LDAF Industrial Hemp Program 2021 SEED PRODUCER LICENSE APPLICATION PACKET

Guidelines and Instructions

• The Louisiana Department of Agriculture & Forestry ("LDAF") is authorized by R.S. 3:1465 and pursuant regulations to issue licenses and regulate industrial hemp in Louisiana. Prior to the cultivation, processing or contracting to transport industrial hemp, a person must first submit an application and receive an industrial hemp license from LDAF. Applications should be submitted to: Louisiana Department of Agriculture & Forestry, Industrial Hemp Program, 5825 Florida Blvd., Suite 3004 Baton Rouge, LA 70806, or hand-delivered to one of the LDAF district offices. See attached district office map. All information in this application packet must be complete, and the application returned to LDAF along with any required fees and documentation.

If you need assistance completing this application, please contact us by phone at 225-925-4863 or by email at industrialhemp@ldaf.la.gov.

• Contents of Application Packet

- Guidelines and Instructions
- > Instructions for submitting to State and Federal Background Checks
- Designated Responsible Party Declaration Form
- Key Participant Disclosure Form
- ➤ LDAF District Office Map
- License Application Please submit only the application (Pages 1-7) and required forms and documentation. Do not submit the guidelines and instructions.
- <u>License Application Submittal</u> Industrial hemp applications are accepted at any time during the year. Industrial hemp license applications must be submitted and approved prior to cultivating, processing or contracting to transport industrial hemp. LDAF recommends that applicants use a delivery method with tracking capabilities when submitting an application. LDAF is not responsible for applications lost in the mail or not received. Applicants should keep a copy of the completed application, all attachments, and, if applicable, the mail receipt and tracking number for your records.
- <u>Fee Schedule</u> A \$500 license fee is due upon notification of application approval. The license fee is payable by check or money order to LDAF. No license shall be issued until full payment of the fees is received by LDAF.
- <u>Application File Format</u> Industrial hemp applications are available in an electronic fillable form. If you do not have compatible software for the fillable form, please print out the form and complete the form manually and legibly. LDAF is not responsible for missing information due to formatting or printing errors by applicants.
- <u>Public Records Law</u> Applications and any attachments may be subject to the Louisiana Public Records Law (R.S. 44:1 *et seq.*).

- <u>Registering a Business Entity</u> Louisiana law requires licenses to be issued in the applicant's name. However, applicants may request to register their business entity with LDAF. In addition to the information required on the application, applicants must supply the following information when registering their business entity.
 - > Submission of a *Key Participant Disclosure* form for all registered business entities. A *Key Participant* is a sole proprietor, a partner in partnership, or a person with executive managerial control in a corporation. A person with executive managerial control includes persons such as a chief executive officer, chief operating officer and chief financial officer. This definition does not include non-executive managers such as farm, field, or shift managers.
 - > Submission of a *Designated Responsible Party Declaration* form for all registered business entities. The *Designated Responsible Party* is the person designated by the applicant or licensee as responsible for facility operations of the applicant and their registered facilities.
 - ➤ If an applicant or licensee requires a change of the Designated Responsible Party or Key Participants anytime during the application process or after a license is issued, the applicant or licensee must submit a new *Designated Responsible Party Declaration* or *Key Participant Disclosure* form, current background checks, and copy of the new Designated Responsible Party's driver's license to LDAF.
- <u>Application Review</u> LDAF will evaluate each application to verify that the application is complete and required documents are included. After the evaluation is completed, applicants will be notified of the application status. Applications must be complete, accurate, and legible. Follow all instructions in the document. LDAF is not required to request additional information for clarity of the application. Any license application missing required information may be subject to denial.
- <u>Prohibited Activities</u> The activities listed below are prohibited activities. A current licensee found to be conducting or participating in any of these activities may be subject to regulatory actions, including but not limited to license revocation and forfeiture or destruction of all cannabis materials in their possession.
 - > Cultivating, processing or contracting to transport cannabis that is not industrial hemp (greater than the federally defined THC level for hemp).
 - ➤ Possessing or cultivating industrial hemp plants or plant parts on any site not approved in the Licensing Application or subsequent Site Modification Request form.
 - > Cultivating or storing industrial hemp:
 - o in any structure that is used for residential purposes;
 - o in any outdoor field or site that is located within 1,000 feet of a school, or public recreational area; and
 - o on property which is not owned or leased by the licensee.
 - ➤ Violating the restrictions outlined in §1325 Restrictions on Sale or Transfer of the industrial hemp regulations.
 - ➤ Allowing unsupervised public access to industrial hemp plots.

