

QHHEKCN'WUG'QPNL 0'

Check Number:

Date Rcvd

Bkgrd Chk:



NEW JERSEY
DEPARTMENT OF AGRICULTURE
HEMP PROGRAM
Division of Plant Industry

HEMP GROWER LICENSE APPLICATION

Anyone growing hemp in the State of New Jersey must successfully complete the full application process with the New Jersey Department of Agriculture (NJDA) and sign a *Grower Licensing Application* before taking possession of any viable hemp seeds/propagules or in-program harvested hemp materials.

Flt gevlpqu<'

Complete all parts of the following application and submit this application. The **&2'pqpt ghwpf cdrg''** **cr r dcvlp' hgg**, and all required attachments to **P gy 'Lgt ug{ 'F gr ct vo gpv'qh'Ci t lewvwt g.'J go r''** **Rt qi t co . 'RQ0Dqz '552.'Vt gpvqp.'P gy 'Lgt ug{ '2: 847**. Be sure to keep a copy of the full application for your records. Virtual submissions are encouraged to reduce the time for application review. Please Email applications to NJHemp@ag.nj.gov.

You will be required to have an NJSP Background check preformed prior to the submission of this application. You will attach a printout or a digital submission of the State Police Background Check to this application for review. NJSP backgrounds are valid for 2 years, to which it is the applicants responsibility to acquire an updated version.

Please scan a valid State Issued I.D. or Passport and attach to the application for the Department to review. Expired I.D.'s will not be accepted by the Department and will result in a rejection of the application. Key Participants will also require valid forms of I.D. for acceptance of an application.

Ensure that the applicant attaches a lease agreement for rented properties to this application prior to submission. Failure to submit a valid lease agreement will result in an immediate rejection of the application.

NJDA is not responsible for missing information due to formatting or printing errors by the applicant. All information submitted must be typed, accurate, and complete. Incomplete submissions may result in the application's removal from consideration; If any information herein is later determined by NJDA to be inaccurate, the application and Grower Licensing Agreement may be withheld or terminated.

Official Use Only:

License #: _____ Business/Client Name: _____ Date Approved: _____

K0 Crr rkecpv'kphqt o cvkqp

30:'''Ctg' qw'errr' lpi 'bu'e'dwulpgu'qt 'ep'lpf klf wcnA'

Ej genlQpg< Dwulpgu'Gpvlw' (Complete Part A in this table; skip Part B)

kpf klf wcn(Skip Part A; Complete Part B in this table, next page)

C0 Kf'errr' lpi 'bu'e'dwulpgu' 'eqo r'ngv'Ugevlqp'C. 's wgnkqu' C3 'd' C:

PQVG<For business application, the business MUST be an established legal entity, and a *Signing Authority for Business Entities* form must be attached to this application.

C30'Pco g'qhlDwulpgu'<'	Dwulpgu'v' r g'ex: LLC, C-Corp, Partnership, etc0-
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FDC'<'	GRP 'P wo dgt'<'
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C40'Kr'vj k'dwulpgu' t gi kwgt gf 'y kj 'vj g'Ucv'g'qhlP gy 'Lgt ug' A'	C70Pco g'qhlCrr rkecpv'<'
Yes No Not Applicable	''''''''Vkwg'qhlCrr rkecpv'<'Signing Authority'<'


C50O cklpi 'Cf f t gu'qhlDwulpgu'<'	C80'Rt ko ct { 'T gu'f gpvlcnCf f t gu'qhlCrr rkecpv'<'
	Elw' '' Ucv'g'' Zip

C60Rt lpekr criRj { ulceciCf f t gu'qhlDwulpgu'lp'P gy 'Lgt ug'<'	C90E qpwev'kphqt o cvkqp''
	G/o clktq Crr rkecpv<
	Dwulpgu' Rj qpg'<'
	Egni' Rj qpg'<'

C: 0'Nkr'CNN'Mg' { 'Rct vlekr cpw'y kj lp { qwt 'dwulpgu' ex: owns 20% of shares, CFO, etc.'<'

hRct vlekr cpv'3''		Rct vlekr cpv'5''	
Pco g'<'		Pco g'<'	
Vkwg'<'		Vkwg'<'	
Rj qpg'%'<'		Rj qpg'%'<'	
Go clk'<'		Go clk'<'	

