ARIZONA DEPARTMENT OF AGRICULTURE
PLANT SERVICES DIVISION - INDUSTRIAL HEMP PROGRAM
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602-542-0955
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INDUSTRIAL HEMP PROGRAM
LICENSE TRANSFER ACKNOWLEDGEMENT

Dept. Use Only

Date Received: _____ Received by: _____ Date of Withdrawal: _____

A license transfer acknowledgement form must be completed and approved by the Department prior to transferring duties and responsibility of the license(s) to an eligible applicant (transfer recipient). Any industrial hemp program fees paid or invoiced prior to any notice of withdrawal are assumed by the transfer recipient. *A.A.C R3-4-1003(H)*

Full Name of Current Licensee	
Company Name (If Applicable):	
License Number:	
Full Name of Transfer Recipient:	
Date of Transfer:	

By transferring the license, the current licensee agrees to relinquish the primary duties as the responsible party for the license listed under _____. Any license, or other fees paid by the current licensee shall be credited to the benefit of the transfer recipient. The transfer recipient agrees to assume all duties and responsibilities carried over from the previous license holder listed under license number _____. The transfer recipient shall also complete and submit an Industrial Hemp Program Application and provide copies of any supporting documentation. The Arizona Department of Agriculture reserves the right to inspect any registered land area, hemp crops or plants, seed or propagative materials, or records associated with the license listed above prior to approving a transfer application.

Current Licensee Signature	Printed Name	Date
Transfer Recipient Signature	Printed Name	Date

Acknowledged before me this date.		Notary Signature	
Date	County	State	Commission Expires

Department Approval Signature	Printed Name	Date