LABEL SUBMISSION FORM FOR COMMERCIAL FERTILIZER

NEBRASKA DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH PROTECTION
P.O. BOX 94756
LINCOLN, NEBRASKA 68509-4756

Name of Submitter of product label ____________________________________________________________
Street Address ____________________________________________________________________________

City/Town __________________________ State ________ Zip ________ Date __________________________

Name and address of firm GUARANTEEING the product, if different than the submitter
__________________________________________________________________________________________

Name and address of MANUFACTURER, if different than the submitter
__________________________________________________________________________________________

BRAND NAME: ____________________________________________________________________________

Product Web site: __________________________________________________________________________

List the nutrient Guarantee: __________________________________________________________________

LABEL MUST BE SUBMITTED FOR STATE USE Provide One (1) copy of Product label.

Fertilizer Manufacturer and/or Distributor must have a distributor’s license/permit, however, Fertilizer product is
exempt from any registration fee. If product contains any pesticide, it must be registered as a pesticide.

___Ag Use ___Non-Ag Use ALSTAR participant: ___ Yes ___ No

Federal ID: ______ _____________________

Printed Name of responsible contact person _________________________________________________

Signature of responsible contact person _____________________________________________________

Phone Number: ___________________________

Fax Number: _____________________________

Email: _________________________________

Office Use
Date Reviewed: __________________________________________________________

Submitted Format: paper
                 Pdf
                 ALSTAR
                 KellySolutions

Product Tracking #

State Firm #