

# 2020 PENNSYLVANIA HEMP PERMIT APPLICATION

**Before completing, please read Pennsylvania’s Hemp General Permit and the 2020 Application Instructions, both available at: [agriculture.pa.gov/hemp](http://agriculture.pa.gov/hemp). Incomplete or Illegible applications will be returned.**

1) CONTACT INFORMATION (NOTE: Information provided shall be made public.)		
Business Name:	EIN #:	
Applicant’s Name:	Previous Hemp Permit #:	
Mailing Address:		
City:	State:	Zip:
Email Address:		
Phone Number:	Secondary Phone:	

**2) DISCLOSURE OF CRIMINAL CONVICTIONS** Applicant is required to submit fingerprints to the FBI to obtain a criminal history check. Receipts from Identogo (**Service Code: 1KG8NN; Service Name: Hemp Grower**) for each applicant and key participant must be submitted as an attachment(s) to this application as proof the background check has been completed or scheduled. *[See 2020 Application Instructions for details on obtaining FBI Clearance.]* **A person with a felony drug conviction within the past 10 years may not grow or cultivate hemp and should not apply.**

If this application is for a business entity, a completed criminal history report must be provided for each key participant. Key participants are a person or persons who have a direct or indirect financial interest in the entity producing hemp, such as an owner or partner in a partnership. A key participant also includes persons in a corporate entity at executive levels including chief executive officer, chief operating officer and chief financial officer. This does not include other management positions like farm, field or shift managers.

FULL LEGAL NAMES (of Applicant and Key Participants)	TITLE	IDENTOGO SUBMISSION DATE

**3) GROWING OR PROCESSING LOCATION – A separate permit is needed for each growing or processing location, requiring a separate application and fee.** The site must be in Pennsylvania. List the address where hemp will be grown or processed. Include a single GPS point at the entrance to the location or main building at the location. A property map must be submitted as an attachment.

**NOTE:** If the property is leased, you must also attach a copy of the signed lease and an original signed agreement granting the Department access to the property for 3-years following the termination of this project. (The Access Agreement is available at [agriculture.pa.gov/hemp](http://agriculture.pa.gov/hemp).)

**PROPERTY INFORMATION – Is this a leased location? Check if yes.**

PROPERTY OWNER		COMPLETE ADDRESS	
MUNICIPALITY	COUNTY	GPS POINT (Use 39.12344, -76.54321 Format.)	

**FOR A GROWING LOCATION:** *Check all that apply.*

**REMINDER:** Acreage/sq. footage minimums, as mentioned in the 2020 Application Instructions, must be met.

<input type="checkbox"/> <b>OUTDOOR GROWING</b>	Total Tillable Acreage at this location?		Anticipated Acreage of hemp to be planted?	
<input type="checkbox"/> <b>INDOOR GROWING</b>	Total square footage at this location?		Anticipated Square footage of hemp to be planted?	
	Type of Structure?	<input type="checkbox"/> Greenhouse <input type="checkbox"/> High Tunnel <input type="checkbox"/> Barn <input type="checkbox"/> Industrial Building	Type of indoor growing?	<input type="checkbox"/> Nursery transplants <input type="checkbox"/> Stock plants (year-round) <input type="checkbox"/> Year-round production

<b>TYPE OF HEMP CROP TO BE CULTIVATED:</b> <i>Check all that apply.</i>				
<input type="checkbox"/> CBD/Extracts	<input type="checkbox"/> Fiber	<input type="checkbox"/> Grain	<input type="checkbox"/> Certified Seed*	<input type="checkbox"/> Seedlings/Clones for sale**
* Plants being grown for seed production require registration with PDA's certified seed program and meeting the requirements of the PA Seed Act. Enter your License Number.				
**A PDA nursery license is required for growing/selling nursery stock. Enter your Nursery License Number				

Are you growing under a contract with a processor/buyer for your crop?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, list the name of the company.	

**FOR A PROCESSING LOCATION:**

<b>TYPE OF HEMP PROCESSING TO OCCUR:</b> <i>Check all that apply.</i>				
<input type="checkbox"/> Drying	<input type="checkbox"/> Fiber Processing	<input type="checkbox"/> Grain Processing	<input type="checkbox"/> CBD/Extract Processing	<input type="checkbox"/> Seed Cleaning
<input type="checkbox"/> Other: <i>Please describe.</i>				

**4) VARIETIES OF HEMP TO BE PLANTED** – List the hemp varieties you are intending to grow and anticipated acreage/variety. List only true variety names; codes will not be accepted. (*Please consult the Prohibited Varieties and Varieties of Concern list available at [agriculture.pa.gov/hemp](http://agriculture.pa.gov/hemp) prior to making your selection.*)

**REMINDER:** Incomplete applications will not be processed.

FULL VARIETY NAME	SOURCE	AMOUNT OF SEED/ NURSERY STOCK TO BE PURCHASED	ANTICIPATED ACREAGE (OUTDOOR)	ANTICIPATED SQUARE FOOTAGE (INDOOR)

5) **STORAGE LOCATIONS** – List any facility addresses where purchased hemp seed and harvested hemp materials will be stored which are separate from Growing or Processing Locations. Include a single GPS point at the entrance to the location or main building at the storage location. (*TBD* can be used if the location is not known at this time, but must be provided to Hemp Program by 8/1/2019.)

