



Registration of Blends and Mixtures of Seed

Registration requested by _____ Date _____
 (Company name)

Mailing address _____
 (Street number) (City/State/Zip)

Phone Number _____ Cell Phone _____

Applicant: Complete the following information for each component of the blend.

Blend Name _____ Is the blend Certified?¹ Yes No

Component Name	Percentage of Blend	Crop Kind	Variety Owner	Permission for use?

¹For Certified Blends:

1. Only certified seed of each blend component may be used in a certified blend. Verification is required.
2. Permission to use a private or protected variety must be obtained from variety owner. Applicant must provide documented proof to certification agency.
3. Seed conditioner must demonstrate the ability to blend within specified tolerances.
4. Conditioner has the option of stating the name and percentage of each component in the blend.
5. The certification label must carry the word **blend** or **mixture** and meet all other AOSCA labeling requirements.

Completed by: _____ Signature _____
 (Print name)

Office use only

Approved by _____ Date _____