



Louisiana Department of Agriculture & Forestry
Mike Strain DVM, Commissioner
Seed Programs Division 5825 Florida Blvd, Suite 3004, Baton Rouge, LA 70806
Phone (225) 925-4733; Fax (225) 925-4124

LDAF Industrial Hemp Program 2021 CONTRACT CARRIER LICENSE APPLICATION PACKET

Guidelines and Instructions

- The Louisiana Department of Agriculture & Forestry (“LDAF”) is authorized by R.S. 3:1465 and pursuant regulations to issue licenses and regulate industrial hemp in Louisiana. Prior to the cultivation, processing or contracting to transport industrial hemp, a person must first submit an application and receive an industrial hemp license from LDAF. Applications should be submitted to: **Louisiana Department of Agriculture & Forestry, Industrial Hemp Program, 5825 Florida Blvd., Suite 3004 Baton Rouge, LA 70806**, or hand-delivered to one of the LDAF district offices. See attached district office map. All information in this application packet must be complete, and the application returned to LDAF along with any required fees and documentation.

If you need assistance completing this application, please contact us by phone at 225-925-4863 or by email at industrialhemp@ldaf.la.gov.

- **Contents of Application Packet**

- Guidelines and Instructions
- Instructions for submitting to State and Federal Background Checks
- *Designated Responsible Party Declaration* Form
- *Key Participant Disclosure* Form
- LDAF District Office Map
- License Application - Please submit only the application (Pages 1-3) and the required forms and documentation. Do not submit the guidelines and instructions.

- **License Application Submittal** – Industrial hemp applications are accepted at any time during the year. Industrial hemp license applications must be submitted and approved prior to cultivating, processing or contracting to transport industrial hemp. LDAF recommends that applicants use a delivery method with tracking capabilities when submitting an application. LDAF is not responsible for applications lost in the mail or not received. Applicants should keep a copy of the completed application, all attachments, and, if applicable, the mail receipt and tracking number for your records.

- **Fee Schedule** - A \$500 license fee is due upon notification of application approval. The license fee is payable by check or money order to LDAF. No license shall be issued until full payment of the fee is received by LDAF.

- **Application File Format** – Industrial hemp applications are available in an electronic fillable form. If you do not have compatible software for the fillable form, please print out the form and complete the form manually and legibly. LDAF is not responsible for missing information due to formatting, or printing errors by applicants.

- **Public Records Law** - Applications and any attachments may be subject to the Louisiana Public Records Law (R.S. 44:1 *et seq.*).

- **Registering a Business Entity** - Louisiana law requires licenses to be issued in the applicant's name. However, applicants may request to register their business entity with LDAF. In addition to the information required on the application, applicants must supply the following information when registering their business entity.
 - Submission of a *Key Participant Disclosure* form for all registered business entities. A *Key Participant* is a sole proprietor, a partner in partnership, or a person with executive managerial control in a corporation. A person with executive managerial control includes persons such as a chief executive officer, chief operating officer and chief financial officer. This definition does not include non-executive managers such as farm, field, or shift managers.
 - Submission of a *Designated Responsible Party Declaration* form for all registered business entities. The *Designated Responsible Party* is the person designated by the applicant or licensee as responsible for facility operations of the applicant, and their registered facilities.
 - If an applicant or licensee requires a change of the Designated Responsible Party or Key Participants anytime during the application process or after a license is issued, the applicant or licensee must submit a new *Designated Responsible Party Declaration* or *Key Participant Disclosure* form, current background checks, and copy of the new Designated Responsible Party's driver's license to LDAF.

- **Application Review** - LDAF will evaluate each application to verify that the application is complete and required documents are included. After the evaluation is completed, applicants will be notified of the application status. Applications must be complete, accurate, and legible. Follow all instructions in the document. LDAF is not required to request additional information for clarity of the application. Any license application missing required information may be subject to denial.

