



Sample Submission Form – Detection of CDC Triffid Flax

Grower Information

Client Name (billable customer): _____
 Address: _____ Town/City: _____

 Province: _____ Postal Code: _____
 Phone: _____ Fax: _____

Sample Information

The client is responsible for accurately completing the requested sample information.

Sample Reference	Online Submission # (if completed)	Variety	Crop Certificate #	Lot #	Sample Type (pedigreed, farm saved or commercial)

Distribution of Results

Please select method of test result delivery:

BioVision Online Account: Mail: Fax: Other (please specify): _____

Authorization

The client agrees to have read and understood the terms outlined in the Sample Submission Form and authorizes BioVision Seed Labs to communicate the test results with the Flax Council of Canada, Canadian Seed Growers' Association and other third party commercial flax industry representatives.

Name (print): _____ Signature: _____ Date: _____

Testing will commence once BioVision Seed Labs receives the completed and signed Sample Submission Form. It is recommended that the client sends the form with the sample, but additional options are available which include fax (1-780-437-6875) or email (biovision@biovision.ca).

Testing Terms and Fees

Sample Type	Sample Description	Samples Size Required	Service Fee	Replicates
Pedigreed Seed Sample	Pedigreed seed (preliminary and clean)	2.0 kg (4.4lbs)	\$195.00 plus 5% GST	4 x 60 gram test
Farm Saved Seed Sample	Non-pedigreed seed intended for planting	2.0 kg (4.4lbs)	\$195.00 plus 5% GST	4 x 60 gram test
Commercial Sale Sample	Seed intended for commercial sale to grain industry.	2.0 kg (4.4lbs)	\$195.00 plus 5% GST	4 x 60 gram test