

Germination Test Result Form

Ref no:

Address Stamp

To,

M/s SUVARNA HYBRID SEEDS,
#15-15-151/A, Veterinary Nagar, 3rd lane,
Kakani Road, Guntur. Pin: 522001.
G-mail: suvarnaahybridseeds@gmail.com

Name of the Person testedS/o.....

Test done Village, Mandal, Dist

Name of Nursery: Phone

Order id received from company online store Ordered date.....

Sub – Seed Lot Germination for Chilli Products of M/s Suvarnaa Hybrid Seeds towards the Kharif 2023.

We hereby declare that to please accept this form by acknowledging this order with bill no.

Product Name	Kind of product	Date of sown	Date of Result	Satisfactory/ Unsatisfactory

By referring to the above table, we are hereby pleased to request to Suvarnaa Hybrid Seeds that:

To kindly provide the provision for for the said stock.

(RELEASE ORDER / RETURN OF STOCK)

I am confirming the result form regarding germination of these products with duly signature.

We request you to consider the above request, and kindly act accordingly as per our desire. Thank you.

Date

Proprietor Seal & Signature