



**REPUBLIC OF MAURITIUS
MINISTRY OF AGRO-INDUSTRY AND FOOD SECURITY
(NATIONAL PLANT VARIETIES AND SEEDS OFFICE)**

**REQUEST FOR OFFICIAL SAMPLING AND TESTING OF A SEED LOT
(Under Regulations 4(6) & 4(8)/ First Schedule of Seeds Act (2016))**

To: The Senior Chief Executive,
Ministry of Agro Industry and Food Security
(Attn. Ag. Principal Scientific Officer)
National Plant Varieties and Seeds Office
Ministry of Agro-Industry and Food Security
Sir Francis Herchenroder St,
Beau Bassin
Tel: (+230) 455 1863; **Fax:** (+230) 466 1867)

FOR OFFICIAL USE ONLY
S/N:
Date:
Name & signature of Officer:

Name of applicant/owner* (Entity/Company/Individual*)

Address of applicant/owner*

Location of seed lot (if different from the above address)
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Telephone no.	Mobile no.	Fax no.
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Email address
Details of seed lot(s) to be sampled

Crop and variety	Reference number	Quantity (Kg)/No. of containers

Tests requested Purity/Germination/Moisture content/Others*

.....
Signature of applicant

.....
Date

.....
Office stamp

Notes

* Delete as appropriate.
Additional notes or information may be recorded on the other side of this form.
In the case of a statutory sample, the reason for taking the sample shall be stated.