- **Prohibited Activities** - The activities listed below are prohibited activities. A current licensee found to be conducting or participating in any of these activities may be subject to regulatory actions, including but not limited to license revocation and forfeiture or destruction of all cannabis materials in their possession.
 - Cultivating, processing or contracting to transport cannabis that is not industrial hemp (greater than the federally defined THC level for hemp).
 - Possessing or cultivating industrial hemp plants or plant parts on any site not approved in the Licensing Application, or subsequent Site Modification Request form.
 - Cultivating or storing industrial hemp:
 - in any structure that is used for residential purposes;
 - in any outdoor field or site that is located within 1,000 feet of a school, or public recreational area; and
 - on property which is not owned or leased by the licensee.
 - Violating the restrictions outlined in *§1325 Restrictions on Sale or Transfer* of the industrial hemp regulations.
 - Allowing unsupervised public access to industrial hemp plots.

- **Criminal Background Checks**
 - All industrial hemp applicants, designated responsible parties, and key participants must undergo state and federal criminal background checks and submit fingerprint identification. The resulting certified criminal background check reports must accompany each license application.
 - Before a license will be approved, the background check report will be reviewed by LDAF for applicant eligibility.
 - State and federal background checks are required annually for each applicant, designated responsible party and key participants, and are valid for a period of 60 days prior to submission of license application.

INSTRUCTIONS FOR COMPLETING STATE AND FEDERAL CRIMINAL BACKGROUND CHECKS

- **State Background Check Procedures**

1. Download and complete the LSP *Right to Review Authorization* and the *Right to Review Disclosure* forms. The forms can be accessed at <http://www.lsp.org/technical.html#criminal>.

2. State background check requests are processed by the Louisiana State Police, Criminal Records Dissemination Section. (LSP)

*LSP, Criminal Records Dissemination Section
7919 Independence Blvd., Baton Rouge, LA 70806
Phone: 225-925-6095
Business hours: M-F 8:00 AM - 3:30 PM Central Time.
Website: <http://www.lsp.org/technical.html#criminal>*

3. Deliver the completed forms along with acceptable form of payment in person to the LSP.

4. Submit to fingerprinting and request a set of fingerprint cards to submit to FBI for federal the background check.

5. Applicants will be given in person their certified *Right to Review* and *State Background Check* which must be submitted to LDAF with application.

- **Federal Background Check Procedures**

1. Request Fingerprint cards (*Form FD-258*) from LSP.

2. Visit the FBI Identity History Summary Checks website at:
<https://www.fbi.gov/services/cjis/identity-history-summary-checks>.

3. Applicants should choose Option 1 or 3 (do *not* choose option 2) to complete the background check.

4. Applicant will receive the background check report electronically or by mail, depending on the requested reporting method. The report must be submitted to LDAF with the license application.

NOTE: Applicant is responsible for providing an official “disposition clarification” from the local Clerk of Court or District Attorney Offices for any reported charges with unknown disposition.

All State Criminal Background Check forms and payments must be hand-delivered or mailed to LSP and FBI Background Check forms and payments mailed to FBI. DO NOT SEND THIS INFORMATION AND PAYMENT TO LDAF.



LOUISIANA DEPARTMENT OF AGRICULTURE & FORESTRY

MIKE STRAIN DVM, COMMISSIONER

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LDAF Industrial Hemp Program
Designated Responsible Party Declaration Form

This form must be completed and submitted with each business entity industrial hemp application.

This completed form is a required attachment for all industrial hemp program business entity applications.

If completing this form electronically, navigate the form with the mouse or select the next field using the down arrow key.

Table with 2 columns: Name of Business Entity, Complete Physical Address

I hereby declare that:

Table with 2 columns: Printed Name, Title, Phone, Email

*The Designated Responsible Party listed above is required to have an annual background check and copy of driver's license on file with LDAF prior to license being issued.

is the Designated Responsible Party for all daily business operations and is authorized to sign all required industrial hemp program documents on the entity's behalf. The entity acknowledges that a change of Designated Responsible Party requires written notice to LDAF.

I certify that this information is true and correct.

Signature of owner, registered agent, or managing member

Printed Name

Date

Signature of designated responsible party

Printed Name

Date



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LDAF Industrial Hemp Program
Key Participant Disclosure Form

This form must be completed and submitted with each business entity application.

1. Business Entity Information

If completing this form electronically, navigate the form with the mouse or select the next field using the down arrow key.

