



2020 Hemp Grower Licensing Agreement: Research Project Amendment

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|---|--|
| License/Company Name: | License # (one form per license #): |
| Name of Signing Authority on License: | |
| Email: | Phone: |
| †Point-of-Contact (POC) for this License (Name): | POC Phone: |
| POC Email: | |

There are no changes at this time for 2020 Grow Season.

<u>OFFICE USE ONLY:</u> <div> <div>RETURNED</div> <div>APPROVE</div> <div>DENY</div> </div>	ADA OFFICIAL:	APPROVED DATE:	RECEIVED DATE:

3) Indicate the focus of your 2020 grow season project (check all that apply):

Grain

Replication of Seeds

Fiber

Replication of vegetative planting stock/seedlings/clones/propagules

Floral material (CBD, other phytocannabinoids, terpenoids, or any other extracts)

4) Provide a list of all individuals, including contractors, who will be primarily responsible for the growing or handling of the applicant's hemp. List each person's name, address, and responsibilities associated with this project. Attach additional sheet(s) if necessary.

Name	City	State	Specific responsibilities related to this industrial hemp project

5) SEED/PROPAGULE SOURCE: Identifying and purchasing seed and/or planting stock is the responsibility of the participant, not ADA. All hemp seed dealers, in-state or out-of-state, must be registered/licensed to sell seed through the ADA's Seed Certification Program.

Explain your seed/propagule acquisition plan by indicating the source of seed or planting stock you intend to plant by completing the table below. [A Domestic Seed/Propagule Request Form](#) must be submitted and approved prior to obtaining new varieties/genetics from licensed hemp sourcing entities. Compliance with rules for importation from other states and countries is the responsibility of the applicant.

If obtaining propagules/seedlings from other state hemp programs, a phytosanitary certificate or Nurseryman's license is needed in order to bring rooted plants into the state of Arkansas. An approved Hemp Material Transfer Form will also be needed to document the movement of hemp plants into AR. For more information or questions regarding Propagule/Seedling acquisition, contact ADA's Nursery Program.

Please list one or more seed/propagule companies you are considering:

	Seed Company Name	City, State	Country	Type of Material (seeds or transplants)
1)				
2)				
3)				

6) **Do you plan to implement field production for this project?** For 2020 Grow Season, growers are permitted a maximum of up to five (5) non-contiguous fields. For Location ID help, see guidance documents located at the end of this report.

Yes

No

If “Yes”, indicate the number of street addresses you intend to use as a part of your plan:

- **TOTAL number of street addresses:**

- **TOTAL number of proposed acres:**

7) **Field Addresses.** Complete parts a) and b) below. Attach additional page(s) as necessary

NO CHANGES TO FIELD SITE LOCATION IDs

a) Enter information for the <u>ADDITION</u> of requested field address(es) or additional field(s) to already approved address(es) in the cells below. Be sure to include a Location ID and GPS coordinates for each growing site. MAKE SURE GPS COORDINATES ARE IN 6-DIGIT "DECIMAL DEGREES" FORMAT						
Farm 1	Planting Address 1	City	State	Zip	County	Own or Rent
			AR			
	Indicate if this farm has multiple entrances: Yes No If yes, number of entrances:					
	Location ID*	GPS: Latitude <i>Ex: 34.123456</i>	GPS: Longitude <i>Ex: -92.123456</i>		Acres	
Field 1						
Field 2						
Field 3						
Farm 2	Planting Address 2	City	State	Zip	County	Own or Rent
			AR			
	Indicate if this farm has multiple entrances: Yes No If yes, number of entrances:					
	Location ID*	GPS: Latitude <i>Ex: 34.123456</i>	GPS: Longitude <i>Ex: -92.123456</i>		Acres	
Field 1						
Field 2						
Field 3						

b) Enter information for the <u>REMOVAL</u> of requested field locations. Be sure to include Location IDs (as they appear on your current <i>Licensing Agreement/Application</i>) for each growingsite.					
	Address	City	Zip	County	Location ID*
Location 1					
Location 2					

*Location ID: A unique identifier or common name for each field, designated by the applicant. The Location ID will be listed in the *Licensing Agreement/Application* and used to identify the field.

8) Do you plan to implement greenhouse production for this project? For 2020 Grow Season, growers are permitted a maximum of up to ten (10) separate indoor/greenhouse structures.

Yes

No

If "Yes", indicate the number of greenhouses you intend to use as a part of your plan:

- **Number of separate Greenhouse structures:**

You MUST register any greenhouse used to grow hemp. Growers who attempt to utilize an unregistered greenhouse shall be in violation of their MOU.

