Grower's Certification

This is to certify that:

Name: _____ **Phone:** _____

Address: _____

Appeared before me this _____day of (month)_____, (year) _____, and affirms that he/she is a grower in _____County and producers the crops and has acreage as indicated below. Further that he/she intends to sell these products in a retail farmers' market or roadside stand. It is also affirmed that there is a suitable disposal site on this farm for unsold/unacceptable product, packaging, refuse, etc.

Affirmed_____, _____
(Producer) (Date)

Certified_____, _____
(County Extension Agent) _____ County (Date)

This Grower Certification will expire on December 31 of (year)_____.

Vegetables

Crop	Acreage (est.)
Asparagus	
Snap beans	
Lima Beans	
Beets	
Broccoli	
Cabbage	
Cantaloupe	
Collards	
Cucumber	
Eggplant	
Pepper	
Pumpkin	
Squash	
Sweet Potatoes	
Tomatoes	
Turnips	
Watermelons	
Other	

Fruits

Crop	Acreage (est.)
Apples	
Blueberries	
Peaches	
Pears	
Grapes	
Strawberries	
Pecans	
Other	

Category	Types
Crafts/Handmade Items	
Bedding Plants	
Flowers	
Other	

***To be completed each market season.**

03/2007