



**Arizona Department of Agriculture (ADA)**  
 Licensing and Registration Section  
 1688 West Adams, Phoenix, Arizona 85007  
 Phone: (602) 542-3578  
 Fax: (602) 542-0466

**For ADA/ESD Use Only**  
 License # \_\_\_\_\_  
 Check # \_\_\_\_\_  
 Check Date \_\_\_\_\_  
 Check Amount \_\_\_\_\_  
 Line # \_\_\_\_\_

**Cottonseed Sampler Certification Application**

**AAC R3-5-102**

Application is made for certification for (please print):

Applicant Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Applicants Signature \_\_\_\_\_ Social Security No. \_\_\_\_\_ Date \_\_\_\_\_

**Check one box:**  New Application  Application Renewal  Transfer of Application

If you have a current certification number, enter it here \_\_\_\_\_

Company Name \_\_\_\_\_

*(If address is different from above please fill in the following. Please note all correspondence will be sent to the applicant's address. It is your responsibility to inform the department if there is a change in contact information.)*

Street Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

**Department Use Only**

For the period beginning July 1, 20\_\_\_\_ and ending June 30, 20\_\_\_\_, as required in Section R3-5-102 of the Sampling and Laboratory Certification Rules of the State Agricultural Laboratory.

Date Received \_\_\_\_\_ Date Completed \_\_\_\_\_

Agency Action Taken:  Approved  Disapproved  Suspended  Other \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_