• Criminal Background Checks

- All industrial hemp applicants, designated responsible parties, and key participants must undergo state and federal criminal background checks and submit fingerprint identification. The resulting certified criminal background check reports must accompany each license application.
- ➤ Before a license will be approved, the background check report will be reviewed by LDAF for applicant eligibility.
- > State and federal background checks are required annually for each applicant, designated responsible party and key participants, and are valid for a period of 60 days prior to submission of license application.

INSTRUCTIONS FOR COMPLETING STATE AND FEDERAL CRIMINAL BACKGROUND CHECKS

• State Background Check Procedures

- 1. Download and complete the LSP *Right to Review Authorization* and the *Right to Review Disclosure* forms. The forms can be accessed at http://www.lsp.org/technical.html#criminal.
- 2. State background check requests are processed by the Louisiana State Police, Criminal Records Dissemination Section. (LSP)

LSP, Criminal Records Dissemination Section 7919 Independence Blvd., Baton Rouge, LA 70806

Phone: 225-925-6095

Business hours: M-F 8:00 AM - 3:30 PM Central Time. Website: http://www.lsp.org/technical.html#criminal

- 3. Deliver the completed forms along with acceptable form of payment in person to the LSP.
- 4. Submit to fingerprinting and request a set of fingerprint cards to submit to FBI for federal the background check.
- 5. Applicants will be given in person their certified *Right to Review* and *State Background Check* which must be submitted to LDAF with application.

• Federal Background Check Procedures

- 1. Request Fingerprint cards (Form FD-258) from LSP.
- 2. Visit the FBI Identity History Summary Checks website at: https://www.fbi.gov/services/cjis/identity-history-summary-checks.
- 3. Applicants should choose Option 1 or 3 (do *not choose option 2*) to complete the background check.
- 4. Applicant will receive the background check report electronically or by mail, depending on the requested reporting method. The report must be submitted to LDAF with the license application.

NOTE: Applicant is responsible for providing an official "disposition clarification" from the local Clerk of Court or District Attorney Offices for any reported charges with unknown disposition.

All State Criminal Background Check forms and payments must be hand-delivered or mailed to LSP and FBI Background Check forms and payments mailed to FBI. <u>DO NOT SEND THIS</u> INFORMATION AND PAYMENT TO LDAF.

Instructions for Creating Maps and Obtaining GPS Coordinates

- A color photographic map is required for each growing, storage, handling or processing locations and must contain the following:
 - Applicant's name, and if applicable, the business name printed on the map page;
 - ♣ Physical address of the location;
 - Expanded view to show the site, a public roadway and the road name;
 - Outline of the location of each contiguous planting;
 - ♣ Location ID/name for each field, greenhouse, indoor growing, handling, storage or processing structure;
 - ♣ GPS Coordinates of center of field, greenhouse, indoor growing, handling, storage or processing structure, and
 - ♣ Acreage of each contiguous planting.

Refer to example map on next page

- LDAF prefers all maps be created with Google Earth; however other mapping sources may be used. 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".
- You can access Google Maps online at https://www.google.com/maps/. 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 Map Quest at https://www.mapquest.com/ locate the address on your screen, and 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. Map should show at least one nearby road, the entrance to the site, and the identification of the hemp locations.
- Finish the map by handwriting in the required information. For maps created in Google Earth you can save the image to a Microsoft Word Document and add a text box(s) for the required information. To add a text box, click in an area outside of the map and choose *Insert* and then *Text Box*. Enter the information into the text box and move the text box into the appropriate area of the map. You may resize the map if required. Repeat the above steps for multiple text boxes.

SEE ATTACHED EXAMPLE OF MAP AND DESCRIPTION OF A CONTIGUOUS FIELD, GREENHOUSE AND INDOOR GROWING STRUCTURE.

EXAMPLE OF MAP REQUIRED FOR INDUSTRIAL HEMP GROWER, SEED PRODUCER AND PROCESSOR LICENSES



What is a Contiguous Location?

A contiguous field will NOT have multiple strains or varieties, any breaks, fence lines, tree or brush lines, canals or bodies of water or roads dividing the field. Any field with these types of divisions shall be considered to be two or more separate fields and require individual map outlines and GPS coordinates.

Individual greenhouses/indoor growing structures are considered separate and require GPS coordinates. Different varieties or strains within a greenhouse or indoor growing structure are considered separate plots.

Contiguous Location?	Example (V = strain/variety)
Yes, 1 Field	$\mathbf{V_{1}}$
No, 2 Fields Reason: Field divided by trees or brush row.	$egin{array}{cccccccccccccccccccccccccccccccccccc$
No, 2 Fields Reason: Divided by a canal or body of water.	V_1 V_1
No, 2 Fields <u>Reason</u> : Field divided by fence	$\mathbf{v_i}$
No, 2 Fields <u>Reason</u> : Two different strains/varieties	V_1 V_2
No, 2 Fields Reason: Field divided by more than 20 feet.	$\begin{array}{c c} V_1 & & More than \\ \hline & & 20 \text{ feet} \\ \hline \end{array} \rightarrow \begin{array}{c} V_1 \\ \hline \end{array}$
Yes, 1 Building	
No, 2 buildings/plots Reason: Two separate buildings or two different strains/varieties within a building.	V_1 V_2

LDAF Industrial Hemp Program Designated Responsible Party Declaration Form

This form must be completed and submi	tted with each business entity industrial hemp applicatio
This completed form is a required attachment	ent for all industrial hemp program business entity application
	th the mouse or select the next field using the down arrow key.
Name of Business Entity	
Complete Physical Address	
I hereby declare that:	
Printed Name	Title
Timted Name	Title
Phone	Email
*The Designated Responsible Party listed above is require prior to license being issued.	d to have an annual background check and copy of driver's license on file with LE
	daily business operations and is authorized to sign all requirentity's behalf. The entity acknowledges that a change of the notice to LDAF.
I certify that this information is true and co	rrect.
Signature of owner, registered agent, or managing member	Printed Name
Date	
Signature of designated responsible party	Printed Name
Date	

LDAF Industrial Hemp Program Key Participant Disclosure Form

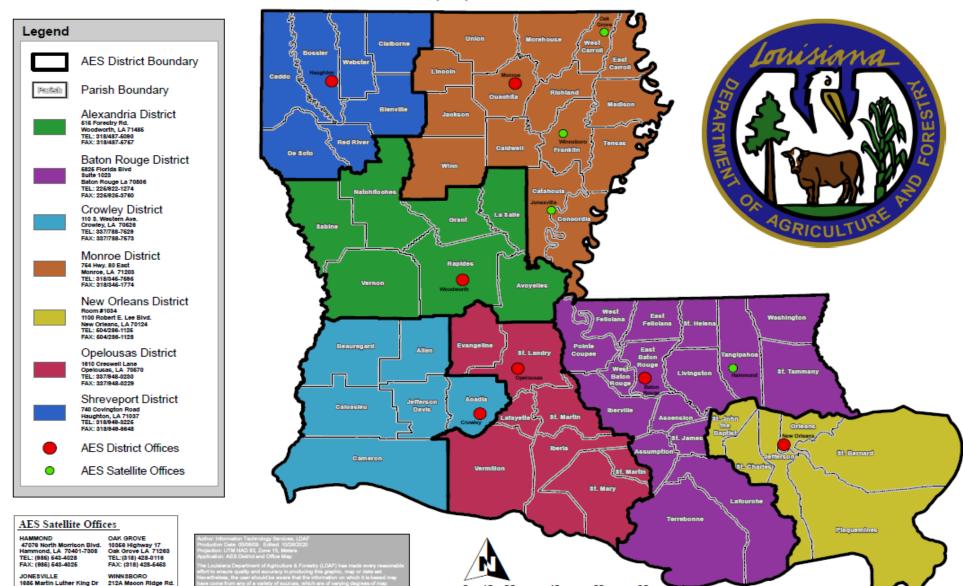
This form must be completed and	sub	mitted with each business entity application.
1. Business Entity Information	n	
If completing this form electronically, navigate t	he fo	rm with the mouse or select the next field using the down arrow key.
Name of Business Entity:		
Name of Applicant:		
Physical Address of Business:		
City, State & Zip:		
2. List the names, titles and	ema	il addresses of <u>ALL</u> key participants in the table below.
managerial control in a corporation	n. A atin	rietor, a partner in partnership, or a person with executive person with executive managerial control includes persons such a officer and chief financial officer. This definition does not include field, or shift managers.
Key Participant 1		
Name:		
Title:		
Email Address:		
Key Participant 2		
Name:		
Title:		
Email Address:		
Key Participant 3		
Name:		
Title:		
Email Address:		
Key Participant 4		
Name:		
Title:		
Email Address:		
indicate total number of s I hereby verify and affirm that all of	hee f the min	information contained on this form is true and accurate. I es any of this information to be false or inaccurate, the industrial
Signature of applicant		Printed Name

