The Kentucky Department of Agriculture (KDA) is conducting an Industrial Hemp Pilot Program as authorized by the Agricultural Act of 2014 (Farm Bill). Individuals and companies who would like to be considered for participation in the program must submit the KDA Industrial Hemp Pilot Program Application for 2016 prior to the deadline. Complete the full application as attached and return to KDA.

- **Application Deadline:** November 5, 2015 is the application deadline for all 2016 projects which involve planting and growing hemp. Applications must be postmarked no later than November 5, 2015 or emailed by 11:59 PM on November 5, 2015. Processors who do not intend to grow hemp are not restricted to this deadline, but it is strongly recommended in order to balance production acreage with processing capacity.

- **Application File Format:** The KDA Industrial Hemp Pilot Program Application for 2016 is available in two file formats: Microsoft Word fillable form and PDF. If you do not have compatible software for the fillable form, please print out the PDF and complete the form manually and legibly.

- **Complete Applications:** Applications must be complete and accurate. Follow all instructions in the document. Incomplete applications will be discarded.

- **Application Review:** The KDA Industrial Hemp Review Committee will evaluate each application and select certain projects for approval based on the legitimacy of the research and the applicant’s ability to complete the proposed project. The review committee will not conduct follow-up inquiries.

- **Research Project:** Section 7606 of the Farm Bill only authorizes research programs; consequently, each applicant must submit a research plan (Section A, number 7). The DEA will not allow the import of seeds for commercial production, only research. The KDA Industrial Hemp Pilot Program involves research of crop production techniques, processing and marketing. Legitimate research may involve the investigation of planting methods, fertility levels, seed varieties, harvest methods, yields, equipment uses, marketing, product development, etc. **Section A, number 7 of the application asks for your research plan; this is a VERY important question.**

- **Background Checks:** Before final approval will be granted to a potential project, a Kentucky State Police (KSP) background check must be received and approved by KDA. It is highly recommended that applicants submit a KSP background check request immediately. See the instructions and forms for KSP background checks attached to the application or on our website at: [www.kyagr.com/hemp](http://www.kyagr.com/hemp). Note: THESE REQUESTS MUST BE SENT DIRECTLY TO KSP (DO NOT SEND TO KDA).

- **Orientation:** All approved applicants must attend an orientation session where they will receive further instructions, complete a Memorandum of Understanding and the Participant Acknowledgement Form.

- **Memorandum of Understanding:** Approved participants become part of the KDA for the purposes of conducting research by executing a Memorandum of Understanding (MOU) with KDA. View a sample of the MOU and Acknowledgement Form on our website at: [www.kyagr.com/hemp](http://www.kyagr.com/hemp)

- **Timeline:** The expected timeline for approval of 2016 projects is as follows:
  - **November 5, 2015** - Applications due
  - **December 1 to January 8, 2016** – Notification of approvals, orientations and execution of MOUs
  - **February 2016** – Complete seed acquisition orders and import permit requests
Kentucky Department of Agriculture
Industrial Hemp Pilot Program Application for 2016

Application Deadline: November 5, 2015

Anyone handling Industrial Hemp in the Commonwealth of Kentucky must successfully complete the full application process with the Kentucky Department of Agriculture (KDA) and sign a Memorandum of Understanding (MOU) before taking possession of any hemp seeds or harvested hemp materials.

Directions: Complete the following application and submit this and all required attachments to: Kentucky Department of Agriculture, Industrial Hemp Pilot Program, 111 Corporate Drive, Frankfort, KY 40601. All information you submit must be accurate, and if it is determined later by KDA to be inaccurate, the application and MOU may be withheld or cancelled.

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

### Section A. General Information

<table>
<thead>
<tr>
<th>Name:</th>
</tr>
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<tbody>
<tr>
<td><strong>Company</strong> (if applicable):</td>
</tr>
<tr>
<td>Is this company registered with the Kentucky Secretary of State?</td>
</tr>
<tr>
<td><strong>Mailing address:</strong></td>
</tr>
<tr>
<td>City:</td>
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<tr>
<td><strong>Email:</strong></td>
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<tr>
<td><strong>Phone Number:</strong></td>
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</tbody>
</table>

1) **Were you previously a participant in the KDA Industrial Hemp Pilot Program?** ☐ Yes ☐ No If No, skip to Question 3.

