



Wisconsin Department of Agriculture, Trade
and Consumer Protection
Division of Agricultural Resource Management
Bureau of Agrichemical Management
Phone: (608) 224-4541

OFFICE USE ONLY

Date Received at DATCP:

Date Exempted:

Fertilizer or Soil or Plant Additive Exemption Determination For Organic Crop Production

NO FEE REQUIRED

(Wis. Adm. Code §§ ATCP 40.12(2)(d) and 40.28(1)(b))

A fertilizer and/or soil and plant additive labeled solely for organic crop production meets the permit exemption if **ALL** of the following apply:

1. The product qualifies, or all of its ingredients qualify, under 7 CFR 205 for use in organic crop production.
2. The product label discloses the listing or approval under subd. 1.
3. The product label conspicuously states that "**This product is intended for use according to an approved organic system plan.**"
4. The manufacturer or distributor makes no performance claims for the product (verbal, printed or electronic).
5. The product label provides use directions, including use rates and methods of application.

You will receive a copy of this form with an exemption date from the agency when the product is determined to be in compliance with requirements.

An exemption is "non-transferable" and remains in effect until substantial changes are made in the product formulation, label or advertising literature or because of a loss of company license.

LABELER NAME (APPLICANT)		WI Fertilizer and/or Soil or Plant Additive License No.	30- 65-
ADDRESS		CITY	STATE ZIP
TELEPHONE ()	FAX ()	E-MAIL ADDRESS	
WEBSITE ADDRESS		LEGAL BUSINESS NAME (IF DIFFERENT)	

This form is for the following product: (For additional products, copy this form and complete one form for each product.)

Brand Name and Grade	Product Type: (circle one or both)	Fertilizer Soil or Plant Additive
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NAME OF MANUFACTURER (If other than labeler)	WI FERTILIZER LICENSE NUMBER 30- 65-	TELEPHONE ()
ADDRESS	CITY	STATE ZIP
<p>Please submit the following along with this completed form:</p> <ol style="list-style-type: none"> 1. A complete and legible copy of your product label in its final form, that complies with all applicable provisions of Wisconsin's Fertilizer and/or Soil or Plant Additive laws and rules (Sections 94.64, 94.65, Wis. Stats., and Chapter ATCP 40. Wis. Adm. Code). 2. Copies of any printed advertising or informational materials used in connection with the sale of this product. If any non-print communication media are used, including testimonials, a printed copy of that material must also be submitted with this application. 3. A valid and current Wisconsin Fertilizer and/or Soil or Plant Additive license number (above) or enclosure of a Wisconsin Fertilizer and/or Soil or Plant Additive License application and the appropriate license fee. 		
SIGNATURE OF AUTHORIZED REPRESENTATIVE: (REQUIRED)		DATE
NAME (print)	TITLE	

NO FEE REQUIRED Mail form and labeling to: **State of Wisconsin, DATCP, Box 93193, Milwaukee, WI 53293-0193**

Personal information you provide may be used for purposes other than that for which it was originally collected (Sec. 15.04(1)(m), Wis. Stats.).