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**WARM SEASON TURF**

**ADDITIONAL ACRES AND PRE-PLANT APPLICATION**

**DATE: \_\_\_\_\_\_\_\_\_\_\_\_**

GROWER: Certification Number:

CONTACT: Telephone:

ADDRESS: Email:

Fax:

**Newly Added Acreage**

If you added new acreage during the past year, and already had a pre-plant inspection done please complete the application below. **You must submit Source of Seed Tags for new varieties**.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **VARIETY** | **Field Name** | **Field #** | **Previous Crop** | **Source of Planting Seed** | | | **To Be Inspected** | |
| **Producer** | **Class** | **Amt. Planted** | **Class** | **Acres** |
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**PREPLANT INSPECTION REQUEST**

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| --- | --- | --- | --- | --- | --- |
| **VARIETY** | **Field Name** | **Field #** | **Previous Crop** | **To Be Inspected** | |
| **Class** | **Acres** |
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To complete the application process, sign, date and return this form to our office.

**Signature Date**