Rct vlekr cpv'4''		Rct vlekr cpv'6''	
Pco g'<'		Pco g'<'	
Vkwg'<'		Vkwg'<'	
Rj qpg'%'<'		Rj qpg'%'<'	
Go clk'<'		Go clk'<'	

 **GRP 'P wo dgt'<**An employer identification number (EIN) is a nine-digit number assigned by the IRS. It's used to identify the tax accounts of employers and certain others who have no employees. EINs are used by employers, sole proprietors, corporations, partnerships, non-profit associations, trusts, estates of decedents, government agencies, certain individuals, and other business entities. **FDC** aka Doing Business As



D0Kl'crrn' lpi 'cu'lpf klf wcn'eqo r ngv'Ugevkpp'D.'s wgnkqpu'D3/'D4			
D30P co g'qh'lpf klf wcn'		GP 'qt'' UUR%	
D30O cklpi 'Cf f t gu'qh'Cr r ncepv<'		D50Rt lo ct { 'P gy 'Lgt ug{ 'Cf f t gu'Y j gt g'Cr r ncepv'Nkxgu' F w lpi 'I t qy lpi 'Ugcupp.'Hf Hhgt gpv'lt qo 'D5<'	
D40Rt lo ct { 'T guf gpvkn' Cf f t gu'qh'Cr r ncepv'		'D60E qpwev' kphqto c vkqp	
		Go cklqhl' Cr r ncepv<'	
		Egnl' Rj qpg<'	
		J qo g'' Rj qpg<'	

2) [qw'b c { 'e'wj qt k g'QP G'tgeqpf ct { 'eqpwev' gt uqp. 'tyj gt 'vj cp'vj g'er r ncepv.'vq'lpf 'epf 't gegkxg kphqto c vkqp't gcvgf 'vq' { qwt 'rt qr qugf 'rt ql gev0They will be able to send in reports and may receive all communications related to your project. They will not have the authority to add or remove registered sites or terminate a license. If you would like to add a secondary contact person, complete the table below.

Name:		Contact:	
	Email:	Phone #:	
Address:			
Street		State:	
City:		Zip:	

3) Rt qxlk g'e'flw'qh'cmkpf klf wcn'*qyj gt 'vj cp' { qwt ugnh: 'y j q'y knldg'rt lo ct kl' 't gur qpukdg' hqt 'vj g'l t qy lpi qt 'j cpf npi 'qh'vj g'er r ncepv'aj go r. 'kpenf lpi 'eqpv' cevqt u0List each person's name, city, state, phone number, and responsibilities associated with this project. Attach additional sheet(s) if necessary.

Name	City	State	Phone Number	Specific Responsibilities related to the proposed industrial hemp project



4) Indicate the proposed focus of your 2023 hemp project (check all that apply)

- Grain Floral Material (CBD, other phytocannabinoids, terpenoids, or any other extracts)
- Micro-greens Replication of seeds
- Fiber Replication of vegetative planting stock (i.e., production of transplants)
- Other:

7+ Explain your planned source of seeds and/or propagules by indicating the source in the table below. Identifying and purchasing seed and/or planting stock is the responsibility of the participant, not NJDA.

	Uggf IRcpv\pi 'UqemUqwt eg'' *Ego rcp{ 'Pco g.'Xctlgv{ '+'	Elw{.'Ucvg''	Eqwpt{ ''	V{ r g'qhlO cvgt kcn' (seeds or transplants)
3+''				
4+''				
5+''				

8+ Tgcf 'gcej 'lucvgo gpv\lgny 'cpf 'lpklcn\j g'dqz 'pgzV\q'vj g'lucvgo gpv\q'lpf kcvg'{ qwt Wpf gt uc pf lpi 0

There is a \$300 plus \$15/acre license fee. Which includes the total of both outdoor and indoor acres per establishment. Any additions or changes to the GPS coordinates listed for growing locations after signing a Grower Licensing Agreement will require the participant to pay a \$300 plus \$15 per acre Site Modification Surcharge (SMS) fee per addition or change to each GPS coordinate.

PQVG <This SMS is NOT per address like the participation fee; it is assessed per GPS coordinate whether it is on an already approved address or a new address.

Locations must be approved and included in your *Grower Licensing Agreement* with NJDA prior to the planting, handling, or storage of any industrial hemp at that location.

