



INDUSTRIAL HEMP APPLICATION TO AMEND REGISTERED SITE/CULTIVAR/ PLAN

Registrant Name: _____	
Registration #: _____	Request to Amend: <input type="checkbox"/> Cultivation Site <input type="checkbox"/> Cultivar <input type="checkbox"/> Variety Development Plan

CULTIVATION SITE/CULTIVAR INFORMATION

Site #: _____ Add Remove Edit

Physical Address: _____		
City: _____	Zip: _____	Site Purpose: <input type="checkbox"/> Cultivation <input type="checkbox"/> Storage <input type="checkbox"/> Both
Global Positioning System (GPS) coordinates (Coordinates should be from the approximate center of the growing area) Latitude: _____ Longitude: _____		Size: <input type="checkbox"/> Acres <input type="checkbox"/> Square Feet

Legal Description of Site: _____
REQUIRED: Attach a map showing boundaries of this growing area for cultivation site addition and edits.

Is this site on a premise that is or will be licensed to cultivate or process cannabis? Yes No

County Use Only: Site #: _____ Approved Not Approved Effective Date: _____

Approved Cultivar	State/Country of Origin	Certified?	Amendment Type	County Use Only
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved Effective Date: _____
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved Effective Date: _____
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved Effective Date: _____

REQUIRED: Attach documentations to meet 3 CCR § 4920 for each new cultivar.

VARIETY DEVELOPMENT PLAN (check all the amendment(s) that applies)

<input type="checkbox"/> Seed Certifying Agency	<input type="checkbox"/> Cultivars/Development Use of Cultivars	<input type="checkbox"/> THC Testing	County Use Only <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved Effective Date: _____
<input type="checkbox"/> Destruction	<input type="checkbox"/> Unlawful Use Prevention	<input type="checkbox"/> Record Maintenance	

REQUIRED: Attach the amended variety development plan.

SUBMIT APPLICATION TO COUNTY AGRICULTURAL COMMISSIONER:

**County of
 Agricultural Commissioner's Office**

By signing below, I hereby certify that:

- the information submitted on this application is true and correct to the best of my knowledge and belief.
- the cultivation site(s) to be registered for cultivation is not on a premise that is licensed by the department to cultivate or process cannabis.
- I will comply with all requirements outlined in Division 24 of California Food and Agricultural Code and in Title 3 of California Code of Regulations.
- I understand that any changes to the cultivation site, cultivar, and/or variety development plan must be provided to the county agricultural commissioner prior to planting.

 Signature Print Name and Title Date

County Use Only:			
Date Received: _____	Reg. #: _____	Amendment #: _____	Reviewed By: _____

Registrant Name:

**INDUSTRIAL HEMP REGISTRATION
 SUPPLEMENTAL FORM TO AMEND ADDITIONAL
 REGISTERED SITES/CULTIVARS**

CULTIVATION SITE/CULTIVAR INFORMATION

Site #: _____

Add

Remove

Edit

<i>Physical Address:</i>		
<i>City:</i>	<i>Zip:</i>	<i>Site Purpose:</i>
<i>Global Positioning System (GPS) coordinates (Coordinates should be from the approximate center of the growing area)</i>		<input type="checkbox"/> Cultivation <input type="checkbox"/> Storage <input type="checkbox"/> Both
<i>Latitude:</i>	<i>Longitude:</i>	

Legal Description of Site:

REQUIRED: Attach a map showing boundaries of this growing area for cultivation site addition and edits.

Is this site on a premise that is or will be licensed to cultivate or process cannabis? Yes No

County Use Only: Site #: Approved Not Approved Effective Date: _____

Approved Cultivar	State/Country of Origin	Certified?	Amendment Type	County Use Only
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved Effective Date: _____
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved Effective Date: _____
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved Effective Date: _____

REQUIRED: Attach documentations to meet 3 CCR § 4920 for each new cultivar.

CULTIVATION SITE/CULTIVAR INFORMATION

Site #: _____

Add

Remove

Edit

<i>Physical Address:</i>		
<i>City:</i>	<i>Zip:</i>	<i>Site Purpose:</i>
<i>Global Positioning System (GPS) coordinates (Coordinates should be from the approximate center of the growing area)</i>		<input type="checkbox"/> Cultivation <input type="checkbox"/> Storage <input type="checkbox"/> Both
<i>Latitude:</i>	<i>Longitude:</i>	

Legal Description of Site:

REQUIRED: Attach a map showing boundaries of this growing area for cultivation site addition and edits.

