

# SEED POTATO CERTIFICATION APPLICATION

(Please use one copy attachment for each field)

2025



Alaska Division of Agriculture  
Attn: Mia Kirk  
1801 S. Margaret Drive, Ste 12  
Palmer, Alaska 99645  
Phone: 907-761-3866

**APPLICATION DEADLINE: 6/15/2025**  
(Must be received or postmarked by June 15, 2025)

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GROWER'S NAME: \_\_\_\_\_ FARM NAME & LOCATION: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_ EMAIL: \_\_\_\_\_

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Check type of inspection required:  Seed Potato Certification  Seed Potato (Home Use)  Greenhouse

Required documentation that must accompany application:

1. A field map with a planting diagram which clearly identifies field location, variety, generation planted and field dimensions.
2. Appropriate documentation for seed/plantlets purchased and to be entered into certification this year. Examples of this documentation is certification from an approved laboratory, Plant Health certificate, blue tag, or bulk certificate, etc.
3. If applicable, appropriate documentation for a protected variety.

Return completed form with required documentation to address above.

\*Please note - Fees will be calculated after application is filed and due by the storage inspection.

Fees are calculated as follows: \$35 for first acre, \$6/lot, \$25 per additional acre.

I have read the State of Alaska, Seed Potato Certification handbook and I hereby voluntarily apply for inspection and agree to abide by all the certification standards in Alaska. I agree to sell as certified seed potatoes only those which have met all the requirements of the Alaska Seed Potato Certification Program. Seed potatoes for Home Use cannot be sold as seed. I understand that inaccurate information may be cause to deny certification. I understand incomplete applications may be cause to reject applications. By applying for certification, I grant access to state inspectors or their designees to seed fields and seed storage facilities.

YES  NO I would like my farm to be included in the Certified Seed Potato Directory

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

