

Instructions

- Complete all parts of the following form to renew your MA Hemp Producer/Processor Dual License. *Incomplete applications will not be processed.*
- **Deadline:** Renewals must be received by MDAR no later than December 1st. Renewal applications not received by this date will not be accepted and you may have to submit a new application during the new application period and *will require updated FBI Identity History Reports for all Key Participants*. Failure to submit a renewal on time may result in the expiration of your license on December 31st.
- **Eligibility:** To be eligible for a hemp license renewal, you must have a current and active hemp license. Submitting a renewal application does not guarantee licensure for 2026; your operation must be in compliance with all Hemp Program requirements. If there are any changes to your license such as new applicants, name changes, or business name changes, your license is not eligible for renewal and a new application must be submitted. Changes to proposed hemp growing and/or processing locations do not require a new license, but approval is not guaranteed and hemp activities requiring a license should not be conducted at any site not already covered by an existing license.
- Submit this renewal application with all required attachments and the \$100 renewal application fee. The renewal application will not be deemed complete until such time as the fee has been received. Processing of the application fee does not mean that your license has been renewed.
- Upon approval, a Licensing fee will become due prior to issuance. Production or Processing of Hemp without a license is a violation of state and federal law and may result in legal action.
- Hemp Licenses are **NOT transferrable or assignable** and cannot be used by any other individual or entity not included in this application.

**Mail completed form, fees
and attachments to:**

Massachusetts Department of Agricultural Resources
225 Turnpike Road; Room 302
Southborough, MA 01772
attn.: **Hemp Program**

Make checks payable to: *Commonwealth of Massachusetts*

Instructions for Licensing Sites

- Each Production and Processing Site must be designated by a specific property address or parcel number. You may license multiple Sites with different addresses by attaching additional copies of the Site Licensing sheet. You cannot engage in any activity at any location without prior written approval from MDAR.
- You may have multiple production areas (i.e., fields, greenhouses, barns, or storage areas) at each Site.
- Maps must be included for each Site. You may submit new Sites with this renewal application.
- Previously licensed Sites must include FSA Farm/Tract Numbers.
- For each Production and Processing Site, you are required to provide an **aerial photograph map** with this application. All maps must include:
 - Aerial photograph of the Site
 - Site Name and Address or Parcel Number
 - GPS coordinates in **decimal degrees** (ex. 42.3664, -71.0588)
 - Site features including *clearly marked boundaries of the proposed growing, storage, drying, and/or processing areas*

Additional Resources:

FSA Farm Registration: <https://www.mass.gov/guides/resources-for-hemp-program-licensees#-fsa-reporting->

Instructions for creating a map: <https://www.mass.gov/doc/instructions-how-to-create-a-map-of-your-site/download>

Find your GPS Coordinates: <https://www.mass.gov/doc/instructions-how-to-find-your-gps-coordinates-latitude/longitude/download>

MDAR Hemp Licenses are valid **ONLY** for the Licensee as indicated here and for the location(s) designated and approved within this application. You **MUST** include any business name, including your d/b/a. Any businesses that are considered “legally” separate may not be covered under a single license. Each d/b/a, LLC, corporation, or other lawfully created entity under the laws of the Commonwealth or any other state must submit a separate license application. Licenses are non-transferable and may not be assigned to any other individual or entity. The use of a license by anyone other than the licensee may result in the suspension or revocation of the license.

Renewal Information:

License Number:		
Licensee Name (may be individual or business entity):		
Primary Contact Name:		
Business Name (if different):		
Mailing Address:		
City:	State:	ZIP Code:
Primary phone: <input type="checkbox"/> cell <input type="checkbox"/> home <input type="checkbox"/> work		Email:
EIN number (if applicable – Do NOT use your individual social security number):		

Key Participant Information

Key Participants are defined as individual applicants, or any person who has a direct or indirect financial interest in the entity producing hemp, including but not limited to, owner(s) or partner(s) in a partnership, officers, directors, the chief executive officer, chief operating officer, or chief financial officer in a corporation, or the trustees of a trust. It does not include management such as farm, field or shift managers, unless those individuals are also identified above.

An [FBI Identity History Summary](#) is required for each Key Participant in accordance with 7 CFR 990 for any production of hemp. New FBI Identity History Summaries must be current to within sixty (60) days of submitting this renewal.

