



Service Test Request Form

Please mail your completed form to:
New York State Seed Testing Laboratory
Department of Horticultural Sciences - Sturtevant Hall
New York State Agricultural Experiment Station
630 W. North Street, Geneva, NY14456

Company Name:

Name:

Address:

Telephone / Fax:

Charge To:

Email:

Services Offered: * Please check test requests.

Purity Analysis

Germination Test

Combined Purity Analysis
& Germination Test

Additional Tests
and Procedures
(Please specify)

Lot Number / Sample Name:

**For multiple tests, feel free to use the following page.*



NEW YORK STATE SEED TESTING LABORATORY
New York State Agricultural Experiment Station ■ Department of Horticultural Sciences
630 West North Street, Geneva, New York 14456 ■ 315-787-2242 ■ Fax: 315-787-2320

