## OREGON DEPARTMENT OF AGRICULTURE APPLICATION FOR FIELD INSPECTION OF SEED FOR EXPORT

Complete all the fields in the client section of the application with the best possible information. Please submit a separate application for each lot number to be inspected, plus a second copy of each application. Multiple field areas on the same application will be processed as a single field with a single lot number. Incomplete applications will be returned and subject to delay before being processed for inspection. Applications for Fall-planted crops must be received by April 1. Bean field applications must be received by the ODA no later than July 1 (OAR 603-52-38). All other applications must be received by May 1, or within two weeks of planting, whichever is later. This inspection program does not imply or express warranty or freedom of disease or quality of stock.



CLIENT INFOR	RMAT	ION					red by the standard DA plant pathology		
COMPANY NAME			staff on		_(date), by		(staff). h list to application)		
ADDRESS			THIS SE	CTI	ON FO	R ODA	USE ONLY		
CITY	STATE	ZIP	ODA FIELD ID	)					
TELEPHONE			INSPECTION 1 DATE						
FAX			INSPECTOR						
FIELD CONTACT PERSON			Vegetative Bolt Flowering						
THE PROPERTY OF THE PROPERTY O			Seed Set Seneso		nt	Not Planted			
TELEPHONE		Windrowed		Harveste		Failed Crop			
GROWER BUSINESS NAME / CONTACT NAME				Exce	ssive We		Withdrawn		
ADDRESS									
	1		INSPECTI	ON 2	2 DATE				
CITY	STATE	ZIP	INSPECTOR						
TELEPHONE			Vegetative		Bolt		Flowering		
CROP		ACRES	Seed Set	Senesco		nt	Not Planted		
			Windrowed		Harveste	ed	Failed Crop		
VARIETY			"Other"	Excessive Weeds			Withdrawn		
LOTANIADED (ONE DED ADDITION	NT)								
LOT NUMBER (ONE PER APPLICATION)			DIAGNOSTICS						
DATE PLANTED (MM-DD-YYYY)	DATE PLANTED (MM-DD-YYYY) COUNTY (OREGON)		vis / micro			bioassay			
APPROXIMATE HARVEST DATE (MM-	-DD-YYYY	Υ)							
ADDITIONAL INFORMATION FOR	MALHEU	UR BEAN CROPS							
APPROXIMATE WINDROW DATE (MM-DD-YYYY)			media	media			serol		
IRRIGATION METHOD									
PREVIOUS CROP									
			<u> </u>						
Your signature indicates that you have agree to pay the inspection fee.	requested	this inspection and	Send Completed and Signed Application to:			ion to:	ODA Date Stamp		
agree to pay the inspection feet				OREGON DEPARTMENT OF AGRICULTURE					
			COMMODITY INSPECTION DIVISION SEED FIELD INSPECTION CERTIFICATION						
			635 CAPITOL ST		JN CEKTII	TCATION			
SIGNATURE OF APPLICANT		DATE	SALEM OR 9730		!				

## REQUIRED INFORMATION

Make a simple line drawing of the field location, including geological reference (i.e., North), landmarks such as buildings, field roads, pumps, county lines. If the field is not on a main road, please indicate the distance in tenths of miles from the road or a landmark. Aerial photographs will be accepted if access routes and roads are labeled.
Please provide a short narrative explaining directions for the location shown on the map.  Please include GPS reference if known:
Field location description:
Attach certified bean tags here for plantings in Malbeur County per OAR 603 052 0385
Attach certified bean tags here for plantings in Malheur County per OAR 603-052-0385. "True to Variety" certification is an OSU program, not a function of the ODA program.

This information is available in alternative formats upon request. The Oregon Department of Agriculture is an Equal Opportunity Employer, providing services to the public without regard to race, color, national origin, sex, age, or disability.

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