**Registrant** (Exactly as name appears on label):

## Office of Indiana State Chemist & Seed Commissioner

Reg. Year:

Registrant #

Purdue University, 175 S. University Street West Lafayette, IN 47907-2063

Telephone: 765-494-1492 • www.oisc.purdue.edu

## **Application for New Pesticide Registration**

Street, R.R., P.O. Box:						
City:		State:	Zip + 4:			
Telephone number (including area code):			Fax:			
<b>Submitted by (</b> if other than Registrant):			Submitter #			
Street, R.R., P.O. Box:						
City:		State:		Zip + 4:		
Telephone number (including area code):			Fax:			
Name (Printed):			Title:			
Signature:		Date:	E-mail Add	E-mail Address:		
EPA Reg.	No	Complete Brand and	Product Name	(Fc	or Office Use Only)	
*List in numerical order		Complete Brand and Product Name List only <u>new</u> products here		(10	of Office Ose Offig	
		_				
	FEE CALC	ULATION				
Number of New Products:		X \$170.00 =	X \$170.00 =		Make check payable to:	
Late Penalty (per product):		X \$170.00 =				
		TOTAL FEES:				
For Office Use Only						
Check Number:	Amount:	Entered Under:	Posted I	Date:	Processed by:	
					Date:	