

CSGA



ACPS

Appeal Application

This *Appeal Application* (Form 200) is completed, and submitted to the Canadian Seed Growers' Association (CSGA) office, by October 15th for most crop kinds, to request an appeal of a CSGA decision on an inspected crop. All information provided in this application should be factual and verifiable. Please include the administration fee of \$100.00 plus GST/HST (# 1068666292) payable to the CSGA, for each appeal.

Name:	
Address:	
City:	
Province:	
Postal code:	

Grower number:	
Telephone:	
Fax:	
Email:	

Field identification number:		Acres:	
CSGA sequence number:		Variety and crop kind:	
Parent seed planted pedigree class:		Crop certificate number:	

APPEAL INFORMATION: Attach a separate page (if required) to provide any supporting documentation available (e.g. Third-party confirmation of corrective action(s) taken).

Was roguing of the crop done after crop inspection? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, how many times, and what was removed?
Were any other corrective actions taken after crop inspection? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, describe these corrective actions (other than roguing above).
Was the crop re-inspected by an inspector authorized by the CSGA? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, why not?
Why should the Appeals Committee reconsider the CSGA's original decision? (attach a separate page if necessary).
If a crop was demoted or declined due to non-conformance with CSGA's mechanical purity (difficult-to-separate) standards: a) What equipment will be used to clean the seed from this crop? _____ b) Was a cleaned sample, drawn by a licensed sampler, analyzed for mechanical purity? Yes <input type="checkbox"/> No <input type="checkbox"/> c) The quantity of seed sampled was: _____ d) The seed analysis was performed by: _____
Supporting documentation – attach if available (e.g. Third-party confirmation of corrective action(s) taken)

I declare all the above to be true:

_____ Grower Signature

_____ Date

****Please make cheque or money order payable to the Canadian Seed Growers' Association**

SEND TO: CANADIAN SEED GROWERS' ASSOCIATION
Box 8455, 202-240 Catherine Street, Ottawa, Ontario, K1G 3T1
Fax: (613) 563-7855 E-mail: applications@seedgrowers.ca

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