2) **If you answered yes to Question 1, complete the following, a and b.**
   a. Check all years for which you were a program participant:
      ☐ 2014 ☐ 2015
   b. **Briefly (2-3 sentences) describe the outcome of your 2015 project.**

3) **Indicate your intended role in the 2016 program** (check all that apply).
   ☐ Grower
   ☐ Processor
   ☐ Other *(Indicate type)*: ____________________________
4) **Indicate the focus of your 2016 project** (check all that apply).

- ☐ Grain
- ☐ Fiber
- ☐ Nutraceuticals/CBD
- ☐ Other *(Describe):__________________________________________*

5) **Is your application affiliated with any other applicants, grower groups, or processors?**  ☐ Yes  ☐ No
   
   If yes, list the affiliated entities below. Also, if you intend to grow for a particular processor or buyer, list them here and attach a signed letter of intent from that company on their letterhead.

6) **Provide a list of all individuals, including contractors, who will be involved in your project in any manner in handling or producing hemp or hemp products.** List each person’s name, address, responsibilities associated with this project and qualifications. Attach additional sheet(s) if necessary.

<table>
<thead>
<tr>
<th>Name</th>
<th>City</th>
<th>State</th>
<th>Responsibilities</th>
<th>Qualifications</th>
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<tbody>
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</table>

7) **Explain in detail the industrial hemp research you are interested in conducting on behalf of the Kentucky Department of Agriculture.** *Incomplete answers to this question will result in the application’s removal from consideration; the review committee will not follow up to request additional information.* Provide the details of your overall plan, including, what you plan to do, how, when, and where, as well as how you will measure the success of your work. Attach additional sheet(s) if necessary.
Section B. Grower Information
If you do not intend to grow Industrial Hemp, skip to Section C.

1) Do you personally grow crops currently? ☐ Yes  ☐ No  If yes, list the crops, acres of production, and years of experience you have for each crop below.

<table>
<thead>
<tr>
<th>Crop</th>
<th>Acres</th>
<th>Years of Experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>6</td>
</tr>
</tbody>
</table>

2) What percent of your personal income is directly derived from production agriculture? _____%

3) What types of production do you plan to implement for this project?
   ☐ Field. List number of proposed acres: ________ acres
   ☐ Greenhouse. List number of proposed square footage: ________ ft²

4) Indicate the source of certified seed or clone cultivar you intend to plant. If you are using multiple sources, provide information for EACH source. Attach additional pages if necessary.
   Note: Prior determination of your seed source is not mandatory for participation.

   Source 1:
   a. Seed or Clone Company: ________________________________
   b. Company Address: ________________________________
   c. Contact Email: ________________________________
   d. Seed or Clone Variety/Cultivar: ________________________________

   Source 2:
   a. Seed or Clone Company: ________________________________
   b. Company Address: ________________________________
   c. Contact Email: ________________________________
   d. Seed or Clone Variety/Cultivar: ________________________________

☐ Check here if your SEED SOURCE IS UNKNOWN.
☐ Check here if your SEED WILL BE PROVIDED BY ANOTHER PARTICIPANT.
   Name of Seed Provider: ________________________________

5) Describe the planting method you intend to use, and any equipment modifications that you have made specifically to accommodate this crop.
6) Describe what part(s) of the hemp plant you intend to harvest as well as the methods you will utilize for harvest.

7) List each piece of planting and harvesting equipment you intend to use. Indicate if you own the equipment or intend to rent, buy, borrow the equipment, or custom hire. If not owned, be sure to list the source of equipment.

<table>
<thead>
<tr>
<th>Equipment</th>
<th>Own, Rent, etc.</th>
<th>Source if Not Owned</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

8) Describe how you intend to handle and store the harvested Industrial Hemp. Provide details about the structure, if any, and intended duration at the storage location.

