

Montana Department of Agriculture
Agricultural Science Division
APPLICATION FOR GROWING SEASON **FIELD INSPECTION**
OF COMMODITIES FOR EXPORT



1a. Name and Address of Grower:

1b. Phone Number of Grower with Area Code:

1c. Email Address of Grower:

2a. Name and Address of Applicant or Agent:

2b. Phone Number of Applicant or Agent:

2c. Email Address of Applicant or Agent:

3. Foreign Country or Countries final product will be shipped to:

4. Physical location where field is or fields are located, including county or counties, and Latitude and Longitude coordinates. A map of the field and directions to the field are required. Please indicate below if an attachment is submitted with this application.

5a. Crop, Variety, and Acres:

5b. Approximate Planting Date:

5c. Approximate Harvest Date:

6. Other information to help with import requirements (see Instructions for details):

By signing this, I certify that the article (articles) listed is (are) accurately represented, and understand that this field inspection will be based on the current import requirements, which are subject to change post-harvest.

7. SIGNATURE (applicant or agent):

8. DATE:

INSTRUCTIONS for Growing Season Field Inspection Application Form: Complete items 1 through 8.

Item 1: Name and complete address of Grower, phone number, and email address (if available).

Item 2: Name and complete address of Applicant if different from Grower, phone number, and email address (if available).

Item 3: List all foreign countries expected to ship to.

Item 4: Physical locations of fields, including county, and Latitude and Longitude coordinates. A map and directions to the field MUST be included.

Item 5: Commodity to be certified for export, crop name, variety, and acres planted. Please also note the planting date and anticipated harvest date of the crop to be inspected in the appropriate subfield.

Item 6: Other information that may be applicable, such as: all treatments that have been applied during the growing season, an import permit number, and/ or any certificates or certified seed sources.

Item 7: Signature of applicant or agent.

Item 8: Date of Signature.

IMPORTANT: Forward the original application and any supporting documentation in one of the following: by mail to the address below, by fax to the number below, OR by email to the email address below.

Contact Information – updated June 2023

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