



# Penn Millers Insurance Company Supplemental Application for Seed Merchants

**Applicant Name:**

**Agent/ Broker:**

**PLEASE COMPLETE THIS APPLICATION FOR ALL SEED MERCHANTS**

**A. General Information:**

	Yes	No
1. Do you own/license proprietary varieties?	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you handle foundation seed stock?	<input type="checkbox"/>	<input type="checkbox"/>
3. Do you condition patent protected varieties? For whom?	<input type="checkbox"/>	<input type="checkbox"/>
4. Do you custom clean seeds for individuals?	<input type="checkbox"/>	<input type="checkbox"/>
a. If yes, do you obtain a release for ones patent protected?	<input type="checkbox"/>	<input type="checkbox"/>
5. Are all lot numbers recorded on customer invoices?	<input type="checkbox"/>	<input type="checkbox"/>
6. Do you physically grow seeds?	<input type="checkbox"/>	<input type="checkbox"/>
a. If no, are the seeds contract grown? By whom?	<input type="checkbox"/>	<input type="checkbox"/>
7. Are quality control samples of all seeds maintained on premises? If yes, for how long?	<input type="checkbox"/>	<input type="checkbox"/>
8. Are hard to obtain specialized spare parts kept in inventory?	<input type="checkbox"/>	<input type="checkbox"/>

**B. Detailed Information:**

1. Type of seed handled (seed grain, vegetables, grass, etc.)	
2. What percentage of total seed sold is imported?	
3. What percentage of total seed sold is exported foreign?	
4. Who is responsible for germination testing?	
5. What percentage of total seed sold is treated by you?	
6. What treatments are applied to seeds?	
7. What quality control procedures are conducted by you?	
8. Any specialized equipment? Custom fabricated or overseas parts?	

Comments:

Applicant Signature:

Date: