



## HEMP RESEARCH PERMIT APPLICATION & RENEWAL FORM

### RESEARCH APPLICATION DETAILS/INSTRUCTIONS -

Researchers are advised to read **Pennsylvania's Hemp General Permit Guidelines** before applying, available at: <http://agriculture.pa.gov/hemp>.

- **APPLICATION PERIOD:** Research applications/renewals for a year will be accepted beginning Oct 1 of the previous year, and will be accepted throughout the year.
- **WHO MAY APPLY:** Individuals conducting hemp growing and processing research under an institution of higher education or private agricultural research institution may apply.
- **CONDITIONS:** Any hemp produced under these permits shall not be used for commercial production or sales. All hemp must be destroyed/rendered unusable when research is completed, unless research involves genetic development which requires maintenance of seed, tissue culture or stock plants AND written approval is received from the Department. (*If crop will be used to produce a saleable product, then applicant must follow the same testing requirements as growing permittees.*)

#### 1) APPLICATION:

- Applications must be complete, or they will be returned without processing by the Department.
- New applicants must submit an FBI Background Check through IdentoGO Fingerprinting Service. Applicants or key participants cannot have a felony drug charge within the past 10 years.
  - Primary applicant and Key Participants (principle investigators, lead professor/instructor, co-directors of research) must all have an FBI background check. Key participants do NOT include other positions like farm managers, research assistants or students.
  - The only FBI background clearance reports accepted by the Department are provided directly to the department by IdentoGO. Use the following directions to register for an IdentoGO appointment:
    - Applicants must use the IdentoGO Fingerprint Service (managed by IDEMIA). Appointments can be scheduled at <https://uenroll.identogo.com> or by phone at 844-321-2101. A listing of IdentoGO service locations by zip code can be found at <https://uenroll.identogo.com/workflows/1KG8NN/locator/location>. Because of unpredictable wait times, it is highly recommended to schedule an appointment rather than walking in to service centers.
    - Registration will require the following service information unique for the Industrial Hemp Program (not to be used for other purposes):
      - Service Code: 1KG8NN
      - Service Name: Hemp Grower
  - Background checks which were done for other programs' requirements, such as a child abuse clearance, cannot be accepted. Background checks must be completed within 60 days of date of application submission.
  - You will not receive a report from IdentoGO; the results are transmitted directly online to only limited Hemp Program staff.
  - Background checks are good for 3 years. If the applicant or key participants completed a background check for a 2023 Hemp Permit, that background check will be good for the 2024 and 2025 permit applications.
- Mailing Address - Can be different than the growing location.
- Locations: A permit is needed for each property.
  - GPS Point should be taken at the entrance to the property or at the main building at the location. The decimal degree format for the GPS point must be used. Example: 40.1234567 -77.543321.
  - A photographic property map with grow sites or processing building outlined must be provided for all locations.
  - If the location is property owned by an institution of higher education:
    - An Access Agreement granting the Department access to the property must be signed by someone with oversight of the research farm/facility and attached to the application. The grant of access to the property shall be for at least 3-years following the termination of the permit. (A template is available on page 10 of this packet and also at <http://agriculture.pa.gov/hemp>.)
  - If the location is property owned by a private entity or institute:

1. An Access Agreement granting the Department access to the property must be signed by the property owner and attached to the application. The grant of access to the property shall be for at least 3-years following the termination of the permit. (A template is available on page 10 of this packet and also at <http://agriculture.pa.gov/hemp>.)
2. The institution must have a property lease agreement with the property owner for the location on which they plan to plant, cultivate, grow, harvest or process hemp. The lease agreement for the property shall be made part of and kept in the applicant's records. The applicant shall provide the Department access to the records for review or copying or both, upon request.

