



ADVANCE TAGGING REQUEST FORM

For Printing Tags on Early Germination Results

Please make sure that the following data is correct. The accuracy of your email address is important – we will email you when the status of your request approval is completed.

Requester (*Person/Co. to bill*): _____

Contact Person: _____

Phone Number: _____

Email: _____

Test Number: _____

Lot Number: _____

To be used in a Mixture? YES NO

Variety: _____

Crop: _____

Warehouse: _____

Remarks: _____