



State of Wisconsin
Governor Tony Evers

Department of Agriculture, Trade and Consumer Protection

Instructions for the Wisconsin Hemp Pilot Program **Processor** Application and 2020 Annual Registration

There is inherent risk associated with participation in a research program focusing on a new crop and with participation in this Pilot Research Program.

General Information

This is the application packet for the 2020 Wisconsin Hemp Processor Pilot Program. This initial application will cover a new, one-time Hemp Processor License and the 2020 Annual Registration of your Hemp Processor License. In order to process Hemp in Wisconsin, you need **both** the one-time Processor License and the Annual Registration for each year in which you plan to process Hemp. If you are renewing your annual registration for the 2020 License Year, the due date for your completed application form and applicable fee(s) is March 1, 2020. Late renewal application forms and/or payment for 2020 annual registrations will incur a 20% late fee. Changes made to your license after March 1, 2020 will result in additional fees, as detailed, below.

Invoiced Fees for Future Modifications to your Hemp Processor License / 2020 Annual Registration

Any changes to your Hemp Processor License after March 1, 2020 will result in the following fees.

Fee Type	Fee Amount	Fee Purpose
License Amendment	\$50	Any amendment to the application made after the license is issued, including processing location changes. All license amendments received on the same date incur a license amendment fee of \$50.
Change of Operations Manager	\$15	For the actual cost of a new background test if the Operations Manager changes.
Annual Registration Late Fee	\$20	20% late fee for hemp processor annual registration renewal application form and/or payment received after March 1, 2020.

Consider your current needs and future plans when completing this application packet. You must complete the Hemp Processor Application Form. Hemp program staff will contact you with instructions for submitting your 2020 Hemp Pilot Program Research Agreement (Research Agreement) and Background Check Form after your completed Hemp Processor Application Form is received. A Research Agreement is required for each existing licensee or new applicant who will be processing hemp in 2020. A Background Check Form is required for each new applicant and those existing licensees who are a business and who are also changing their Operations Manager for the 2020 License Year, which is from March 1, 2020 – February 28, 2021. Existing Hemp Processor licensees may apply for a 2020 annual registration on November 1, 2019. Renewal applications for a 2020 hemp processor annual registration must be received by March 1 to avoid a 20% late fee. New Applicants may apply for a new Hemp Processor license beginning on November 1, 2019.

Make check payable to WDATCP. Return all necessary payment and the completed, signed and dated Application Form:

**WDATCP
BOX 93598
MILWAUKEE WI 53293-0598**

Instructions for submitting your Background Check Form and 2020 Hemp Pilot Program Research Agreement will be sent to the Existing Licensee/ New Applicant upon receipt of the completed license application form. If you have questions or concerns regarding the Hemp licensure process or forms, please contact the license staff via email at DATCPIndustrialhemp@wisconsin.gov. The direct line for Hemp is (844) 449-4367. Please leave a voicemail for a return call as soon as time allows.

See the next page for detailed instructions on completing the Hemp Pilot Program Processor Application Form.

Wisconsin - America's Dairyland

2811 Agriculture Drive • PO Box 8911 • Madison, WI 53708-8911 • Wisconsin.gov

An equal opportunity employer

Detailed Instructions for Completing the Hemp Pilot Program Processor Application Form

Section 1 – Business and Contact Information

In the section marked Applicant Type, specify which of the two applicant types you are. In the Field marked Legal Name of Applicant, provide the applicant's legal name or legally formed business name. Provide your principal Wisconsin business location address in the following fields: Business Headquarters County, Business Headquarters Address, City, State, and Zip. If you do business under any other name, provide that other in the field marked Doing Business as Name or Trade Name. If you are applying as an individual, your Operations Manager must be the same person as the individual who is applying for this license. If you are applying as a legally formed business, provide the full name of the individual who is authorized to sign on behalf of your business entity in the field marked Operations Manager. Also provide the Operations Manager's phone number and their email address. If you are applying as a Business Entity, the individual named in the field marked Operations Manager must complete the Background Check Form. If you are applying as an individual, the person applying for this license will later complete the Background Check Form.

Section 2 – Summary Information

Please indicate if you are planning on processing Hemp in 2020. If you are planning on processing Hemp in 2020, make sure to pay for the 2020 annual registration. The one-time Hemp Processor License is free of charge. In order to process Hemp in Wisconsin in 2020, you need the one-time Hemp Processor License and the 2020 annual registration for the 2020 License Year. The 2020 License Year runs from March 1, 2020 – February 28, 2021.