## 2) PERMIT RESPONSIBILITIES:

### a. PLANTING:

- i. There is no minimum size of planting required for research permits. (*Minimum sizes for plantings specified in the PA Hemp General Permit Guidelines are for standard growing permits.*)
- ii. Location restrictions specified in the PA Hemp General Permit Guidelines do apply to research permits. Applicants seeking an exemption to any of these requirements may submit an exemption form (available on pages 11 & 12 of this packet)
  1. Hemp may not be planted, grown, cultivated or propagated in or within 200 feet of any structure that is used for residential purposes, unless prior written approval is provided by the Department.
  2. Hemp may not be planted, grown, cultivated or propagated within 1,000 feet of a pre-kindergarten through 12th grade school property or a public recreational area, unless prior written approval is provided by the Department.
  3. Hemp shall be physically segregated from other crops unless prior written approval is provided by the Department.
  4. No hemp growing location found within 3 miles of a PA Department of Health Medical Marijuana Grower/Processor will be approved. Links to the Phase 1, 2 & 3 Grower/Processor Location listings can be found at <http://agriculture.pa.gov/hemp>.

### b. SAMPLING:

- i. Testing will not be required for varieties that are designated as fiber or seed varieties.
- ii. For CBD varieties, sampling is **to be conducted by researchers** according to the needs of their research, following PDA's approved sampling method. Records are to be maintained by researchers.

### c. CROP DESTRUCTION:

- i. Following the analysis required by the research, all hemp crops/material must be destroyed, unless research involves genetic development which requires maintenance of seed, tissue culture or stock plants AND written approval is received from the Department (form available on pages 11 & 12 of this packet). The following methods of on-property destruction may be used.
  1. Plowing utilizing curved plow blades. Plowing under using curved plow blades to assure the plow rotates subsoil to the surface and buries the hemp crop below.
  2. Mulching and Composting – Field crops shall be cut, mulched into fine pieces and blended with manure or other biomass material.
  3. Disking utilizing a disk that levels the hemp crop and cuts and rotates the hemp crop plant parts and materials into the subsoil.
  4. Utilize a Brush mower or Chopper – A commercial 6x6 pull behind mower, forage chopper or commercial lawn mower used to shred and mix thick vegetation.
  5. Deep burial through digging a trench in the fields and filling it with the cut and uprooted hemp plants along with the surface soil. Plants, soil and materials shall be buried at a depth of at least 12 inches.
  6. Where not forbidden by local or state ordinances or regulations, burning the hemp plant material by setting fire to the specific production fields, or plants piled on the specific production fields. All necessary safety precautions and permits for such an activity are the responsibility of the permittee.
  7. Other methods of rendering the hemp material un-usable must be verified as acceptable by the Hemp Program staff (email: [RA-AGPLHEMP@pa.gov](mailto:RA-AGPLHEMP@pa.gov); phone: 223-666-2561).

*\* Any hemp seeds produced by the non-compliant hemp shall either be left on the growing site, where any sprouted plants shall be controlled after spring germination, or rendered non-viable by burning, or other method approved in writing by the Department.*

# Hemp Research Permit Application

\* Application questions highlighted in blue are optional but recommended.

## 1) CONTACT INFORMATION

Institution Name:		EIN #:	
Contact's Name:		Previous Hemp Permit #s:	
Mailing Address:			
City:	State:	Zip:	County:
Email Address:			
Website: <i>(Please use full address. Ex. http://...html)</i>			
Phone Number:		Secondary Phone:	

Would you like your contact information (Phone, Email, Website) made available to suppliers, processors, and the public on the Department's Website?  No\*  Yes – Indicate which:  Phone  Email  Website

\* **PLEASE NOTE:** This contact information is public information and the Department is obligated to provide it should requests be received under Pennsylvania's Right to Know Law.

