



BPI-NSQCS From No. 1: Request Form for Seed Testing

Republic of the Philippines
Department of Agriculture
BUREAU OF PLANT INDUSTRY
NATIONAL SEED QUALITY CONTROL SERVICES DIVISION
Central Office

Request No. _____

**INFORMATION
TO BE PROVIDED
BY THE APPLICANT**

Crop & Variety: _____
Generation, etc. _____
Source/Origin of Planting Material: _____
Lot No.: _____
Weight of Seed lot: _____
No. of bags, cans, etc.: _____
Date Harvested: _____
Kind of Container used: _____
Remarks (e.g. treated with chemicals): _____
Date of Application: _____
Submitted by: _____

Analysis Requested	Test Procedure	Method to be Used	Cost of Analysis/Sample

NAME & SIGNATURE OF APPLICANT/DATE

SEND REPORT TO:

Sampled by: _____ Date Sampled: _____
Name of Company /President/General Manager: _____
Address: _____
Company Contact Number: _____
Purpose: _____
Other Remarks: _____

**INFORMATION SUPPLIED BY
THE OFFICIAL SAMPLER**

***Sampling Intensity if applicable using ISTA Rule Chapter 2
(Please see at the back of guidance)***

Signature of Sampler

Location: _____
Date and Time Sampled: _____
RH _____ Temperature _____ Weather: Dry/Wet(if applicable) _____

**INFORMATION TO BE
COMPLETED BY THE
SEED TESTING LAB.**

Container of Sample: _____
Weight of Sample Submitted: _____
Seed testing Lab No.: _____
Date Sample Received: _____
Received by: _____
Date Release of Result of Analysis*: _____
Remarks: _____
*(*under normal condition and the seed is not dormant)*

Approved by:

Designation/Date