

Revised May 2019

## **COMBINED INDUSTRIAL HEMP PLANTING & HARVEST REPORTS** **(RULES 3.2, 3.3)**

- 1) USE THIS FORM TO FILE BOTH YOUR PLANTING AND HARVEST REPORTS.
- 2) **SAVE A COPY** OF YOUR PLANTING REPORT IN ORDER TO COMPLETE PART 2 ON THE SAME FORM AT A LATER DATE. THE INDUSTRIAL HEMP PROGRAM MAY NOT BE ABLE TO PROVIDE YOU A COPY IN A TIMELY MANNER FOR YOU TO MEET REPORTING REQUIREMENTS.

IT IS YOUR RESPONSIBILITY TO RETAIN COPIES OF YOUR PLANTING & HARVEST REPORTS. TO BE IN COMPLIANCE, YOU MUST HAVE CONSISTENT INFORMATION ABOUT VARIETY(S), LOCATION(S) AND GPS COORDINATES ON THE PLANTING AND HARVEST REPORTS OR YOU MAY BE INSPECTED.

Please type or print clearly. Incomplete and illegible forms will be returned.

### **REPORTING TIMELINE: NUMBER OF DAYS BY WHICH A PLANTING AND HARVEST REPORT MUST BE FILED**

- 1) Planting Reports are **due within 10 days** after planting any cannabis, AND/OR 10 days after the emergence of volunteer Cannabis plants in a Registered Land Area that the Registrant choose to cultivate.
- 2) Planting Reports are **due within 10 days** of transferring Cannabis plants INTO a Registered Land Area from another source.
- 3) Planting Reports are **due within 10 days** of transferring Cannabis plants WITHIN a Registered Land Area from one location within the Registered Land Area to another location within the Registered Land Area (i.e. from a greenhouse to an outdoor field).
- 4) Harvest Reports are **due at least 30 days prior to the anticipated harvest date. A registrant must notify the Commissioner immediately, by submitting an AMENDED Harvest Report, of any changes in the reported harvest date(s) in excess of 5 days (+/- ).** If such changes are made the Commissioner may require testing prior to harvest.  
To send an AMENDED Harvest Report, Use a copy of your completed, previously submitted report, write "AMENDED" across Page 1. Cross out the previous date with a single line, write in the new date. Provide a brief explanation in the margins. If an amended harvest report results in less than 30 day notice, or you have already been notified of inspection, permission from the Program Manager to harvest early is required.  
  
**"Harvest" includes taking cuttings. If you take cuttings, you must file a Harvest Report. FOR MORE INFORMATION ON REPORTING CLONES AND CUTTINGS PLEASE SEE THE FREQUENTLY ASKED QUESTIONS ON OUR WEBSITE.**
- 5) No Female Plants shall be destroyed, or plants moved, without notification via a Harvest Report being submitted 30 days PRIOR to such action being taken.

**THIS PAGE IS INFORMATION ONLY – NOT PART OF THE PLANTING/HARVEST REPORT/  
PLEASE DO NOT SUBMIT WITH YOUR PLANTING/HARVEST REPORT**



## COMBINED PLANTING AND HARVEST REPORT

Registration Name (Printed on your Registration Certificate)	Registration Number:
Contact Name ( <u>must</u> be applicant or authorized person on application)	Registration Main Contact Address:
Main Contact Phone:	Email Address:
Registered Land Area Address for this Registration:	Today's Date:

### ***If you did not plant:***

Notify us by **checking the box** and signing below. Submit Page 1 and your Planting and Harvest reporting requirements are fulfilled.

\*NOTE: An inspection may occur to verify that there are not plants present.

All *Active* registrations are subject to inspection and associated fees. If you no longer intend to grow under this registration and wish to inactivate/close your registration please contact our office.

