



# agriculture, forestry & fisheries

Department:  
Agriculture, Forestry and Fisheries  
REPUBLIC OF SOUTH AFRICA

## Registrar of Plant Improvement

Directorate Plant Production  
Private Bag X250  
Pretoria 0001

Tel. 012 319 6255/6034  
Fax. 012 319 6353

### APPLICATION FOR REGISTRATION OF PREMISES: NURSERY

[In terms of section 7 of the Plant Improvement Act, 1976 (Act 53 of 1976)]

**INSTRUCTIONS:** Please fill in the form in clear letters, e-mail to [LindaSN@daff.gov.za](mailto:LindaSN@daff.gov.za) and [JoanS@daff.gov.za](mailto:JoanS@daff.gov.za)

PARTICULARS OF APPLICANT		FOR OFFICE USE
Company name/Name of legal person	<input type="text"/>	Receipt Amount <input type="text"/>
Surname of natural person (owner)	<input type="text"/>	Receipt No. <input type="text"/>
Initials	<input type="text"/>	Receipt Date <input type="text"/>
Title	<input type="text"/>	
Postal address of applicant	<input type="text"/>	
	<input type="text"/>	
	Postal Code	<input type="text"/>

PARTICULARS OF PREMISES			
Name under which business is to be conducted		<input type="text"/>	
Physical address of premises			
<input type="text"/>			
<input type="text"/>			
Magisterial District	<input type="text"/>	Postal Code	<input type="text"/>
Province:	<input type="text"/>	Cellphone	<input type="text"/>
Telephone number	<input type="text"/>	Fax number	<input type="text"/>
E-mail	<input type="text"/>		

KIND OF BUSINESS	
<input type="checkbox"/> Premises where plants are grown and/or kept for sale: Nursery	
Name of person in charge of nursery	<input type="text"/>

Has another premises of your organisation which conducts a business under the same name, already been registered in terms of the Plant Improvement Act?  Yes  No

If "YES", please provide the following particulars:

a) DAFF Registration number of registered premises:

b) Name under which business is conducted on the registered premises:

I, .....  
hereby apply for the registration of the premises in respect of which particulars are specified and declare that, to the best of my knowledge, the information furnished in this application is correct and that no relevant information has been omitted.

Signed at (place) ..... on (date) .....

.....  
Signature of applicant

.....  
Capacity

**INDICATE KINDS OF PLANTS TO BE GROWN FOR SALE**

Kind		Kind		Kind	
Apple		Grape – table, dry		Orange	
Apricot		Grape - wine		Papaya	
Avocado		Hazelnut		Peach	
Almond		Kiwi fruit		Pear	
Brazil Nut		Kumquat		Pecan	
Cashew		Lemon		Pistachio	
Cherry		Lime		Plum	
Chestnut		Litchi		Pummelo	
Coffee		Macadamia		Quince	
Fig		Mandarin		Tangerine	
Granadilla		Mango		Tea	
Grapefruit		Nectarine		Trifoliate Orange	
Guava		Olive		Walnut	

**SKETCH/GOOGLE MAPS LOCATION OF PREMISES**  
in relation to the nearest town/city

Name of nursery .....

Name of person in charge .....