



# Illinois Department of Agriculture

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## Bureau of Agricultural Products Inspection

State Fairgrounds • P.O. Box 19281 • Springfield, IL 62794-9281 • 217/782-3817 • TDD 217/524-6858 • Fax 217/524-7801

Dear Fertilizer Registrant:

Please return the completed Application for Certificate of Free Sale with a current label for the product that is being requested. The label will be reviewed prior to the issuance of the Certificate.

The Application for Certificate of Free Sale and the label can be mailed along with the payment to:

Illinois Department of Agriculture  
Bureau of Agricultural Products Inspection  
State Fairgrounds  
P.O. Box 19281  
Springfield, IL 62794-9281

Illinois Department of Agriculture  
Bureau of Agricultural Products Inspection  
State Fairgrounds  
801 E. Sangamon Avenue  
Springfield, IL 62702

The product(s) will be listed on the Certificate of Free Sale as they are registered with the State of Illinois.

Please complete a separate application for each Certificate of Free Sale. Multiple products may be listed on one Certificate.

There is a \$20.00 fee for each Certificate of Free Sale.

Certificates will be mailed via USPS unless otherwise requested. Please include your FedEx account number on the application or a return label for UPS if either of these options is your preferred method of receipt.

If you have any questions, please call the Bureau of Agricultural Products Inspection at 217-782-3817.

ILLINOIS DEPARTMENT OF AGRICULTURE  
BUREAU OF AGRICULTURAL PRODUCTS INSPECTION

Jeff Squibb  
Bureau Chief

**ILLINOIS DEPARTMENT OF AGRICULTURE  
APPLICATION FOR CERTIFICATE OF FREE SALE  
FERTILIZER DIVISION**

(Only one certificate will be issued per completed application)

Please submit a product label for each product that is to be listed on the certificate and the \$20.00 for for each certificate with this application

USAPlant Pin ID:		Country Shipping To:		Date:					
<b>Illinois Facility:</b>									
Business Name:				Phone:					
Address									
City:				State:			Zip:		
<b>Application Submitted By:</b>									
Name:				Title:					
Address:									
City:				State:			Zip:		
Phone:				Email:					
<b>Corporate Headquarters (this is the address that will appear on the certificate)</b>									
Business Name:									
Address:									
City:				State:			Zip:		
Contact:				Phone:					
<b>Product Number</b>									
<b>Product Name (note-product name will appear on certificate as it is registered with IDoA)</b>									
<b>Mailing Instructions</b>									
<input type="checkbox"/> USPS (no charge) <input type="checkbox"/> FedEx (Include Acct. #) <input type="checkbox"/> UPS (Pre-paid shipping label must be included)									
Business Name:				Contact:					
Phone:				Ext.:			Email:		
Address:									
City:				State:			Zip:		