



DELAWARE DEPARTMENT OF  
**AGRICULTURE**

2320 SOUTH DuPONT HIGHWAY  
DOVER, DELAWARE 19901  
AGRICULTURE.DELAWARE.GOV

TELEPHONE: (302) 698-4500  
TOLL FREE: (800) 282-8685  
FAX: (302) 697-6287

## **HEMP GROWER APPLICATION CHECKLIST:**

- Completed Hemp Grower Application and Site Registration Form**
- Submitted Research Agreement to Delaware State University**
- Submitted Application for Federal Criminal Background Check**
- Attached Site Maps (*including name, address, GPS coordinates, roads*)**
- Signed Landowner Statement, Completed by All Hemp Site Landowners**
- Mail or hand-deliver application and supporting materials to:**

Delaware Department of Agriculture  
ATTN: Plant Industries Section  
2320 South DuPont Highway  
Dover, DE 19901



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## Hemp Grower Application

### Applicant Information

Name (Last, First, Middle)	
Residential Address	
Mailing Address	
Primary Phone Number	
Secondary Phone Number	
Email Address	
Grower Nutrient Management Certification Number (if no number please state why)	
Business Name (if applicable)	
Business Phone Number	
Business Physical Address	
Type of License Applying For	<input type="checkbox"/> Research with Intent to Market # of Acres _____  <input type="checkbox"/> Research Only # of Acres _____  Name of Research Institution:



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## Site Registration Form

**Please Note: The Delaware Department of Agriculture cannot advise that a viable market will exist for any grower of hemp to sell their crop. The Delaware Department of Agriculture does not hold any responsibility for ensuring that an end market for hemp or hemp products exists and does not take any responsibility for any losses that may be incurred by the grower.**

### Outdoor Field Production - not to exceed 10 acres

Grower's Name				
Farm Address				
City		Zip Code		Tax Parcel ID
<input type="checkbox"/> Own <input type="checkbox"/> Rent		How many entrances does the farm have?		Total Number of Fields for Hemp Production
Name of the Nutrient Management Consultant				
	Farm and Field Name	GPS Coordinates for Field Center Latitude      Longitude		Number of Acres Are they under Irrigation? Y or N
Field 1				Y N
Field 2				Y N
Field 3				Y N
Field 4				Y N
Soil samples are not more than 3 years old. <input type="checkbox"/>				
<b>FIELD MAPS WITH AT LEAST TWO ROADS IDENTIFIED MUST BE ATTACHED.</b>				



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### Indoor Production

Grower's Name					
Growing Site Address					
City			Zip Code		
<input type="checkbox"/> Own		<input type="checkbox"/> Rent		Number of Driveways	Total Number of Structures for Hemp Production
Name of the Nutrient Management Consultant:					
	Structure ID	GPS Coordinates for Structure(s) Latitude      Longitude		Total Square Footage	Square Footage Planned for Hemp
S 1					
S 2					
S 3					
S 4					
<b>MAPS OF STRUCTURE LOCATIONS WITH AT LEAST TWO ROADS IDENTIFIED MUST BE ATTACHED.</b>					

**DISCLOSURE OF CRIMINAL CONVICTIONS** – The 2018 Farm Bill states that “a person with a felony drug conviction within the past 10 years may not contract to grow or cultivate hemp under this subsection and requires applicants to submit fingerprints to the FBI to obtain a criminal history check, proof of which must be submitted as an attachment to this application.”

**(PLEASE INITIAL)** \_\_\_\_\_ I acknowledge that the information provided in the Site Registration Form expires 12/31/19.

**(PLEASE INITIAL)** \_\_\_\_\_ I acknowledge that by registering with the Department, I agree to allow the Department to inspect and test hemp plants and hemp products at the Department’s discretion any time throughout sowing, growing season, harvest, storage, and processing.

**(PLEASE INITIAL)** \_\_\_\_\_ I acknowledge that federal prosecution for growing hemp in violation of federal law may include criminal penalties and or forfeiture of property.

**(PLEASE INITIAL)** \_\_\_\_\_ I acknowledge that until the State of Delaware has received approval of its permanent Hemp Program from the United States Department of Agriculture, any cultivation and possession of hemp in Delaware will be grown or marketed under a pilot program as authorized by section 7606 of the federal Agricultural Act of 2014, Pub. L. No. 113-79.

**(PLEASE INITIAL)** \_\_\_\_\_ I have read this Site Registration Form and understand the requirements detailed. I agree to hold harmless and release the state of Delaware, its officers, employees, contractors or agents from any and all claims, actions, suits, damages, judgments, attorney’s fees, or prosecution of any kind that may arise due to my cultivation of *Cannabis sativa* (L) conducted under authority of this state law-based registration requirement administered by the Department.

**(PLEASE INITIAL)** \_\_\_\_\_ I agree to monitor the site(s) identified on this application and the surrounding area for volunteer or feral hemp plants for three years and to immediately destroy volunteer or feral hemp plants in the areas identified above at my own cost and expense.

**(PLEASE INITIAL)** \_\_\_\_\_ I affirm that the hemp seeds obtained for planting are THC Compliant (a type and variety that do not exceed the maximum concentration of tetrahydrocannabinol of no more than 0.3 percent on a dry weight basis.)

**(PLEASE INITIAL)** \_\_\_\_\_ I affirm that I am prepared to conduct a research project and comply with all other requirements of the Delaware Hemp Program, including timely submission of reports and other required documents to the Department and affiliated research institutions.

**(PLEASE INITIAL)** \_\_\_\_\_ I affirm all of the information contained in this application is true and accurate. I understand that if the Department later determines any of this information to be inaccurate that the application and registration may be withheld or terminated.

**(PLEASE INITIAL)** \_\_\_\_\_ I affirm that landowners of registered sites have been notified of my intent to grow hemp.

**(PLEASE INITIAL)** \_\_\_\_\_ I affirm that I have submitted a Research Agreement with the institution named on page 1 of the Hemp Grower Application.

<b>Applicant’s Name</b> Printed: _____ Signature: _____ Date: _____
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<b>Land Owner(s) (if different from applicant)</b> The named applicant has my permission to use the site (s) listed on this application, which I own, to participate in the Delaware Hemp Program. Printed: _____ Signature: _____ Date: _____
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