

# SEED LABORATORY SERVICE SAMPLE REQUEST

68-010 (Rev. 7-2011)

## APPLICANT: (please print)

Company \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Contact Person \_\_\_\_\_  
Phone \_\_\_\_\_  
Email Address \_\_\_\_\_

## MAIL RESULTS TO: (please print)

Company \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Contact Person \_\_\_\_\_  
Phone \_\_\_\_\_  
Email Address \_\_\_\_\_

## SAMPLE IDENTIFICATION: This information will appear on the report of analysis (please print)

Kind of Seed \_\_\_\_\_ Variety Name \_\_\_\_\_

Lot Number \_\_\_\_\_ Seed Count \_\_\_\_\_

Lot Size \_\_\_\_\_ Miscellaneous \_\_\_\_\_

Treated \_\_\_ No \_\_\_ Yes Treatment Name \_\_\_\_\_

## SAMPLER: This information will appear on the report of analysis (please print)

County \_\_\_\_\_ Inspector's Identification \_\_\_\_\_

## CHECK TESTS DESIRED

- \_\_\_ Purity Analysis, includes California noxious weed seed exam
- \_\_\_ Germination Test
- \_\_\_ Noxious Weed Seed Examination (indicate type requested):
  - \_\_\_ California noxious weed seed only
  - \_\_\_ All States noxious weed seed
  - \_\_\_ Foreign noxious weed seed: Destination country \_\_\_\_\_
- \_\_\_ Complete Other Species Examination
- \_\_\_ Seed Moisture Test
- \_\_\_ Tetrazolium Viability Test
- \_\_\_ Ryegrass Fluorescence Test
- \_\_\_ Soil Percentage
- \_\_\_ Sclerotia Percentage
- \_\_\_ X-ray Analysis
- \_\_\_ Other \_\_\_\_\_

## RULES FOR TESTING SEED (check one)

- \_\_\_ FSA (Federal Seed Act)
- \_\_\_ AOSA (Association of Official Seed Analysts)
- \_\_\_ ISTA (International Seed Testing Association)
- \_\_\_ CSAR (Canadian Seed Act & Regulations)

## SUBMIT SAMPLE TO:

California Department of Food & Agriculture  
Plant Pest Diagnostics Center – Seed Laboratory  
3294 Meadowview Road  
Sacramento, California 95832-1448  
Phone: (916) 262-1100 FAX (916)262-1190