

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 SITE MODIFICATION REQUEST FORM

The Industrial Hemp Law (R.S. 3:1461 et seq.) and regulations require LDAF approval of all sites <u>prior</u> to growing, handling, processing, or storing industrial hemp material at that site.

INSTRUCTIONS FOR COMPLETING THIS FORM

- □ Enter your license information and the type of modification requested in Section I.
- □ Enter the information for the site you wish to add in the appropriate area of Section II.
- □ Enter the information for the site you wish to remove in Section III.
- □ Check off and/or enter information for attachments in Section IV.
- Email the completed form to <u>industrialhemp@ldaf.state.la.us</u> or mail the hardcopy form to the LDAF Industrial Hemp Program 5825 Florida Blvd., Suite 3004, Baton Rouge, LA 70806.
- □ You will receive a written response to your request via email at the email address on record for your license.
- Vou may attach additional sheets as necessary for the addition or removal of multiple sites. The additional sheets must provide all required information for each site.
- The *Site ID* is a unique identifier designated by the applicant/licensee and should be used to identify the specific site in all reports to LDAF.

SECTION I – LICENSEE INFORMATION

1) **Licensee Information** (Enter the licensee information in the table below.)

Licensee Name:				Email:
License Type: (choose the license type below in which this site				will be used)
□ Grower	□ Seed Producer	□ Handler	□ Processor	License No:

2) <u>Type of modification</u> (Check the type of site(s) you are adding or removing. Check all that apply.)

□ Outdoor field production site □ Greenhouse or indoor production site □ Handling, storage, or processing site

SECTION II – ADDING A NEW SITE

1) **Outdoor Field Production Site** (Enter the information for the field production site you are requesting to be added in the table below.)

Site ID:			Choose one: \Box Rent \Box Own		
Physical Address of Field Production Site City		State	Zip	Parish	
GPS Latitude (decimal degree format)	GPS Longitude (decimal de	gree form	at)		
EX: 29.83726000	EX: -90.3394100	0.33941000 Acres		Acres	

LDAF OFFICE USE ONLY			
The requested Outdoor Field Production Site 🗆 is approved; 🗆 is not approved.			
Comments:			
LDAF Representative: Date:			

2) <u>Greenhouse or Indoor Production Site</u> (Enter information for the greenhouse or indoor growing structure you are requesting to be added in the table below.)

Site ID:			Choose one: \Box Rent \Box Own		
Physical Address of Greenhouse/Indoor Site City		State	Zip	Parish	

Licensee Name:

GPS Latitude (decimal degree format)	GPS Longitude (decimal degree format)	
EX: 29.83726000	EX: -90.33941000	Ft^2

LDAF OFFICE USE ONLY			
The requested Greenhouse/Indoor Production Site is approved; is not approved.			
Comments:			
LDAF Representative: Date:			

3) Handling, Storage, or Processing Site (Enter information for the handling, storage, or processing site you are adding in the table below.)

Site ID:			Choose one: □ Rent □ Own		
Physical Address of Handling, Storage or Processing Site	City	State	Zip	Parish	
GPS Latitude (decimal degree format)	GPS Longitude (decimal de	gree forma	at)	Purpose	
EX: 29.83726000	EX: -90.33941000		((check all that apply)	
			🗆 Proc	cess □ Handle □ Store	

LDAF OFFICE USE ONLY			
The requested Handling, Storage or Processing Site 🗆 is approved; 🗆 is not approved.			
Comments:			
LDAF Representative: Date:			

SECTION III – REMOVING A SITE

Enter the Site ID for the growing, handling, storage, or processing site being removed in the table below.

NOTE: Site IDs should appear exactly as they are submitted on your license application or Site Modification Request Forms.

Site Type	Site ID	Site ID	Site ID
Outdoor Field Production			
Greenhouse or Indoor Production			
Handling/Storage/Processing			

SECTION IV – ATTACHMENTS

Check the attachments being submitted with this site modification request.

I hereby verify and affirm that all information contained in this *Site Modification Request* is true and accurate. I also understand if LDAF later determines any of this information to be false or inaccurate, the request may be denied, and my license may be withheld or revoked.

Printed Name of Licensee or Designated Responsible Party

Signature of Licensee or Designated Responsible Party

Date