Date

LOUISIANA DEPARTMENT OF AGRICULTURE & FORESTRY MIKE STRAIN DVM, COMMISSIONER

Office of Agricultural and Environmental Sciences

(225) 925-3770



Jonesville La 71343 TEL:(318) 339-7842 FAX: (318-338-8038 Winnsboro LA 71296 TEL: (318) 436-2186 FAX: (318)435-2916 80

Miles



LDAF Industrial Hemp Program 2021 Seed Producer License Application

Any person interested in producing industrial hemp seed (including propagules) for planting purposes must first submit a Seed Producer license application and receive a Seed Producer License from LDAF prior to engaging in the regulated profession. **NOTE:** Applicants must receive a Seed Producer license from LDAF before taking possession of any viable industrial hemp seed (including propagules).

OFFICIAL USE ONLY
Date Received:
Application Status Notification
Date:
Date License Fee
Received:
License No:

Directions: Complete all parts of this application. Enter the applicant name

on the top of pages 2-7. Submit the application and all required attachments and documentation to the Louisiana Department of Agriculture & Forestry, Industrial Hemp Program, 5825 Florida Blvd., Suite 3004, Baton Rouge, LA 70806, or hand-deliver to one of the LDAF district offices. See attached district office map. Be sure to keep a copy of the completed application and all supporting documents for your records.

Read and carefully follow all instructions on the previous pages before completing this application.

If completing this form electronically, navigate the form with the mouse or select the next field using the down arrow key. 1. Applicant Information a. Applicant Name: (Applicant Name must be the name of a person. Enter name as it appears on the background check report. Do NOT enter a business name.) b. Mailing Address: c. Physical Address: d. Email: Note: Email is the primary method of communication for this program. e. Cell Phone Number: f. Alternate Phone Number: 2. Applicant's Business Information (if applicable) NOTE: To register a business, the business must meet the following requirements: 1) be an established legal entity, 2) declare a Designated Responsible Party, and 3) identify all Key Participants in the business. a. Business Name: b. Is this business registered with the Louisiana Secretary of State: Yes No c. Registered Agent (if yes to question B2): d. Business type (example: LLC, C-Corp., Partnership, etc.): e. Employer Identification Number (EIN): f. Business Mailing Address: g. Business Physical Address: h. Email of Applicant: i. Cell Phone: j. Business Phone: 3) Indicate intended product for the crop (check all that apply): ☐ Seed Production ☐ Replication of vegetative planting stock (i.e., production of transplants)

☐ Other (describe):

Farm 2

Township 4S, Range 10E):