9) Provide a list of all intended growing and storage addresses. Location addresses must be approved and included in your MOU with KDA prior to the planting of any Industrial Hemp in order to demonstrate legitimacy of growers to the law enforcement agencies. Attach additional page(s) as necessary. *Note: GPS coordinates of fields will be measured by KDA inspectors after planting. If an exact street address is not available for the farm entrance, list an approximate number, road name, city and county.*

<table>
<thead>
<tr>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>County</th>
<th>Own or Rent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Farm 1</td>
<td></td>
<td>KY</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Farm 2</td>
<td></td>
<td>KY</td>
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<tr>
<td>Farm 3</td>
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<td>Farm 4</td>
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<td>KY</td>
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<tr>
<td>Farm 5</td>
<td></td>
<td>KY</td>
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</tbody>
</table>
10) What is your intended marketing plan for the crop? If you intend to grow for a specific processor, you must attach to this application a letter of intent from the processor (as previously directed in Section A. number 5). Note: All processors and wholesale buyers are required to complete an application and participate in the KDA Industrial Hemp Pilot Program.

11) Do you own transportation that can deliver your harvest to a processor or market? □ Yes □ No If yes, describe the transportation equipment.

Section C. Processor Information
If you do not intend to process Industrial Hemp, skip to Section D.

1) Do you personally operate as an agriculture product processor currently? □ Yes □ No If yes, list the products you currently process and describe your processing experience.

2) Do you intend to use existing infrastructure to process Industrial Hemp? □ Yes □ No If yes, describe your existing infrastructure. If no, explain your plans to develop the infrastructure necessary to handle Industrial Hemp for your proposed research and provide a timeline for those developments.
3) What is your expected processing capacity? Describe the volume of hemp required for the products you plan to produce as part of your research project.

4) Explain your plans to source industrial hemp materials for your processing research. If known, list the names of the farmers growing the hemp.

5) List the raw hemp materials entering your production and the intended products resulting from your processing research of Industrial Hemp.

6) Describe in detail your processing steps for each intended Industrial Hemp product. Attach additional pages as necessary.

7) Do you intend to produce food grade products? ☐ Yes ☐ No If yes, attach the appropriate food safety certificate/permit or describe below your plans to obtain the proper certification.

8) Do you operate transportation that picks up from farms? ☐ Yes ☐ No If yes, describe.
9) Do you anticipate needing access to capital? □ Yes □ No If yes, indicate an approximate amount. $  

10) If you need access to capital, is this capital already secured? □ Yes □ No

11) Describe your marketing plan and estimated market potential for the products you create. Be sure to provide sources for market potential figures.

12) Describe the intended sales outlet or intended utilization of your products and byproducts.

13) Provide a list of all intended processing and storage addresses. Locations must be approved and included in your MOU with KDA prior to the arrival of any Industrial Hemp in order to demonstrate legitimacy of processors to law enforcement agencies. Attach additional page(s) as necessary.

<table>
<thead>
<tr>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>County</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Description of #1 Facility and Purpose:</td>
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<td>2</td>
<td></td>
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<tr>
<td>Description of #2 Facility and Purpose:</td>
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<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Description of #3 Facility and Purpose:</td>
<td></td>
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</tr>
</tbody>
</table>

**Section D. Summary Information**
All applicants must complete this section.

1) Have you ever been convicted of a felony or a misdemeanor? □ Yes □ No If yes, provide dates and details about the conviction(s) that have occurred.

**NOTE:** It is highly recommended that applicants submit a KSP background check request immediately. Although background checks are only required for final approval, a timely background check will eliminate any potential delays.
by that process. If requesting a background check by mail, it will take 2 weeks. Background check instructions and the proper forms can be found at the end of this application and on our website at www.kyagr.com/hemp.

| Dates and Details of Convictions: |

2) I affirm that I am prepared to conduct a research project and comply with all other requirements of the Kentucky Department of Agriculture Industrial Hemp Pilot Program, including timely submission of reporting forms and required attachments.