- **Number of TOTAL square feet:**

- **Indicate type of greenhouse production (check all that apply):**

Transplants only; either seeded or vegetative cuttings

Mother/stock plants, year round

Year-round production with intent to harvest indoor grow

ADA HEMP PROGRAM

- 9) **Greenhouse/Indoor Growing Addresses. Complete parts a) and b) below.** Attach additional page(s) as necessary. For Location ID help, see guidance documents located at end of this report.

NO CHANGES TO GREENHOUSE/INDOOR SITE LOCATION IDs

a) Enter information for the <u>ADDITION</u> of requested greenhouse/indoor growing address(es) or additional building(s) to already approved address(es) in the cells below. Be sure to include a Location ID and GPS coordinates for each growing site. MAKE SURE GPS COORDINATES ARE IN 6-DIGIT "DECIMAL DEGREES" FORMAT							
Indoor Growing Address 1	Planting Address 1		City	State	Zip	County	Own or Rent
				AR			
	Location ID*	Type of Structure†	GPS: Latitude <i>Ex: 34.123456 N</i>		GPS: Longitude <i>Ex: -92.123456 W</i>		Square Feet
Building 1							
Building 2							
Building 3							
Indoor Growing Address 2	Planting Address 2		City	State	Zip	County	Own or Rent
				AR			
	Location ID*	Type of Structure†	GPS: Latitude <i>Ex: 34.123456 N</i>		GPS: Longitude <i>Ex: -92.123456 W</i>		Square Feet
Building 1							
Building 2							
Building 3							

b) Enter information for the <u>REMOVAL</u> of requested greenhouse/indoor growing locations. Be sure to include Location IDs (as they appear on your current <i>Licensing Agreement/Application</i>) for each growing site.					
	Address	City	Zip	County	Location ID*
Location 1					
Location 2					

†Type of structure may be a greenhouse, high tunnel, shade house, barn, warehouse, etc.

*Location ID: A unique identifier or common name for each building, designated by the licensee. The Location ID will be listed in the *Licensing Agreement/Application* and used to identify the structure.

10) Storage Addresses. Complete parts a) and b) below. Attach additional page(s) as necessary. NOTE: Storage addresses must be listed in the below table, even if location ID serves other purposes. For example; greenhouse location IDs, Processing Location IDs, etc.

NO CHANGES TO STORAGE SITE LOCATION IDs

a) Enter information for the <u>ADDITION</u> of requested storage building(s) in the cells below. Be sure to include a Location ID and GPS coordinates for each storage site. MAKE SURE GPS COORDINATES ARE IN 6-DIGIT "DECIMAL DEGREES" FORMAT						
Storage Location 1	Storage Address 1	City	State	Zip	County	Own or Rent
			AR			
	Location ID*	Type of Structure†	GPS: Latitude <i>Ex: 34.123456 N</i>		GPS: Longitude <i>Ex: -92.123456 W</i>	
Building 1						
Building 2						
Building 3						
Storage Location 2	Storage Address 2	City	State	Zip	County	Own or Rent
			AR			
	Location ID*	Type of Structure†	GPS: Latitude <i>Ex: 34.123456 N</i>		GPS: Longitude <i>Ex: -92.123456 W</i>	
Building 1						
Building 2						
Building 3						

b) Enter information for <u>REMOVAL</u> of requested storage address(es) below. NOTE: ADA does NOT recommend removing storage location(s) unless you are absolutely certain that you will NOT use the storage facility at any time.					
	Address	City	Zip	County	Location ID*
Location 1					
Location 2					

†Type of Structure may be a warehouse, barn, high tunnel, etc.

*Location ID: A unique identifier or common name for each building, as designated by the applicant. The Location ID will be listed in the *Licensing Agreement/Application* and used to identify the building.

11) Attach maps depicting Location IDs being requested on pages 4, 6 & 7 for addition. Indicate number of maps being submitted:

Refer to example map and map instructions at the end of this report. Improper maps will be denied.

➤ **1 MAP PER STREET ADDRESS.**

12) If locations are leased, please indicate whether you have authorization from the owner allowing industrial hemp research to be conducted on the property. ADA reserves the right to request a notarized letter of support from the property owner.

Yes

No

Not Applicable (owned by me)

If "Yes," complete the table below for leased locations:

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

13) If your mailing address has changed, please provide your new mailing address in the table below.

