

# SSCA Southern Seed Certification Association

**Application for Certification of Turfgrass**  
*Submit an Application for each crop kind, variety and Certified class*  
**Attach Form "A" for Contract growers**

Applicant \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 (City) (State) (Zip)

Date \_\_\_\_\_  
 County \_\_\_\_\_  
 Phone Day \_\_\_\_\_  
 Night \_\_\_\_\_  
 Mobile \_\_\_\_\_  
 Hwy. No. \_\_\_\_\_

<b>For office use</b>
Certification No. _____
Date Received _____
Membership \$ _____
Acreage \$ _____
Total \$ _____

Directions to Farm:  
 \_\_\_\_\_ Miles \_\_\_\_\_ From \_\_\_\_\_  
 \_\_\_\_\_ N.E.S.W. \_\_\_\_\_ Town

New Planting – Provide All Information Below

Continued Certification of Established Fields – Provide Only Kind, Variety, Field No(s).

Kind \_\_\_\_\_ Variety \_\_\_\_\_ No. Acres \_\_\_\_\_

Seed Class Planted \_\_\_\_\_ Class To Produce \_\_\_\_\_ Seedstock Source \_\_\_\_\_

Seedstock Lot Number \_\_\_\_\_ Field Number \_\_\_\_\_ Date Planted \_\_\_\_\_

Previous Crop and Variety Grown on Land \_\_\_\_\_ Distance From Other Turf Grass \_\_\_\_\_ Feet \_\_\_\_\_

Land Fumigation: Yes \_\_\_\_\_ No \_\_\_\_\_

Material Applied \_\_\_\_\_ Rate \_\_\_\_\_

Date Applied \_\_\_\_\_ Fumigated by Applicant: Yes \_\_\_\_\_ No \_\_\_\_\_

Custom Applicator: Name \_\_\_\_\_

Other Cultural Practices Conducted \_\_\_\_\_

I hereby apply for membership in the Southern Seed Certification Association for the current year and for inspection of the crop listed on this application. I understand and agree to abide by the Rules and Regulations of the SSCA relative to certification of the crop listed above. Also, I confirm that the entire acreage listed above was planted with seed represented by tags and purchase invoice submitted with this application.

**FEES SUBMITTED (See Back)**

Membership \$ \_\_\_\_\_  
 Acreage \$ \_\_\_\_\_  
 Total \$ \_\_\_\_\_

**I Have:**

- \* Planted an eligible class of certified seed on eligible land.
- \* Thoroughly cleaned all equipment involved in planting.
- \* Provided adequate isolation distance.

Make check payable to:  
 SOUTHERN SEED CERTIFICATION ASSOCIATION, INC.  
 P.O. BOX 2619  
 AUBURN, AL 36831  
 Phone (334) 821-7400 (334) 844-4995 FAX (334) 844-4901

\_\_\_\_\_  
 SIGNATURE OF APPLICANT

\_\_\_\_\_  
 PRINT NAME

**SUBMIT THE FOLLOWING WITH THIS APPLICATION:**

**New Planting:**

1. An invoice showing crop, variety, class, lot number and quantity of seed stock purchased
2. A tag from each lot
3. An invoice showing fumigation material, rate applied and size of area fumigated
4. Fees

**Continued Certification of Established Fields:**

1. Completed application
2. Fees

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**ANNUAL FEE SCHEDULE**

Membership:	\$ 5.00
Application Fee:	\$250.00
Acreage:	\$ 50.00 per acre or part thereof for first 20 acres, \$10.00 per acre for each additional acre or part thereof.

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**FINAL DATE FOR FILING APPLICATIONS**

New fields: 30 days prior to planting if planting date can be established – but no later than date planted.

Continued Certification of established fields: February 1<sup>st</sup> each year.