**2) BACKGROUND CHECK SUBMISSION/KEY PARTICIPANT INFORMATION** - New Applicants and key participants are required to submit fingerprints to the FBI to obtain a criminal history check within 60 days of submitting an application.\* Receipts from Identogo for each applicant and key participant must be submitted as attachments to this application, as proof the background check has been completed or scheduled. [See **RESEARCH APPLICATION DETAILS/ INSTRUCTIONS** section for details on obtaining FBI Clearance through Identogo.] **A person with a felony drug conviction within the past 10 years may not grow or cultivate hemp and should not apply.**

Key Participants (lead professor/instructor, co-director of research) must be listed, and a background check completed for each. Key participants do not include other positions like farm managers, research assistants or students.

\*Background checks are good for 3 years. If the applicant or key participants completed a background check for a 2020 Hemp Permit, that background check will be good for the 2021 and 2022 permit applications.

APPLICANT FULL LEGAL NAME	TITLE	IDENTOGO SUBMISSION DATE
FULL ADDRESS (Street Address, City, State, Zip)	PHONE	EMAIL

KEY PARTICIPANT FULL LEGAL NAME	TITLE	IDENTOGO SUBMISSION DATE
FULL ADDRESS (Street Address, City, State, Zip)	PHONE	EMAIL

KEY PARTICIPANT FULL LEGAL NAME	TITLE	IDENTOGO SUBMISSION DATE
FULL ADDRESS (Street Address, City, State, Zip)	PHONE	EMAIL

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KEY PARTICIPANT FULL LEGAL NAME	TITLE	IDENTOGO SUBMISSION DATE
FULL ADDRESS (Street Address, City, State, Zip)	PHONE	EMAIL

KEY PARTICIPANT FULL LEGAL NAME	TITLE	IDENTOGO SUBMISSION DATE
FULL ADDRESS (Street Address, City, State, Zip)	PHONE	EMAIL

3) **STORAGE LOCATIONS (OPTIONAL)** - If purchased hemp seed and/or harvested hemp materials [will be stored at a facility located on a property which is **different from the growing or processing locations** listed in Section 4 of this application, list the details below. 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 and can be added at a later time by submitting a permit change form, or by submitting online at PA Plants.)

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

**4) PERMIT LOCATION INFORMATION - PLEASE NOTE: Incomplete applications will not be processed.**

Complete these two pages for every location (i.e. deeded property) where you plan to grow or process hemp and submit each with the main application, along with permit fees\* for each location submitted.

**\* NEW PERMIT FEE: \$150; RENEWING PERMIT FEE: \$50**

- 1) Site must be in Pennsylvania.
- 2) The GPS point should be taken at the entrance to the property or at the main building at the location.
- 3) A photographic property map, with growing/processing sites & facilities outlined, must be submitted as an attachment.

**I. LOCATION INFORMATION**

<b>PROPERTY OWNER</b>		<b>COMPLETE ADDRESS (Street Address, City, State, Zip)</b>	
<b>MUNICIPALITY</b>	<b>COUNTY</b>	<b>GPS POINT (Use Decimal Format. Ex: 39.12344, -76.54321)</b>	

**DID YOU HAVE A 2020 PERMIT FOR THIS LOCATION?**     No     Yes - PREVIOUS PERMIT NUMBER: \_\_\_\_\_

**IS THIS A PROPERTY OWNED BY AN INSTITUTION OF HIGHER EDUCATION?**     No     Yes\*

**IS THIS A PROPERTY OWNED BY A PRIVATE ENTITY OR INSTITUTE?**     No     Yes\*\*

\* If the location is property owned by an institution of higher education:

- 1) An **Access Agreement** granting the Department access to the property must be signed by someone with oversight of the research farm/facility and attached to the application. The grant of access to the property must be for at least 3-years following the termination of the permit. (A template is available on page 10 of this packet and is also available at [agriculture.pa.gov/hemp](http://agriculture.pa.gov/hemp).)

