FORM – I

Form of application for seed production under the seed certification programme

1.Name (In BLOCK LETTERS)	••
2.Complete Address (in BLOCK LETTERS)	
Village Post Office District State Telegraph Office Nearest Rly.Station Telephone No	
3.Nearest townits d Route	istance from your farm Highway No. or
4.Name of variety/kind of seed offered for certific	eation.
5.Area under each variety/kind offered for certific	eation.
6.Class of seed desired to be produced Foundation	n/Registered/Certified.
7.Source of seed for Item 6 above (also mentioned	l Tag No. and other particulars on the tag)
8.``Isolation distance''(in metres)from other vari West.	eties of the same crop North to South: East to
9. Actual or proposed date of planting.	
	Signature Date
(to be filled in by	the office of the Seed Certification Agency)
1.Number of field inspections made	
Dates of Inspection	
(copy of inspection reports to be attached)
2.Report of Seed Analyst (copy to be attached)	
3.Certificate issued.	
Tag No Date of Issue Issued by	
	Signature Director, Seed Certification Agency.