Section 3 – Hemp Processing Location(s) *If you have more than two locations, use additional sheets to include the location information as indicated on the application form.*

This section is required if you are processing hemp in 2020. In the location Name field, provide the name that you use for each hemp processing location. Provide the Address, City, State, ZIP, Town or Municipality, and County of your Hemp Processing Locations. The GPS coordinates (Latitude and Longitude, in decimal degrees) of the center of your processing location are required in the field marked Processing Location GPS Points. At the field marked Acreage provide the area, in acres, of your Hemp Field / Greenhouse Location. When calculating the area of a greenhouse, convert greenhouse area measured in Square Feet to Acres using 43,560 square feet = 1 Acre. In the field marked Exact Road Directions to Processing Location, provide the driving directions from a major intersection to your Hemp Processing site. Attach plat maps or other maps on a separate sheet. Please specify if you own or lease the property on which your processing site is located. If the location's property owner is different from the applicant for this license, specify their name in the field marked Name of the Property Owner. Include the property owner's email address and phone number in the fields marked Property Owner Phone and Property Owner Email.

Section 4 – Applied Research Information

Indicate if you are affiliated with a college or a university. If you are, please name the institution. Please indicate if you have been a participant in another state's pilot hemp program. If so, please specify which states. Under Applied Research Description, check all the boxes which apply to the nature of your proposed research. If you are processing hemp in 2020, you are required to provide a brief, overall summary of the hemp research you are conducting, attach additional pages if needed. If you are processing hemp in 2020, program staff will contact you with instructions for submitting your research Agreement.

Section 5 – Registration Fee and Calculation

Please note that there is no License fee for the one-time Hemp Processor License. If you plan on processing hemp in 2020, your annual registration fee is \$100.

Make your check payable to WDATCP

Any renewal 2020 annual registration payment or application form received after March 1, 2020 will incur a late fee of 20%. Return all necessary payment; the completed, signed and dated Application Form to:

**WDATCP
BOX 93598
MILWAUKEE WI 53293-0598**

Instructions for submitting your Background Check form and 2020 Hemp Pilot Program Research Agreement will be sent to the applicant upon receipt of the completed application form.

Wisconsin - America's Dairyland

2811 Agriculture Drive • PO Box 8911 • Madison, WI 53708-8911 • Wisconsin.gov

An equal opportunity employer



WI Department of Agriculture, Trade and Consumer Protection
 Division of Agricultural Resource Management
 Bureau of Plant Industry
 Box 93598, Milwaukee WI 53293-0598
 Phone: (844) 449-4367 Fax: (608) 224-5775

<input type="checkbox"/> New License	
<input type="checkbox"/> Existing License	
Existing license Number:	-HP

Wisconsin Hemp Pilot Program Processor Application

(Wis. Stat. § 94.55, Wis. Admin. Code ch. ATCP 22)

For initial license application and the 2020 annual registration period ending February 28 2021.

SECTION 1 - BUSINESS AND CONTACT INFORMATION

LEGAL NAME OF APPLICANT(S)		PHONE (Primary): () -	PHONE (Alternate): () -
APPLICANT TYPE - CHECK ONE			
<input type="checkbox"/> Individual / Sole Proprietor	<input type="checkbox"/> Legally Formed Business Entity - State of Formation (please specify):		
DOING BUSINESS AS NAME OR TRADE NAME	APPLICANT E-MAIL	FAX: () -	
NAME OF OPERATIONS MANAGER (NOTE: Background Check Required for new applicants or if Operations Manager has changed)	OPERATIONS MANAGER E-MAIL	PHONE (Operations Manager): () -	
OPERATIONS MANAGER ADDRESS	CITY	STATE	ZIP
BUSINESS HEADQUARTERS COUNTY			
BUSINESS HEADQUARTERS ADDRESS	CITY	STATE	ZIP
MAILING ADDRESS (if different than business headquarters address)	CITY	STATE	ZIP

SECTION 2 - SUMMARY INFORMATION

ARE YOU PLANNING TO PROCESS HEMP IN 2020?
 Yes (please complete location information below and submit annual registration fee)
 No (submit application materials only, no fee is required)

SECTION 3 - HEMP PROCESSING LOCATION(S) (If you have more than two locations, please use additional sheets for the location information)