COMPANY NAME/OWNER	COMPLETE ADDRESS	COUNTY	GPS POINT (Use 39.12344, -76.54321 Format.)

6) **ATTESTATIONS** – The following statements list requirements of the Pennsylvania Hemp General Permit. Applicants must read and check the boxes for each of the following attestation statements, indicating the applicant’s understanding and acceptance of each requirement. **REMINDER: Incomplete applications will not be processed.**

<input type="checkbox"/>	I attest that I have read Pennsylvania’s Hemp General Permit and agree to abide by the conditions and requirements of the General Permit to grow, cultivate or process hemp as defined in the General Permit.
<input type="checkbox"/>	I attest that the physical address of the location to be used to grow or process industrial hemp is listed on this application. Any changes to physical address used in the growing or processing of hemp will require a new application and permit approved in writing by PDA prior to that location being legally permitted for growing or processing hemp, and that the deadline for applying for a new permit is April 1, 2020.
<input type="checkbox"/>	I attest that the growing or processing location listed on this application is owned or completely controlled by this applicant and was not owned by, leased from, or previously submitted in a permit application by any person who is ineligible or was terminated, or denied admission to the program.
<input type="checkbox"/>	I attest that the use of the property and/or facility listed on this application shall meet and comply with any and all laws, regulations and requirements of any governmental agency or other regulating authority, including building, commercial, environmental, zoning and other regulated categories.
<input type="checkbox"/>	I attest that if growing hemp, all field or planting sites at this location meet the requirements of the General Permit and are not within 1,000 feet of a school or public recreational area; are not within 200 feet of a structure used as a residential dwelling; are not within 3 miles of State licensed Medical Marijuana growing facility; and are physically separated from other crops.
<input type="checkbox"/>	I attest that if growing hemp, the planting will meet or exceed the minimum planting and plant maintenance requirements for outdoor plantings of no less than ¼ acre and 300 plants and for indoor plantings no less than 2,000 square feet and 200 plants.
<input type="checkbox"/>	I attest, subject to the criminal penalties for unsworn falsifications to authorities, at 18 Pa. C.S.A. § 4904, that I will not utilize a key participant as part of the activities authorized under the General Permit issued thereunder that had a felony drug conviction in the past 10 years and I will immediately remove from the permitted activities any key participant accused of a drug related felony and notify the Department of this action during the term of this permit.
<input type="checkbox"/>	I attest that subject to the criminal penalties for unsworn falsification to authorities, at 18 Pa.C.S.A. § 4904, the plant materials used will be selected from apparently disease-free and pest-free sources.
<input type="checkbox"/>	I attest that in propagating, cultivating, harvesting, transporting and processing of hemp, all biosecurity safeguards will be utilized in order to assure isolation from the domestic environment outside of permitted locations.
<input type="checkbox"/>	I attest that this application constitutes written consent by the applicant to allow PDA personnel access to the hemp growing or processing location and any storage locations as deemed necessary by PDA for evaluation and testing.
<input type="checkbox"/>	I attest that any finished products produced as part of this project which are to be marketed and sold will comply with all laws, regulations and requirements of any governmental agency or other regulating authority.