You are required to provide precise GPS coordinates in DEGREES DECIMAL MINUTES for each field/plot, greenhouse, indoor growing location, building, and storage at each address.

Gzco rig: lat: 38° 9.919'N, long: 84° 49.267'W

You are required to provide a map of each address with the application. (For complete instructions, see page viii-x, *Instructions for Creating Maps for Submission with the Application*, in the application packet.)

The following Land Use Restrictions apply to all approved Grower Licenses. By checking the box next to each statement, you are agreeing to NOT propose any sites that would be in contradiction to the restrictions:

I will not grow cannabis that is not hemp (cannot have a decarboxylated delta-9-tetrahydrocannabinol concentration of more than 0.3%).

I will not grow, handle, or store hemp on any land which is not owned or leased and completely controlled by the license holder.

I will not grow, handle, or store hemp on land owned by or leased from any person who was terminated or denied admission to the program.



9+ Y j cv'ku{ qwt 'lpvgpf gf 'b ctngv'pi 'r'np'ht 'vj g'et qr ADg'twt g'vq'ur gell'ecnf 'lpf kec v'vj g'pco g'qil'cp{ r t qeguut *u+'{ qw'ctg'y qt n'pi 'y kj 0

PQVG'3<Participants are not obligated by NJDA to remain with a single processor; however, NJDA does not become involved in any contract negotiations or disputes

PQVG'4<'All New Jersey processors and wholesale buyers of in-program materials are required buyers of in-program materials are required to be to be licensed in the NJDA Hemp Program

8) Do you have a valid license with the CRC (*Cannabis Regulatory Commission*) to legally cultivate or manufacture Cannabis that would test above 0.3% Total THC?

Yes No If yes, please fill out the following:

NOTE 1: Dual License are allowed within our program. Ensure that no cannabis is grown in registered hemp sites. Cannabis plants grown in registered sites will be warranted for destruction and culpable violations may occur.

NOTE 2: Equipment meant to process hemp post-harvest **MUST** be only used for hemp, as cross-contamination is possible.

a) Please indicate which class of license you have:

Class 1 Cultivator	Class 4 Distributor	Conditional
Class 2 Manufacturer	Class 5 Retailer	Date of Conditional: _____
Class 3 Wholesaler	Class 6 Delivery	

b) Fill out the following table:

Applicant ID	Applicant Business Name	Business Category

c) Will cannabis be cultivated on the same property as your proposed hemp project?

Yes No



9+ Rt qxl f g'c 'huv'qhl'c mihqec v kpu't gs wguvf 'hqt 't gi km c v kpp'd{ 'eqo r ngvpi 'vj g'vcdrgu'dgnw<

c+FIELD / OUTDOOR LOCATIONS

10 Kpf kecvg'vqvcntc et gu't rppgf 'hqt 'ewnkxcvkpp'cu'f gpvllgf 'lp'vj g'vcdrgu'dgnvy "(Department Policy- 1 Acre Active Growing per Address)<

Acres: 'aaaaaaa'

10 Gpvgt 'lphqt o c vkpp'hqt 't gs wguvf 'HKGNF' i t qy lpi mqc v kpu'lp'vj g'vcdrgu'dgnvy 0

NOTE: There is a \$300 plus a \$15/acre fee.
NOTE: Acre fee rounded up to nearest whole (Ex: 1.39 acres = 1 acre; 1.81 acres = 2 acres)

10 Cwcej 'b cru'qhl'gcej 'c'f f t gu including all required map information outlined in the *Instructions for Creating Maps for Submission* (found in the application instruction materials).

10 Site ID is a unique identifier made by the grower for the New Jersey Hemp Program.

- ex: Field-1, F-25

x0 Nku/CNN'cr r dcedig'HUC Field and Tract numbers 'kmgf 'y kj lp' { qwt 'registered locations Failure to do so will result in an incomplete application.

d+GREENHOUSE / INDOOR GROWING LOCATIONS

10 Kpf kecvg'vqvcnts wct g'lgv't rppgf 'hqt 'lpf qqt 'i t qy lpi 'cu'lpf kecvgf 'lp'vj g'vcdrgu'dgnvy (Department Policy- 0.25 Acres per address)<

Square Feet: 'aaaaaaaaaa'

10 Kpf kecvg'v r g'qhl' t ggpj qwug r t qf wevkpp 'ej genlqt 'ekt eng'cmlv c v cr r d <

Transplants only (either seeded or vegetative cuttings), or seasonal stock plants
Stock plants, year round
Year-round production with intent to harvest

