

MARYLAND DEPARTMENT OF AGRICULTURE

TELEPHONE NUMBER: 410-841-2721

FAX NUMBER: 410-841-2740

Receipt No. _____ S

APPLICATION FOR REGISTRATION OF COMPOST

Return two copies to:

For US Postal Service:

Maryland Department of Agriculture
P. O. Box 17304
Baltimore, MD 21297-1304

For Commercial Shipping Service:

Maryland Department of Agriculture
Attn: 17304
1000 Stewart Avenue
Glen Burnie, MD 21061

BANK USE ONLY: 14 05

Please make checks payable to: Maryland Department of Agriculture

Application is hereby made for the registration of the following _____ Soil Conditioner /Compost product(s) sold in packages of 10 lbs. or less (\$30.00 per product), of _____ Soil Conditioner /Compost product(s) sold only in bulk or packages larger than 10 lbs. (\$15.00 per product) and _____ Soil Conditioner /Compost product(s) sold in both small and large packages (\$30 per product) for a period beginning with the actual date of registration and ending on January 31, 20____. Enclosed is a label for each product or brand. Make checks payable to the **Maryland Department of Agriculture.**

BRAND NAME	COMPOSITION	CLASSIFICATION	DISTRIBUTION (X)	
			10 lbs. or less	Over 10 lbs. BULK
		TOTALS		

\$30 each \$15 each

Firm Name and Address Appearing on Label:

Firm _____
Address _____
City, State and Zip _____
Attention: _____
FAX: (____) _____

Submitted By:

Firm _____
Address _____
City, State and Zip _____
Email Address: _____
PHONE: (____) _____

Date	Account Amt.	Maker	Check No.	Date	Check Amt.