Street Address	City	State	Zip	County

By signing below, I attest that I am the License Holder, or an authorized agent of the License Holder, and that this information is accurate to the best of my knowledge. I also affirm that all information contained within the original *Licensing Agreement*, if not changed by this amendment, remains true and correct. I also understand that ADA must approve this project update request in writing prior to the implementation of the proposed 2020 Research Project Amendment. I further acknowledge that failure to complete this report may result in enforcement action against me by the Department, which may result in license suspension or revocation.

Signature of License Holder/Approved Applicant

Date

Printed Name

Email to: Industrialhemp@agriculture.arkansas.gov

Mail to:

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

Reference / Guideline Document

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Instructions for Creating Maps and Obtaining GPS Coordinates for Submission with the Application

The following instructions outline required site map contents and basic instructions for obtaining a map. You are required to provide ADA a photographic aerial map of all growing, handling, processing, and storage locations. This requirement applies to all applicants and License holders, and will assist with ADA's required reporting to law enforcement.

Each map should be **in color** and contain the following:

- Only one address per map and all locations at that address on a single map.
- The applicant's full name printed on the page.
- If applicable, the full name of the business entity.
- The map location's street address, city, state, and zip code printed on the page.
- "E" marking the primary site entrance on the map. "E2" marking any secondary farm/site entrances.
- Must be zoomed out to show the site location, a public roadway, and the road name.
- Processing buildings, storage buildings, or handling facilities and the Location ID/name of each structure.

NOTE: The handling, processing, and storage location IDs used MUST be consistent on all report forms used in the program.

- GPS coordinates for each building. GPS coordinates should be provided in DECIMAL DEGREES up to six-digits (Example: *lat: 34.123456 N, long: -92.123456 W*) with a pinpoint showing exactly where the GPS coordinate was taken.
 - Use Google Earth or another web-based mapping program, or obtain GPS coordinates off your smartphone. If you are unable to get the required coordinates this way, please visit www.geoplaner.com

ADA prefers maps created with Google Earth. You can download Google Earth Pro for free by visiting <https://www.google.com/earth/download/gep/agree.html>. If asked for a registration key, enter "GEPFREE".

Google Maps, MapQuest maps or another similar program; Farm Service Agency (FSA) maps; Property Valuation Administrator (PVA) maps; or Soil Conservation maps with legible handwritten information will usually suffice if they are in color. To obtain a map online:

- You can go to Google Maps online at <https://maps.google.com/>. When you have the address on your screen, you can click the button in the lower left corner that says "Earth" or "satellite" for an aerial view of the location.
- On MapQuest at <http://mapquest.com/>, locate the address on your screen, then click in the upper right corner on "Satellite" for an aerial view of the location.


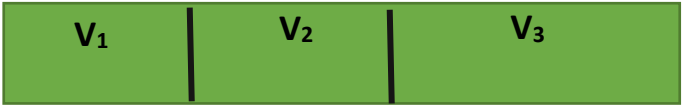


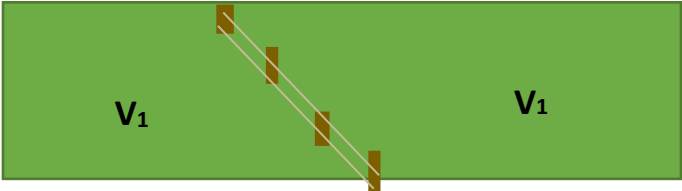
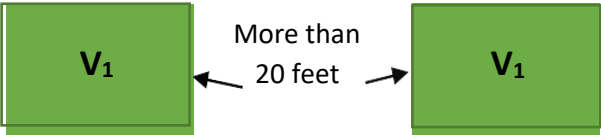
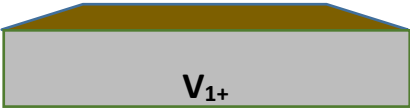
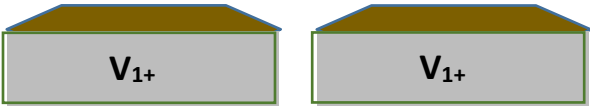
Print out the map when you are satisfied with the level of zoom (i.e. should show at least one nearby road, the entrance to the site, and the location of the hemp sites).

