



APPLICATION FOR FIELD INSPECTION

for
Noxious Weed Seed Free Forage and Mulch

IOWA CROP IMPROVEMENT ASSOCIATION
 4611 MORTENSEN ROAD, SUITE 101, AMES IA 50014
 PHONE 515/294-6921 FAX 515/294-1897 E-MAIL iowacrop@iastate.edu

This form is to be used when applying for inspection of a production field in Iowa to produce Noxious Weed Seed Free Forage and Mulch. Complete one form for each production field.

Applicant Name _____

Address _____

Telephone _____ Cell Number _____

FIELD NUMBER	CROP	ACRES	APPROXIMATE HARVEST DATE

Is this field also being inspected for seed certification, Quality Assurance, or another program by ICIA? Yes No

FIELD LOCATION

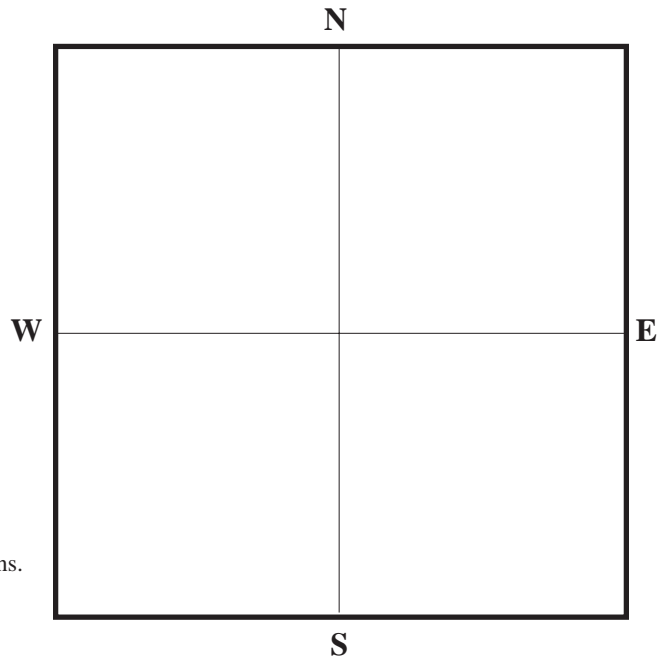
Please draw a detailed map locating the field to be inspected. Use the map to show the location of the field in a 640 acre section of land.

1. Show the **location** of each field from any nearby **farmsteads**.
2. **Outline the borders** of each field to be inspected in **red**. (Please do not use red except to identify the borders of fields to be inspected.)
3. Show **surrounding crops**, roads, waterways, and other landmarks that may help to identify the field.

Directions to Field (use 911 address) _____

County _____

Township _____ Section Number _____



STORAGE LOCATION

Please describe where the hay or mulch will be stored. If a storage facility will be used indicate the location on the map above and/or provide directions.

Directions to Storage Location (use 911 address) _____



PRODUCTION AGREEMENT

for

Noxious Weed Seed Free Forage and Mulch

IOWA CROP IMPROVEMENT ASSOCIATION

4611 MORTENSEN ROAD, SUITE 101 AMES, IOWA 50014-6228

PHONE 515/294-6921 FAX 515/294-1897 E-MAIL: iowacrop@iastate.edu

This form is to be completed by a grower who desires to produce Noxious Weed Seed Free Forage and Mulch. This is a binding agreement to follow the certification standards when signed. Please complete **one** Production Agreement each season.

Crop Year _____ Grower Number _____ Acres Applied For _____

Please provide the following information which will be published in the seed directory and/or other promotional materials.

Applicant Name _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

County _____

Telephone Number _____ Cell Number _____

Fax Number _____ 800 Number _____

E-Mail _____ Website _____

I agree to follow the standards of the Iowa Noxious Weed Seed Free Forage and Mulch Program. This shall include the removal or isolation of plants from the designated list of noxious weeds or undesirable plants when there is danger of dissemination of the seed or the propagating parts of the plant. This agreement applies to all stages of productions including harvesting, storage, and labeling.

Signature _____ Date _____

FOR OFFICE USE ONLY: Check Number _____ Check Amount _____