

IOWA DEPARTMENT OF AGRICULTURE & LAND STEWARDSHIP
APPLICATION FOR **AGRICULTURAL LIMING MATERIAL LICENSE**

Agricultural liming material shall not be distributed in this state unless the manufacturer of the agricultural liming material obtains a license for each facility owned by the manufacturer for distribution of agricultural liming material in this state. **License fee is \$25.00** for each manufacturing facility distributing into this State. Remittance Payable to: Secretary of Agriculture

Mailed By:

Company Name: _____

Address: _____

City: _____

State & Zip: _____

County Name: _____

County Number: _____

Telephone: _____

Fax: _____

Email: _____

Iowa Dept. of Agriculture & Land Stewardship Attn: Fertilizer Bureau Wallace Building 502 E 9 th St. Des Moines, IA 50319 Tel: 515-281-8597 Fax: 515-281-8888

If you are doing business under a new name due to a merger, buyout or other business transaction, please list previous name and Agricultural Liming Material License Number: _____

Agricultural liming material shall not be sold, offered for sale, or exposed for sale in this state unless a label accompanies the agricultural liming material which provides the following information:

- ✓ The name and address of the principal office of the manufacturer.
- ✓ The brand or trade name of the agricultural liming material.
- ✓ The identification of the type of agricultural liming material. (Industrial by-product, Pelletized lime, Quarry lime, Water treatment lime)
- ✓ The undried net weight of the agricultural liming material.
- ✓ The effective calcium carbonate equivalent of the agricultural liming material in the following form "Iowa Secretary of Agriculture Certified _____ pounds ECCE per ton."

ATTACH SAMPLE COPY OF LABEL TO THIS APPLICATION. FAILURE TO SUBMIT A LABEL WILL CAUSE THIS APPLICATION TO BE RETURNED.

Total number of manufacturing facilities to be licensed: _____ X \$25 = Total Fee Due: _____

State of Iowa, County of _____

I, the undersigned, hereby state that the above, to the best of my knowledge, is true and correct.

Signature

IOWA DEPARTMENT OF AGRICULTURE & LAND STEWARDSHIP
APPLICATION FOR **AGRICULTURAL LIMING MATERIAL LICENSE**

Mailed By:

Company Name: _____

Address: _____

City: _____

State & Zip: _____

Total Number of Manufacturing Facilities (25.00 for each): _____

List all facility locations from which agricultural lime is sold in the State of Iowa. Use additional sheets if necessary.

1. Facility Name: _____

Facility Address: _____

City: _____ State: _____

County Number: _____ County Name: _____

Township: _____ Section: _____

2. Facility Name: _____

Facility Address: _____

City: _____ State: _____

County Number: _____ County Name: _____

Township: _____ Section: _____

3. Facility Name: _____

Facility Address: _____

City: _____ State: _____

County Number: _____ County Name: _____

Township: _____ Section: _____

4. Facility Name: _____

Facility Address: _____

City: _____ State: _____

County Number: _____ County Name: _____

Township: _____ Section: _____