hssca

HARYANA STATE SEED CERTIFICATION AGENCY

(A State Government Undertaking)
Bay 11 & 12, Sector-14, Panchkula-134109
Regional Office_____

Registration of Seed Producer for the year 20 - 20

PHOTO

Name of the firm: _____

_____

Address: _____

_____

Telephone No: Office:_____ Residence:_____

*Aadhar No. _____

Name(s) of proprietor/Partner:_____

Trade Mark:

TRADE MARK

Any Other Information: _____

_____

_____

*** Aadhar No. is desirable relating to the Applicant but not mandatory.**

UNDERTAKING

I _____ S/O Sh _____ M/S_____

_____ here by certified that:-

1. I am well aware about the seed certification procedure & shall abide by them,
2. I will procure the seed for sowing from the source approved by HSSCA,
3. I will procure the produce from the certified seed plot(s) only & same shall be offered for processing to the HSSCA and after meeting the seed standards same seed will not be used for Truthful Label purpose.
4. I will maintain all records of purchase of raw seed & sale of certified seed according to the direction of the HSSCA & it shall be produced for verification as & when asked to do so by HSSCA.
5. I will pay premium to my seed growers to encourage them for the production of high quality seed.

SEAL OF THE FIRM

Signature of the Proprietor / Partner

Name _____

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