You must obtain your FBI Identity History Summary via the Federal Bureau of Investigations (FBI) and a copy must be included with this application: <https://www.fbi.gov/services/cjis/identity-history-summary-checks>.

Your FBI Identity History Summary will be kept on file for 3 years. **A new [FBI Identity History Summary](#) must be submitted every 3 years.**

No Individual Applicant or Key Participant may have been convicted of a drug-related felony within the last 10 years.

Failure to comply with this requirement will result in the denial of any application.

Please list all Key Participants. You may attach additional sheets if necessary.

Key Participant Name:	Title:
Email:	FBI Identity History Summary Date:
Key Participant Name:	Title:
Email:	FBI Identity History Summary Date:
Key Participant Name:	Title:
Email:	FBI Identity History Summary Date:

Production Site Licensing Information		
Site Name:		
Site Address:		
City:	Zip Code:	Previously Licensed? <input type="checkbox"/> Yes <input type="checkbox"/> No
FSA Farm No.:	FSA Tract No.:	
Total acreage of all hemp to be licensed outdoors at this location:		
Total square footage of all hemp to be licensed indoors at this location:		
Statement of Property Ownership: Are you the owner of the property listed above? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, (please initial) _____ I certify that I have permission to use the property listed in this application for cultivation and/or processing of hemp. MDAR is not responsible for any issues that arise between a licensee and property owner.</i>		
Property Owner or Manager Name (if different from Applicant):		
Owner/Manager Phone:	Owner/Manager Email:	
Property Type: <input type="checkbox"/> Farm/Agricultural <input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Other _____		

Please provide the following information for each field, greenhouse, barn, or other area to be licensed at the Site listed above (attach additional sheets if necessary):

Production Area Detail		
Field/Greenhouse Name:	Size: <input type="checkbox"/> acres <input type="checkbox"/> ft ²	
Primary Use (check all that apply): <input type="checkbox"/> Plant Starts <input type="checkbox"/> Cultivation <input type="checkbox"/> Storage <input type="checkbox"/> Drying		
Latitude:	Longitude:	<input type="checkbox"/> indoor <input type="checkbox"/> outdoor
Production Area Detail		
Field/Greenhouse Name:	Size: <input type="checkbox"/> acres <input type="checkbox"/> ft ²	
Primary Use (check all that apply): <input type="checkbox"/> Plant Starts <input type="checkbox"/> Cultivation <input type="checkbox"/> Storage <input type="checkbox"/> Drying		
Latitude:	Longitude:	<input type="checkbox"/> indoor <input type="checkbox"/> outdoor:
Production Area Detail		
Field/Greenhouse Name:	Size: <input type="checkbox"/> acres <input type="checkbox"/> ft ²	
Primary Use (check all that apply): <input type="checkbox"/> Plant Starts <input type="checkbox"/> Cultivation <input type="checkbox"/> Storage <input type="checkbox"/> Drying		
Latitude:	Longitude:	<input type="checkbox"/> indoor <input type="checkbox"/> outdoor

Note: Site and growing area names will be required for filing planting and harvest reports.
Latitude and Longitude must be reported in **decimal degrees** (ex. 42.3664, -71.0588).

Processing Site Licensing Information

Site Name:		Previously Licensed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Physical Address:		
City:	State:	Zip Code:
Latitude:		Longitude:
Site Description:		
Statement of Property Ownership: Are you the owner of the property listed above? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, (please initial): _____ I certify that I have permission to use the property listed in this application for processing of hemp. MDAR is not responsible for any issues that arise between a licensee and property owner.</i>		
Property Owner or Manager Name (if different from Applicant):		
Owner/Manager Phone:		Owner/Manager Email:
Property Type: <input type="checkbox"/> Farm/Agricultural <input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Other _____		

Latitude and Longitude must be reported in **decimal degrees** (ex. 42.3664, -71.0588).

Type of Processor (please check all that apply)

- ☐ **Extractor:** removes a product directly from the hemp plant such as fiber, seed, extract, oil, resin, etc.
- ☐ **Manufacturer:** makes an intermediate or finished product that uses any hemp or hemp-derived material and that will be packaged, labeled and ready for sale to an end user or wholesale.