\*\* If the location is property owned by a private entity or institute:

- 1) An **Access Agreement** granting the Department access to the property must be signed by the property owner and attached to the application. The grant of access to the property must be for at least 3-years following the termination of the permit. (A template is available on page 6 of this packet and is also available at [agriculture.pa.gov/hemp](http://agriculture.pa.gov/hemp).)
- 2) Applicants must have a property lease agreement with the property owner for the location on which they plan to plant, cultivate, grow, harvest or process hemp. The lease agreement for the property shall be made part of and kept in the applicant's records. The applicant shall provide the Department access to the records for review or copying or both, upon request.

**THIS LOCATION WILL BE USED FOR:**

**GROWING RESEARCH**     **PROCESSING RESEARCH**     **BOTH**

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

<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 RESEARCHED:</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*

**III. VARIETIES OF HEMP TO BE PLANTED** – List the hemp varieties you are intending to grow and anticipated acreage for each 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.)

*\* Growers may later indicate changes to these varieties on PDA Planting Report.*

FULL VARIETY NAME	SOURCE	AMOUNT OF SEED TO BE PLANTED	OR	AMOUNT OF NURSERY STOCK TO BE PLANTED (#)	ANTICIPATED ACREAGE (OUTDOOR)	ANTICIPATED SQUARE FOOTAGE (INDOOR)
		(INDICATE # OR LBS)				

**IV. FOR A PROCESSING RESEARCH 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>				

**REMINDER:** Those applying for multiple research locations must submit additional copies of **4) Permit Location Information** (Pages 5 & 6) and add additional permit fees to the check or money order made payable to the Commonwealth of PA. Failure to submit the additional information and fees will result in the Application being considered Incomplete and the application will not be processed. [See **PERMIT FEE WORKSHEET** on Application Page 9].

**5) ATTESTATIONS** – The following statements list requirements of the Pennsylvania Hemp General Permit. Applicants must read and check the boxes for **ALL** of the following attestation statements, indicating the applicant’s understanding and acceptance of each requirement. All of the following attestations are made under and subject to the criminal penalties for unsworn falsifications to authorities, at 18 Pa. C.S.A. § 4904. **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.
<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 growing permit is April 1.
<input type="checkbox"/>	I attest that the growing or processing location listed on this application is owned or completely controlled by this institution 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, orders, permit requirements and ordinances of any governmental agency or other regulating authority, including building, commercial, environmental, zoning and other regulated categories.
<input type="checkbox"/>	I attest that all field or planting sites at this location meet the requirements of the General Permit and are not within 1,000 feet of a Pre-K – 12 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, except where written approval has been granted by the Department.
<input type="checkbox"/>	I attest, that I have not had a felony drug conviction in the past 10 years, and that during the time period of the application, this permit and the General Permit, I will immediately report to the Department any key participant of the permit, including myself, that is convicted of a state or federal controlled-substance-related felony.
<input type="checkbox"/>	I attest that the plant materials used shall be selected from apparently disease-free and pest-free sources.
<input type="checkbox"/>	I attest that in growing, 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 to and understand 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 to and understand that it is my responsibility to assure that any activity conducted under this permit will comply with all laws, regulations, orders, permit requirements and ordinances of any governmental agency or other regulating authority.
<input type="checkbox"/>	I attest to and understand that it is my responsibility to pay for required testing of any hemp grown under this research permit, including THC testing of CBD hemp varieties as is required by the research being conducted and to keep records of all such testing, along with the other permit required records. All records shall be made available to PDA personnel upon request.
<input type="checkbox"/>	I attest to and understand all of the following: 1. That if growing hemp and testing the hemp lots for THC compliance under this research permit, the sample shall be collected by personnel that are part of and operating under the research permit. 2. Samples shall be collected using the PDA sampling protocol published to the PDA Hemp Program webpage and shall consist of female flowering structures (buds) from the terminal points of the plant. 3. Samples shall be submitted to a laboratory meeting the USDA requirements.
<input type="checkbox"/>	I attest to and understand that if conducting hemp growing or processing research under the hemp research permit, once the data collection has been completed on the growing or harvested hemp materials, all lots of hemp shall be destroyed, unless written approval is received from the Department. The destruction shall take place on the permitted premises and by using one of the approved methods of crop destruction set forth in the hemp research permit.

