

STATE OF WISCONSIN APPLICATION FOR PERMIT TO MOVE LIVE PLANT PESTS OR BIOLOGICAL CONTROL AGENTS

WISCONSINDEPARTMENTOFAGRICULTURE, TRADE AND CONSUMER PROTECTION DIVISION OF AGRICULTURAL RESOURCE MANAGEMENT

PLANT INDUSTRY BUREAU

2811AGRICULTUREDRIVE, P.O.BOX8911, MADISON,WI 53708-8911 Phone1-800-462-2803

PART II: DOCUMENTATION OF THE RELEASE OF BIOLOGICAL CONTROL AGENTS

PERMITTEE MUST COMPLETE THIS FORM AND SEND TO THE ADDRESS BELOW, EMAIL OR FAX TO (608) 224-4656 WITHIN 30 DAYS FOLLOWING THE RELEASE OF APPROVED BIOLOGICAL CONTROL AGENTS

NAME, TITLE, & ADDRESS OF APPLICANT

NAME: TITLE:

AGENCY/BUSINESS/ORGANIZATION:

ADDRESS:

CITY: STATE: ZIP CODE:

PHONE: EMAIL:

APPLICANTS MUST COMPLETE THIS FORM AND EMAIL OR SEND TO THE ADDRESS BELOW WITHIN 30 DAYS FOLLOWING THE RELEASE OF APPROVED BIOLOGICAL CONTROL AGENTS

WISCONSIN DEPARTMENT OF AGRICULTURE, TRADE & CONSUMER PROTECTION – ARM ATTN: CHRIS FOELKER, BIOCONTROL

2811 AGRICULTURE DR

PO BOX 8911

MADISON, WI 53708-8911

Christopher.Foelker@wisconsin.gov

(608) 224-4581

SITE	COUNTY & NEAREST TOWN	TOWNSHIP	GPS COORDINATES OR TRS	BIOCONTROL AGENT	RELEASE DATE	NUMBER RELEASED	SOURCE OF BIOCONTROL AGENT OR ORIGINAL COLLECTION SITE	ноѕт
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								

PERMITTEE MUST COMPLETE THIS FORM AND EMAIL, SEND TO THE ABOVE ADDRESS OR FAX TO (608) 224-4656 WITHIN 30 DAYS FOLLOWING THE RELEASE OF APPROVED BIOLOGICAL CONTROL AGENTS