulatory Services

<u>Check Amount</u>	<u>Check Number</u>	<u>Date Issued</u>	<u>Date Received</u>	<u>Company Code</u>	<u>Account Code</u>
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