

The following form is used to apply for GARLIC seed certification within the state of Nevada. Certified seed garlic must meet standards set forth within the <u>Nevada Administrative Code</u>, <u>Chapter 587.640-810</u>. When filing this form with the Nevada Department of Agriculture, ensure that all regulatory requirements are reviewed. In addition to filing this application with the Department, the applicant must also submit an "Allium Registration Form."

INSTRUCTIONS

1. Submit application form by the following date:

Certified Garlic Seed: February 15th

2. Complete and submit an "Allium Registration Form" with this application, if you haven't already done so.

3. Enclose a detailed <u>field map</u> with the application packet

4. Ensure that form is signed and filled out completely prior to submission

5. Submit application via email to: <u>rwilhelm@agri.nv.gov</u> or via mail to:

Nevada Department of Agriculture Attn: Seed Program 405 South 21st Street Sparks, NV 89431

6. An invoice will be compiled and sent to applicant after the registration form has been processed and all documents have been filed for the given crop year. Fees for each crop type are provided below:

Сгор	Price/Acre
Foundation Block	\$55.00
Nursery Increase Block	\$55.00
Certified Block	\$12.00
Stem & Bulb Nematode Sampling	\$17.00
(Optional for certified block)	

7. You will be contacted by a Department representative to schedule a field inspection after the application form has been fully processed.

405 South 21st St. Sparks, NV 89431



Application for Certified Garlic Seed

Plant Industry	Division
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pplicant Inform	ation						
Applicant name:					Ema	al address	s:
Contact name:					er:		
Mailing address:						number:	
e							
"Allium Registra	ation Form	ı" subm	itted?				
irower Informat	<u>ion</u> :						
Grower name:					Em	ail addres	ss:
Mailing address:							er:
Location of plai		Count	· ·			Cit	ty:
Location of plan	ining.	Count	y				
rop Information	<u>1</u>						
Field #	Varie	ety	Block	Ν	Lot #	Acres	Stock Record - Source
*Indicate the block ty	ype to be pro	duced in 1	the table ab	ove -	Foundation (F	B). Nurserv	/ Increase (IB), or Certified (CB),
**For the sampling of	of a certified	block for	stem & bul	b nem	natode, check t	the "N" colu	
	of a certified	block for	stem & bul	b nem	natode, check t	the "N" colu	ımn
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Date

405 South 21st St. Sparks, NV 89431 2300 East St. Louis Ave. Las Vegas, NV 89104 4780 East Idaho St. Elko, NV 89801