Processor Certifications:

By signing this application and initialing where required, the individual signing hereby acknowledges that they have the legal authority to bind the applicant and agrees to the following:

(please initial): _____ I understand that it is my responsibility to ensure that any hemp or hemp-derived material used for processing shall only be obtained from a producer or processor licensed by MDAR, USDA, under a USDA-approved plan from a jurisdiction outside the Commonwealth, or as otherwise authorized under federal law, and shall be accompanied by all required paperwork.

(please initial): _____ I understand that I may not use any cannabis material for processing that is not in compliance with state and federal law and otherwise not produced under a license issued in compliance with state and federal law, regardless of whether the term "hemp" is used on the package, accompanying documents, or used in any way to market such material.

Processor Certifications (Continued):

By signing this application and initialing where required, the individual signing hereby acknowledges that they have the legal authority to bind the applicant and agrees to the following:

(please initial): _____ I understand that it is my responsibility to ensure that any hemp or hemp extract received for processing complies with the testing requirements set forth by MDAR, including that it meets all THC limitations, and any other applicable testing requirements or standards set by local, state, or federal law.

(please initial): _____ I understand that any products made are subject to state and federal law, including but not limited to, the Federal Food, Drug, and Cosmetic Act, M.G.L. c. 128, Sections 116 through 123, and 105 CMR 590.00, and that it is my responsibility to ensure compliance of all products that are offered for sale in the Commonwealth or introduced into interstate commerce. I further understand that failure to comply with any legal requirements may result in further legal action, including but not limited to, the destruction of products found out of compliance, and suspension or revocation of any hemp license.

(please initial): _____ I understand that it is my responsibility to read and understand all applicable state and federal laws, regulations, and rules that govern hemp in the Commonwealth, including but not limited to, the Federal Food, Drug, and Cosmetic Act, M.G.L. c. 128, Sections 116 through 123, the regulation promulgated thereunder at 330 CMR 32.00, Hemp Production, 105 CMR 590.00, and any rules, policies, or regulations promulgated thereunder.

(please initial): _____ I understand that all finished products must be processed and manufactured in accordance with the MA Hemp Processor Policy and any other local, state, or federal requirements and must include, at minimum, the MDAR License number and Licensee Name as it appears on the license issued, batch numbers for the finished product, cannabinoid profile, ingredients, and statements.

(please initial): _____ I understand that all hemp and finished products must comply with all applicable requirements set by MDAR and the Cannabis Control Commission in order to be deemed in compliance with M.G.L. c. 94G, Section 12(f). I understand that if I am found to be processing, in possession, selling, or otherwise transferring any hemp or hemp-derived material or products not otherwise in compliance with these requirements that such activity may result in further legal action, including but not limited to, the destruction of products found out of compliance, and suspension or revocation of any hemp license.

(please initial): _____ I understand that the manufacture and use of any synthetically derived cannabinoid including, but not limited to delta-8 THC, THCO, THC10, HHO, THC-o-acetate, is prohibited to the extent that synthetic cannabinoids are not included in the definition of hemp under state or federal law.

Producer Certifications:

By signing this application and initialing where required, the individual signing hereby acknowledges that they have the legal authority to bind the applicant and agrees to the following:

(please initial): _____ I understand that upon approval of my application, I will be required to provide certain reporting information to the Farm Service Agency (FSA) as required by the USDA Final Rule and 330 CMR 32.04(5).

(please initial): _____ I understand that the seeds obtained for planting will be of a type and variety that do not exceed the maximum concentration of total THC as set forth in M.G.L. c. 128, Sections 116 through 123 and the regulation promulgated thereunder at 330 CMR 32.00, Hemp Production, and must be approved by MDAR before planting. I understand that any cannabis produced that exceeds the maximum concentration of total THC as set forth by state and federal law shall be subject to destruction.

(please initial): _____ I understand that it is my responsibility to read and understand all applicable state and federal laws, regulations, and rules that govern the production of hemp, including but not limited to, 7 CFR 990, M.G.L. c. 128, Sections 116 through 123, and the regulation promulgated thereunder at 330 CMR 32.00, Hemp Production, and any rules, policies, or regulations promulgated thereunder.

(please initial): _____ I understand that it is my responsibility to make sure that any hemp transferred or sold to or by an establishment licensed by the Cannabis Control Commission meets all applicable legal requirements.

