## APPLICATION FOR A NURSERY STOCK DISTRIBUTOR LICENSE



Return completed application, with payment to:

Nebraska Department of Agriculture (NDA)
Central Fee Collection
P.O. Box 94668
Lincoln, NE 68509
Phone: (402) 471-2351



E-mail: agr.plant@nebraska.gov Web site: www.nda.nebraska.gov

A Nebraska Nursery Stock Distributor License is required by the Nebraska Plant Protection and Plant Pest Act of any person distributing perennial or woody nursery stock in Nebraska. Initial applications must be received prior to the beginning of distribution. If not received prior to the beginning of distribution, initial applications shall be considered delinquent and shall have an additional late fee assessed of 25% per month.

This application shall be accompanied by an annual license fee of \$83.00 for the first acre and \$3.61 for each additional acre on which nursery stock is held, for each location from which nursery stock is distributed. VISA, MasterCard, check, or money order accepted. All Nursery Stock Distributor Licenses expire at the end of the calendar year. You must renew your license annually, as long as you continue to distribute nursery stock.

Any person growing perennial or woody nursery stock must also complete the request (below) for certification of Nebraska-grown nursery stock. After NDA has received your completed application, a nursery inspector will inspect the nursery stock grown in Nebraska, and you will receive certification for that plant material, if applicable to your business.

Total acres on which nursery stock is held	Fees due S	(\$83.00 + \$	3.61 for each additional acre)
Business Name	Manager's Name		
Business Address (physical address of location to be licensed)			
City	State _	Zip	County
Phone (primary) Phone (alternate)		Fax Numbe	er
E-mail Address	Web site		
Mailing Address (if different from above)			
City		State	Zip
Tree spade operator? Yes  No Size of Tree Spa	ide		
Do you distribute nursery stock outside of Nebraska?	Yes 🗌 N	No 🗌 Do you distribute	nursery stock wholesale? Yes ☐ No ☐
Do you distribute nursery stock at farmers' markets?	Yes 🗌 N	No ☐ If so, list the mark	tet locations:
REQUEST FOR CERTIFICATION OF NEBRASKA-GROWN NURSERY STOCK			
Nebraska-grown nursery stock must be inspected and certified by NDA, prior to distribution. If you grow nursery stock in Nebraska, fill out the following section:			
Types of nursery stock grown (check all that apply):			
	Aquatic I	us Trees (DCT) Plants (AQU) en Shrubs (EVS)	Evergreen trees (EVT) Perennials (PER) Greenhouse (GHS)
Location of growing site(s): (street address or exact directions)		Acres of stock:	County where growing site is located:

\*Growing site(s) to be inspected must be clearly marked. Maps must be included for sites over five acres, with clearly labeled sections of no more than five acres.

## SOURCES OF NURSERY STOCK

Please list all sources of nursery stock that you are utilizing. Nursery stock includes perennial and woody plant material. It is not necessary to include sources of hard goods. Attach a separate page, if more space is needed. Source Name Address City State Zip I understand that as a distributor, I shall acquire and distribute only nursery stock from a licensed grower or dealer approved by an authorizing agency within the state of origin, and recognized by this Department. I shall supply and continually update a complete and accurate list of sources of nursery stock with the Department. If I grow nursery stock, I hereby request inspection of those sites and certification of that plant material. Under penalties of perjury, I declare that I have examined this application and, to the best of my knowledge and belief, it is correct and complete. I will comply with all the provisions of the Nebraska Plant Protection and Plant Pest Act and the rules and regulations adopted under such Act. (Print Name) (Signature) **United States Citizenship Attestation Form** For the purpose of complying with Neb. Rev. Stat. §§4-108 through 4-114, I attest as follows: ☐ This business is <u>not</u> a sole proprietorship. OR ☐ I am a citizen of the United States. □ I am a qualified alien under the federal Immigration and Nationality Act, my immigration status and alien number are as follows: \_\_\_\_, and I agree to provide a copy of my USCIS documentation upon request. I hereby attest that my response and the information provided on this form and any related application for public benefits are true, complete, and accurate, and I understand that this information may be used to verify my lawful presence in the United States. **Print Name** Signature Date Any check returned by a financial institution to the Department due to insufficient or uncollected funds, may be re-presented electronically. A copy of the cancelled check can be obtained by contacting your financial institution. If the check cannot be deposited either traditionally or electronically, it shall be the policy of the Department to recover a \$30 insufficient fund check fee from the payer. The full payment must then be made with a cashier's check or credit card (Visa or MasterCard). For Credit Card Payment (Circle One) VISA MasterCard

Credit Card Number:

\_\_\_ Expiration Date: