



**SPECIALTY CROPS INSPECTION DIVISION  
POSITIVE LOT IDENTIFICATION  
STAMP(S)/DIE(S) REQUEST FORM**

**A. Stamp Description**

**Stamp Location (Applicant):**

**Stamp Manufacturer:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Stamp Manufacturer: Please reproduce, at the Applicant's expense, \_\_\_\_\_ hand stamps or \_\_\_\_\_ in-line coder printing dies bearing the approved USDA Federal-State Inspection logo with the following permanently affixed accountability number(s).

Inches

House Number	District Number	Inspection Number	Office/Market Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

\_\_\_\_ Inches

**B. Applicant's Request**

As a duly authorized agent of the above firm (Applicant), I hereby request that the above stamp/die order be approved and produced. I/We agree to be responsible for all charges assessed by the stamp manufacturer for this order. I also acknowledge that all stamps/dies ordered are the exclusive property of the United States Department of Agriculture and/or the \_\_\_\_\_ Federal-State Inspection Service.

\_\_\_\_\_  
*Applicant's Authorization Signature*

\_\_\_\_\_  
*Date of Request*

**E-Mail Address:**

**C. State/District Authorization**

I have reviewed the above request and give approval for the order to be processed.

\_\_\_\_\_  
*State/District Authorization Signature*

\_\_\_\_\_  
*Date of Request*

**D. Federal Authorization**

All stamps/dies which make reference to or imply that a product has been USDA or Federal-State inspected are accountable items and are the property of the United States Department of Agriculture. No stamps/dies shall be produced without specific written consent of the Federal Program Manager/ Supervisor.

\_\_\_\_\_  
*Federal Program Manager/Supervisor's Signature*

\_\_\_\_\_  
*Date of Authorization*

**NOTE:** These stamps/dies are to be mailed to the Federal-State District Supervisor who will distribute them.

MAIL STAMPS/DIES TO

\_\_\_\_\_  
\_\_\_\_\_

**E. Manufacturer's Statement**

I certify that each stamp/die produced by this firm bears a permanent accountability number and the only stamps/dies produced by this firm with markings referencing the USDA and/or the \_\_\_\_\_ Federal-State Inspection Service are those that have been authorized in writing by the USDA.

\_\_\_\_\_  
*Manufacturer's Signature of Compliance*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date of Shipment*

**F. Local/District Receipt**

I have received \_\_\_\_\_ (quantity) stamp/dies bearing the following permanently affixed accountability number(s).

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
*District Supervisor's Signature*

\_\_\_\_\_  
*Date Received*

**G. Authorized PIQ-PLIDS Firm Representative/Inspector's Receipt**

I have received the above listed stamps/dies and they are now my responsibility.

\_\_\_\_\_  
*Authorized Signature*

\_\_\_\_\_  
*Date Received*

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