



**Pesticide and Fertilizer Program**

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 Manhattan, KS 66502  
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**Commercial Fertilizer Product Registration Application**

For July 1, \_\_\_\_\_ to June 30, \_\_\_\_\_  New  Renewal Non-Refundable \$45.00 Registration Fee Per Product  
 (year) (year)

|                  |              |                   |  |
|------------------|--------------|-------------------|--|
| Registrant Name: |              | FEIN:             |  |
| Address:         |              | City, State, Zip: |  |
| Company Email:   |              | Company Phone:    |  |
| Agent Name:      | Agent Phone: | Agent Email:      |  |

**Answer the following questions regarding product provisions:**

|               |
|---------------|
| Product Name: |
|---------------|

- Product Type:  Agricultural  Bulk  Lawn and Garden  Hydroponics  Turf  Ornamental  House Plant
- Does the Registrant intend to sell any ammonium nitrate in Kansas?  Yes  No
- Does the Registrant intend to store bulk ammonium nitrate to be used in blending or other manufacturing in Kansas?  
 Yes  No
- What is the weight of the product? \_\_\_\_\_  lbs.  oz.
- Is this product liquid or dry?  Liquid  Dry
- Is this product packaged or bulk?  Packaged  Bulk

This is to certify the following to be a true copy of the statement which will be plainly printed on the label accompanying bulk shipments or affixed to every lot or parcel of fertilizer product sold, offered, or exposed for sale in Kansas. Current final label must be submitted with the application in searchable PDF format. **Not submitting the labels will delay the application process.**

| Name of Fertilizer & <u>Unit</u> <u>Product</u> <u>Code</u> | Guaranteed Analysis from Product Label |  |                       |                             |
|---|--|--|-----------------------|-----------------------------|
|   | Total Nitrogen (min.)                  | Available Phosphate P <sub>2</sub> O <sub>5</sub> (min.) | Soluble Potash (min.) | Other Plant Elements (min.) |
|   |  |  |                       |                             |

**I hereby attest that the information in the application is true, complete, and accurate.**

|               |              |
|---------------|--------------|
| Signature:    | Date Signed: |
| Printed Name: | Title:       |

**DO NOT WRITE IN THIS BOX** (For Kansas Department of Agriculture use only)

| Fee | Code | Transaction No. | CH | ACH | MO |
|-----|------|-----------------|----|-----|----|
|     | RFP  |                 |    |     |    |
|     | FRR  |                 |    |     |    |