Virginia Department of Agriculture and Consumer Services P O Box 1163 Richmond VA 23218-1163

STATEMENT OF AGREEMENT – FERTILIZER, SOIL AMENDMENT, HORTICULTURAL GROWING MEDIUM

To Be Filed by August 1 following the reporting period (July 1-June 30)

see Number		
Licensee Name:		
Address:		
City – State – Zip:		
FIN/SSN:		
Telephone:	Fax: _	
Authorized Representati	e: Print Name	
	Signature	
	Title	Date
ction tees to the Treasurer	of Virginia for the distribution of regulated produc	t in the Commonwealth of
Firm/Individual Name: Address:		
Address:		
Address: City – State – Zip:		
Address: City – State – Zip: FIN/SSN: Telephone:	Fax: _	
Address: City – State – Zip: FIN/SSN: Telephone: reby acknowledge that t	he information provided in this document is parties listed.	
Address: City – State – Zip: FIN/SSN: Telephone: reby acknowledge that the ement between the two	ne information provided in this document is parties listed.	
Address: City – State – Zip: FIN/SSN: Telephone: reby acknowledge that the ement between the two	he information provided in this document is parties listed.	