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**OFFICE OF THE TEXAS STATE CHEMIST  
TEXAS FEED AND FERTILIZER CONTROL SERVICE**

**AFLATOXIN BINDER REGISTRATION FORM**

Reply to:

Your Firm's Name \_\_\_\_\_

Texas Feed and Fertilizer Control Service  
P. O. Box 3160  
College Station, TX 77841-3160  
979/845-1121

\_\_\_\_\_  
(Type or Print)

Date of Application \_\_\_\_\_

**WE WISH TO REGISTER THE FOLLOWING AFLATOXIN BINDER PRODUCT(S):**

No.	Product name	Net Weight	Revised Product	Name and address of the manufacturing facility

**INSTRUCTIONS**

1. List the item number and the complete name of each product to be registered on this application. (More than one name can be listed.)
2. Indicate the net weight of each package under which the product is distributed. If distributed in bulk, state "bulk".
3. Attach a copy of the label for each product.
4. Complete certification on back side. **MANUFACTURER'S OR GUARANTOR'S FIRM NAME AND PRINCIPAL LOCATION SHOULD BE THE SAME AS SHOWN ON EACH LABEL.**

**NOTE:** COMPLETE CERTIFICATION SECTION ON REVERSE SIDE.

## CERTIFICATION OF REGISTRANT

I hereby certify that the information submitted with this form is true and correct in every respect, and that every package or bulk shipment of the product(s) will be labeled as required by the Texas Agriculture Code (1981), as amended.

I am authorized to execute this application for registration of commercial feed.

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Name of Manufacturer or Guarantor	Telephone No.
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Address	City	State	Zip
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Name of Authorized Representative (Print)	Signature	Title
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Date