

### **Instructions**

- > Deadline: Applications must be received by the Department no later than April 30.
- Complete <u>all</u> parts of the following form to apply for a MA Hemp Producer/Processor Dual License. *Incomplete applications will not be processed.*
- Submit this application with all required maps, attachments, and the \$100 application fee.
- Upon approval, you will be billed for a Licensing fee, 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.

**Massachusetts Department of Agricultural Resources** 

225 Turnpike Road; Room 302 Southborough, MA 01772 attn.: **Hemp Program** 

Mail completed form, fees and attachments to:

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 properties with different addresses by attaching additional copies of the Production and/or Processing Site Licensing page.
- ➤ MDAR may license any or all the proposed Sites. Production and/or processing may only occur at locations that are covered by the license.
- You may have multiple production areas (i.e., fields, greenhouses, barns, or storage areas) at each Site.
- For <u>each</u> growing 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 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-latitudelongitude/download

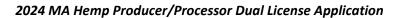


## 2024 MA Hemp Producer/Processor Dual License Application

Please type or print clearly. Incomplete or illegible forms will be returned.

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.

| 1. Applicant Information   |                               |            |                                      |  |
|--|-------------------------------|------------|--------------------------------------|--|
| 1. Applicant Name (may be individual   | or business entity – this is  | the name   | e that will appear on your license): |  |
|  |                               |            |                                      |  |
| Primary Contact Name:  |                               |            |                                      |  |
| Business Name (if applicable):   |                               |            |                                      |  |
| Mailing Address:   |                               |            |                                      |  |
| City:  | State:                        | ZIP Code:  |                                      |  |
| Primary phone: □cell □home □work   |                               | Email:     |                                      |  |
| EIN number (if applicable – Do NOT use your individual social security number):  |                               |            |                                      |  |
| Please list <u>all</u> Key Participants. You may att   | ach additional sheets if nece | essary.    |                                      |  |
| 2. 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 such management as farm, field or shift managers, unless those individuals are also identified above.  An FBI Identity History Summary (FBI Report) is required for each Key Participant in accordance with 7 CFR 990 and 330 CMR 32.03(5). FBI Reports must be current to within sixty (60) days of submitting this application.  FBI Reports are kept on file for 3 years. New/updated FBI Reports must be submitted every 3 years.  FBI Reports must 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.  No Individual Applicant or Key Participant may have been convicted of a drug-related felony within the last 10 years. |                               |            |                                      |  |
| Key Participant Name:  | Title:                        |            |                                      |  |
| Email:   | Crimina                       | al History | Report Date:                         |  |
| Key Participant Name:  | Title:                        |            |                                      |  |
| Email:   | Crimina                       | al History | Report Date:                         |  |
| Key Participant Name:  | Title:                        |            |                                      |  |
| Email:   | Crimina                       | al History | Report Date:                         |  |





|                       | Zip C  | ode:   |   |   |  |   |
|-----------------------|--|--|---|---|--|---|
| nsed <i>outdoo</i>    | <i>rs</i> at t   | his location:  |   |   |  |   |
| be licensed i         | indoo  | r <b>s</b> at this loca  | ition   | :   |  |   |
| I certify the         | at I have  | permission to use t  |   |   |  | f   |
| (if different f       | from A   | Applicant):  |   |   |  |   |
|                       | 32. C  | )wner/Mana   | ger E   | mail:   |  |   |
| each field, gree<br>: | enhous   | e, barn, or othe   | r area  | a to be licensed  | at the Site I  | isted   |
|                       |  |  |   |   |  |   |
|                       |  |  | Size  | 2:  | □acres   | □ft²  |
| □Plant Start          | ts   | □Cultivatio  | n   | □Storage  | □Dry   | /ing  |
| Longitude:            | -  |  |   | $\square$ indoor  | □ou  | tdoor   |
|                       |  |  |   |   |  |   |
|                       |  |  | Size  | 2:  | □acres   | □ft²  |
| □Plant Start          | ts   | □Cultivatio  | n   | □Storage  | □Dry   | /ing  |
| Longitude:            | -  |  |   | $\square$ indoor  | □out   | door:   |
|                       |  |  |   |   |  |   |
|                       |  |  | Size  | <b>:</b> :  | □acres   | □ft²  |
| □Plant Start          | ts   | □Cultivatio  | n   | □Storage  | □Dry   | /ing  |
| Longitude:            | -  |  |   | $\square$ indoor  | □out   | door  |
|                       |  |  |   |   |  |   |
|                       |  |  | Size  | 2:  | □acres   | □ft²  |
| □Plant Start          | ts   | □Cultivatio  | n   | □Storage  | □Dry   | /ing  |
| Longitude:            | -  |  |   | □indoor   | □out   | door  |
|                       | be licensed.  Are you the  I certify the  is between a licens  (if different f  each field, grees  Plant Start  Longitude:  Plant Start  Longitude:  Plant Start  Longitude: | nsed outdoors at to be licensed indoor. Are you the owner of the petween a licensee and pet | Are you the owner of the prop    Certify that   have permission to use the between a licensee and property owner. | be licensed indoors at this location:  Are you the owner of the property  I certify that I have permission to use the property owner.  (if different from Applicant):  32. Owner/Manager E each field, greenhouse, barn, or other area:  Size  Plant Starts | be licensed indoors at this location:  Are you the owner of the property listed above?  I certify that I have permission to use the property listed above for the between a licensee and property owner.  (if different from Applicant):  32. Owner/Manager Email:  each field, greenhouse, barn, or other area to be licensed:  Size:  Plant Starts | Insed outdoors at this location:  be licensed indoors at this location:  Are you the owner of the property listed above?  I certify that I have permission to use the property listed above for cultivation one between a licensee and property owner.  (if different from Applicant):  32. Owner/Manager Email:  each field, greenhouse, barn, or other area to be licensed at the Site I is:  Size:acres  Plant StartsCultivationStorageDry  Longitude:indoorout  Size:acres  Plant StartsCultivationStorageDry  Longitude:indoorout  Size:acres  Plant StartsCultivationStorageDry  Longitude:indoorout  Size:acres  Plant StartsCultivationStorageDry  Longitude: |

