

TANZANIA OFFICIAL SEED CERTIFICATION INSTITUTE



THE SEED ACT, 2003

(No. 18 of 2003)

S/N.....

Form SR VII

APPLICATION FOR REGISTRATION OF A FIELD AS A UNIT OF SEED
PRODUCTION IN TERMS OF OECD SEED CERTIFICATION SCHEME

[Made under Regulation 27(1)]

(To be completed in triplicate)

To: Director General/Chief Seed Certification Officer,
Tanzania Official Seed Certification Institute,
P.O. Box 1056,
Morogoro.

Note:

- Separate application form must be submitted for each crop and variety grown for certification and must be submitted within 30days after planting.
- A map giving clear instruction on how to reach the farm as well as the location of the field unit within the farm must be drawn overleaf.

1. Full name of Applicant: Address:..... Telephone:.....

2. Name of Contract grower (if any)*:..... Address: Telephone:

3. Person to be contacted for field inspection..... Address..... Telephone.....

4. Location of the field within the farm:

5. Location of the field within the farm.....

6. Details of crop to be produced/grown:

Crop	Variety	Class	Lot No. of Seeds used	Hectarage:	Source of Seeds use (Supplier/Seller)	Planting date

7. Estimated flowering/Tasselling date:

8. Quantity of Seeds Used: kgs No. of Containers:.....Weight of each container:kgs

9. Estimated date of Harvesting (Approximate):

10. Previous crops and varieties grown in this field for the last two growing seasons.....

* a separate application form should be filled for each contract grower.

Declaration I hereby declare that all information provided here is true to the best of my knowledge and belief and I shall always observe all conditions governing Seeds production as provided in the Seeds Act and Regulations.

Date:Signature of Applicant:

Designation:

FOR OFFICIAL USE ONLY

Date received:.....Appication No.....

Application accepted/rejected:

If rejected, state reasons for rejection:.....

Field Registration No:

Date: *Signature:*

Designation:.....