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
(Attention: 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

Name of applicant/owner* .......................................................... (Entity/Company/Individual*)
Address of applicant/owner* ..........................................................
Location of seed lot (if different from the above address) ...................................

Telephone no. ......................... Mobile no. ................................. Fax no. .................................

Email address ................................................................. Details of seed lot(s) to be sampled

<table>
<thead>
<tr>
<th>Crop and variety</th>
<th>Reference number</th>
<th>Quantity (Kg)/No. of containers</th>
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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.