

Application for Seed Certification

Plant Industry Division



The following form is an application for seed certification. When filing this form with the Nevada Department of Agriculture, ensure that all regulatory requirements are reviewed. Standards for specific crops can be found under the Nevada Administrative Code (NAC), Chapter 587. The Nevada Department of Agriculture is the state authorized Certified Seed Agency (CSA) and is accredited to prescribe seed crops with certified designation. Please follow the below instructions and file an application prior to the due dates in order to successfully file for seed certification:

INSTRUCTIONS

- Submit application by the following dates:

Alfalfa, Grass, Clover & Rapeseed:	April 1 st for F,R,C
Woody Plants & Forbs	April 1 st for F,R,C
Small Grains, Beans & Field Crops	May 1 st for F,R,C, or RP

*F = Foundation Class, *R = Registered Class, *C = Certified Class, *RP = Renewal of Perennial Crops
- Enclose a tag or other proof of seed source as well as a field map with application packet
- Ensure that application is signed and filled out completely prior to submission
- Submit application via email to: rwilhelm@agri.nv.gov or via mail to:

Nevada Department of Agriculture – Seed Program
405 South 21st Street
Sparks, NV 89431
- An invoice will be compiled and sent to applicant after application has been processed and all applications have been filed for the given crop year. Fees for each crop type are provided below:

Crop	Price/Acre	<u>Post-Production</u> Price/Hundredweight
Alfalfa	\$7.00	\$0.15/cwt
Beans	\$7.00	\$0.15/cwt
Clover	\$7.00	\$0.15/cwt
Grass	\$7.00	\$0.15/cwt
Rapeseed	\$7.00	\$0.15/cwt
Small Grains	\$7.00	\$0.10/cwt
Woody plants and forbs	\$7.00	\$0.15/cwt
Other field crop	\$7.00	\$0.15/cwt

- You will be contacted by a Department representative to schedule a field inspection after application has been approved.

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Application #: _____
Certification Fee: \$ _____

Applicant Information

Seed company: _____ Email address: _____
Applicant name: _____ Office number: _____
Mailing address: _____ Cell number: _____
_____ Fax number: _____

Grower Information

Company name: _____ Email address: _____
Grower contact: _____ Office number: _____
Mailing address: _____ Cell number: _____
_____ Fax number: _____

Crop Information

Crop type: _____ Varietal name: _____
Acres planted: _____ 3-year crop 1) _____
Date planted: _____ history of land: 2) _____
Field number: _____ 3) _____
Class of seed planted: Breeder Foundation Registered
Class of seed produced: Foundation Registered Certified

Field Location ***PLEASE INCLUDE A MAP WITH APPLICATION***

Physical address: _____ **Coordinate information:**
(if applicable) _____ Latitude: _____
Longitude: _____
Directions: _____

Seller Information ***PLEASE INCLUDE A COPY OF TAG WITH APPLICATION***

Seed purchased from: _____ Amount purchased: _____
Mailing address: _____ Amount planted: _____
_____ Lot #: _____
Seed was grown in: _____ Certification #: _____

I agree to abide by all laws and regulations governing the production of certified seed in the State of Nevada and assume responsibility for maintaining the genetic identity and purity at all stages of certification including seeding, harvesting, transporting, processing and labeling.

Signature

Date

405 South 21st St.
Sparks, NV 89431

2300 East St. Louis Ave.
Las Vegas, NV 89104

4780 East Idaho St.
Elko, NV 89801