



**DEPARTMENT of AGRICULTURE
and NATURAL RESOURCES**

JOE FOSS BUILDING
523 E CAPITOL AVE
PIERRE SD 57501-3182
danr.sd.gov

**SEED PERMIT APPLICATION – 2026/2027
(SDCL 38-12A)**

Company Name (*Appears on Permit*)

Applicant

Mailing Address

City State Zip Code

Phone

Please be advised that under SDCL 38-12A, no person may sell, distribute, advertise, solicit orders for, offer for sale, expose for sale, or transport seed without first obtaining a permit to engage in the business from the Department of Agriculture and Natural Resources.

***To expedite registration, you may register online at:
<https://apps.sd.gov/doa/SEED/Login.aspx>***

Labeling/Local Full Address (If Different From Mailing Address)

County (*South Dakota county for physical address*)

Email Address

For the biennial period ending December 31, 2027

Check the most Appropriate Class

_____ **“SEEDSMAN,” \$500**, any person who purchases, conditions, labels or sells seed as a major part of his business;

_____ **“SEED PRODUCER,” \$75**, any person who labels and sells seed only of his own production (a permit is not required if seed is stored or delivered to a purchaser only on or from the farm or premises where grown or the production and sale of seed is not a primary endeavor and primary source of income to such persons – specific advertisement requirements apply to those exempted from a seed permit);

_____ **“SEED DEALER,” \$75**, any person who exposes seed for sale, maintains an unsold inventory and sells seed, or takes orders for seed for a “Seedsman” or “Seed Producer” but does not condition or label seed;

Upon acknowledgement of signature on this application, I agree to provide the Secretary of Agriculture and Natural Resources, during customary business hours, with a legible copy of any seed records, and access to premises where seed is sold, handled or stored. I declare and affirm under the penalties of perjury that this application has been examined by me, and to the best of my knowledge and belief, is in all things true and accurate.

Signature of Applicant

Title

Date

For Office Use Only:

Permit#: _____ - _____ Check #: _____ Receipt #: _____ Date: _____