



**North Carolina Department of Agriculture and Consumer Services
Plant Industry Division-Seed and Fertilizer Section**

**Application for New Seed Dealer's License
Effective Year: January 1-December 31, 20__**

Business Name:	
Complete Corporate Address (For correspondence related to licensing):	
Complete Physical Address:	County:
Contact Individual:	
Phone Number:	Fax Number: Email:
Signature of Licensee: _____	
Printed Name: _____	
Date: _____	

<p>License Type:</p> <p><input type="checkbox"/> Wholesale or Combined Wholesale and Retail Seed Dealer.....\$125.00</p> <p><input type="checkbox"/> Retail Seed Dealer.....\$ 30.00</p> <p>Total Amount Enclosed.....\$ _____</p> <p>Make checks payable to: N.C. Department of Agriculture and Consumer Services Submit application and check to: NCDA&CS, Plant Industry Division, Seed and Fertilizer Section, 1060 Mail Service Center, Raleigh, NC 27699-1060</p>

<p>For Office Use Only:</p> <p>Amount of Fee Paid: _____ License Number: _____</p>
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