



SOUTH DAKOTA DEPARTMENT OF AGRICULTURE

Plant Industry Program

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APPLICATION FOR INSPECTION AND CERTIFICATION OF DOMESTIC PLANTS AND PLANT PRODUCTS FOR EXPORTS

A. Company Name: _____

Address: _____

Phone Number: _____

B. Name of Official Company Representative: _____

C. Field Contact Person: _____ Phone Number: _____

D. Location of Field: _____

E. Travel directions – general reference points: _____

F. Field Descriptions (field # or identification name): _____

G. Crop: _____ Harvest Date: _____

Variety: _____

Country being shipped to: _____ Field Size: _____

Irrigated: Yes / No

Space on back of form for map of field.

Map of Field

