



Bill Northey, Secretary of Agriculture

2017 APPLICATION FOR IOWA NURSERY DEALER CERTIFICATE January 1, 2017 – December 31, 2017

INSTRUCTIONS: Please complete all information requested for each business location and mail with the \$25 fee (per location), payable to IDALS, to the address at the bottom of this form.

Business Name _____ Contact Person _____

Mailing Address _____

City _____ State _____ Zip _____

Telephone _____ Alternate Phone _____

Fax _____ Email _____

Address of Business(if different than mailing address) _____

Type of Business (check all that may apply)

- checkbox year-round nursery sales, checkbox tree mover, checkbox broker, checkbox seasonal nursery sales, checkbox landscape contractor, checkbox other

Please list the sources of your stock (both in- and out-of-state sources)

Name of Supplier Address of Supplier

Blank lines for listing sources of stock

(continue on back or use additional sheet(s) if more space is needed)

Important: Please read the following; must be signed and dated below.

I hereby apply for a certificate to operate as a dealer of nursery stock in the state of Iowa. I understand and agree to the following responsibilities as a nursery stock dealer:

- 1. I grow no nursery stock myself, and that I will obtain only certified stock from sources that have been inspected and approved by a duly authorized inspector of the state where grown.
2. I will provide the IDALS Entomology and Plant Science Bureau, in advance and in writing, the name and addresses of all sources from which I obtain nursery stock for my business use.
3. As a dealer, I am subject to inspections and the provisions of the Iowa Crop Pest Act (Chap. 177A, Code of Iowa) and related regulations pertaining to maintenance, care and display of stock.
4. If I should plant nursery stock on property under my control (such as carry-over stock), my status will change to that of a nursery grower, and I must notify the State of this change so arrangements can be made to inspect the stock during the growing season prior to sale or movement of the stock.

Applicant Name (please print): _____

Applicant Signature: _____ Date: _____

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