



# CONNECTICUT DEPARTMENT OF AGRICULTURE

450 Columbus Blvd, Suite 703 | Hartford, Connecticut 06103 | 860.713.2500

Bureau of Agricultural Development & Resource Conservation

An Equal Opportunity Employer



ctgrown.gov

## 2025 SPECIALTY CROP PLAN

Date Completed: \_\_\_\_\_ Contact Name \_\_\_\_\_

Farm Name \_\_\_\_\_

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

Town \_\_\_\_\_ Zip \_\_\_\_\_

Farm Address \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ (home/work) \_\_\_\_\_ (cell) \_\_\_\_\_

Email Address: \_\_\_\_\_ Website Address: \_\_\_\_\_

Cultivated Acres Owned \_\_\_\_\_ Cultivated Acres Leased \_\_\_\_\_ Total Acres Cultivated \_\_\_\_\_

List the farmers' markets you will be participating in or have applied to participate in (as both a full-time and/or part-time vendor). Attach a separate page if necessary.

- |    |     |
|----|-----|
| 1. | 2.  |
| 3. | 4.  |
| 5. | 6.  |
| 7. | 8.  |
| 9. | 10. |

I attest that this crop plan is truthful and an accurate representation of my farm's production area. I understand it is my responsibility to maintain an updated crop plan with the Connecticut Department of Agriculture and provide a copy to each farmers' market my farm participates in. I understand a current crop plan is required for valid participation in the Farmers' Market Nutrition Program and certified farmers' markets. Failure to maintain a current crop plan may result in dismissal from the program. I understand any Connecticut Grown farm products (as defined by CGS Sec. 22-6r (7)) not grown by myself and brought to a certified Connecticut farmers' market shall be labeled accordingly per CGS Sec 22-38.

Farmer Signature

Date

By affixing my signature to this statement (General Statutes of Connecticut, Vol 13, Sec 53a – 157b under penalty of false statement(\*) in the second degree: Class A misdemeanor), I acknowledge that I have read and completed this document and/or someone has read it and completed it for me and it is true to the best of my knowledge and belief.

(\*)Sec. 53a-157b. (Formerly Sec. 53a-157). False statement in the second degree: Class A misdemeanor. (a) A person is guilty of false statement in the second degree when he intentionally makes a false statement under oath or pursuant to a form bearing notice, authorized by law, to the effect that false statements made therein are punishable, which he does not believe to be true and which statement is intended to mislead a public servant in the performance of his official function.

**For each product grown or produced on your farm, enter the total quantity of all varieties. An additional sheet can be attached if necessary. This can be updated throughout the growing season.**

<b>LIVESTOCK, POULTRY, &amp; EGGS</b>	<b>Number of Head</b>
Cattle - Dairy	
Cattle - Beef	
Cattle - Veal	
Sheep - Lamb	
Sheep - Ewes	
Pigs - Feeder	
Pigs - Market Hogs	
Pigs - Boars	
Pigs - Sow	
Chicken - Broilers	
Chicken - Layers	
Chicken - Spent Hens	
Eggs - Dozens per Week	
Turkeys - Toms	
Turkey - Hens	
USDA or Custom Slaughter:	
Slaughter & Processing Location(s):	
<b>HONEY &amp; MAPLE SYRUP</b>	
Honey - Number of Hives	
Honey - Pounds/Year	
Maple Syrup - # of Taps	
Maple Syrup - Gallons/Year	
<b>BAKERY ITEMS PRODUCED ON-FARM</b> (Provide the name of the item. Bakery items produced by non-farmers should go in the non-ag products section above.)	
Bakery License Number:	

<b>Non Agricultural Products Sold at Farmers' Markets</b>	<b>Quantity (if applicable)</b>
List Numbers of Applicable Licenses and Permits:	

<b>PLANTS &amp; CUT FLOWERS</b>	<b>Flats</b>	<b>Containers/ Ball Burlap</b>	<b>Hangers</b>	<b>Total Greenhouse Sq Ft</b>
Annuals				
Perennials				
Vegetable plants				
Nursery				
Cut Flowers	Acres:			
Pesticide Applicators License Number (if applicable):				
<i>A list of plant varieties must be provided. Attached additional sheet(s).</i>				
<b>SEAFOOD</b>		<b>Pounds/Year</b>		<b>Total Acres</b>
Oysters				
Hard Clams				
Fin Fish				
Seaweed/Kelp: # of long lines & length:				
List Numbers of Applicable Licenses and Permits:				
<b>DAIRY PRODUCTS</b>		<b>Varieties offered (flavors, types, etc.)</b>		
Yogurt				
Ice Cream				
Butter				
Milk				
Cheese				
List Numbers of Applicable Licenses and Permits:				
<b>SOAP/LOTIONS/BATH GOODS PRODUCED ON-FARM</b> (Provide the name of the item. Items produced by non-farmers should go in the non-ag products section above.)				
List Numbers of Applicable Licenses and Permits:				
<b>OTHER AG PRODUCTS PRODUCED ON-FARM NOT LISTED</b>				
<b>OTHER VALUE-ADDED &amp; SPECIALTY FOOD PRODUCED ON-FARM</b> (Provide the name of the item. Items produced by non-farmers should go in the non-ag products section to the left.)				
Commercial Kitchen License or Cottage Foods Permit Number:				

**Keep a copy/picture** and send the completed form to market managers for each market attending AND the CT Department of Agriculture: 450 Columbus Blvd, Suite 703, Hartford, CT 06103.