



Kansas Department of Agriculture
Accounts Receivable and Licensing
1320 Research Park Dr.
Manhattan, KS 66502
785-564-6700

APPLICATION FOR REGISTRATION OF CUSTOM FERTILIZER BLENDER

For Calendar Year _____
January 1 - December 31

Registration Fee
\$125.00

____New
____Renewal

Intend to Blend (Mark all that apply): _____Dry _____Liquid

Do you sell and/or distribute ammonium nitrate from this location? _____Yes _____No

| FIRM INFORMATION | | | |
|-------------------------|--------|--------------------------------------|-----------------------|
| Complete Business Name | _____ | | |
| Location/Street Address | _____ | | |
| City, State, Zip Code | _____ | | |
| Phone Number | County | Federal Tax ID or Social Security No | E Mail Address |

Mailing Address (if different than above for license, letter & renewal purposes)

Owner of Facility _____

Owner's Federal Tax ID (if different) _____

Business Name Last Year (if different) _____

I hereby attest that the information in this application for registration is true, complete, and accurate.

Signature (Date)

(Typed/printed name of signer) (Title)

Make check payable to "Kansas Department of Agriculture." Send or deliver application and license fee to Kansas Department of Agriculture at address shown above.

For Office Use Only

Trans# _____ Check # _____ FBL _____ RFB _____