

ARKANSAS DEPTARTMENT OF AGRICULTURE

Renewal Application to Produce Vegetatively Propagated Certified Turfgrass

ANT INDUSTRIES DIVISION	;	(COMPLETE ALL BLANKS)			
	NT NAME	PHONE()	FAX <u>(</u>)
ADDRESS	3				
UPS ADDI	RESS				
LIST NAM	ME OF GROWER'S FARM, FAI	RM MANAGER & PHONE NUMBER	S ON 2 ND PAC	SE OF FORM	
FARM	DIRECTIONS: MY FARM IS	MILES NSEW FROM		ON HIC	3HWAY
Additiona	I Directions / Instructions:	CIRCLE ONE)	(TOWN)		
1)	KII FORMATION ON VARIETIES (ND (Ex. Bermuda, Zoysia, etc Use DF THIS KIND APPLIED ON MUST E	a Separate Ар ВЕ LISTED ON	oplication Form fo	or Each KIND) OF THIS FORM
		f the stand will continue for all classes of v I annually. (The land history is on file in t			
planted. F	For renewal applications this informations or control of the LABELS from the L	To be eligible for certification, found rmation must already be on file in the ce om this lot attached to the original applicate their own registered sprigs for certified soon the control of the certified soon the certifie	ertification officion for each var	ce: If Turfgrass was iety applied on to sh	s purchased, an <u>INVOICI</u> how evidence of source
APPLICATI		Y IDENTIFIED CORRESPONDING TO			
		sted and agree to abide by the AR Cer gnature to this application is affidavit t			l5: Official Standards
A)		verification of seed / sod eligibility rource was used for planting the fields			seed or sprigs used
B)	That all equipment involved in purity of the crop.	planting, harvesting, conditioning, or	other handling	of these crops is	s cleaned to maintair
C)		ill be maintained from harvest time to the growers' responsibilities as stated			
D)	That the land which this crop is in the Arkansas Certification s	s planted on meets the land requirement standards in Circular 15.	nts specified fo	or "Vegetatively P	ropagated Turfgrass
		d as authorized representatives of company each shipment of certified		nment and may	complete Turfgrass
OP	PERATOR(S) IN CHARGE:				
4) FEES E	ENCLOSED: (see fees on page	8 of Cir 15)	MA	AIL TO:	
\$	Acreage (\$500 for 1st Ten A	cres + \$12/each additional acre)	AR	KANSAS DEPT OF A	AGRICULTURE
\$	Varietal Fee (\$20 for each Var	iety listed on back)	1 N	ATURAL RESOURC	ES DRIVE
\$	TOTAL ENCLOSED		LIT	TLE ROCK, AR 7220	05

SIGNED_____DATE_____



GROWER INFORMATION

CONTRACT GROWER *(One per Application Form)*			FARM NAME		DATE				
	PHONE # (FAX # <u>()</u>	CELL	/MOBIL PHONE # ()				
ADDRESS					ZIP				
(CHECK CIRCULAR 15 FOR CROP HISTORY REQUIRED)									
VARIETY: PLEASE LIST EACH FIELD SEPARATELY	NUMBER OF ACRES IN FIELD	FIELD NUMBER or ID	Class to be Produced	YEAR PLANTED	COMMENTS				
TOTAL ACRES	·								

INSTRUCTIONS: (PLEASE LIST EACH FIELD SEPARATELY)

- 1. **VARIETY:** Ex. *Tifway*, *Meyers*, etc. (Kind should also be listed on front page of form)
- 2. ACRES: Give the number of acres for this field.
- 3. FIELD: Give the identification (name or number) of this field- should be the same as previous years field ID.
- 4. **YEAR PLANTED:** Give the year this field was planted.
- 5. CLASS to be Produced: Give the class of seed, sprigs, or sod you are continuing to produce (Registered or Certified).
- 6. **COMMENTS:** List any comments needed.
- 7. Make additional copies of this sheet if needed for any additional fields of this Kind.