



CERTIFIED SEED APPLICATION

NOTES:

- 1) One variety per application.
- 2) Application must be signed by grower, appropriate fees attached and returned to Louisiana Department of Agriculture and Forestry at the above address by dates outlined in the Louisiana Seed Certification Standards.
- 3) The application must be filled out completely. Incomplete forms will not be processed.

Application Fee – Mandatory Fee _____ **\$28.00**

Choose one variety per application:

<input type="checkbox"/> Sugarcane - \$3.00 per acre	Number of Acres _____ x \$3.00 = _____
<input type="checkbox"/> Turfgrass - \$31.25 per acre	Number of Acres _____ x \$31.25 = _____
<input type="checkbox"/> Sweet Potato - \$2.25 per acre	Number of Acres _____ x \$2.25 = _____
<input type="checkbox"/> Rice - \$1.15 per acres	Number of Acres _____ x \$1.15 = _____
<input type="checkbox"/> Other:	

\$100 Late Application Fee (if applicable) _____

Total Due \$ _____

A \$25.00 per hour per inspector and mileage to and from will be charged for Sweet Potato crops. Fees based on hourly inspections and mileage will be invoiced by LDAF after inspections are performed.

Before processing this application, the following must be attached:

- 1) A tag and invoice showing origin and source of seed.
- 2) A detailed map(s) with GPS location of center of field, and landmarks, showing the exact location of each field. GPS coordinates must be listed in decimal degrees (DD) format.
(Example – 29.83270600, -91.926661999)

Grower: _____ Phone Number of Grower: _____
Address of Grower: _____ City: _____ State: _____ Zip: _____
Email: _____ Parish (Farm Location): _____
Certifier: _____ Phone Number of Certifier: _____
Address of Certifier: _____ City: _____ State: _____ Zip: _____
Email of Certifier: _____

I am familiar with all the provisions of the regulations promulgated by the Louisiana Department of Agriculture and Forestry pertaining to certification of seed and do hereby agree to conform to and abide by all provisions set forth therein.

Contact Person: _____ Telephone: _____
Signature: _____ Date: _____
Crop: _____ Variety: _____

OFFICE USE									
Transmittal # _____									
Check # _____									
Date _____									
Amt. \$ _____ .00									

FIELD INFORMATION

Field ID Number: Number of Acres:
Class of Seed Planted:
Source of Seed of Planting Stock (Tag and Invoice Attached):
Previous Crop: if same kind, give Variety and Class:

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TOTAL NUMBER OF ACRES

LDAF OFFICE USE ONLY