

# REQUEST FOR TAGS

**RETAIN WHITE COPY**

Ohio Seed Improvement Association, 6150 Avery Rd., Box 477, Dublin, Ohio 43017-0477

VARIETY \_\_\_\_\_

LOT ID # \_\_\_\_\_

CROP \_\_\_\_\_

PLANNED DATE OF PROCESSING \_\_\_\_\_  
MONTH WEEK

IF BULK TRANSFER, FROM WHOM  
\_\_\_\_\_

HOLD TAGS UNTIL PURITY COMPLETE

IN SIGNING THIS REQUEST I AGREE TO ABIDE  
BY ALL THE TERMS SET FORTH ON THE REVERSE  
SIDE OF THIS FORM.

MEMBER/APPLICANT \_\_\_\_\_

DATE \_\_\_\_\_ SIGNED \_\_\_\_\_

## TAGGING INFORMATION

POUNDS TO  
GO IN BAG \_\_\_\_\_

TAGS NEEDED

FOUNDATION \_\_\_\_\_

REGISTERED \_\_\_\_\_

CERTIFIED \_\_\_\_\_

OECD BASIC \_\_\_\_\_

OECD CERTIFIED \_\_\_\_\_

QUALITY ASSURANCE \_\_\_\_\_

OTHER \_\_\_\_\_

## FIELD INFORMATION

LIST FIELD  
APPLICATION NUMBERS  
INCLUDED

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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