FIRST PROCESSING LOCATION			
LOCATION NAME	COUNTY	TOWN OR MUNICIPALITY	
STREET ADDRESS:	CITY	STATE	ZIP
PROCESSING LOCATION GPS POINT (Latitude and Longitude, in decimal degrees):			
EXACT ROAD DIRECTIONS TO PROCESSING LOCATION (i.e., from a major intersection)			
PLEASE SPECIFY WHETHER YOU OWN <input type="checkbox"/> OR LEASE <input type="checkbox"/> THIS PROPERTY (please fill in owner information below if leased)			
NAME OF PROPERTY OWNER (if different from Applicant):	PROPERTY OWNER PHONE:	PROPERTY OWNER EMAIL:	
SECOND PROCESSING LOCATION			
LOCATION NAME	COUNTY	TOWN OR MUNICIPALITY	
STREET ADDRESS:	CITY	STATE	ZIP
PROCESSING LOCATION GPS POINT (Latitude and Longitude, in decimal degrees):			
EXACT ROAD DIRECTIONS TO PROCESSING LOCATION (i.e., from a major intersection)			
PLEASE SPECIFY WHETHER YOU OWN <input type="checkbox"/> OR LEASE <input type="checkbox"/> THIS PROPERTY (please fill in owner information below if leased)			
NAME OF PROPERTY OWNER (if different from Applicant):	PROPERTY OWNER PHONE:	PROPERTY OWNER EMAIL:	

SECTION 4 – APPLIED RESEARCH INFORMATION

Are you affiliated with a college or university? Yes (please name the institution): No

Have you grown or processed hemp in another state's pilot program? Yes (please specify which state(s)):_ No

APPLIED RESEARCH DESCRIPTION (check all that apply):

- Storage Markets for the replication of seeds
 Processing conditions (humidity, temperature, light exposure, etc.) Markets for vegetative planting stock
 Grain Markets Fiber Markets Floral Markets Other (please explain):

*Applicant is solely responsible for determining the legal status of the hemp use (e.g. hemp is not permitted in commercial animal feed)

RESEARCH SUMMARY (please provide an overall summary of the hemp research you are conducting below, attach additional pages if needed):**2020 HEMP PILOT PROGRAM RESEARCH AGREEMENT**

Additional terms and conditions for the Processor License are specified in the 2020 Hemp Pilot Program Research Agreement. Instructions for submitting the research agreement will be sent to the applicant upon receipt of this application form.

SECTION 5 – REGISTRATION FEE

Based on the definitions below, please complete the license fee table. This form must be completed, and fee remitted for each year that you process hemp in Wisconsin. See Wis. Admin. Code ch. ATCP 22.

DEFINITIONS:

Hemp Processor – Person who stores, handles, or converts hemp into marketable form.

Research Agreement – This document must be completed and signed by the department and applicant and submitted at the time of application. The Research Agreement is required for an Annual Registration. Instructions for submitting your Research Agreement will be sent to the Applicant upon receipt of this application form.

Background Check Form – For NEW applicants, this form must be completed by the Applicant if the Applicant is an Individual or by the Operations Manager if the Applicant is a Business. Current licensees who are businesses who need to change their Operations Manager must complete this form. Instructions for submitting the Background Check Form will be sent to the Applicant upon receipt of this application form.

TABLE 1) Hemp Processor License and Annual Registration Fee

SELECTION	FEE	
LICENSE ONLY	\$0	No Payment
ANNUAL REGISTRATION: only remit if processing in 2020.	\$100	
ANNUAL REGISTRATION LATE FEE: for annual registration renewal applications postmarked after March 1, 2020.	\$20	

NOTE: Pursuant to Wis. Stat. § 93.21(5), a person who files an application for renewal or reissuance of a license after the license has expired shall pay, in addition to the fee for the license, an additional fee equal to 20% of the license fee or \$5, whichever is greater.

Make check payable to: **WDATCP**

Mail application and check to:

WDATCP

BOX 93598

MILWAUKEE, WI 53293-0598

Instructions for submitting your background check form and/or 2020 research agreement will be sent to applicant upon receipt of this application form.

For more information about the hemp program, visit our website:

https://datcp.wi.gov/Pages/Programs_Services/IndustrialHemp.aspx

I CERTIFY ALL THE INFORMATION THAT I PROVIDE ON THIS FORM TO BE TRUE AND ACCURATE.

--	--	--

TYPE/PRINT NAME OF APPLICANT AND TITLE

APPLICANT SIGNATURE

DATE

All applicants must comply with all applicable federal, state and local laws. It is the responsibility of the applicant to understand and comply with all federal and state regulations.

Personal information that you provide may be used for purposes other than that for which it was originally collected (§ 15.04 (1)(m) Wis. Stats.).