Is this site on a premise that is or will be licensed to cultivate or process cannabis? Yes No

County Use Only: Site #: Approved Not Approved Effective Date: _____

Approved Cultivar	State/Country of Origin	Certified?	Amendment Type	County Use Only
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved Effective Date: _____
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved Effective Date: _____
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved Effective Date: _____

REQUIRED: Attach documentations to meet 3 CCR § 4920 for each new cultivar.

INDUSTRIAL HEMP APPLICATION TO AMEND REGISTERED SITE/CULTIVAR/PLAN INSTRUCTIONS

APPLICATION INSTRUCTIONS

Registrant must complete all fields in the section(s) to be amended. All information provided must be complete, legible, and accurate. Any incomplete section or illegible information may delay the processing of the amendment to the registration.

Registrant Information

Registrant must provide the **Full Name** and the valid **Registration Number**.

Request to Amend Registration

Registrant must check the corresponding box(es) next to section(s) to be amended.

Cultivation Site/ Cultivar Information

Registrant must complete all sections for each cultivation site within the county and list the approved cultivar(s) to be planted for each cultivation site that is to be added, removed, or edited. Additional cultivation sites/cultivar to be added, removed, or edited must be listed on the supplemental form to amend additional registered sites and cultivars.

- A **Cultivation Site** is a contiguous area with no breaks (e.g., fences, trees, roads, etc.) dividing the area. Each noncontiguous field is considered a separate cultivation site.
- **Site number** is the assigned number provided by the county agricultural commissioner for a registered cultivation site. If the cultivation site is to be added to the registration, do not provide a site number.
- Indicate the **Amendment** type for the cultivation site: add, remove, or edit the cultivation site.
- **Physical address** is the location address of the cultivation site. Use cross streets if the cultivation site does not have a physical address.
- Indicate if the cultivation site is for cultivation, storage, or both in **Site Purpose**.
- **Global Positioning System (GPS) coordinates** must be from the approximate center of the growing area and in the format of decimal degrees, up to six decimals with a negative longitude (i.e., 38.574968, -121.492337 **NOT** 38°N and 121°W).
- Indicate the acreage or square footage of the cultivation site in **Size**.
- Include information to describe, locate, and identify the boundaries of the cultivation site in **Legal Description**. A legal description is required if the cultivation site does not have a physical address. Information like assessor's parcel numbers (APN), operator identification number for Pesticide Use Enforcement, and Section Township Range can be provided in this section.
- A **Boundary Map** outlining each cultivation site must include the registrant name, physical address of each site (if available), labels for all roadways, labels for each cultivation site (Site 1, Site 2, etc.) that corresponds to site # on the application, and a boundary outline of each cultivation site.
- Indicate whether the cultivation site is on a **Premise** that is or will be licensed to cultivate or process cannabis.
- Provide the **Name** of each approved cultivar and **Origin** (state or country) of the approved cultivar. If cultivar was produced in California, provide the county of origin.
- Indicate the **Amendment Type** (add or remove) for the cultivar.
- Attach the **Documentation to Meet 3 CCR § 4920** for each new cultivar.

VARIETY DEVELOPMENT PLAN

Registrant must indicate all that applies to the changes of the variety development plan. The changes to the variety development plan include:

- **Seed Certifying Agency:** if a new cultivar is to be certified by a seed-certifying agency, the name of the seed-certifying agency that will be conducting the certification,
- **Cultivars/Development Use of Cultivars:** the industrial hemp varieties that will be used and, if applicable, how those varieties will be used in the development of a new cultivar,
- **THC Testing:** a plan for testing THC concentration of all the plants grown,
- **Destruction:** the measures that will be taken to destroy any plants with THC concentrations that test above 0.3 percent,
- **Unlawful Use Prevention:** the measures that will be taken to prevent the unlawful use of industrial hemp under FAC Division 24, and
- **Record Maintenance:** a procedure for the maintenance of records documenting the development of the new cultivar.

REGISTRATION AMENDMENTS

Registrants must submit an application for any changes or alterations to the business name, contact information, or key participants within 15 calendar days of the change in accordance with 3 CCR Section 4901(c)(1). The registrant must complete the [Industrial Hemp Application to Amend Registered Contact/Business/Key Participant Information](#).

Any changes to the registrant require a new application and registration fee prior to planting.

ALTERNATIVE FORMATS

This application can be made available in alternative formats for visual or hearing-impaired individuals. Please contact the California Department of Food and Agriculture (916-654-0435 or industrialhemp@cdfa.ca.gov) to request the application in an alternative format. Please allow 7-10 working days for production of the alternative format. Requests for an alternative format may be sent to the address and telephone number below.

If you have additional questions, please contact the County Agricultural Commissioner's office.

County of
Agricultural Commissioner's Office