



APPLICATION FOR NURSERY INSPECTION

County Area Cert. #

For certificate year JANUARY 1, 20 through DECEMBER 31, 20

New Renewal

FIRM NAME:
MANAGER NAME:
PO BOX:
STREET ADDRESS:
CITY, STATE, ZIP:
PHONE NUMBER:
FEDERAL ID#:

Table with 4 columns: NAME CHANGE, MGR. CHANGE, ADDRESS CHANGE, CHANGE CITY STATE ZIP CO. Includes a section for change of place of business.

PLACE OF BUSINESS FOR WHICH CERTIFICATE IS REQUESTED

ADDR.
CITY
COUNTY & TOWNSHIP

Number of Acres in Nursery Stock for Certification This Year:

Field Stock: Intensive Production: Total: (containers, greenhouses, beds, heeling-in)

Extra places of business:

Location of growing site. (List all growing sites: provide directions or map on reverse side of paper. Give number and name of road, distance, and direction from nearest crossroad or town.)

KINDS OF STOCK BEING PRODUCED AND FOR WHICH CERTIFICATION IS DESIRED

Non Woody

- Strawberry (for plant production) S
Raspberry (for plant production) R
Perennials (other than Garden Mums) P
Garden Mums (for outdoor use) M
Indoor non-hardy plants (for interstate shipping) I
Other non-woody plants O

Woody

- Deciduous D
Evergreens E
Fruit Trees F
Nut Trees N
Other woody (describe) W

Inspection is requested for the nursery stock indicated above. All growing stock in Ohio under the control of the nursery is included.

Signature Title Date

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Table with 3 columns: Description, Calculation, Amount. Includes rows for Inspection Fee, Field Stock Acreage, Intensive production Acreage, Additional place(s) of business, and TOTAL FEE.

Table with 2 rows: APPLICATION RECEIVED, REPORT RECEIVED

Inspector Signature Inspection Date