



### Certified Container Sampling Program (CCSP) sample submission form

Date: _____ <span style="float: right;"><i>(Please print)</i></span>					
CCSP-registered company:				Phone no.:	
Address:				Postal code:	
Facility location:			Plant manager or designate:		
Certificate to be issued to <small>(if different from above name and address):</small>		Name (licensee):			
		Address:			
Sample identification			Commodity: <i>(including variety, if required)</i>		
Origin of grain:	<input type="checkbox"/> Canadian	<input type="checkbox"/> Imported	<input type="checkbox"/> Mixed Canadian and Imported		
<b>The sample identified is declared to be (check one):</b>					
<b>Canada Western Grain Declaration</b>			<b>Canada Eastern Grain Declaration</b>		
<input type="checkbox"/> CWRS	<input type="checkbox"/> CWRW	<input type="checkbox"/> CWES	<input type="checkbox"/> CER	<input type="checkbox"/> CEHWW	<input type="checkbox"/> CERS
<input type="checkbox"/> CPSR	<input type="checkbox"/> CPSW	<input type="checkbox"/> CWAD	<input type="checkbox"/> CEHRW	<input type="checkbox"/> CEWW	<input type="checkbox"/> CESRW
<input type="checkbox"/> CWSWS	<input type="checkbox"/> CWHWS	<input type="checkbox"/> CWSP	<input type="checkbox"/> CNHR	<input type="checkbox"/> CEAD	<input type="checkbox"/> CESWS
Barley CW <input type="checkbox"/> Malting <input type="checkbox"/> Food <input type="checkbox"/> General Purpose			Barley CE <input type="checkbox"/> Malting <input type="checkbox"/> Food <input type="checkbox"/> General Purpose		
<input type="checkbox"/> Others: (please specify) Grain <input type="checkbox"/> Registered variety <input type="checkbox"/> Non-registered variety					
<small>I as the undersigned, understand and agree that in order to be eligible, the variety must be registered by the Canadian Food Inspection Agency as eligible for the commodity type (e.g. wheat, barley, flax, peas, canola, mustard, etc.). I further understand that, in the case of wheat, barley and flaxseed the variety must be on a Canadian Grain Commission Variety Designation List.</small>					
Name (print):			Signature:		
Approximate tonnes:		Date sampled:		Destination:	
Sampling method:	<input type="checkbox"/> Probed bags		Total bags:		
	<input type="checkbox"/> Mechanical sampler		Other (specify):		
Shipment type: <input type="checkbox"/> Bags (quantity) <input type="checkbox"/> Totes (quantity) <input type="checkbox"/> Bulk (approximate tonnage)					
<b>Certified sampler information</b>					
Sampler's name <i>(please print)</i> :				Signature:	
Certified sampler certificate no. <i>(required)</i> :				Sampling date:	
Sampling location in plant:					
Observations:					
Lot ID:					
Container no.	Seal no.	Container no.	Seal no.	Container no.	Seal no.
<b>Specify service requested: Minimum 1000 grams required for any service</b>					
<input type="checkbox"/> Grade and dockage	<input type="checkbox"/> Protein	<input type="checkbox"/> Moisture <small>(submit in moisture proof container)</small>	<input type="checkbox"/> Oil content	<input type="checkbox"/> Analysis (specify type of analysis)	
<input type="checkbox"/> Phytosanitary analysis <i>(Ontario only)</i> ; <input type="checkbox"/> Insects <input type="checkbox"/> Weed seeds					
Application for phytosanitary certificate submitted to CFIA office in what city?					
<input type="checkbox"/> Other information required:					
<b>For Canadian Grain Commission (CGC) use only (I-135 Certified Submitted Sample Certificate)</b>					
Gross wt.		Test wt.		Moisture:	
				Protein:	
				File no.	