Application for inspection of crops and pastures for Certified and SureSeed® seed production

## Both sides of a separate form must be used for each property

## Details of the property owner / grower

|  |  |  |
| --- | --- | --- |
| Trading name: |       |  |
| Contact name: |       |  |
| Postal address: |       |  |
| Telephone: |       | Fax: |       | Mobile: |       |  |
| Email: |       | UHF: |      |  |
| Property address: |       |  |
|  |  |  |

## Seed company / Licensee name and address (if applicable)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Trading name: |       | Contact name: |       |  |
| Postal address: |       |  |
| Telephone: |       | Fax: |       | Mobile: |       |  |
| Email: |       |  |
|  |  |  |
| Invoices to be sent to: [ ]  Grower [ ]  Seed company/Licensee |
| Inspection results to be sent to: [ ]  Grower [ ]  Seed company/Licensee |

|  |  |
| --- | --- |
| **Return by 31 August to:**  | **Enquiries:** |
| Senior Seed Certification OfficerDDLS Seed Testing and CertificationDepartment of Primary Industries and Regional Development3 Baron-Hay Court, South Perth WA 6151 | Telephone: (08) 9368 3721Facsimile: (08) 9474 2658Email: DDLS-STAC@dpird.wa.gov.au  |

**Declaration**

I declare that the varieties listed on the reverse of this form have been sown to meet the rules of the Certified and/or SureSeed® Program and agree to the required inspections being made.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Signature:** |       |  | **Date:** |       |

Provide seed and paddock details on the back of this form. Use this form for all crops when establishing a new crop, re-sowing an existing crop or allowing an existing crop to regenerate.

DDLS Seed Testing and Certification will inspect crops and charge fees on the basis of this single application unless written notification that a crop is to be withdrawn is received prior to crop inspection.

Complete all seed source and paddock details below.

|  |  |  |
| --- | --- | --- |
| **Seed source information** | **Current sowing information** | **Seed prod. class** |
| Variety | Licensee name | Seed lot identification | Gener- ation | Sowing date | Paddock name | Three years ago | Two years ago | Last year | Hectares planted | Certified | SureSeed |
| *e.g.: Dalkeith* | *DPIRD* | *21AA001* | *C1* | *20/5/21* | *One tree* | *Canola* | *Wheat* | *Barley* | *10* | *C2* | *S1* |
|       |       |       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |       |       |
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**Application checklist:**

• Complete the front of this form with all contact details. The form must be signed.

• Complete seed source and paddock details above.

• **Enclose sowing labels with this form** - bundle or staple together and identify by variety name and line number for each separate crop establishment. If there are more than ten labels per sowing, send the highest and lowest numbered labels from each sowing along with a note that records all labels.

• Applications **must** be accompanied by an accurate **map** showing access to paddocks and part-paddock sowings. Please clearly define: farm paddock name; gates and fences; details of crops sown in adjoining paddocks; indicate North; roads and tracks and distances to nearest towns.