

## Screenings Permit Application

*(Entry, inspection, and sampling by authority of M. S. 21.75)*

*The information provided on this application will be used to assess the applicant's eligibility to hold a permit. Applicants are not legally required to provide the Minnesota Department of Agriculture (MDA) with the information requested, but only completed applications will be considered for approval. All applicants are required by Minnesota Statutes, Chapter 21.891 to provide the information requested in this form; incomplete or inaccurate applications may result in a delay in the processing of an application or the denial of a permit. The information provided will be accessed only by MDA staff that have a business need to see the data, the state auditor, legislative auditor, or by court order.*

**Office Use Only**

Permit Year:

Permit NO:

**Person Applying for Permit**

|                 |        |        |      |
|-----------------|--------|--------|------|
| Applicant Name: | Phone: | Date:  |      |
| Address:        | City:  | State: | Zip: |
| Email:          |        |        |      |

**Primary Firm Where Screenings Will Be Purchased**

|            |        |        |      |
|------------|--------|--------|------|
| Firm Name: | Phone: |        |      |
| Address:   | City:  | State: | Zip: |

**Secondary Firm Where Screenings Will Be Purchased**

|            |        |        |      |
|------------|--------|--------|------|
| Firm Name: | Phone: |        |      |
| Address:   | City:  | State: | Zip: |

**Description of Devitalization Process**

*By authority of the Commissioner of Agriculture provided in M. S. 21.74, part (5), permission is granted to the applicant to purchase screenings or grain containing weed seeds in excess of that permitted under M. S. 21.72, subdivision 15 and M. S. 21.73, subdivision 1, to be used for feed purposes from the firms identified in this application.*

Applicant's Signature / Date:

NOTE: Additional Space for Listing Secondary Firms

|                                                   |       |        |      |
|---------------------------------------------------|-------|--------|------|
| Secondary Firm Where Screenings Will Be Purchased |       |        |      |
| Firm Name:                                        |       | Phone: |      |
| Address:                                          | City: | State: | Zip: |
| Secondary Firm Where Screenings Will Be Purchased |       |        |      |
| Firm Name:                                        |       | Phone: |      |
| Address:                                          | City: | State: | Zip: |
| Secondary Firm Where Screenings Will Be Purchased |       |        |      |
| Firm Name:                                        |       | Phone: |      |
| Address:                                          | City: | State: | Zip: |
| Secondary Firm Where Screenings Will Be Purchased |       |        |      |
| Firm Name:                                        |       | Phone: |      |
| Address:                                          | City: | State: | Zip: |
| Secondary Firm Where Screenings Will Be Purchased |       |        |      |
| Firm Name:                                        |       | Phone: |      |
| Address:                                          | City: | State: | Zip: |
| Secondary Firm Where Screenings Will Be Purchased |       |        |      |
| Firm Name:                                        |       | Phone: |      |
| Address:                                          | City: | State: | Zip: |
| Secondary Firm Where Screenings Will Be Purchased |       |        |      |
| Firm Name:                                        |       | Phone: |      |
| Address:                                          | City: | State: | Zip: |
| Other Information                                 |       |        |      |
|                                                   |       |        |      |