

3) Do you intend to plant additional hemp at this address this year? YES NO

If “Yes,” explain:

- 4) If you only planted a portion of the licensed field(s), attach an **updated version of the map** for this address. Include the following new information on the map.
- Circle only the area planted in each field.
 - If not planting in a licensed field location, mark an “X” through the field where hemp will NOT be planted. Also, remember to write the Location ID for this no-plant field in the table on Question (2) and the “No Planting” column.

By signing my name below, I attest that I am the license holder or a signing authority by the license holder to submit this form and that this information is accurate and complete.

Printed Name: _____

Signature: _____ Date: _____

➤ If this address also has greenhouse/indoor growing location, you must also submit a separate *Greenhouse/Indoor Planting Report* form.

Email to: Industrialhemp@agriculture.arkansas.gov

Mail to:
 ATTN: Caleb Allen
 ADA Industrial Hemp Program
 1 Natural Resources Dr.
 Little Rock, AR 72205