1. Business Information.

Alaska Department of Natural Resources Division of Agriculture Plant Materials Center 5310 S. Bodenburg Spur Palmer, AK 99645

PHONE: (907) 745-4469 FAX: (907) 746-1568



☐ New Application ☐ Renewal

This application is for a 1-year HEMP GROWER REGISTRATION. Non-refundable Application Fee: \$100 Mail to: Attn: Hemp Program 5310 S. Bodenburg Spur, Palmer, AK 99645, or Email to: industrialhemp@alaska.gov

Please include with this application all required fees, maps, and background check(s). An applicant is not authorized to grow or cultivate hemp until it has received the approval notice with registration number from the Division.

Background Checks are required annually for the primary applicant to determine eligibility under 7 CFR 990.6(e)(1) and as required and defined in AS 03.05.076(a)(3)(A). The report must be dated within 60 days of the application date. A grower registration approval will not be issued until a background check report is submitted.

Business Name:	
Federal EIN :	
Business License # Own	ners as identified on license:
Ownership Structure: \Box LLC \Box Corporation \Box Pa	artnership \square Sole proprietorship \square Other, If other please list
Business Mailing Address	
Business Physical Address	
2. Applicant Name and Contact Information	
Primary Contact:	
Title:	
Full Name:	
Address:	_
City:	_ State: Zip
Email:	<u> </u>
Optional Secondary Contact:	
Title:	<u>_</u>
Full Name:	
Address:	<u> </u>
City:	_ State: Zip:
Email:	<u> </u>

a) Contact Name:			b) Contac	t Name:
-			.,	Title:
				Email:
Email: Phone Number:		Phone Number:		
riione Number			Phone	vuilibei
Business Focus.				
Check all that apply.				
☐ Fiber				
☐ Grain/food products (ex:	hempseed oil)			
☐ CBD Hemp Growing				
☐ Cannabinoids (extraction				
☐ Cannabinoids (smokable				
Other:				
Site 1:				
	acres	OR	Indoor:	square feet
Outdoor:		<u>OR</u>		square feet
Outdoor: Site Name:				square feet
Outdoor: Site Name: Address:				
Outdoor: Site Name: Address: City:		State:	Zip:	Borough:
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Updated 01/01/2024.

Address:		
City:	State: Zip:	
Varieties:		
7. Criminal History.		
Has the person responsible for ma	nagement of hemp or any officer, director, stockholder, or per	son with
_	the entity seeking a license been convicted of a drug-related fe	elony in any court
of the U.S. or any state or territory		
If yes, please explain.	Ŭ YE	S ∐ NO
	penalty of unsworn falsification that 1) the application is true,	
•	the applicant has not been convicted of a felony described in vision later determines that any of this information to be fa	AS 03.05.076(a)(3)(
(B). I understand that if the Div gistration may be suspended or rev understand that before a grower re	rision later determines that any of this information to be fa	AS 03.05.076(a)(3)(alse or inaccurate, the applicant to obtain
(B). I understand that if the Diving gistration may be suspended or revunderstand that before a grower reackground check (criminal history researched).	vision later determines that any of this information to be favoked. egistration will be approved Alaska law requires the primary eport) in accordance with 7 CFR 990.6(e)(1) and AS 03.05.076(apport my hemp crop acreage to the Farm Service Agency (FSA) v	AS 03.05.076(a)(3)(a) AS 03.05.076(a)(3)(a) AS 03.05.076(a)(3)(A) \square Yes \square No
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