

Can I collect and grow aquatic plants in my classroom?

The answer is **YES**, but these activities are regulated by the state and require a few permits (described below). **NOTE:** We recommend that you apply for the permits well in advance as it may take two to twelve weeks to receive them, depending on the backlog of requests received by the Department of Agriculture and Consumer Services (DOACS).



Native Aquatic Plants:

- To **grow** native aquatic plants, you must have a nursery registration or have your school registered through the **Florida FFA Association** www.flaffa.org. Both of these options involve a minor fee. The nursery registration application can be found online from the **Florida Department of Agriculture and Consumer Services**: <http://www.freshfromflorida.com/onestop/index.html>
- To **collect non-prohibited** aquatic plants from the wild, you need to apply for a **Permit to Collect Non-Prohibited Aquatic Plants**. This can be obtained by contacting the Florida Department of Agriculture and Consumer Services (DOACS) at (352) 372-3505. Detailed information about the collection site must also be included. **Look for the form at the bottom of this webpage:** <http://www.freshfromflorida.com/onestop/plt/plantinsp.html>
Remember: Always ask permission from the land owner to collect plants from private property

Non-native/prohibited plants (e.g., water hyacinth or alligator weed):

- For **possessing** these plants, you will **NOT** need the nursery registration or the Florida FFA association membership, as it is illegal to propagate these plants. Instead, you can obtain the **Application and Permit to Move Organisms Regulated by the State of Florida**. This will allow you to be issued a permit to possess these plants in a controlled environment for educational purposes. You may obtain this by contacting DOACS at (352) 372-3505 or apply online with form **DACS-08208**, located at the bottom of this web page:
<http://www.freshfromflorida.com/onestop/plt/entnempath.html>

IMPORTANT: Always dispose of non-native plants—and all of their parts—including seeds, stems, flowers, etc. in a responsible manner: sealed in a garbage bag and placed in the household garbage. If collecting native plants, be sure they are obtained with permission from the land owner. If you have questions, contact the folks at DOACS (352) 372-3505.



ANOTHER OPTION: The UF/IFAS Center for Aquatic and Invasive Plants has put together a Freshwater Artificial Plant Kit. This kit includes ten life-like artificial plants that are both native and non-native. Teachers may borrow this kit for up to 2 weeks to use in their classroom. This is a good way to familiarize students with some of the common aquatic species, look at plant structures, and compare and contrast characteristics among the plants. To obtain a loaner copy (or information on how to assemble one yourself), contact us at caip-education@ufl.edu or call 352.392.1799.





Florida Department of Agriculture and Consumer Services
Division of Plant Industry

**APPLICATION FOR PERMIT TO COLLECT
NON-PROHIBITED AQUATIC PLANTS**

PERMIT NO. _____

VALID UNTIL _____

**ADAM H. PUTNAM
COMMISSIONER**

Section 369.25(2), F.S., Rule Chapter 5B-64, F.A.C.

1911 S.W. 34th Street / P.O. Box 147100, Gainesville, FL 32614-7100 / (352) 372-3505 / Fax (352) 334-3816

THIS SECTION TO BE COMPLETED BY APPLICANT

Applicant Name _____

Business Name _____

Mailing Address _____

City _____ **State** _____ **Zip** _____ **County** _____

Nursery Registration Number _____ **Renewal of Permit? Yes or No (If yes, please indicate permit number)** _____

Telephone No. _____ **Fax No.** _____ **Email Address** _____

Species of Non-prohibited Aquatic Plants to be Collected or Harvested <i>(Attach additional pages as needed)</i>	Quantity	Sovereignty submerged lands <i>(Public)</i>	Non-Sovereignty submerged lands <i>(Private)</i>	Collection Site

Collection Site Description *(Provide directions, address, GPS, and map if necessary)*

Attach evidence of consent of use from landowner for collection on **non-sovereignty** submerged lands.

Land Owner _____

Mailing Address _____

City _____ State _____ Zip _____ County _____

Intended Use *(Be specific)*

I/We agree to comply with the safeguards printed on the reverse of this form, and understand that a permit may be subject to other conditions specified below.

