



Alaska Division of Agriculture Hemp Program

Pre-Harvest/Destruction Report

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A registered grower shall inform the division by mail or electronic mail of a projected harvest date for an industrial hemp crop at least 30 calendar days before the projected harvest. Following the submission of this form, the division will collect and test samples from the harvest lot before the projected harvest date (pre-harvest testing) or will inform the registrant in writing that the registrant may harvest industrial hemp from a harvest lot before division sampling and testing (post-harvest testing). This report is due for every field or indoor planted area. If the industrial hemp crop lot has failed testing and you intend to destroy, complete the appropriate questions below. A registrant shall give notice to the division of the disposal of the industrial hemp not later than 10 business days after disposal. No fee is required for destruction of hemp.

Directions: Complete all parts of the following report and submit the report, the collection fee, and all required attachments to Alaska Plant Materials Center Hemp Program, 5310 S. Bodenburg Spur, Palmer, AK 99645. The report must be complete, accurate and legible. Follow all instructions in the document. Be sure to keep a copy of the full report for your records. **NOTE:** The THC Testing Fee is separate from the Collection Fees.

The completed report may be filed electronically, mailed, or hand-delivered to the division. All associated fees must be submitted to the division at the time of submittal. Fees may be in the form of cash, check, money order or the applicant may contact the division at 907-745-4469 to pay electronically. For electronic mail submission of the report please send completed forms to industrialhemp@alaska.gov. To facsimile a completed report, send to 907-746-1568. To post mail a completed report, send to Alaska Plant Materials Center Hemp Program, 5310 S. Bodenburg Spur, Palmer, AK 99645. This form is due for every field or indoor area planted.

Registered Grower Name:	
Name of Signing Authority on License (if business):	
Registration Number:	
Email:	Phone:
Total Number of Harvest Lots Requested to be sampled and tested:	

- 1) **Indicate type of reporting:** Harvest (questions 2-6, and 9)
 Destruction of failed crop (questions 2-3, and 7-9)
- 2) **Indicate Grow Area Type:** Field/Outdoor Greenhouse/Indoor
- 3) **Indicate Registered Growing Address for this report:**

Planting Address (MUST match Address on Grower Registration Agreement)	City	Zip Code

- 4) **Provide initial harvest info in the table below. The “Location ID” must correspond to the Location ID found on the registered site in the *Grower Registration Agreement*.**

Location ID (must match Location ID in Grower Agreement)	Variety/Strain	Acres/square feet in this harvest	Primary Harvest (Grain, Fiber, Floral)	Declared Harvest Date	Expected completion Date (NO more than 15 days later)	Will this be a complete harvest for this plot?
Ex: PMC South Field 2020	Berry Blossom	4.5 ac	Floral	8/15/2020	8/25/2020	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No

***If all industrial hemp harvests are not represented on this form, future harvests must be reported on additional forms. Attach additional sheets as necessary.**

- 5) **Were any pesticide(s) used on the hemp after planting?** Yes No
- If “Yes”, indicate:
- a. Applicator License number: _____
- b. Product(s) used: _____

6) Is any harvest listed in Item (4) of floral material? Yes No

If “Yes”, the registrant is prohibited from co-mingling or moving the harvested lot from its storage location until testing confirms delta-9-THC levels of the harvested lot are not more than 0.3 percent.

7) If the industrial hemp crop lot has failed (tested above 0.3 percent delta-9-THC) and you intend to destroy, complete the information in the table below*. The Location ID MUST correspond to the Location ID found on the registered site in the *Grower Registration Agreement*.

Location ID (must match Location ID in Grower Application)	Variety/Strain	Acres/square feet proposed for destruction	Date of Proposed Destruction	Reason for Proposed Destruction	Proposed Method of Destruction	Will this be a complete destruction of all hemp in this plot?
Ex: PMC North Field 2020	Cherry Wine	3.5 ac	7/15/2020	Exceeds delta-9-THC limit	Mowing mixed with food waste	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No

*The registrant may elect to recondition the failing lot with another lot within testing levels in an attempt to reduce the delta-9-THC of the reconditioned lots to not more than 0.3 percent. A registrant may also request written authorization from the division to utilize industrial hemp waste, such as spent floral material, for another purpose if the reconditioned lots still exceed the 0.3 delta-9-THC or if the registrant chooses not to recondition the lot.

8) If planning to destroy your crop, attach pictures of the hemp plot(s) intended for destruction.

Pictures attached

9) Indicate if you have any other hemp remaining on your property. Yes No

NOTE: If you are growing any other hemp NOT reported on this form, you will need to complete another Pre-Harvest/Destruction Report at least 30 calendar days before the projected harvest or not later than 10 business days after disposal of a failed industrial hemp crop.