Table with 2 columns: Field Name (Name of Business Entity, Name of Applicant, Physical Address of Business, City, State & Zip) and Input Field.

2. List the names, titles and email addresses of ALL key participants in the table below.

NOTE: A Key Participant is a sole proprietor, a partner in partnership, or a person with executive managerial control in a corporation. A person with executive managerial control includes persons such as a chief executive officer, chief operating officer and chief financial officer. This definition does not include non-executive managers such as farm, field, or shift managers.

Table with 2 columns: Key Participant (1-4) and Fields (Name, Title, Email Address).

3. Attach sheets as necessary for additional key participants. If additional sheets are attached, indicate total number of sheets attached: _____

I hereby verify and affirm that all of the information contained on this form is true and accurate. I understand that if LDAF later determines any of this information to be false or inaccurate, the industrial hemp license may be withheld or revoked.

Signature of applicant

Printed Name

Date

LOUISIANA DEPARTMENT OF AGRICULTURE & FORESTRY











MIKE STRAIN DVM, COMMISSIONER

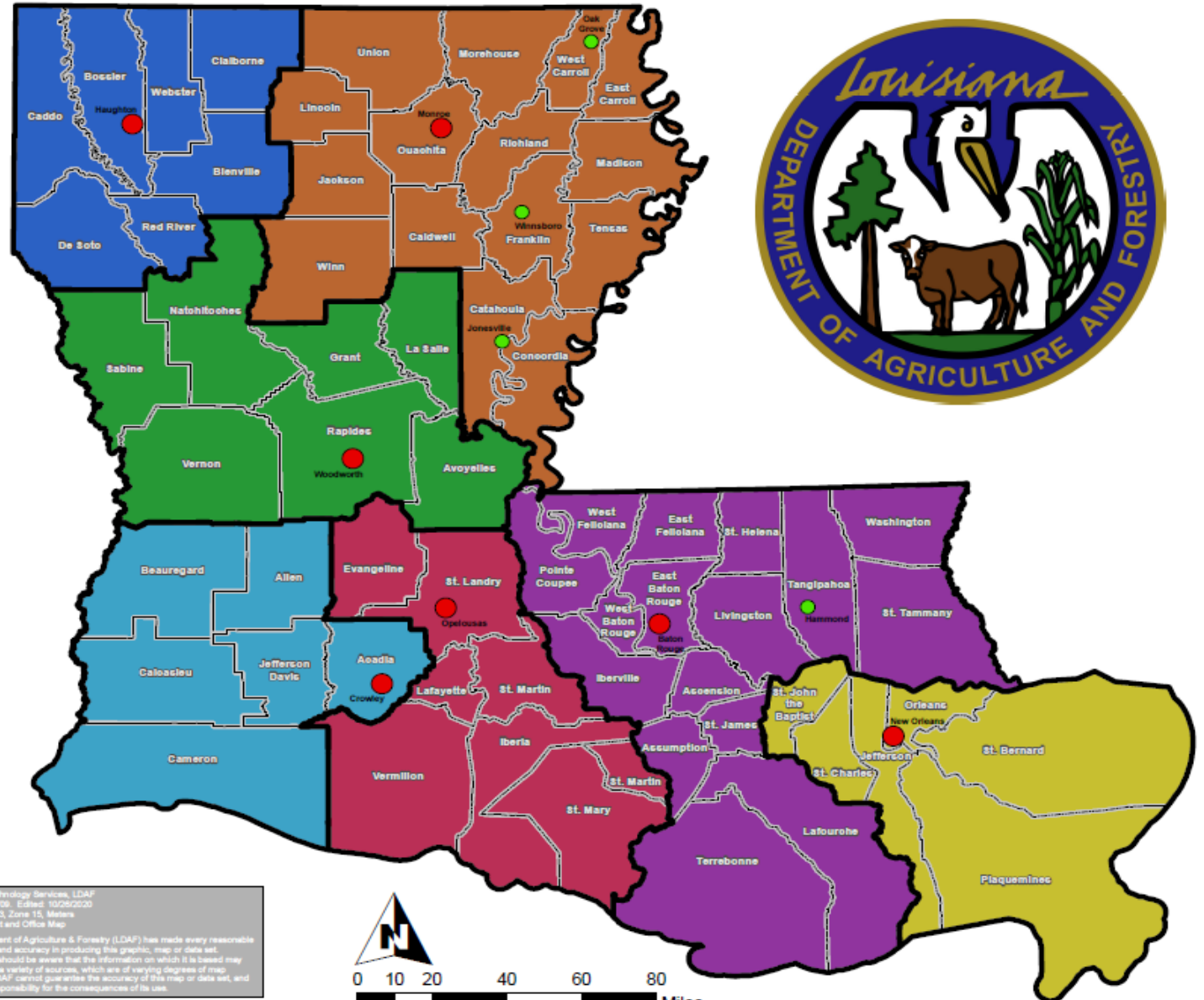
Office of Agricultural and Environmental Sciences

