## Use Separate Application for Each Crop

**Signature of Applicant** 

APPLICANT NAME AND ADDRESS (Zip Code)

## **ILLINOIS CROP IMPROVEMENT ASSOCIATION**

3105 RESEARCH ROAD :: CHAMPAIGN, ILLINOIS 61822 :: 217-359-4053

## APPLICATION FOR PHYTOSANITARY ONLY (Non Certified Crops)

**CORN - SUNFLOWER - SOYBEANS - SMALL GRAINS - OTHER CROPS** 

**GROWER NAME AND ADDRESS (Zip Code)** 

Co. List

Date

Phone ( )		County	Phone (	Phone ( )			County Field Location		
Information on Fields to be Inspected Office Use								Office Use Only	
Field #	Plot Nursery or Field Name	Variety/Inbred/Hybrid Name	Crop	Acreage	Date Regulated Planted Y/N				
Field									
#	Directions to Above Fields or Attach Maps								
I am herewith making application for inspection of the crop listed above, I agree to abide by the By-Laws and Rules of the Association. I understand and agree that services may be suspended or terminated if I violate any of the provisions of such By-Laws and Regulations or if I engage or persist in practices likely to injure or discredit the Association. I understand it is the applicant's responsibility to so handle inspected seed so that its identity is preserved through all stages of production, processing and shipping.									