



LOUISIANA DEPARTMENT OF AGRICULTURE & FORESTRY

MIKE STRAIN DVM, COMMISSIONER

Seed Division, 5825 Florida Blvd., Suite 1003, Baton Rouge, LA 70806, (225) 925-4733, FAX (225) 925-4124

LOUISIANA CERTIFIED SEED APPLICATION

0803

Table with 2 columns: Description of fees and Amount. Rows include Application Fee (\$28.00), inspection fees for sugarcane, turfgrass, Sweet Potato, and Native Plant, and a \$100 late application fee.

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.

Notes:

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

GROWER () TELEPHONE NUMBER OF GROWER

ADDRESS OF GROWER CITY STATE ZIP PARISH WHERE FARM IS LOCATED ()

E-MAIL FAX NUMBER ()

CERTIFIER () TELEPHONE NUMBER OF CERTIFIER

ADDRESS OF CERTIFIER CITY STATE ZIP ()

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

CONTACT PERSON (Print Clearly) TELEPHONE # ()

SIGNATURE DATE

CROP VARIETY

Table with 5 columns: FIELD ID #, NUMBER ACRES, CLASS OF SEED PLANTED, SOURCE OF SEED OF PLANTING STOCK (TAG AND INVOICE ATTACHED), PREVIOUS CROP IF SAME KIND GIVE: VARIETY AND CLASS

TOTAL # OF ACRES (Office use only)

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