☐

**Did Not Plant** WHY? \_\_\_\_\_

Print Name \_\_\_\_\_ Signature \_\_\_\_\_

### **Variety Report** On Page 2, for each variety planted provide the following:

1. Variety Name
2. Number of Acreage or Square Footage planted
3. Location Number: Assign a location number for each "crop"

Assign a location number for each different area planted within your Registered Land Area. Also assign a **new** location number for each area that was previously harvested and now a new crop &/or variety is being planted there during the same registration period. This is used as a tracking number so each crop should be considered a "new" location and be assigned a new location number. Once a location is harvested, retire the location number, and if you plant in the same area again, in the same registration period, assign a new location number.

4. GPS coordinates (in decimal degrees i.e. 40.12345, -104.1234) of each unique location.

**MAPS:** It is required that a map be attached to the Planting & Harvest Report that shows the contiguous registered land area for this registration and shows the boundaries of the grow area, dimensions, and clearly delineates/outlines the location of each variety within the registered land area.

### **Please print and attach additional copies of page 3 if additional varieties or locations need to be reported.**

\*\*If plants have been transferred from another location, or are volunteer plants, you may explain using a separate sheet of paper. Please note which variety & location the supplemental information pertains to.

**KEEP A COPY FOR YOUR RECORDS** YOU WILL NEED YOUR PLANTING REPORT TO COMPLETE YOUR HARVEST REPORT.

Step 1. Complete the Planting Report section.

Step 2. At least 30 days prior to harvest, complete the Harvest Report by filling in the grey shaded area.

Planting Report and Harvest Report should match for each location. If not, explain by including a short note at the bottom of the page, or use a separate piece of paper.

NOTE: If you know your harvest date at the time of completing the Planting Report, then complete both sections at once and submit both reports at the same time (usually for indoor grows doing projections).



## COMBINED PLANTING AND HARVEST REPORT - VARIETY REPORT

**STEP 1**(PLANTING Report) Complete PART 1 - Planting Report at time of planting. Submit the Planting Report within 10 days of planting.

Leave the Harvest Report section BLANK unless you know your anticipated harvest date when you submit the Planting Report (usually applies to indoor grows).

**\*\*\*IMPORTANT!!!!---**→ **Keep a copy. You will need it to complete Part 2: Harvest Report when preparing to harvest. Harvest Reports are due at least 30 days prior to harvest.**

**Step 2** (HARVEST Report) Complete PART 2: Harvest Report at least 30 days prior to harvest.

Using the copy of your planting report, complete each row in the Harvest Report section, filling in the grey shaded area.

Each line on the Planting Report should now have a Harvest Report that correlates. Planting Report and Harvest Report should match. (Location #1, Planted 1 Acre, Harvested 1 Acre)

REGISTERED NAME:

REGISTRATION NUMBER:

### INDOOR LOCATION(S)

REGISTERED NUMBER OF SQUARE FEET FOR THIS REGISTRATION \_\_\_\_\_

#### PART 1: PLANTING REPORT

**DID YOU PLANT FEMALES ONLY? CHECK BOX** ☐

#### PART 2: HARVEST REPORT

WHAT DATE DID YOU PLANT?	Location Number (See instruction Page 1)	VARIETY NAME	WHAT ARE THE GPS COORDINATES FOR THIS LOCATION? Decimal degrees from center of each location	TOTAL # SQ FT PLANTED FOR EACH GROW AREA /LOCATION?	DID YOU PLANT SEEDS OR PLANTS?	TOTAL # SQ FT TO BE HARVESTED FROM WHAT WAS PLANTED IN EACH GROW AREA/LOCATION?	ARE THESE FLOWERS? WHOLE PLANTS? CUTTINGS?	WHAT IS THE ANTICIPATED HARVEST DATE?