<input type="checkbox"/>	I attest to and understand that, as part of the requirements of growing hemp under this research permit, any plants, plantings or harvested hemp 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.
<input type="checkbox"/>	I attest to, understand and consent that test results evidencing total THC levels in excess of 0.3% will require and shall result in destruction of the crop represented by the sample. Such destruction shall be at the permit holder's expense, and records of this destruction must be included in required permit records. All records shall be made available to PDA personnel upon request.
<input type="checkbox"/>	I attest to and understand that if growing or processing hemp, should I intend to stop growing or processing hemp I shall notify the Department and implement all measures ordered by the Department to destroy hemp plants, plant parts and plant material covered by the permit.
<input type="checkbox"/>	I attest to and understand that if growing or processing 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 hemp plants, plant parts and plant material regulated by the General Permit or this permit shall be destroyed in a manner approved by the Department. I shall continue to be responsible for all hemp plants, plant parts and plant materials, the cost of destruction and eradication of the hemp plants, plant parts and any plant material associated with the controlled plant, and 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 to and understand 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 Report</i> 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>Crop Loss Report</i> for any plantings that are not being maintained to maturity to be submitted within 10 days of the remaining crop being rendered useless; <i>Inactive Permit Reporting</i> , if no hemp is planted at the permitted site by September 1 <sup>st</sup> ; and <i>Harvest Reports</i> to be submitted by November 15 <sup>th</sup> .
<input type="checkbox"/>	I attest to and understand that if conducting hemp processing research, I shall only accept hemp plants or plant parts from a permitted or licensed grower, whether in-state or out-of-state, which have been verified to have a total THC not above the 0.3% limit. Any attempts by a grower or processor to sell or distribute to my university, college, research establishment or business hemp plant parts or plant material which does not meet these requirements shall be reported to the Department.
<input type="checkbox"/>	I attest to and understand that if conducting hemp processing research, I shall maintain records on all shipments of hemp received and the name, address and permit number of the grower, thereof, as specified in the General Permit, and that I shall make such records available to the Department upon request.
<input type="checkbox"/>	I attest that if conducting hemp processing research, all hemp plant material and products produced as part of the research 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 and General Permit requirements for the duration of time the hemp plants, plant parts 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>



**ATTACHMENTS:** Please list any attachments including: property map(s), IdentoGO (FBI background check) receipt, signed property lease, signed PDA 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:

1. Property map

2. IdentoGO Receipts for \_\_\_\_\_

3. A signed Access Agreement

4. Request for Exception (if applicable)

**NEW PERMIT APPLICATION FEE - \$150; PERMIT RENEWAL FEE - \$50**

**PERMIT FEE WORKSHEET**

Number of Renewal Permit Locations: \_\_\_\_\_ x \$50.00 \_\_\_\_\_ = Renewal Fee Subtotal (A)

Number of New Permit Locations: \_\_\_\_\_ x \$150.00 \_\_\_\_\_ = New Permit Fee Subtotal (B)

A) Renewal Permit Fee Subtotal      \$

B) New Permit Fee Subtotal      +      \$

**Total Permit Fee Due**      =      \$

**MAILED SUBMISSION: Accepted beginning October 1.**

- **MAIL COMPLETED APPLICATIONS, CHECK/MONEY ORDER (PAYABLE TO THE COMMONWEALTH OF PA) AND ALL REQUIRED ATTACHMENTS TO:**

Bureau of Plant Industry Hemp Program  
PA Department of Agriculture  
2301 N. Cameron St, Harrisburg, PA 17110

**For questions regarding the application, contact the Department's  
Hemp Program: [RA-AGPLHEMP@pa.gov](mailto:RA-AGPLHEMP@pa.gov) or 223-666-2561.**

# ACCESS AGREEMENT

## FOR THE PENNSYLVANIA DEPARTMENT OF AGRICULTURE

Land leasing/rental agreement addendum.