	each statement below and check	k the box next to the	statement to ind	icate your und	erstanding and						
_	agreement:										
	The \$500 license fee is non-refundable after the license has been issued.										
locati the cl Ea handl Al field/	 □ Any additions, subtractions or changes to the GPS coordinates listed for growing, handling or storage locations after the seed producer license is issued by LDAF will require the license holder to submit, and have the changes approved. All site modification requests must be submitted using a <i>Site Modification Request</i> form. □ Each location must be included in your licensing application and approved by LDAF prior to the planting, handling, or storage of any industrial hemp at that location. □ Applicants are required to provide precise GPS coordinates in a decimal degrees (DD) format for each field/plot, greenhouse, indoor growing location, building, and handling storage sites at each address. □ Applicants are required to provide a legal description of address and a detailed map of every site at each address with the application. 										
5) The fo	ollowing restrictions apply to all	seed producer lice	nsees. Read each	statement belov	w and check the						
	next to the statement to indicate	-			w and eneck the						
	will not knowingly grow cannabis		_		ntration of more						
	federally defined THC level for he										
	will not grow, handle or store indu	* /	ructure that is use	d for residential	purposes.						
	will not grow industrial hemp in a										
	c recreational area.										
•	will not grow, handle, or store indu	ustrial hemp on any l	and which is not o	owned or leased	by the licensee.						
	nave read and understand the Loui										
			•		•						
	de a list of all locations requeste			-							
	houses/Indoor Growing Location	ons, and c) Handling	g/Storage Locatio	ons. Attach add	itional page(s) as						
necess	sary.										
a)]	Field Locations										
	i. Indicate total acres planned for growing as identified in the tables below.										
	Total Number of Acres										
	ii. Enter information for requested field growing locations in the tables below.										
	iii. If you do not intend to grow in	n a <u>field</u> , indicate by	entering N/A in th	ne space provide	d:						
	Far	m Name		Owr	n or Rent						
	Physical Address	City	State	Zip	Parish						
Farm 1	Legal Property Description. Des	scription may be incl	uded as attachmen	t if necessary. (EX: Section 42,						
	Township 4S, Range 10E):										
		GPS Latitude		Longitude							
= 111	Location ID*	EX: 29.832706000	$0 \qquad EX: -90$	0.926661999	Acres						
Field 1											
Field 2											
Field 3											
	Far	m Name		Owr	n or Rent						
	Physical Address	City	State	Zip	Parish						

Legal Property Description. Description may be included as attachment if necessary. (EX: Section 42,

Zip

		GPS Latitude		GPS Longitude				
	Location ID*	EX: 29.832706000		EX: -90.926661999		Acres		
Field 1								
Field 2								
Field 3								
	Farm Name					Ow	n or Rent	
	Address	City	Stat	e	Zip		Parish	
Farm 3	Legal Property Description. Description may be included as attachment if necessary. (EX: Section 42,							
	Township 4S, Range 10E):							
		GPS Latitude	e	GPS Longitude		ude		
	Location ID*	EX: 29.832706000		EX: -90.92666		51999	Acres	
Field 1								
Field 2								
Field 3								
* Location	ID: A unique identifier or common non	a for each field as design	noted by tl	ha ann	licent The Locati	on ID will be	come part of the	

b) Greenhouse / Indoor Growing Locations

i.	Indicate total square footage planned for indoor growing as indicated in the tables below. Total Square Footage:
ii.	Indicate type of greenhouse production (check all that applies):
	☐ Transplants only (either seeded or vegetative cuttings), or seasonal stock plants
	☐ Stock plants, year round
iii	. Enter Greenhouse/Indoor Growing Locations in the tables below.
iv	. If you do not intend to grow in a greenhouse or indoor growing structure, indicate by entering N/A in the space provided:

NOTE: Approval of a greenhouse/indoor growing structure includes the area inside the greenhouse and equal square footage immediately adjacent outside the greenhouse. The outside square footage can only be used to place container hemp plants temporarily for necessary agronomic reasons.

	Greenhouse/	Own or Rent					
	Address	City	State	Zip	Parish		
Greenhouse/							
Indoor 1	Legal Property Description		e included as attac	chment if neces	ssary. (EX: Section		
IIIdooi 1	42, Township 4S, Range 1	<i>DE</i>):					
			<u> </u>				
		GPS Latitude	GPS	Longitude			
	Location ID*	EX: 29.83270600	0 EX: -90	0.926661999	Total Ft ²		
Site 1							
Site 2							
Site 3							
	Greenhouse/Indoor Structure Name Own or Rent						
Greenhouse/							
Indoor 2	Address	City	State	Zip	Parish		
			_				

^{*} Location ID: A unique identifier or common name for each field, as designated by the applicant. The Location ID will become part of the license record.

