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| DARM-BACM-030.dcox (Rev. 09/23) | | | | | | | | | | |
|  | Wisconsin Dept. of Agriculture, Trade and Consumer Protection  Division of Agricultural Resource Management  Bureau of Agrichemical Management  Phone: (608) 224-4537  Email: [DATCPFert@wisconsin.gov](mailto:DATCPFert@wisconsin.gov) | | | | | OFFICE USE ONLY | | | | |
| 10000 73600 1150073000 4600000 71100 | | | | |
| $ | | | | |
|  | | | | |
| Liming Materials Tonnage Report for 2023 | | | | | | | | | | |
| (Wis. Stat. § 94.66 and Wis. Admin. Code § Ch. ATCP 41) | | | | | | | | | | |
|  | | | | CORRECT YOUR MAILING ADDRESS HERE | | | | | | |
|  | | | | NAME | | | | | | |
|  | | | | CONTACT NAME | | | | | | |
|  | | | | STREET ADDRESS | | | | | PO BOX | |
|  | | | | CITY | | | | STATE | | ZIP |
| No person Completion of this form is required. Failure to complete this form is subject to enforcement action pursuant to Wis. Admin. Code § ATCP 41.07. Personal information you provide may be used for purposes other than that for which it was originally collected. Wis. Stat. § 15.04(1)(m).  A research fee of one and one-quarter cents per ton ($0.0125) on all liming materials (or the equivalent amount of marl and paper mill refuse lime) sold within the state shall be paid to the Wisconsin Department of Agriculture, Trade and Consumer Protection annually for the preceding calendar year. If more than one distributor or seller is involved in the chain of distribution, the person who first sells or distributes liming material for further sale is responsible for the payment of research fees on that material. The minimum fee is $1. However, if NO SALES were made, the $1 fee is not required.  If another licensee has paid the research fee, you are entitled to a credit for that tonnage by completing the Credit Section found in Section B.  Please complete this report, sign it, pay the appropriate fees and mail to address shown on the back of the form. | | | | | | | | | | |
| SECTION A: TONNAGE OF LIMING MATERIALS SOLD BY INDEX ZONES (1 OUNCE TO 2,000 POUNDS = 1 TON) | | | | | | | | | | |
| Index Zone | | Pell Lime | Tons | | Index Zone | | Pell Lime | Tons | | |
| Marl | | No |  | | 60-69 | | No |  | | |
| Paper Mill | | No |  | | 60-69 | | Yes |  | | |
| Recycled Byproducts | | No |  | | 70-79 | | No |  | | |
| Barn Lime | | No |  | | 70-79 | | Yes |  | | |
| Less than 40 | | No |  | | 80-89 | | No |  | | |
| Less than 40 | | Yes |  | | 80-89 | | Yes |  | | |
| 40-49 | | No |  | | 90-99 | | No |  | | |
| 40-49 | | Yes |  | | 90-99 | | Yes |  | | |
| 50-59 | | No |  | | 100 or more | | No |  | | |
| 50-59 | | Yes |  | | 100 or more | | Yes |  | | |
|  | |  | 1. Total tons sold (transfer to line 1 on reverse side) | | | | |  | | |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| SECTION B: TONNAGE CREDIT (another licensee paid fee). | | | | | | | | | |
| If another licensee has paid the research fee you are entitled to a credit for that tonnage. Complete the schedule below | | | | | | | | | |
| Index Zone | Pell Lime (Yes or No) | Tons | | License Number (Required) | Licensee’s Name and Address | | | | |
|  | Yes  No |  | |  |  | | | | |
|  | Yes  No |  | |  | v | | | | |
|  | Yes  No |  | |  |  | | | | |
|  | Yes  No |  | |  |  | | | | |
| 1. TOTAL CREDIT  (transfer to line 2 below) | |  | |  |  | | | | |
| SECTION C: TONNAGE FEES OWED (Calculation) | | | | | | | | | |
| 1. Total tonnage from Section A on Page 1 (1 ounce to 2,000 pounds = 1 ton) | | | | | | | | | $ |
| 1. Tonnage credit from Section B on Page 2 (above) | | | | | | | | | $ |
| 1. Net Tonnage (Subtract line 2 from line 1) | | | | | | | | | $ |
| 1. Amount Due $0.0125 times line 3, net tonnage   Minimum $1.00 is due for 1 pound to 80 tons  If line 1 is zero then no fee is due. | | | | | | | Pay This Amount | | $ |
| Return this form by February 1st | | | | | | | | | |
| I certify that all information on this application is true and correct. | | | | | | | | | |
|  | | |  | | | | |  | |
| SIGNATURE | | | TITLE | | | | | DATE | |
|  | | |  | | | : | | | |
| NAME (PRINT OR TYPE) | | | PHONE | | | EMAIL: | | | |
| **Make check payable to:** Wisconsin Department of Agriculture, Trade and Consumer Protection  **Mail form and check to:**  State of Wisconsin, DATCP, PO Box 93178, Milwaukee WI 53293-0178 | | | | | | | | | |
| **Errors or omissions will delay the issuance of your license.** | | | | | | | | | |