### OUTDOOR LOCATION(S)

REGISTERED NUMBER OF ACRES FOR THIS REGISTRATION \_\_\_\_\_

#### PART 1: PLANTING REPORT

**DID YOU PLANT FEMALES ONLY? CHECK BOX** ☐

#### PART 2: HARVEST REPORT

WHAT DATE DID YOU PLANT?	Location Number (See instruction Page 1)	VARIETY NAME	GPS COORDINATES FOR THIS LOCATION? Decimal degrees from center of each location	TOTAL # OF <u>ACRES</u> PLANTED FOR EACH GROW AREA /LOCATION (do not report outdoor in square feet)	DID YOU PLANT SEEDS OR PLANTS?	TOTAL # OF <u>ACRES</u> TO BE HARVESTED FROM WHAT WAS PLANTED IN EACH GROW AREA/LOCATION? (do not report outdoor in square feet)	ARE THESE FLOWERS? WHOLE PLANTS? CUTTINGS ?	WHAT IS THE ANTICIPATED HARVEST DATE?



## COMBINED PLANTING AND HARVEST REPORT

**\*Complete Part 1 when submitting Planting Report \*Complete Part 2 when submitting Harvest Report**

KEEP A COPY FOR YOUR RECORDS. YOU WILL NEED IT IN ORDER TO COMPLETE FUTURE REPORTS.

REGISTERED NAME:	REGISTRATION NUMBER:
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### PART 1: WHEN SUBMITTING YOUR PLANTING REPORT SIGN HERE

Registration(s) number(s) Plant and Seed Sources Originated From: \_\_\_\_\_

DID YOU PLANT CDA APPROVED CERTIFIED SEED? NO:

IF YES: YOU DID PLANT CDA APPROVED CERTIFIED SEED ANSWER THE FOLLOWING:

NUMBER OF POUNDS PLANTED: \_\_\_\_\_ NAME/SEED PLANTED: \_\_\_\_\_

#### Statement of Verification

By signing I acknowledge to the best of my knowledge, that all crop(s) reported here within are of a type and variety of industrial hemp that will produce a THC concentration of no more than 0.3% on a dry weight basis and that the variety name(s), location(s), acreage/sq. ft. and GPS coordinates for each grow area (as provided in decimal degrees format /12.45678, -106-54321) as stated in the Planting Report.

_____ Print Name	_____ Signature
_____ Title	_____ Date

### PART 2: WHEN SUBMITTING YOUR HARVEST REPORT SIGN HERE

#### Statement of Verification

By signing I acknowledge to the best of my knowledge, that all crop(s) reported here within are of a type and variety of industrial hemp that contain a THC concentration of no more than 0.3% on a dry weight basis and that the variety name(s), location(s), acreage/sq. ft. and GPS coordinates for each grow area (as provided in decimal degrees format /12.45678, -106-54321) as stated in the Harvest Report.

#### CHOOSE ONE:

\_\_\_\_\_ Documentation exists regarding a purchase agreement that has been entered into with an in-state Industrial Hemp Processor for the harvest(s) identified in this Industrial Hemp Report.  
\_\_\_\_\_ A purchase agreement has not been entered into with an in-state Industrial Hemp Processor for the harvest(s) identified in this Industrial Hemp Report and the following is a statement of intended disposition of the harvest(s):

- ☐ CBD Extraction ☐ Grain ☐ Dietary ☐ Fiber ☐ Phytoremediation ☐ Seed (for stock or to sell)  
☐ Other 1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_ 4) \_\_\_\_\_ 5) \_\_\_\_\_ 6) \_\_\_\_\_  
☐ Crop Died If crops died, please explain \_\_\_\_\_

_____ Print Name	_____ Signature
_____ Title	_____ Date

#### SUBMIT FORMS:

US Postal Mail to: CDA Industrial Hemp Program 305 Interlocken Parkway, Broomfield Co. 80021

OR Via Email to: [industrialhemp@state.co.us](mailto:industrialhemp@state.co.us) (Do not mail to individual staff member email address)

1) Send as single attachment in one email 2) If you have more than one registration send each registration report in a separate email otherwise you must send as a hard copy to the postal address provided above.