

Michigan Department of Agriculture and Rural Development



P.O BOX 30776
 LANSING MI 48909-8276
 Phone: 517-284-5771 Email: mdard-clu@michigan.gov
HEMP GROWING SITE MODIFICATION FORM
 Public Act 641 of 2018

Grower Registration Number:

STEP 1: BUSINESS INFORMATION

Business Name:

Business Address:

City:

State:

Zip:

Phone Number:

Email Address:

Office Use Only (1603)

Ownership Type: ☐ Corporation ☐ LLC ☐ LLP ☐ Sole Proprietor ☐ Individual

☐ Joint Tenant ☐ Other

Federal Identification #:

STEP 2: GROWING LOCATION(S)

| Location Address (City, State, Zip, County) | GPS Coordinates | Indoor | Outdoor | Acreage/ Square Feet |
|--|--------------------|--------------------------|--------------------------|-------------------------|
| Location #1: <input type="checkbox"/> Adding Location <input type="checkbox"/> Amending Current Location <input type="checkbox"/> Removing Location | | | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | |
| Location #2: <input type="checkbox"/> Adding Location <input type="checkbox"/> Amending Current Location <input type="checkbox"/> Removing Location | | | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | |
| Location #3: <input type="checkbox"/> Adding Location <input type="checkbox"/> Amending Current Location <input type="checkbox"/> Removing Location | | | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | |
| Location #4: <input type="checkbox"/> Adding Location <input type="checkbox"/> Amending Current Location <input type="checkbox"/> Removing Location | | | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | |
| Location #5: <input type="checkbox"/> Adding Location <input type="checkbox"/> Amending Current Location <input type="checkbox"/> Removing Location | | | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | |

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STEP 3: ACKNOWLEDGMENTS

- ☐ I acknowledge that all physical addresses of the location(s) to be used to grow hemp must be submitted with this application. This application constitutes written consent by the applicant to allow MDARD personnel access to any growing locations as deemed necessary by MDARD for inspection, sampling and testing. Any changes to physical addresses used in the growing or processing of hemp shall be approved in writing by MDARD prior to that location being legally permitted for use. A site modification fee of \$50.00 must be submitted for each alteration to a site listed in a grower registration after the registration has been issued.
- ☐ I acknowledge that any finished products produced as part of this project which are to be marketed and sold will comply with all applicable laws, regulations and requirements of any governmental agency or other regulating authority.

| | | |
|-------------------------|----------------------|-------|
| Applicant Name (Print): | Applicant Signature: | Date: |
|-------------------------|----------------------|-------|

STEP 4: REQUIRED ATTACHMENTS

- ☐ Maps – Satellite view with marked new and amended growing locations

STEP 5: HEMP GROWER SITE MODIFICATION FEE - *Make check/money orders payable to the State of Michigan*

| | |
|--|---|
| Nonrefundable Grower Site Modification Fee: \$50.00 | ASC Hot Key (<i>mdard use only</i>): 1603 |
|--|---|

I hereby verify and affirm that all information contained in this application is true and accurate.

| | | |
|-------------------------|----------------------|-------|
| Applicant Name (Print): | Applicant Signature: | Date: |
|-------------------------|----------------------|-------|