(225) 925-3770



Legend

-  AES District Boundary
-  Parish Boundary
-  Alexandria District
616 Forestry Rd.
Woodworth, LA 71486
TEL: 318/487-6090
FAX: 318/487-6767
-  Baton Rouge District
6826 Florida Blvd
Baton Rouge La 70808
TEL: 226/922-1274
FAX: 226/926-3760
-  Crowley District
110 S. Westam Ave.
Crowley, LA 70628
TEL: 337/788-7529
FAX: 337/788-7673
-  Monroe District
764 Hwy. 80 East
Monroe, LA 71203
TEL: 318/346-7686
FAX: 318/346-1774
-  New Orleans District
Room #1034
1100 Robert E. Lee Blvd.
New Orleans, LA 70124
TEL: 604/288-1126
FAX: 604/288-1128
-  Opelousas District
1810 Creswell Lane
Opelousas, LA 70670
TEL: 337/848-0230
FAX: 337/848-0229
-  Shreveport District
740 Covington Road
Houffton, LA 71037
TEL: 318/948-3226
FAX: 318/948-8848
-  AES District Offices
-  AES Satellite Offices

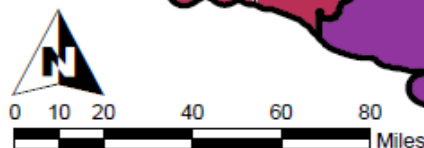


AES Satellite Offices

HAMMOND 47078 North Morrison Blvd. Hammond, LA 70401-7308 TEL: (886) 643-4028 FAX: (886) 643-4026	OAK GROVE 10366 Highway 17 Oak Grove LA 71283 TEL: (318) 428-0116 FAX: (318) 428-5463
JONESVILLE 1685 Martin Luther King Dr Jonesville LA 71343 TEL: (318) 338-7942 FAX: (318) 338-8036	WINNABORO 212A Macon Ridge Rd. Winnaboro LA 71296 TEL: (318) 436-2186 FAX: (318) 436-2816

Author: Information Technology Services, LDAF
 Production Date: 05/09/08, Edited: 10/26/2020
 Projection: UTM NAD 83, Zone 15, Meters
 Application: AES District and Office Map

The Louisiana Department of Agriculture & Forestry (LDAF) has made every reasonable effort to ensure quality and accuracy in producing this graphic, map or data set. Nevertheless, the user should be aware that the information on which it is based may have come from any of a variety of sources, which are of varying degrees of map accuracy. Therefore, LDAF cannot guarantee the accuracy of this map or data set, and does not accept any responsibility for the consequences of its use.



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LDAF Industrial Hemp Program
2021 Contract Carrier License Application

Any person interested in contracting to transport industrial hemp plants, plant parts and products must first submit a Contract Carrier license application and receive a Contract Carrier license from LDAF prior to engaging in the regulated profession. NOTE: Applicants must receive a Contract Carrier license from LDAF before contracting to transport any industrial hemp plants, plant parts or products.

Directions: Complete all parts of this application. Enter the applicant name on the top of pages 2-3. Submit the application and all required attachments and documentation to the Louisiana Department of Agriculture & Forestry, Industrial Hemp Program, 5825 Florida Blvd., Suite 3004, Baton Rouge, LA 70806, or hand-deliver to one of the LDAF district offices. See attached district office map. Be sure to keep a copy of the completed application and all supporting documents for your records.