10 Gpvgt 't gs wguvf 'I t ggpj qwug'lpf qqt 'I t qy lpi 'Nqec v kpu'lp'vj g'vcdrgu'dgnvy 0

- NOTE 1: \$15/acre fee. Square Footage rounded to nearest whole acre.
- NOTE 2: [qw'O WUV'f genc't g'i t ggpj qwug' r t qf wevkpp 'v'q'igi cmf 'i t qy 'lp'c' i t ggpj qwug'qt 'lpf qqt 'int wevwt g; those approved growers who attempt to grow indoors without declaring such usage shall be considered to be growing at an unapproved location and may be subject to penalties.
- NOTE 3: Any container plants outside a registered growing structure are considered field production and MUST be registered.
- Cwcej 'b cru'qhl'gcej 'c'f f t gu including all required map information outlined in the *Instructions for Creating Maps for Submission* (found in the application instruction materials)

e+STORAGE LOCATIONS

10 Gpvgt 'lphqt o c vkpp'hqt 't gs wguvf 'j cpf dpi hwt ci g'hqec v kpu'lp'vj g'vcdrgu'dgnvy <
(b) NOTE 1: The \$300 plus \$15/acre fee does pqv'apply to storage only addresses for growers storing their own hemp.
(c) NOTE 2: Storage addresses must be listed in the below table even if listed in tables for part (a) or above, in order to provide GPS coordinates for the buildings.

10 Cwcej 'b cru'qhl'gcej 'c'f f t gu including all required map information outlined in the *Instructions for Creating Maps for Submission*, found in the application instruction materials.



Outdoor Location 1							
Address 1	Farm Address		City	State	Zip	County	Own or Rent
				NJ			
	FSA Farm #:			FSA Tract #:			
	Site ID	GPS: Latitude		GPS: Longitude		Acres	
Field 1							
Field 2							
Field 3							
Field 4							
Field 5							
Outdoor Location 2							
Address 2	Farm Address		City	State	Zip	County	Own or Rent
				NJ			
	FSA Farm #:			FSA Tract #:			
	Site ID	GPS: Latitude		GPS: Longitude		Acres	
Field 1							
Field 2							
Field 3							
Field 4							
Field 5							
Outdoor Location 3							
Address 3	Farm Address		City	State	Zip	County	Own or Rent
				NJ			
	FSA Farm #:			FSA Tract #:			
	Site ID	GPS: Latitude		GPS: Longitude		Acres	
Field 1							
Field 2							
Field 3							
Field 4							
Field 5							



Indoor Location 1						
Address 1	Greenhouse Address	City	State	Zip	County	Own or Rent
			NJ			
	FSA Farm #:			FSA Tract #:		
	Site ID	Type of Structure	GPS: Latitude	GPS: Longitude	Sq Ft	
Structure 1						
Structure 2						
Structure 3						
Structure 4						
Structure 5						
Indoor Location 2						
Address 2	Greenhouse Address	City	State	Zip	County	Own or Rent
			NJ			
	FSA Farm #:			FSA Tract #:		
	Site ID	Type of Structure	GPS: Latitude	GPS: Longitude	Sq Ft	
Structure 1						
Structure 2						
Structure 3						
Structure 4						
Structure 5						
Indoor Location 3						
Address 3	Greenhouse Address	City	State	Zip	County	Own or Rent
			NJ			
	FSA Farm #:			FSA Tract #:		
	Site ID	Type of Structure	GPS: Latitude	GPS: Longitude	Sq Ft	
Structure 1						
Structure 2						
Structure 3						
Structure 4						
Structure 5						



STORAGE 1						
Address 1	Storage Address	City	State	Zip	County	Own or Rent
			NJ			
	Site ID	GPS: Latitude	GPS: Longitude	Type of Structure	Purpose	
Structure 1						
Structure 2						
Structure 3						
Structure 4						
Structure 5						
STORAGE 2						
Address 2	Storage Address	City	State	Zip	County	Own or Rent
			NJ			
	Site ID	GPS: Latitude	GPS: Longitude	Type of Structure	Purpose	
Structure 1						
Structure 2						
Structure 3						
Structure 4						
Structure 5						
STORAGE 3						
Address 3	Storage Address	City	State	Zip	County	Own or Rent
			NJ			
	Site ID	GPS: Latitude	GPS: Longitude	Type of Structure	Purpose	
Structure 1						
Structure 2						
Structure 3						
Structure 4						
Structure 5						