Reference / Guideline Document

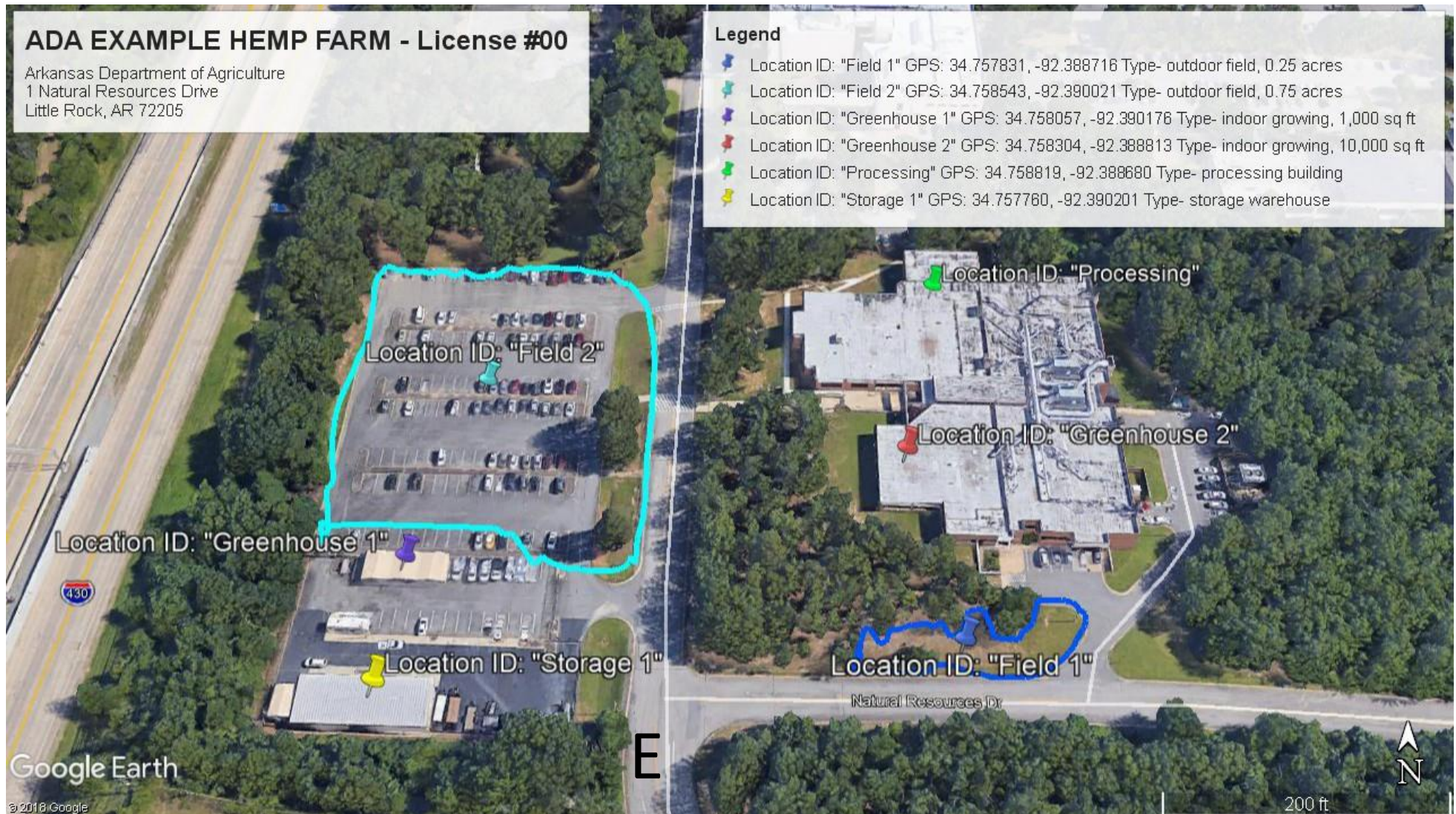
What is a Contiguous Location?

A contiguous field will NOT have any breaks, fence lines, tree lines, or roads dividing the field. Any field division shall be seen as two or more separate fields, which is considered non-contiguous.

Greenhouses and other indoor growing locations are treated as individual structures and need separate coordinates.

Contiguous Locations?	Diagram V = variety
Yes, 1 Field	
Yes, 1 Field	
<u>NO, 2 Fields</u> <u>Reason:</u> Field divided by trees or hedgerow.	
<u>NO, 2 Fields</u> <u>Reason:</u> Field divided by stream.	
<u>NO, 2 Fields</u> <u>Reason:</u> Field divided by fence.	
<u>NO, 2 Fields</u> <u>Reason:</u> Field divided by space of more than 20 feet.	
Yes, 1 Building	
<u>NO, 2 Buildings</u> <u>Reason:</u> Two separate buildings.	





NOTE This map is for example purposes ONLY. There is no industrial hemp grown at any of these locations.

