Seed Sample Request Form

DTS FOOD ASSURANCE
A BUREAU VERITAS ASUREQUALITY JOINT VENTURE

Please Send Samples and Request Form to: DTS, 3-5 Lillee Crescent, Tullamarine, 3043, VIC. Phone: (03) 8318 9000

Requested By: *(i.e. processor)* _____

Grower Name: _____

Statement Issued in the Name of: _____

Post Statement To: _____

Copy To: _____

Invoice To: _____ Order No: (*if required*)

Other Tests Invoiced To (E.g. Endophyte, TZ):

Office Use Only

Lab No

CROP DETAILS

Seed Type: _____ Cultivar: _____

Paddock Name / ID: _____ Lot No: _____

Paddock Location (GPS Co ord / CFA Ref): _____

CROP STATUS		SAMPLE TYPE		TREATMENT		
☐ Certified*	☐ DECD	☐ Retest	☐ Rebagged	Pickled	☐ Yes	☐ No
☐ Seedcare*	☐ Domestic	☐ Processed		Coated	☐ Yes	☐ No
☐ Uncertified	☐ AOSCA	☐ Reclean		Pelleted	☐ Yes	☐ No
☐ Other		☐ Header / Farmer Dressed		GMO	☐ Yes	☐ No

***If Certified or Seedcare, attach Authority To Move with delivery of first sample**

TYPE CLEANER Static ☐ Mobile ☐ **Seed Treated With:** _____

TOTAL WEIGHT LOT DESCRIPTION

No. Bags	Bag Size (KG*) *If Bulk Write Bulk*	Total Weight

Tag No.s 1. From _____ To _____

2. From _____ To _____

Tag Colour (If Certified): _____ Authority To Move No. (if Certified / Seedcare): _____

TESTS REQUIRED

☐ Purity ☐ Germination ☐ WA Dec/ Purity ☐ Endophyte (Squash)

☐ Soil % ☐ Moisture ☐ Anguina ☐ Endophyte (Grow Out)

☐ 1000 Seed Weight ☐ Fluorescence ☐ Germ Cold Test ☐ Vigour

☐ E.U. Compliance ☐ Tetrazolium (TZ) ☐ Other Tests (Specify) _____

☐ Weed Seed Search (Please state destination for export) _____

Moisture tests for OIC, BIC & Certified Seed, please contact Laboratory before sending the sample.

CERTIFICATE REQUIRED

☐ Statement of Analysis ☐ Interim Report Required at Purity

☐ ISTA Orange International Certificate (OIC)** ☐ ISTA Blue International Certificate (BIC)**

** **Advise Seal of lot:** ☐ Lead ☐ Tapes ☐ Finger and Thumb ☐ Single Line Stitching ☐ Not Sealed ☐ Anti-tamper Adhesive Patches

Please Specify if a Complete Test is Required on your ISTA Certificate ☐ Yes ☐ No

Country Destination for Export: _____

Samplers Name _____ Signature _____ Manually Sampled ☐

Lic No. (if applic) _____ Date _____ Automatically Sampled ☐

AUTHORISED COPY