I \_\_\_\_\_, owner/manager of the property located at \_\_\_\_\_  
*(Property owner/Manager full name)* *(Address)*  
\_\_\_\_\_, hereby grant employees of the Pennsylvania  
*(Address, cont.)*

Department of Agriculture (Department) access to this property, land and facilities during normal business hours to inspect for the presence of hemp plants or plant parts associated with the growth, cultivation, propagation or processing of hemp on lands, premises or facilities owned by me and rented or leased to \_\_\_\_\_  
*(Permit holder full name and address)*

holder of a Permit issued by the Department of Agriculture, for the growing, propagation and processing of Hemp.

The purpose of these inspections will be to determine the presence of any hemp plants or plant parts associated with the growth, cultivation, propagation or processing of hemp at this location. I understand that and hereby consent to the Department employees inspecting my property, land and facilities that are part of the lease or rental agreement and for a period of three (3) years following the termination of the use of these lands or facilities as a growing, cultivation, propagation or processing location for hemp.

I understand that any hemp plants found growing on the above-mentioned property following the end of the permitted project must be destroyed prior to flowering and hereby consent to such destruction. I am fully aware that allowing hemp plants to grow on or be processed in areas not covered by a current valid Permit issued by the Department of Agriculture is a violation of the Controlled Plants and Noxious Weeds Act (3 Pa. C.S.A. § 1501 et seq.) and subject me to the penalties allowed thereunder. I also understand that the cost of destruction of any hemp plants or plant parts found will be the responsibility and at the expense of the lease holder or the landowner/manager.

The terms of this lease or rental agreement addendum must be conveyed in any future leases or sales of this property, land or facilities thereon for a period of three (3) years from the termination of the permit issued by the Department of Agriculture allowing hemp to be grown, cultivated, propagated and processed at this location.

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
*(Signature of Land/Facility Owner/Manager)* *(Title)* *(Date)*

\_\_\_\_\_  
*(Printed Name of Land/Facility Owner/Manager)*

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
*(Signature of Land/Facility Leaser)* *(Title)* *(Date)*

\_\_\_\_\_  
*(Printed Name of Land/Facility Leaser)*

**Guidelines for Departmental approval of written requests for location exceptions:**

*(If requesting exemption, please submit a copy of this form as an attachment to your application.)*

NOTE: Any hemp produced under these permits shall not be used for commercial production or sales. All hemp must be destroyed/rendered unusable when research is completed unless written approval is received from the Department. For research which will require the maintenance of hemp material (i.e. cultures, mother plants, seeds, etc.) beyond a single growing season, applicant should explain the research and confirm that maintained hemp material will not be used for commercial production. For research involving soil remediation in an urban or suburban agriculture setting, applicant should review the below exception options and provide detailed justifications. It is recommended that applicants detail their plans to minimize potential odor nuisance and air quality issues if requesting an exemption to grow in or near a residential area or neighborhood.

Please check which exemption is requested and provide details:

- 1. Exceptions may be granted for research involving genetic development or other areas which require maintenance of hemp plant material (cultures, germ plasm, mother plants, etc.) beyond a single growing season. Please explain.

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- 2. Exception may be granted for a research planting near a residence, if within an area zoned agricultural, or if the area has a history of agricultural use. Example: An isolated farmstead may be within 200 ft of a field – an exception could be granted for growing hemp in that field.

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- 3. No exception will be made for a planting at a site within a neighborhood where multiple residences are within 200 feet of the planting unless there is a compelling agricultural/environmental reason for using that site. Example: If hemp is being used for soil remediation of a future or current urban agriculture site, an exception for an industrial or residential property may be granted.

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- 4. Exceptions may be granted for highly secured areas, such as indoor planting or processing facilities, if environmental controls are sufficient to prevent malodor or other conditions of concern to the community.

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