10+ Kikp { qh { qwt 'iqecvkpu' t g'igcugf . 'r igcug' lpf kecvg' y j gvj gt { 'qw' j cxg' t wj qt k c vkqp 'lt qo ' vj g qy pgt ' emy lpi ' j go r ' vq' dg' ewnkxcvgf ' qp' vj g' r t qr gt v { 0' Lease Agreement with Notarized Letter of Support from Landlord Required.

Yes No Not Applicable

Kil [gu' eqo r rvg' vj g' tcdig' dngy ' hqt ' igcugf ' iqecvkpu' <

Leased Location Address	Name of Owner/Landlord	Phone Number of Owner/Landlord

31+ J cxg' { qw' bxt ' dggp' eqpxlevgf ' qh' t' hgnp { ' t gnc vkpi ' vq' t' eqpvt qngf ' t wduwpeg' wpf gt ' y kxj kp ' vj g' r u' vgp ' 32+ { gct uA

Yes No Kik [guo . ' r t qxl f g' f c vgu' t pf ' f gvc ku' t d qw' vj g' eqpxlevkp * u' vj cv' j cxg' qeewt t gf 0

NOTE: It is recommended that applicants submit a NJSP background check request at least two weeks prior to the application deadline. Background check instructions and the proper forms can be found in the application instructions.

F c vgu' t pf ' F gvc ku' t d qw' vj g' eqpxlevkp <

Cempqy rfi o gpw

T gcf ' gcej ' qh' vj g' t empqy rfi o gpv' t wcygo gpw' dngy ' t pf ' t j gend [guo' t' t' P qo' vq' lpf kecvg' { qwt ' wpf gt wcpf lpi ' ' t gcegr wpeg' qh' gcej ' t wcygo gpv' 0

32+ Ktempqy rfi o g' vj cv' b { ' t r r rdecvkqp . ' vj g' 72' p qpt ghwpf cdig' t r r rdecvkqp ' hgg . ' t pf ' t mlt wcej o gpw' b wu' dg t gegkxgf ' d { ' vj g' P L F C 0 G o c k i t w d o k u k a p u' y k n i p q' v' d g' t e e g r v g f ' d g e c w a g' t c { o g p w' h q t ' v j g' t r r r d e c v k q p ' t g x l g y ' ' r t q e g u 0 V j g' y t k s v g p' t g u r q p u g' u' p ' vj k i' t r r r d e c v k q p ' t p f ' t w c e j o g p w' t j q w f ' d g' vj g' t a r g' t q w t e g' q h' l p h q t o c v k q p ' ' w p f g t e q p u l f g t c v k q p ' h q t ' r q y p v k r i t c t v l e k r c v k q p ' l p ' vj g' P g y ' L g t u g { ' J g o r ' R t q i t c o 0

Yes No

33+ Ktempqy rfi o g' vj cv' P L F C' k i' p q v' d r i c v g f ' v q' t u n i h q m y / w r ' s w g u k a p u f w t l p i ' v j g' t r r r d e c v k q p ' t g x l g y ' ' r t q e g u 0 V j g' y t k s v g p' t g u r q p u g' u' p ' vj k i' t r r r d e c v k q p ' t p f ' t w c e j o g p w' t j q w f ' d g' vj g' t a r g' t q w t e g' q h' l p h q t o c v k q p ' ' w p f g t e q p u l f g t c v k q p ' h q t ' r q y p v k r i t c t v l e k r c v k q p ' l p ' vj g' P g y ' L g t u g { ' J g o r ' R t q i t c o 0

Yes No

34+ Ktempqy rfi o g' vj cv' vj k i' k i' t ' t g r g e v k x g' t t q e g u' t p f ' p q v' b x g t { ' t r r r d e c v k q p ' b c { ' d g' t r r t q x g f ' h q t ' r c t v l e k r c v k q p 0

Yes No

35+ Ktempqy rfi o g' vj cv' vj g' f g e f n p g' vq' t w d o k t' p' t r r g e n i vq' P L F C' l p' vj g' b x g p v' q h' t' f g p k e n k i' 42' f c { u' h q m y l p i t g e g r v' q h' l p q h' t e c v k q p ' q h' t' r r d e c v k q p ' f g p k e n i 0

