



**OREGON  
DEPARTMENT OF  
AGRICULTURE**

*Protect. Promote. Prosper.*

### Christmas Tree Grower Application

Please allow 15 business days to process this application in full. This license will expire on June 30, following the date of issue. Fees are not prorated.

#### CONTACT INFORMATION

Legal Name (Owner): \_\_\_\_\_

Contact Name: \_\_\_\_\_

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

Phone number: \_\_\_\_\_ Cell number: \_\_\_\_\_ Fax number: \_\_\_\_\_

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

<p>Check license type:</p> <p><input type="checkbox"/> New License</p> <p><input type="checkbox"/> Renewal</p> <p>License number: AG-L_____</p>
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#### BUSINESS LOCATION INFORMATION

Business Name: \_\_\_\_\_

Location Address: \_\_\_\_\_  
\_\_\_\_\_

Phone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

#### CHRISTMAS TREE GROWER INFORMATION

Address of each separate plantation:

Species of trees grown at location:

- |          |       |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |
| 5. _____ | _____ |

**LICENSE FEE INFORMATION**

Your reported acreage of Christmas trees is subject to verification by Oregon Department of Agriculture. Minimum fee is \$73 and a maximum of \$5,000.

**Total # of Acres:** \_\_\_\_\_

<b>Acreage Used</b>	<b>Basic Charge</b>	<b>Acreage Assessment</b>	<b>Total Fee Due</b>
1 to 40	\$70.00 plus	\$3.00 per acre	\$ _____
41 to 100	\$190.00 plus	\$3.00 per acre over 40	\$ _____
101 to 200	\$370.00 plus	\$2.50 per acre over 100	\$ _____
200 or more	\$620.00 plus	\$2.00 per acre over 200	\$ _____

A fee calculator is available at: <https://oda.direct/ChristmasTreeFeeCalculator>

**PAYMENT METHOD**

**FOR CHECK OR MONEY ORDER, MAIL TO:**

Oregon Department of Agriculture  
P.O. Box 4395, Unit 17  
Portland, Oregon 97208-4395

**FOR CREDIT CARD CHARGE, MAIL OR FAX TO:**

Oregon Department of Agriculture  
635 Capitol Street NE  
Salem, Oregon 97301-2532  
Secure Fax: 503.986.4746

Make checks payable to Oregon Department of Agriculture. All dishonored checks or electronic payments will incur a \$25.00 administrative fee per ORS 30.701.

**For Visa, MasterCard, Discover, or American Express card charges, complete the following information:**

Name of cardholder: \_\_\_\_\_ Phone: \_\_\_\_\_

Address of cardholder: \_\_\_\_\_  
\_\_\_\_\_

Email or fax receipt available for credit card payments **ONLY**.

Print email address or fax number: \_\_\_\_\_

Signature: \_\_\_\_\_ Total Charges: \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_