Read and carefully follow all instructions on the previous pages before completing this application.

If completing this form electronically, navigate the form with the mouse or select the next field using the down arrow key.

Form with sections: 1. Applicant Information (Name, Address, Email, Phone), 2. Applicant's Business Information (Business Name, Registration, Type, EIN, Address, Email, Phone)

3) Read each statement below and check the box next to the statement to indicate your understanding and agreement:

[] The \$500 license fee is non-refundable after the license has been issued.

OFFICIAL USE ONLY
Date Received:
Application Status Notification Date:
Date License Fee Received:
License No:

AES-28-06 (R12/20)



OFFICE USE
Transmittal #
Check #
Date
Amt. \$.00

Applicant Name: _____

- I will not knowingly contract to transport cannabis that is not industrial hemp (cannot have a THC concentration of more than federally defined THC level for hemp).
- I understand that the Louisiana Industrial Hemp Law requires a dated invoice, bill of lading, or manifest in my possession during the entire time I am transporting or delivering industrial hemp. The invoice, bill of lading or manifest must contain the seller's and purchaser's name and address, specific origin and destination, and quantity of industrial hemp transported.
- I have read and understand the Louisiana law and administrative regulations regarding industrial hemp.

Acknowledgments

Read each of the acknowledgment statements below and check "Yes" or "No" to indicate your understanding and acceptance of each statement.

- 1) I acknowledge that LDAF is not responsible for missing information due to formatting or printing errors on the user end. LDAF is not responsible for applications lost in the mail or not received.
 Yes No
- 2) I acknowledge that LDAF is not obligated to ask follow-up questions during the application review process. The written responses on this application and attachments shall be the sole source of information under consideration for potential participation in the LDAF Industrial Hemp Program.
 Yes No
- 3) I acknowledge that this is a selective process and only those applications that meet the criteria set forth in the Louisiana Industrial Hemp Law and regulations will be approved for licensing.
 Yes No
- 4) I acknowledge that, upon request from LDAF, Louisiana State Police, or other state or local law enforcement officers, license holders must immediately produce a copy of their contract carrier license, or other required program documentation for inspection.
 Yes No
- 5) I consent that, the commissioner or his authorized agent(s) shall have access, during normal working hours, to any premises where industrial hemp plants or plant parts are being processed, transported, produced, cultivated, and/or stored for the purpose of inspection, investigation, and/or collection of samples for testing. The commissioner or his authorized agent(s) may inspect any industrial hemp seed, plants, or plant parts located on the premises.
 Yes No
- 6) I acknowledge that I, or the designated responsible party, shall be available on location by appointment for on-site visits by LDAF for the purpose of inspections or sampling.
 Yes No
- 7) I affirm that, if I am issued a license, I shall not allow other persons, not directly employed by me, to process, handle, or store under my license in lieu of their own license with LDAF.
 Yes No
- 8) I acknowledge that I will renew my license annually if intend to engage in regulated program activities. I further acknowledge that past participation does not guarantee or imply automatic approval for future participation.
 Yes No

Attachments

Check all attachments below that you are submitting with this application. In addition to those listed, attachments may include extended answers to any question in the application or other supporting documents. If the attachment is supplementary information to a question in this form, be sure to: 1) include the associated question number on the document; and 2) start each new question attachment on a new page.

Applicant Name: _____

- Copy of Driver's License for the Applicant
- Copy of Driver's License for the Designated Responsible Party
- State and Federal Certified Background Check Report for the Applicant,
- State and Federal Certified Background Check Report for the Designated Responsible Party and all Key Participants.
- Completed *Designated Responsible Party Declaration* form.
- Completed *Key Participant Disclosure* form.
- Other Attachments (describe): _____

I hereby verify and affirm that all of the information contained in this license application is true and accurate. I understand that if LDAF later determines any of this information to be false or inaccurate, the Contract Carrier license may be withheld or revoked.

Signature of Applicant

Printed Name of Applicant

Date