Yes No



36+I acknowledge that the following fees will apply, in addition to the \$50 nonrefundable application fee, if my application is approved:

Yes No

- License Fee = \$300 plus \$15/acre, *submitted with completed application.*
- Secondary Pre-Harvest Sample Fee for additional site visits mandated by premature Harvest Reports, or Post-Harvest Retest Fee for THC compliance testing conducted by NJDA = \$150 per variety, location, instance, due within 30-days of invoice by NJDA.
- Site Modification Surcharge = \$300 plus \$15 per acre for each new growing site, due with submission of any *Site Modification Request*. A new growing site is defined as any GPS location not listed in the *Grower Licensing Application* (i.e., any change to or addition of GPS coordinates at an address on the License, or for the addition of a GPS coordinate not approved for the *License*). The Site Modification Surcharge does not apply to storage- only sites, but request and approval is still required.

17) Failure to pay the required fees, submit required notifications to NJDA Hemp Staff, or obtain any necessary written approvals in advance may result in appropriate action, including expulsion from the program and the destruction of hemp materials without compensation.

Yes No

18) I affirm that, if approved for participation, I will abide by all requirements of the New Jersey Department of Agriculture Hemp Program, including timely submission of reporting forms and required attachments. Forms for growers include those listed below.

- **Seed/Propagule Request** – due at growers request to begin planting for the season
- **Planting Report** – due **10 days after** planting
- **Sale/Transfer (Chain of Custody) Report** - due for movement of In Program hemp within 5 days
- **Harvest/Disposal Report** form – due at least **30 days prior** to harvest or destruction of a failed crop; triggers an inspection and THC sampling
- **Production Report** from- due by December 10th from all participants who planted hemp
Other forms as deemed necessary by NJDA for Program Administration

Yes No

19) I acknowledge that, upon request from NJDA Staff, New Jersey State Police, or other state or local law enforcement officers, licensees must immediately produce a copy of their *Inventory of Propagule* for inspection.

Yes No

20) I consent that, if approved for participation, NJDA Staff, New Jersey State Police, and other representatives of federal, state and local law enforcement agencies and drug suppression units may enter onto all premises where industrial hemp or other cannabis plants or materials are located, or licensed to be located. Refusal to grant entry or otherwise obstructing such site visits or inspections is a violation of the Hemp Program and may result in the suspension or revocation of my license.

Yes No

20) I agree that my registered sites shall only be used to grow or store hemp and shall not be used to grow unlicensed cannabis (cannot have a decarboxylated delta-9-tetrahydrocannabinol concentration of more than 0.3%).

Yes No

22) I consent to the confiscation or order for destruction of all hemp or other cannabis plants and materials found to be growing in unlicensed locations, and I waive any right to seek compensation for such plants.

Yes No

23) I acknowledge that all physical addresses and GPS coordinates of the location(s) to be used to grow, handle, or store industrial hemp must be submitted with this application. This application constitutes written consent by the applicant to allow NJDA representatives access to any location as deemed necessary by NJDA for evaluation and verification of compliance with the Program.

Yes No

24) I acknowledge that my name and all growing, handling, and storage locations will be conveyed to the New Jersey State Police (NJSP), the USDA and other law enforcement agencies.

Yes No

25) I acknowledge that I or an authorized representative of the operation who is knowledgeable about our hemp production activities shall be available on location by appointment for on-site visits by NJDA for the purpose of scheduled inspection or sampling.

Yes No

26) I affirm that, if I am granted a *Grower License*, I shall not allow other persons to grow under my license in lieu of their own application to the New Jersey Hemp Program.

Yes No

27) I accept the inherent risk associated with participation in the Hemp Program. I acknowledge that both personal and financial loss may be possible and agree that NJDA is not responsible for reimbursing or compensating any participant for any loss resulting from involvement with the Program.

Yes No

28) I acknowledge that grower applicants are required to apply on an annual basis, and all participants growers, processors and handlers – does not guarantee or imply automatic approval for future participation in the Program.

Yes No

29) I recognize that outside of the NJDA's Hemp Program it is illegal to grow, handle or process hemp materials in New Jersey. If my license is terminated or expires, I will not be allowed to possess hemp and will lawfully dispose of any remaining hemp prior to the date of expiration or termination of my license.