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



| 8. Processing Site Licensing Information   |            |                        |  |  |
|--|------------|------------------------|--|--|
| Site Name:   |            |                        |  |  |
| Physical Address:  |            |                        |  |  |
| City:  | State:     |                        | Zip Code:                              |  |
| Latitude:  |            | Longitude: -           |  |  |
| Site Description:  |            |                        |  |  |
| Statement of Property Ownership: Are you th  | e owner    | of the property list   | ted above?                             |  |
| If No, (please initial): I certify that I have MDAR is not responsible for any issues that arise betwee  |            |                        | sted above for processing of hemp.     |  |
| Property Owner or Manager Name (if different   | t from A   | pplicant):             |  |  |
| Owner/Manager Phone: Owner/Manager Ema   |            |                        | nail:                                  |  |
| O. Turns of Business (Johanna shook all that are   | اد باد     |                        |  |  |
| 9. Type of Processor (please check all that app  |            |                        |  |  |
| Extractor: removes a product from the hen  | np plant   | such as fiber, seed    | , oil, resin, etc.                     |  |
| ☐ Manufacturer: makes a product that will be   | e packag   | ged, labeled and rea   | ady forsale to an end user.            |  |
| ☐ Other (please explain):  |            |                        |  |  |
| 10. Processor Certifications: By signing this appli  | cation ai  | nd initialing where re | quired, the individual signing hereby  |  |
| acknowledges that they have the legal authority to l   | oind the o | applicant and agrees   | to the following:                      |  |
| (please initial): I understand that it is my   |            |                        |  |  |
| processing shall only be obtained from a producer of from a jurisdiction outside the Commonwealth, or as   |            |                        |  |  |
| by all required paperwork. Hemp may not be obtained from any jurisdiction within the United States that does not have a USDA-approved plan unless the Hemp was produced under a USDA-issued license.                                       |            |                        |  |  |
| (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 produ  |            | -                      | =                                      |  |
| limited to, the Federal Food, Drug, and Cosmetic Act, M.G.L. c. 128, Sections 116 through 123, and 105 CMR 590.001, 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 of these requirements may  |            |                        |  |  |
| result in further legal action, including the destrurevocation of any hemp license.  | action of  | r products found ou    | t of compliance and suspension or      |  |
| (please initial): I understand that it is my res   | ponsibili  | ty to read and under   | stand 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 590.001, and an  |            |                        |  |  |
| (please initial): I understand that all finished   | -          | •                      |  |  |
| 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, potency, ingredients, and stateme  | nts.       |                        |  |  |



11. 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. 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, the Massachusetts Endangered Species Act. I further understand that these licenses, permits, or approvals, may be needed prior to any activity begins and that any hemp license does not supersede or exempt the activity from any other applicable law. (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, and/or processed.

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

(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.



| <b>12. Producer Certifications:</b> 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 forthin 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.  |
| 13. 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 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  |



I hereby certify that, to the best of my knowledge, all information provided in this 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 31<sup>st</sup> 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 will comply with applicable state and federal laws, regulations, and rules that govern the production and/or processing 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, and may subject me to fines in accordance with M.G.L. c. 128, Section 123, and/or further legal action as authorized by state and federal law.

I have read this license 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: □ <b>OK</b> □ <b>Not Attached</b> | ☐Other (explain): | Date:    |
| Payment:                                      | Number:           | Amt.: \$ |

# **Application Attachments Checklist**

|                      | rowing and processing site that include:                                       |
|----------------------|--|
| • Site Na            |  |
|                      | ss or Parcel Number  |
|                      | pordinates in <b>decimal degrees</b> (ex. 42.3664, -71.0588)                   |
| •                    | marked boundaries of the growing and processing areas                          |
|                      | structions for creating a map: https://www.mass.gov/doc/instructions-          |
|                      | ow-to-create-a-map-of-your-site/download                                       |
|                      | nd your GPS Coordinates: https://www.mass.gov/doc/instructions-                |
| <u>hc</u>            | ow-to-find-your-gps-coordinates-latitudelongitude/download                     |
| □ \$100 non-refun    | dable application fee  |
| ☐ An FBI Identity I  | History Summary report for each Key Participant                                |
|                      | must be current to within sixty (60) days of submitting this application.      |
| -                    | are kept on file for 3 years. After 3 years, new FBI Reports must be submitted |
| -                    | must be obtained via the Federal Bureau of Investigations:                     |
| https://wwv          | v.fbi.gov/services/cjis/identity-history-summary-checks                        |
|                      |  |
| ☐ Please keep a co   | opy of this application for your records.                                      |
|                      |  |
|                      |  |
| Please mail applica  | tion, supporting materials, attachments, and payment to:                       |
| MDAR Hemp Progr      | am   |
| 225 Turnpike Road;   |  |
| Southborough, MA     |  |
|                      |  |
| Make checks payab    |  |
| Commonwealth of      | Massachusetts  |
|                      |  |
| Overtion 2 makes     |  |
| Questions? mahem     | p@mass.gov   |
| Or visit: https://ww | w.mass.gov/industrial-hemp-program   |