Signature of Applicant _____ Date _____

THIS SECTION TO BE COMPLETED BY STATE OFFICIAL

Botany _____ Approved _____ Disapproved _____

Status _____ Approved _____ Disapproved _____

Signature _____

Title _____

Date _____

Conditions

Under authority of Chapter 369.25(2), F.S, and Rule-Chapter 5B-64, F.A.C., permission is hereby granted to the applicant named above to move the non-prohibited aquatic plants described, subject to the conditions stated on, or attached to, this application. This permit is not valid unless signed by an official authorized representative of the department. Failure to comply with stipulations of this agreement may result in penalties as stipulated in Rule-Chapter 5B-64, F.A.C., and Section 581.211, F.S.

STANDARDS, CONDITIONS AND SAFEGUARDS OF PERMIT

Application for collection of non-prohibited aquatic plants from **non-sovereignty** submerged lands must provide all additional information listed below:

1. A written plan which will provide reasonable assurance that the removal of non-prohibited aquatic plants from the site will **not** result in the dissemination of any noxious or prohibited aquatic plants listed in Rule-Chapter 5B-64, F.A.C.
2. A description of the proposed collection site which shall state the location, the size and dimensions of the site and the size and location of plant communities within the site. Include additional documentation as needed to provide this information.

In addition to the requirements above, application for collection of non-prohibited aquatic plants from **sovereignty** submerged lands must also provide the additional information listed below:

3. A written plan which will provide reasonable assurance for the continued maintenance of self sustaining native aquatic plant populations within the site.

All applicants for a permit to collect non-prohibited aquatic plants must also be registered as a plant nursery prior to being approved.



Florida Department of Agriculture and Consumer Services
Division of Plant Industry

**APPLICATION AND PERMIT TO MOVE ORGANISMS
REGULATED BY THE STATE OF FLORIDA**

ADAM H. PUTNAM
COMMISSIONER

Section 581.083, 581.211, F.S.

1911 S.W. 34th Street/PO Box 147100, Gainesville, Florida 32614-7100
Phone: (352)372-3505 Fax: (352)334-0737

Page ___ of ___ **THIS SECTION TO BE COMPLETED BY STATE OFFICIAL**

Permit Number	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	Conditions
Valid Until	Signature _____	
	Title _____ Date _____	

THIS SECTION TO BE COMPLETED BY APPLICANT

1. Renewal of Permit? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate permit number	2. Name: _____ Title: _____ Physical Address: _____ 3. Mailing Address: _____
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4. Telephone No.: _____ 5. Fax No.: _____ 6. Email Address: _____

7. I/We agree to comply with the stipulations of this agreement, and understand that a permit may be subject to other conditions specified.
Signature of Applicant _____ Date _____

8. Type of Organisms to be Moved Arthropods Plant Pathogens Nematodes Noxious Weeds
 Genetically Altered Organisms Biological Control Agents Other (Specify): _____

Scientific Names of Organisms to be Moved	Classification (Order, Family, Other)	Life Stages	Number of Specimens	Shipped From	In U.S. Yes/No	Host Material Included	Approved (√)
9.					<input type="checkbox"/> <input type="checkbox"/>		
10.					<input type="checkbox"/> <input type="checkbox"/>		
11.					<input type="checkbox"/> <input type="checkbox"/>		
12.					<input type="checkbox"/> <input type="checkbox"/>		

➤ In addition to the above listed organisms, additional organisms to be moved are listed starting at Line # 35

13. Number of Shipments	14. Port of Arrival	15. Approximate Date of Arrival or Interstate Movement
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16. Destination/Location of Movement	17. Method of Shipment <input type="checkbox"/> Air <input type="checkbox"/> Air Freight <input type="checkbox"/> Auto <input type="checkbox"/> Baggage 18. <input type="checkbox"/> Other (Specify)
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19. Supplier No. 01 - Name & Address	20. Supplier No. 02 - Name & Address	21. Supplier No. 03 - Name & Address
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22. General Purpose of Request (Be specific)

23. Intended Use (Be specific)

24. Methods to be Used to Prevent Organisms Escape (Be specific)

25. Method of Final Disposition of Organisms and Host Material (Accompanying materials and containers? (Be specific))

Standards and Safe Guards of Permit: 1). All organisms must be shipped in sturdy, escape-proof containers. 2). Upon receipt, all packaging material and shipping containers shall be sterilized or destroyed immediately after removing organisms. 3). Organisms shall be kept only within the laboratory at the permittee's address. 4). No living organisms kept under this permit shall be removed from confined area except by prior approval from this office. 5). Without prior notice and during reasonable hours, authorized State Regulatory Officials shall be allowed to inspect the conditions under which the organisms are kept. 6). All organisms kept under this permit shall be destroyed at the completion of the intended use, and not later than the expiration date. 7). All necessary precautions must be taken to prevent escape. In the event of an escape, notify this office.

