



Canadian Food  
Inspection Agency

Agence canadienne  
d'inspection des aliments

Application for approval under Japanese beetle programs for Canadian Producers

### Compliance Agreement & Registration Application Form

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#### A. Contact Information

Production Facility (Nursery/Greenhouse) Name:

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Owner / Manager: \_\_\_\_\_  
*(name of person signing this agreement)*

Mailing Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email / Fax: \_\_\_\_\_

#### Contact information of the CFIA pest control manager and alternate

1) Primary Contact: \_\_\_\_\_

Position / Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

2) Alternate Contact: \_\_\_\_\_

Position / Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Participation in the Japanese beetle program(s) must be renewed as needed. The CFIA must receive a completed and signed application form from the facility by **April 1<sup>st</sup>** each year. Registration in the Japanese beetle program(s) and the Greenhouse Certification Program / Canadian Nursery Certification Program should be coordinated/combined.



**B. Japanese Beetle Pest Management Program Options**

Please select the Japanese Beetle Pest Management Program(s) for which you are applying and indicate (for each) whether this is your initial application or a renewal of an existing approval:

	<b>Initial</b>	<b>Renewal</b>
<b>Japanese Beetle Free Greenhouse/Screenhouse Program</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Japanese Beetle Greenhouse Plant Program</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Japanese Beetle Nursery Management Program</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Japanese Beetle Containerized Nursery Stock Program</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Japanese Beetle Sod and Turfgrass Program</b>	<input type="checkbox"/>	<input type="checkbox"/>

**C. Compliance Agreement Requirements for the Japanese Beetle Program(s):**

1. The facility agrees to comply with the specific program requirements associated with the selected Japanese beetle program(s), as described in directive D-96-15: Phytosanitary requirements to prevent the spread of Japanese beetle, *Popillia japonica*, in Canada and the United States.
2. The facility must maintain all documents, records and maps associated with the regulated commodities produced under the Japanese beetle program(s) for **five years**. Documents, records and maps must be made available to the CFIA upon request.
3. The facility will be inspected by the CFIA, at appropriate intervals. The facility agrees to cooperate with these audits.
4. The facility agrees to immediately suspend all shipments of regulated commodities to Category 1 and 2 provinces/states if notified by the CFIA that the facility is in non-compliance.
5. Approved facilities will be listed on the public CFIA website indicating the facility's status within the program(s). Should a facility be in non-compliance or suspended, the facility's name will be removed from the website and regulated plant material will not be permitted to be shipped to Category 1 and 2 provinces/states.



**D. Applicant's statement:**

I am the owner/manager and/or the legally authorized representative of the Production Facility.

I have read, understood and agree to comply with all the requirements outlined above and as set out in CFIA directive D-96-15: Phytosanitary requirements to prevent the spread of Japanese beetle, *Popillia japonica*, in Canada and the United States.

I understand that the information I provide on this document is collected by the Canadian Food Inspection Agency (CFIA) under the authority of the Plant Protection Act for the purpose of preventing the spread of Japanese beetle, *Popillia japonica*, in Canada and the United States. In relation to this, I understand/acknowledge that my personal information collected by the CFIA under Plant Protection Programs will be dealt with under the provisions of the Privacy Act and will be stored in Personal Information Bank CFIA IPP 155 and this information may be accessible or protected as required under the provisions of the Access to Information Act. I also acknowledge that this information will be retained for a period of 10 years in accordance with the Agency's retention and disposition policies.

\_\_\_\_\_  
*Applicant Signature*                      *Printed name*                      *Date*

**E. Approval Statement from the CFIA**  
*(to be completed by CFIA Regional Program Officer or Inspector)*

The above facility has been inspected and complies with all the requirements outlined in this agreement.

Date of inspection: \_\_\_\_\_

I hereby approve the above-mentioned establishment for participation in the following selected Japanese Beetle Program(s):

- Japanese Beetle Free Greenhouse/Screenhouse Program
- Japanese Beetle Greenhouse Plant Program
- Japanese Beetle Nursery Management Program
- Japanese Beetle Containerized Nursery Stock Program
- Japanese Beetle Sod and Turfgrass Program

\_\_\_\_\_  
*Signature*                      *Printed name*                      *Date*