Yes No



Attachments

Check all attachments below that you are submitting with this application. In addition to those listed, attachments may include extended answers to any question in the application, a business plan, or other supporting documents. If the attachment is supplementary information to a question in this form, be sure to 1) include the question number on the document; and 2) start each new question attachment on a new page.

- REQUIRED: Application Fee: Check or Money Order for \$50 made payable to New Jersey Department of Agriculture.
- REQUIRED: Copy of Driver’s License for the applicant.
- REQUIRED: Copy of Background Check from NJSP for the applicant and, if applicable, key participants. NJDA must receive & approve background checks for the applicant and all key participants prior to issuing your license. You may not begin purchasing or growing hemp until you receive your license. Indicate date background check(s) requested: _____
- REQUIRED: Check or money order for \$300 plus \$15/acre made payable to the NJDA, *Separate check or money order from that issued for application fee.*
- REQUIRED: Farm, greenhouse/indoor growing structures, and handling/storage location maps (including applicant name, site address, location ID, Lot#, and GPS coordinates).
- REQUIRED: Letter of Intent from one or more processors, if not self-processing.
- REQUIRED (ONLY for Business Entities): *Signing Authority for Business Entities.*
- Other Attachment (describe): _____

Hemp Application Fee	
Grower Fee: <u> \$300.00 </u>	** Round to nearest <u>Acre</u>
Grower Application Fee: <u> \$50.00 </u>	Total Outdoor Acreage: _____
Acreage Fee: _____ (\$15.00 x Total Acreage)	Total Indoor Acreage: _____
Total Fee Due: _____	Total Acreage: _____

** The Department has a minimum requirement of 1 acre. Indoor grow is converted to acres from square feet when calculating costs. Minimum is the standard cost for any acreage under the requirements.

** Acreage fee is rounded up or down to the nearest whole. (Ex: 1.39 acres = 1 acre --> \$15.00; 1.81 acres = 2 acres --> \$30.00)





NEW JERSEY
DEPARTMENT OF AGRICULTURE
HEMP PROGRAM
Division of Plant Industry

I certify that all of the information contained in this application is true and accurate. I understand that if NJDA later determines any of this information to be inaccurate, the *Grower Licensing Agreement* may be withheld or terminated. I also agree to abide by all of the provisions of the New Jersey Hemp Program found in N.J.A.C. 2:25-1 et seq.

Signature of Applicant _____ Date _____

Printed Name _____ Title, if applicable _____

NJDA is not responsible for missing information due to formatting or printing errors on the user end.
NJDA is not responsible for applications lost in the mail or not received.
NJDA is not required to request additional information for clarity of the application.

Send attachments to:

New Jersey Department of Agriculture
Attn: Hemp Program
P.O. Box 330
Trenton, New Jersey 08625

For more information about the NJDA Hemp Program, please visit

https://www.state.nj.us/agriculture/divisions/pi/prog/nj_hemp.html



Joseph Atchinson III
Assistant Secretary



NEW JERSEY
DEPARTMENT OF AGRICULTURE
Division of Plant Industry

Division of Plant Industry

Hemp Program

P.O. Box 330

Trenton, NJ 08625

Phone: (609)406-6939

Fax: (609) 5406-6960

**Signing Authority for Business Entities (e.g.,
LLCs, Corporations, etc.)**

If completing this form electronically, navigate the form with the mouse or select the next field using the down arrow key.

Name of Business Entity	
Complete Business Street Address	
EIN Number	
Date of Last Annual Report	

	Printed Name	Title
Signing Authority*		

*must have an annual background check and copy of driver's license on file with NJDA prior to obtaining a license.

I certify that I have the authority to sign all documents submitted on the entity's behalf to NJDA. I also acknowledge that a change of authorization to sign documents requires written notice to NJDA. (Attach additional sheets if necessary)

I certify that this information is true and correct.

Signature

Printed Name

Title

Date

"Key participant" means a sole proprietor, a partner in partnership, or a person with executive managerial control in a corporation. A person with executive managerial control includes persons such as a chief executive officer, chief operating officer and chief financial officer. This definition does not include non-executive managers such as farm, field, or shift managers.

Key Participants of Business Entities:

Signature

Printed Name and Title

Signature

Printer Name and Title

Signature

Printer Name and Title

Signature

Printer Name and Title