Property Certifications:

By signing this application and initialing where required, the individual signing hereby acknowledges that they have the legal authority to bind the applicant and agrees to the following:

(please initial): _____ I certify that the Production and/or Processing Site Map(s) accurately represent the proposed area(s) to be used for Hemp Processing and/or Production, including storage and drying, and are attached to this application.

(please initial): _____ I certify that I have permission to use all Site locations listed in this application for the production and/or processing of hemp. I further understand that if the property owner rescinds permission to use any or all of the Site locations listed in this application that this will result in the suspension, revocation, or non-renewal of my license. MDAR is not responsible for any issues that arise between me and the property owner.

(please initial): _____ I understand that if any Site is subject to an Agricultural Preservation Restriction ("APR") or Agricultural Covenant held by MDAR, all activity must be conducted in accordance with the terms of the APR or Agricultural Covenant. I further understand that it is my responsibility to review and understand the terms and conditions set forth in the APR or Agricultural Covenant before commencing operation.

Is any property listed on this application subject to an APR? ☐ Yes ☐ No

If yes, please contact MDAR's APR Program to ensure compliance with any applicable requirements of the APR.
<https://www.mass.gov/agricultural-preservation-restriction-apr-program>

Is any property listed on this application subject to an Agricultural Covenant? ☐ Yes ☐ No

If yes, please contact MDAR's Farm Viability Program to ensure compliance with the terms of the Agricultural Covenant. <https://www.mass.gov/service-details/farm-viability-enhancement-program-fvep>

General Certifications: *By signing this application and initialing where required, the individual signing hereby acknowledges that they have the legal authority to bind the applicant and agrees to the following:*

(please initial): _____ I understand that the production of hemp in Massachusetts must be done so in accordance with applicable state and federal law, including but not limited to, the Agricultural Improvement Act of 2018, USDA's Final Hemp Production Rule at 7 CFR 990 ("USDA Final Rule"), M.G.L. c. 128, Sections 116 through 123, and the regulation promulgated thereunder at 330 CMR 32.00, Hemp Production. I further understand that producing hemp in violation of federal and state law may include further legal action as authorized by applicable federal and state law. This includes destruction of any crops produced in violation of applicable state and federal law.

(please initial): _____ I understand that processing hemp must be done so in accordance with applicable state law, including but not limited to, M.G.L. c. 128, Sections 116 through 123 and the regulation promulgated thereunder at 330 CMR 32.00, Hemp Production. I further understand that processing hemp in violation of state law may include further legal action as authorized by applicable state law. This includes the destruction of any hemp or hemp-derived products processed in violation of applicable state law.

(please initial): _____ I understand that it is my responsibility to ensure that I obtain any other applicable licenses, permits, or approvals required by local or state law for the type of activity to be conducted and that failure to do so may result in enforcement action, included but not limited to, the loss of my hemp license. This includes, but is not limited to, building permits and approvals under any applicable state statute or regulation or municipal regulation, ordinance, or bylaw, including but not limited to, wetland regulations, M.G.L. c. 131, Section 40, the Wetlands Protection Act, or M.G.L. c. 131A, and the Massachusetts Endangered Species Act. I further understand that these licenses, permits, or approvals may be needed prior to conducting any hemp activity and that any hemp license does not supersede or exempt the activity from any other applicable law. I understand that failure to obtain such licenses, permits or approvals shall result in the denial of any application for licensure and failure to maintain, comply, and/or remain in good standing with such may result in the suspension, revocation, or non-renewal of any license.

(please initial): _____ I understand that any individual or entity registered by MDAR to produce or process hemp shall be subject to audit, inspection, and testing pursuant to the USDA Final Rule, as applicable, M.G.L. c. 128, Sections 116 through 123, and the regulation promulgated thereunder at 330 CMR 32.00, Hemp Production at the discretion of MDAR.

(please initial): _____ I hereby give consent for MDAR to conduct both scheduled and random inspections of and around the premises on which hemp is being sown, grown, harvested, stored, or processed.

(please initial): _____ I understand that upon approval of my application, MDAR may share the location of my grow and processing sites with municipal officials, including but not limited to, the chief elected or appointed official, local law enforcement, and fire safety officials in the municipality where hemp will be produced or processed. I further understand that any information obtained by MDAR may be disclosed without further notice unless otherwise prohibited by law.