	Legal Property Description. Description may be included as attachment if necessary. (EX: Section 42, Township 4S, Range 10E):							
	Location ID*	GPS Latitude GPS Longitude EX: 29.832706000 EX: -90.926661				Total Ft ²		
Site 1								
Site 2								
Site 3								
	Greenhouse/Indoor Structure Name Own or Rent							
	Address	City	State	e	Zip		Parish	
Greenhouse/ Indoor 3	Legal Property Description. Description may be included as attachment if necessary. (EX: Section 42, Township 4S, Range 10E):							
	Location ID*		GPS Latitude EX: 29.832706000		GPS Longit EX: -90.9266		Total Ft ²	
Site 1								
Site 2								
Site 3								

c) Handling/Storage Locations

- i. Enter information for requested handling/storage locations in the tables below.
- ii. Handling/storage addresses must be listed in the below table even if listed in tables for part (a) or (b) above, in order to provide GPS coordinates for the buildings.

	Handling	Own or Rent						
	Address	City	State	Zip	Parish			
Handling/								
Storage 1	Legal Property Description.	-	e included as attac	chment if neces	sary. (EX: Section			
Storage 1	42, Township 4S, Range 101	E):						
			<u> </u>		•			
					Purpose			
		GPS Latitude		Longitude	(handling or			
	Location ID*	EX: 29.832706000) EX: -90	0.926661999	storage)			
Site 1								
Site 2								
Site 3								
	Handling/Storage Name Own or Rent							
		,						
	Address	City	State	Zip	Parish			
	Legal Property Description.		e included as attac	chment if neces	sary. (EX: Section			
Handling/	42, Township 4S, Range 101	E):						
Storage 2								
					Purpose			
		GPS Latitude		Longitude	(handling or			
	Location ID*	EX: 29.832706000	EX: -9	0.926661999	storage)			

^{*} The Location ID is a unique identifier or common name for each structure, as designated by the applicant. Location ID will become part of the license record.

Site 1							
Site 2							
Site 3							
	Н	andling/Storage Nat	ne			Ow	n or Rent
	Address	City	State	e	Zip		Parish
	Legal Property Descripti	on. Description may	be inclu	ıded	as attachment	if necessar	y. (EX: Section
Handling/	42, Township 4S, Range	10E):					
Storage 3							
							Purpose
		GPS Latitude	•		GPS Longit	ude	(handling or
	Location ID*	EX: 29.8327060	000		EX: -90.9266	61999	storage)
Site 1							
Site 2						_	
Site 3							
		6 1 1			11		. 0.1

Acknowledgments

Read each of the acknowledgment statements below and check "Yes" or "No" to indicate your understanding and acceptance of each statement.

1) I acknowledge that LDAF is not responsible for missing information due to formatting or printing errors on the

user end. LDAF is not responsible for applications lost in the mail or not received.

	□Yes □ No
2)	I acknowledge that LDAF is not obligated to ask follow-up questions during the application review process. The written responses on this application and attachments shall be the sole source of information under consideration for potential participation in the LDAF Industrial Hemp Program. \Box Yes \Box No
3)	I acknowledge that this is a selective process and only those applications that meet the criteria set forth in the Louisiana Industrial Hemp Law and regulations will be approved for licensing. \square Yes \square No
1)	I affirm that, if approved for a license, I will abide by all requirements of LDAF, and the law and regulations, including timely submission of report forms and required attachments, as applicable, including but not limited to:

- Seed Acquisition Request form must be submitted to and approved by LDAF prior to receiving any industrial hemp seeds or propagules.
- Site Modification Request form must be submitted to LDAF prior to the growing, handling, or storage of hemp materials at any location not previously approved on your seed producer license application.
- Planting Reports must be submitted to LDAF within the established deadlines following planting for each field, greenhouse and indoor growing structure.
- Harvest/Destruction Report due within 15 days prior to crop harvest or destruction of a failed crop;
- **Production Report** due by November 15th annually

☐ Yes ☐ No

^{*} Location ID: A unique identifier or common name for each structure, as designated by the applicant. Location ID will become part of the license record.

Copy of Driver's License for the Designated Responsible Party
State and Federal Certified Background Check Report for the Applicant
State and Federal Certified Background Check Report for the Designated Responsible Party and all Key
Participants
Completed Designated Responsible Party Declaration form

☐ Copy of Driver's License for the Applicant

LDAF Industrial Hemp Program 2021 Seed Producer License Application

Applicant Name:	2021 Seed Producer License Application
☐ Completed Key Participant Discle	osure form
☐ Other Attachments (describe):	
	of the information contained in this license application is true and F later determines any of this information to be false or inaccurate, the held or revoked.
Signature of Applicant	Printed Name of Applicant
Date	_