Under authority of Chapter 581.083, Florida Statutes (FS), and Rule Chapter 5B-57, Florida Administrative Code (FAC), permission is hereby granted to the applicant named above to move the organisms described, except as deleted, subject to the conditions stated on, or attached to, this application. This permit not valid unless signed by an official authorized representative of the department. Failure to comply with stipulations of this agreement may result in penalties as stipulated in Rule 5B-57.0010, FAC, and Section 581.211, FS.

Florida Department of Agriculture and Consumer Services
Division of Plant Industry

**APPLICATION AND PERMIT TO MOVE ORGANISMS
REGULATED BY THE STATE OF FLORIDA**

Page ____ of ____	Permit Number _____
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26. Plant Pathogens or Nematodes – Indicate Why Indigenous Pathogens or Nematodes, If Present and/or Available, Would Not Serve the Purposes of the Investigation								
27. Plant Pathogens or Nematodes – What Are the Benefits of the Introduction?								
28. Plant Pathogens or Nematodes – What Are the Risks of the Introduction?								
29. Plant Pathogens or Nematodes – Please Provide Pertinent Literature References or Reprints								
30. List all personnel who will be involved with the project at this location. The individual listed on page 1, in item number 2 is responsible for the individual(s) listed below to be in compliance with this permit								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Project Assistant No. 01</td> <td style="width: 25%;">Project Assistant No. 02</td> <td style="width: 25%;">Project Assistant No. 03</td> <td style="width: 25%;">Project Assistant No. 04</td> </tr> <tr> <td>Project Assistant No. 05</td> <td>Project Assistant No. 06</td> <td>Project Assistant No. 07</td> <td>Project Assistant No. 08</td> </tr> </table>	Project Assistant No. 01	Project Assistant No. 02	Project Assistant No. 03	Project Assistant No. 04	Project Assistant No. 05	Project Assistant No. 06	Project Assistant No. 07	Project Assistant No. 08
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Project Assistant No. 05	Project Assistant No. 06	Project Assistant No. 07	Project Assistant No. 08					
31. Indicate Location of Work, and Briefly Describe the Test Facility and Methodology to be Used								
32. Indicate Sanitation Procedures to be Used to Contain Pathogen in the Test Area, and Security Measures to Prohibit Unauthorized Access to Pathogen to Test Site								
33. Time Required for Completion of Project								
34. Will the organism be retained? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Where and Why?								

➤ Additional Organisms To Be Moved Continued From Line # 12

Scientific Names of Organisms to be Moved	Classification (Order, Family, Other)	Life Stages	Number of Specimens	Shipped From	In U.S. Yes / No	Host Material Included	Approved (√)
35.					<input type="checkbox"/> <input type="checkbox"/>		
36.					<input type="checkbox"/> <input type="checkbox"/>		
37.					<input type="checkbox"/> <input type="checkbox"/>		
38.					<input type="checkbox"/> <input type="checkbox"/>		
39.					<input type="checkbox"/> <input type="checkbox"/>		
40.					<input type="checkbox"/> <input type="checkbox"/>		
41.					<input type="checkbox"/> <input type="checkbox"/>		
42.					<input type="checkbox"/> <input type="checkbox"/>		
43.					<input type="checkbox"/> <input type="checkbox"/>		
44.					<input type="checkbox"/> <input type="checkbox"/>		
45.					<input type="checkbox"/> <input type="checkbox"/>		
46.					<input type="checkbox"/> <input type="checkbox"/>		
47.					<input type="checkbox"/> <input type="checkbox"/>		
48.					<input type="checkbox"/> <input type="checkbox"/>		
49.					<input type="checkbox"/> <input type="checkbox"/>		
50.					<input type="checkbox"/> <input type="checkbox"/>		
51.					<input type="checkbox"/> <input type="checkbox"/>		
52.					<input type="checkbox"/> <input type="checkbox"/>		
53.					<input type="checkbox"/> <input type="checkbox"/>		
54.					<input type="checkbox"/> <input type="checkbox"/>		

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