(please initial): _____ I understand that upon approval of my application, my MDAR Hemp License is valid only for the licensed entity at the location(s) indicated within this application. Licenses are not transferrable or assignable to anyone or any other location and may not be used by unlicensed entities under any circumstances.

(please initial): _____ I understand that this license is valid only for the production and processing of hemp. This license does not allow for retail or wholesale of hemp products other than those produced or manufactured by a licensee, under the terms of their license and in accordance with state and federal law. I understand that products manufactured or sold may be subject to additional state and federal law, including but not limited to, regulations promulgated by the Massachusetts Department of Public Health and/or the United States Food and Drug Administration.

I hereby certify that, to the best of my knowledge, all information provided in this renewal application is true and accurate. I understand that providing false, inaccurate, or misleading information is grounds for renewal denial, suspension, or revocation pursuant to the USDA Final Rule, M.G.L. c. 128, Sections 116 through 123, and the regulation promulgated thereunder at 330 CMR 32.00, Hemp Production. I further understand that my license to produce or process hemp in the Commonwealth expires on December 31st and that if I fail to submit a renewal application and obtain a license for the following year, I am no longer considered licensed to produce or process hemp under state or federal law.

I hereby certify that I acknowledge and understand that all information provided to MDAR as part of this renewal application and as part of my participation in the program is subject to the public records law and may be disclosed unless otherwise protected by state or federal law.

I hereby certify that I will comply with applicable state and federal laws, regulations, and rules that govern the production of hemp, including but not limited to, M.G.L. c. 128, Sections 116 through 123, and the regulation promulgated thereunder at 330 CMR 32.00, Hemp Production, and any rules, policies, or regulations promulgated thereunder, and the USDA Final Rule. I understand that failing to comply with such requirements may result in the denial, suspension, or revocation of any license, may subject me to fines in accordance with M.G.L. c. 128, Section 123, may result in the destruction of any non-compliant cannabis material or products, and/or further legal action as authorized by state and federal law.

I have read this renewal application, understand the requirements in it, and I agree to hold harmless and release the Commonwealth of Massachusetts, its officers, employees, contractors or agents from any and all claims, actions, suits, damages, judgments, attorneys' fees, or prosecution of any kind, that may arise due to my cultivation of industrial hemp conducted in accordance with the Industrial Hemp Program administered by the Massachusetts Department of Agricultural Resources pursuant to the USDA Final Rule, M.G.L. c. 128, Sections 116 through 123, and the regulation promulgated thereunder at 330 CMR 32.00, Hemp Production.

Signature: _____

Printed Name: _____ Date: _____

For official use

Date Received:

CHR Review: ☐ OK ☐ Not Attached ☐ Issue (explain): _____ Date: _____

Payment: ☐ Check ☐ Money Order Number: _____ Amt.: \$ _____

Application Attachments Checklist

- ☐ Maps for each growing and processing site that include:
 - Site Name
 - Address or Parcel Number
 - GPS coordinates in **decimal degrees** (ex. 42.3664, -71.0588)
 - Clearly marked boundaries of the growing and processing areas
 - Instructions for creating a map: <https://www.mass.gov/doc/instructions-how-to-create-a-map-of-your-site/download>
 - Find your GPS Coordinates: <https://www.mass.gov/doc/instructions-how-to-find-your-gps-coordinates-latitude/longitude/download>
- ☐ \$100 non-refundable renewal application fee paid by check or money order
 - Make checks payable to "Commonwealth of Massachusetts"
- ☐ An FBI Identity History Summary ("FBI Report") for each Key Participant (*If FBI Reports were previously submitted and you received your license in the last 3 years, you will **not** need to attach these reports to your renewal*)
 - New FBI Reports must be current to within sixty (60) days of submitting this renewal. FBI Reports are kept on file for 3 years. After 3 years, a new FBI Report must be submitted.
 - FBI Reports may be obtained via the Federal Bureau of Investigations and should be included with this application: <https://www.fbi.gov/services/cjis/identity-history-summary-checks>
- ☐ Please keep a copy of this renewal application for your records.

Please mail renewal, supporting materials, attachments, and payment to:

MDAR Hemp Program

225 Turnpike Road; Room 302
Southborough, MA 01772

Make checks payable to:

Commonwealth of Massachusetts

Questions? mahemp@mass.gov

Or visit: <https://www.mass.gov/industrial-hemp-program>