



## 2018 INDUSTRIAL HEMP RESEARCH PILOT PROGRAM PERMIT RENEWAL

\* Before completing, please read the 2018 Industrial Hemp Research Pilot Program Parameters, available at: [www.agriculture.pa.gov/Plants\\_Land\\_Water/industrial\\_hemp](http://www.agriculture.pa.gov/Plants_Land_Water/industrial_hemp).

<b>1) CONTACT INFORMATION</b>				
Institution/Business Name:				
Project Director:				
Mailing Address:				
City:		State:		Zip:
Email Address:				
Phone Number:			Secondary Phone:	
<b>2) RESEARCH PROJECT CONTINUATION</b>		<input type="checkbox"/> 1 year <input type="checkbox"/> 2 years		
<b>3) TITLE OF LAST YEAR'S PROJECT</b>				
<b>4) Will the research objectives be the same as last years? If no, how will they be modified?</b>				
<b>5) Over the course of this past year, have you or anyone involved in this project, been convicted of a drug-related felony or misdemeanor?</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, provide dates and details about the conviction(s) that occurred.</i>		
<b>6) PERSONNEL INVOLVED IN THE CULTIVATION OF THE CROP</b> – For projects not involving an institution of higher education, individuals must be part of a legal partnership (LLC, corporation, etc.) with the project director. <i>May not include individuals who have had a felony drug conviction within the past 10 years. Attach additional sheet(s) if necessary. All personnel must complete an FBI background check.</i>				
NAME	ADDRESS	RESPONSIBILITIES	QUALIFICATIONS	
<b>7) GROWING LOCATIONS</b> - Growing sites must be in Pennsylvania, under ownership or control of project institution/business, project director or personnel listed above, and total acreage must be under 100 acres. List all addresses where hemp will be grown. Color-printed, aerial maps (with boundaries and GPS coordinates labelled) must be submitted by applicant for each location. Google maps are acceptable with details added. Fee for PDA site visits will be \$100/hour.				
ADDRESS	CITY	ACREAGE	COUNTY	OWNER
<b>8) STORAGE LOCATIONS</b> – Storage addresses must be in Pennsylvania. List all facility addresses where purchased hemp seed and harvested hemp materials or any products or substances produced will be stored. Color-printed, aerial maps (with boundaries and GPS coordinates labelled) must be submitted by applicant for each location. Google maps are acceptable with details added.				
ADDRESS	CITY	COUNTY	OWNER	

**9) HEMP PRODUCTS** - If your research project involves marketing of hemp products, what products do you anticipate developing?

HEMP PRODUCTS	ANTICIPATED VOLUME

**10) PROCESSING LOCATIONS** – Processors must be located in Pennsylvania. List all intended processing facility addresses. Color-printed, aerial maps (with boundaries and GPS coordinates labelled) must be submitted by applicant for each location. Google maps are acceptable with details added.

ADDRESS	CITY	COUNTY	OWNER

**ACKNOWLEDGEMENTS**

The Agricultural Act of 2014 (Farm Bill) states that “notwithstanding the Controlled Substance Act, an institution of higher education or a State department of agriculture may grow or cultivate industrial hemp (7 U.S.C. §5940 (regarding legitimacy of industrial hemp research)). **I hereby attest that this proposed research project does not involve any activity regulated under the Controlled Substances Act or any other federal law or regulation for which I do not possess legal authority from the appropriate federal agency with jurisdiction.**

Yes  No

I affirm that I am prepared to conduct a research project and comply with all other requirements of the Pennsylvania Department of Agriculture Industrial Hemp Research Pilot Program, including timely submission of reports and other required documents.

Yes  No

I acknowledge that there may be no follow-up questions during the application review process. The written responses on this application and attachments may be the sole source of information under consideration for potential participation in the PDA Industrial Hemp Research Pilot Program.  Yes  No

I acknowledge that this is a selective process and not every application may be approved for participation. I understand that PDA is not obligated to issue a permit to me. Furthermore, the decisions made by PDA are final.  Yes  No

I acknowledge that all physical addresses of the location(s) to be used to grow, process or store industrial hemp must be submitted with this application. This application constitutes written consent by the applicant to allow PDA personnel access to any research pilot locations as deemed necessary by PDA for evaluation, including verification of compliance and progress of research. Any changes to physical addresses used in the growing or processing or storage of hemp or substances made from hemp shall be approved in writing by PDA prior to that location being legally permitted for use in this project.  Yes  No

