

# NEW YORK STATE GINSENG DEALER PERMIT APPLICATION

Applicant or Individual's Name:	
Business Name:	
Mailing Address:	
Business Address:	
Phone Number:	

I do hereby request a Ginseng Dealer Permit as defined by Environmental Conservation Law, Section 9-1503, regarding the regulations for the purchase and sale of American ginseng or appropriately certified non-New York ginseng.

I will maintain all records as described by the regulations and make them available to the Commissioner of Environmental Conservation or his duly appointed representative upon request. All Ginseng Dealer Permits shall be valid for the calendar year in which they are issued.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Please return all applications to:

**New York State Department of Environmental Conservation  
Division of Lands & Forests  
625 Broadway  
Albany, NY 12233-4253**

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**FOR OFFICE USE ONLY:**

Date Processed \_\_\_\_\_

\_\_\_\_\_ Approve - Permit Number \_\_\_\_\_ Expires: \_\_\_\_\_

\_\_\_\_\_ Disapprove - Reason: \_\_\_\_\_