

ARIZONA DEPARTMENT OF AGRICULTURE

ENVIRONMENTAL & PLANT SERVICES DIVISION - INDUSTRIAL HEMP PROGRAM

postal: 1802 W. Jackson St., #78, Phoenix, AZ 85007 physical:1110 W. Washington St., Phoenix, AZ 85007 phone: 602-542-0955 - email: azhemp@azda.gov

INDUSTRIAL HEMP PROGRAM LOCATIONS SUPPLEMENT

Please provide all location information as applicable and submit with the Hemp Application Form. Applicants must also include a labeled map(s) of the locations registered.

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OVERVIEW OF REGISTERED LOCATIONS									
0	Nursery								
Total No. of Outdoor			Total Numb	er of Nursery	To	otal Area to Register			
Growing Locations:	Total Outdoor Acres:		Loca	ations:		(Square Feet)			
			Harv	ester/		Transporter			
Total No. of Indoor			Total No. o	of Harvester	Tot	al No. of Transporter			
Growing Facilities:	Total Indoor Sq. Ft.:		Oper	ations:		Operations:			
Processor									
Total No. of Processing Facilities/Units:			Total No. of Mobile Units:						
Hemp Parts to be processed (Check All That Apply)									
□ Stalk / Fiber □ Sterile See			ed			S			
		Hurds	Roots						
☐ Other:									

Provide a list of all locations you wish to register by completing the tables on the next page. If registering more than 3 locations, complete an "Additional Location Supplement" form and submit with the application.

Note the Following:

- GPS coordinates for each field and building shall be provided, in decimal degrees, to at least five decimal places (*For example: 33.54321*).
- A map or labeled aerial photo is required of all registered locations and must include all items listed in the *Instructions for Creating Maps*.
- Location IDs used in the tables **MUST** be consistent on all future report forms.
- A unique Location ID number must be supplied for each location. Location ID numbers must be unique in nature and not repeated in your entire operation, even if located in separate areas of the state. (For example: G1, G2, GH1, and GH2 for 2 outdoor growing locations and 2 indoor greenhouse growing locations.)
- If, after a license has been issued, any request to add locations, relocate existing locations will need to be requested by completing and submitting a site modification form (HempSiteModification), and include the site modification fee of \$300. To remove a location from the license, complete and submit a site modification form. No fee is required to remove a location, or if additions or relocations are submitted during the renewal process.

		For Office Use Only		
Date Rec'd:	Rec'd By:	Lic #:	or Appl #:	_
	Date Approved:	Date Rejected:		

Form: HempLocations ADA PSD 06/23/22 BKM



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OPERATIONS LOCATIONS:

Grower Harvester Transporter Processor Nursery Location ID: Indoor Outdoor (Grower/Nursery License Only) Physical Address/Major Crossroads: City: State: Zip: Township: Range: Section: County: GPS: Latitude (EX: 33.449517) (EX: -112.095899) Outdoor Acres Indoor Sq. Ft. Is this a mobile unit's base of operation? (Processor License Only) Yes No If yes, how many units? Grower Harvester Transporter Processor Nursery Location ID: Indoor Outdoor (Grower/Nursery License Only) Physical Address/Major Crossroads: City: State: Zip: Township: Range: Section: County: GPS: Latitude (EX: -112.095899) Area (Grower/Nursery Only) (EX: -112.095899) Outdoor Acres Indoor Sq. Ft. Is this a mobile unit's base of operation? (Processor License Only) Yes No If yes, how many units? GPS: Latitude (EX: -112.095899) Outdoor Acres Indoor Sq. Ft. Is this a mobile unit's base of operation? (Processor License Only) Yes No If yes, how many units? Grower Harvester Transporter Processor Nursery Location ID: Indoor Outdoor (Grower/Nursery License Only) Physical Address/Major Crossroads: City: State: Zip:		CATIONS.								
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STORAGE LOCATIONS:

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