I affirm that all individuals listed in the application are part of a validly-formed legal entity (i.e., an LLC, corporation, etc.) with myself, the project director, and assume full liability and responsibility for their actions and violations.  Yes  No

I acknowledge that all plant material produced as part of this research project (includes seeds, leaves, stalks, flowers, etc.) that has not been processed must be rendered non-viable at the end of the growing season and that this will be confirmed by PDA inspectors and that follow up visits will continue for 3 years after the project has concluded.  Yes  No

I acknowledge that any finished products produced as part of this research project which are to be marketed, distributed or sold must comply with all laws, regulations and requirements of any governmental agency or other regulating authority.  Yes  No

I acknowledge that any research plots with THC levels over 0.3% will no longer be classified as Industrial Hemp. If THC levels are found to be greater than 0.3%, the material shall not move off site and cannot be utilized or employed in any way in the approved research project. If THC is between 0.3% and 1.0%, confirmatory testing or alternative destruction methods may be authorized, at PDA’s discretion. For any planting with THC levels over 1.0%, PDA will issue an order for the registrant to immediately destroy the plants and law enforcement will be notified and has the authority to pursue prosecution under any applicable laws.  Yes  No

**I hereby verify and affirm that all information contained in this application is true and accurate.**

**PRINTED FULL NAME:**

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**ATTACHMENTS:** Please list any attachments including: maps, FBI background check response (or receipt), extended answers to any questions in the above sections, a PDA food establishment registration or other supporting documents. If the attachment is supplementary information to a question on this form, be sure to include the question number on the document.

List of attachments:

**APPLICATIONS DUE: JANUARY 19, 2018 BY 4:00 PM.**  
**APPLICATION FEES: \$250 FOR UNCHANGED RENEWALS; \$500 FOR RENEWAL WITH CHANGES**  
**EMAIL, MAIL OR HAND CARRY COMPLETED APPLICATION, ATTACHMENTS AND CHECK/ MONEY ORDER (PAYABLE TO THE COMMONWEALTH OF PA) TO:**  
Cathy Thomas (E-mail: [caththomas@pa.gov](mailto:caththomas@pa.gov); FAX: 717-783-3275)  
PA Department of Agriculture - Bureau of Plant Industry, 2301 N. Cameron St, Harrisburg, PA 17110

## Seed Source Application

Indicate the source of certified seed you intend to purchase. If using multiple sources, provide information for each source. Attach additional sheet(s) if necessary. **THE FOLLOWING INFORMATION WILL BE USED TO APPLY FOR US DEA IMPORT PERMITS, SO ACCURACY IS VERY IMPORTANT.**

PDA, as the US DEA registered importer, will apply for the US DEA import permits. All ordering and payment for seed will be done by the researcher.

**ALL SEED MUST BE DELIVERED TO:** PA Department of Agriculture, 2301 North Cameron St, Harrisburg, PA 17110

SEED SOURCE # 1		
<i>Seed Company Name:</i>		
<i>Company street Address:</i>		
<i>City, Country and Postal Code:</i>		
<i>Seed Company Contact Name:</i>		
<i>Contact Email:</i>		
<i>Contact Phone:</i>		
<i>Foreign Port of Export:</i>		
<i>US Port of Entry:</i>		
<i>Brokerage Co./Contact Info.</i>		
<i>Seed Variety</i>	<i># of bags</i>	<i>Size of bags (in KG)</i>
1)		
2)		
3)		
4)		
SEED SOURCE # 2		
<i>Seed Company Name</i>		
<i>Company street Address:</i>		
<i>City, Country and Postal Code:</i>		
<i>Seed Company Contact Name:</i>		
<i>Contact Email:</i>		
<i>Contact Phone:</i>		
<i>Foreign Port of Export:</i>		
<i>US Port of Entry:</i>		
<i>Brokerage Co./Contact Info.</i>		
<i>Seed Variety</i>	<i># of bags</i>	<i>Size of bags (in KG)</i>
1)		
2)		
3)		
4)		
SEED SOURCE # 3		
<i>Seed Company Name</i>		
<i>Company street Address:</i>		
<i>City, Country and Postal Code:</i>		
<i>Seed Company Contact Name:</i>		
<i>Contact Email:</i>		
<i>Contact Phone:</i>		
<i>Foreign Port of Export:</i>		
<i>US Port of Entry:</i>		
<i>Brokerage Co./Contact Info.</i>		
<i>Seed Variety</i>	<i># of bags</i>	<i>Size of bags (in KG)</i>
1)		
2)		
3)		
4)		