<input type="checkbox"/>	I attest that if growing hemp, it is my responsibility to arrange and pay for sampling for THC and other required testing by a PDA approved agent to be conducted no more than 15 days prior to harvest, and if harvest is delayed for any reason beyond 15 days from the sampling date, the crop must be retested. The sampling agent will maintain custody of the collected samples and will ship them to a DEA-approved laboratory for testing.
<input type="checkbox"/>	I attest that if growing hemp, the sample must be collected by PDA personnel or a PDA approved sampling agent for THC or other required testing, shall consist of a single variety from a single field or identified lot, of female flowering structures (buds) from the terminal points of the plant and be selected using an approved statically accurate representation of the growing site.
<input type="checkbox"/>	I attest that if growing hemp, a separate sample must be collected and tested for each individual field, or lot, or variety of hemp planted at this permitted location.
<input type="checkbox"/>	I attest that is my responsibility to pay for THC and other testing that maybe required at a DEA approved laboratory utilizing the USDA approved method.
<input type="checkbox"/>	I attest that if growing hemp, harvested hemp materials must be kept separated from other harvested hemp materials from other fields, lots, or varieties and the storage location must have signage to assure identification of the material stored to that lot's laboratory test results.
<input type="checkbox"/>	I attest that if growing hemp, until an acceptable total THC test and letter of release from the Department is received, no hemp plants or plant parts may be moved from the growing location property. (Excludes seedlings.)
<input type="checkbox"/>	I attest that if growing hemp, any plantings with total THC levels over 0.3% will no longer be classified as Hemp. If THC levels are found to be greater than 0.3%, the material shall not move off site and products cannot enter the market.
<input type="checkbox"/>	I attest that testing resulting in total THC levels in excess of 0.3% will require destruction of the crop represented by the sample at the permit holder's expense, during normal business hours under the supervision of DEA, state or local police or authorized official.
<input type="checkbox"/>	I attest that if growing hemp, in order to transfer possession or ownership of any viable hemp plants or plant parts, I shall, before the transfer of possession or ownership, assure the person to whom the hemp will be transferred or sold has obtained the required permit and I shall maintain the required records of the transfer, sale or distribution.
<input type="checkbox"/>	I attest that if growing hemp, should I intend to stop growing or cultivating hemp I shall notify the Department and implement all measures ordered by the Department to destroy hemp plants covered by the permit.
<input type="checkbox"/>	I attest that if growing hemp, if I abandon, relinquish possession or ownership of, control over or responsibility for the hemp in a manner inconsistent with the provisions of the Act or General Permit, all plant material regulated by the permit shall be destroyed in a manner approved by the Department. I shall continue to be responsible for the hemp, the cost of destruction and eradication of the hemp and any plant material associated with the controlled plant. As the original permit holder, I shall continue to be subject to the penalties imposed under the Act and General Permit.
<input type="checkbox"/>	I attest that if growing hemp, there are reporting requirements attached to the permit and failing to submit the required reports in a timely manner may be considered a violation of the Act and the General Permit. The required reports are: <i>Planting</i> report due within 10 days following planting giving detailed information of the location, variety, and other planting information; Reporting planting information to USDA Farm Service Agency (FSA); <i>Failed Crop</i> Reporting for any plantings that not being maintained to maturity or falling below the minimum size requirements to be submitted within 5 days of the remaining crop being rendered useless; <i>Closing of Permit</i> , if no hemp is planted at the permitted site prior to July 31 <sup>st</sup> and <i>Harvest</i> reports to be submitted by November 15 <sup>th</sup> .
<input type="checkbox"/>	I attest that if processing hemp, I shall only accept hemp plants or plant parts from a permitted or licensed grower, which have been verified to have a total THC not above the 0.3% limit. Any attempts by a seller/distributor to sell to my business hemp material which does not meet these requirements shall be reported to the Department.
<input type="checkbox"/>	I attest that if processing hemp, I shall maintain records on all shipments of hemp received and the grower, thereof, as specified in the General Permit, and made available to the Department upon request.
<input type="checkbox"/>	I attest that if processing hemp, and I have product lines which include items made from hemp buds or flowers, or from whole plant extractions, that I shall conduct testing on the raw material received by my business in accordance to the requirements of the General Permit, and shall maintain records of this testing for three years which shall be made available to the department upon request.

<input type="checkbox"/>	I attest that if processing hemp, all hemp plant material shall be rendered non-viable in the processes used in my facility and documentation of such shall be maintained and made available to the Department upon request.
<input type="checkbox"/>	I attest that subject to the criminal penalties for unsworn falsification to authorities, at 18 Pa.C.S.A. § 4904, I will continue to comply with the permit requirements for the duration of time the hemp or hemp materials are in the permit holder's possession, including any regrowth of the hemp.

<b>I hereby verify and affirm that all information contained in this application is true and accurate and that I shall comply with all provisions of Pennsylvania's Hemp General Permit.</b>	
<b>PRINTED FULL NAME:</b>	<b>TITLE:</b>
<b>SIGNATURE:</b>	<b>DATE:</b>

<b>ATTACHMENTS:</b> Please list any attachments including: property map(s), IdentoGo (FBI background check) receipt, signed property lease, signed access agreement, extended answers to any questions in the above sections, 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: <b>1. Property map</b> <b>2. IdentoGo Receipts for _____</b> <b>3. If using leased property, a copy of the signed lease</b> <b>4. If using leased property, a signed PDA Access Agreement</b>

<b>APPLICATION FEE - \$150</b>	
<b>ONLINE SUBMISSION: <i>When available, and until April 1, 2020.</i></b> <b>UPLOAD COMPLETED APPLICATIONS AND ALL REQUIRED ATTACHMENTS AND PAY BY CREDIT CARD ONLINE AT:</b> <b>PA PLANTS - <a href="https://www.paplants.pa.gov/SecurityLogin.aspx">https://www.paplants.pa.gov/SecurityLogin.aspx</a>.</b> Instructions for Registration and submission can be found on the 2020 Application Instructions.	<b>MAILED SUBMISSION: <i>By April 1, 2020.</i></b> <b>MAIL COMPLETED APPLICATIONS, CHECK/MONEY ORDER (PAYABLE TO THE COMMONWEALTH OF PA) AND ALL REQUIRED ATTACHMENTS TO:</b> Bureau of Plant Industry Hemp Program PA Department of Agriculture 2301 N. Cameron St, Harrisburg, PA 17110