☐ Yes  ☐ No

3) I acknowledge that all physical addresses of the location(s) to be used to grow, process, or store industrial hemp must be submitted with this application. This application constitutes written consent by the applicant to allow KDA personnel access to any research pilot location as deemed necessary by KDA for evaluation, verification of compliance and progress of research. Any changes to physical addresses used in the growing or processing of hemp shall be approved in writing by the KDA prior to that location being legally allowed for hemp handling.

☐ Yes  ☐ No

4) I acknowledge that there will be no follow-up questions during the application review process. The written responses on this application and attachments will be the sole source of information under consideration for potential participation in the KDA Industrial Hemp Pilot Program.

☐ Yes  ☐ No

5) I acknowledge that this is a selective process and not every application will be approved for participation. I understand that KDA is not obligated to enter into a MOU with me. Furthermore, the decisions made by the Kentucky Department of Agriculture Industrial Hemp Review Committee are final.

☐ Yes  ☐ No

6) I acknowledge that program participants are required to reapply on an annual basis.

☐ Yes  ☐ No

**Attachments**

If including any attachments to this application, list them below. Attachments may include extended answers to any questions in the above sections, a letter of intent from a processor/buyer, a business plan, a background check, processing license or permit from other regulatory authority such as Food
Safety Branch, or FDA, or other supporting documents. If the attachment is supplementary information to a question in this form, be sure to include the Section and Question number on the document.

List of Attachments:

I hereby verify and affirm that all of the information contained in this application is true and accurate.

________________________________________________________________________  ____________
Signature of applicant                  Date

________________________________________________________________________
Printed name

**Deadline:** Applications must be postmarked no later than November 5, 2015 or emailed by 11:59 PM on November 5, 2015.

**Mail completed application and all attachments to:**
Kentucky Department of Agriculture
Industrial Hemp Program
111 Corporate Drive
Frankfort, KY 40601

**Completed applications and attachments may also be emailed from the email account listed on this application to:** hemp@ky.gov

For more information on the KDA Industrial Hemp Pilot Program, please visit www.kyagr.com/hemp
Kentucky State Police Background Check Instructions

for KDA Industrial Hemp Pilot Program Participants

KDA Industrial Hemp Pilot Program requires a Kentucky State Police (KSP) background check on each approved participant. Applicants are required to utilize the Request for Conviction Records-Employment/Professional License background check option.

THE REQUEST FOR CONVICTION RECORDS FORM (Background Check Request) MUST BE MAILED TO Kentucky State Police; DO NOT SEND THIS REQUEST TO KDA.

Background checks are required annually for all participants. Spouses, employees and contractors hired by the participant are not required to submit a background check, only the participant signing the Memorandum of Understanding (MOU) with KDA.

KSP Criminal Records Dissemination Section can be contacted at 502-227-8700.
Business hours are M-F 8:00 AM - 4:30 PM Eastern Time.
Website: http://kentuckystatepolice.org/background_check_forms.html

You must complete the form on the next page or find the original at http://kentuckystatepolice.org/pdf/employment_rev11_10.pdf

You may submit the request and payment in person at the Kentucky State Police Records Branch, 1266 Louisville Road, Frankfort, KY 40601 where it can be processed while you wait (typically 15 minutes).

If submitting the request via mail, complete steps 1 through 5 below. This process typically requires at least 2 weeks.

Required for a mailed submission of the background check:

1. A completed Request for Conviction Records-Employment/Professional License form found on the following page.

2. A $20 check made payable to Kentucky State Treasurer

3. A Self Addressed Stamped Envelope for a copy to be returned to you

4. A Pre-Addressed Stamped Envelope with the following recipient address:
   Kentucky Department of Agriculture
   Attn: 7606
   111 Corporate Dr.
   Frankfort, KY 40601

5. Mail items 1-4 listed above to:
   Kentucky State Police
   Criminal Identifications and Records Branch
   1266 Louisville Road
   Frankfort, KY 40601

THE REQUEST FOR CONVICTION RECORDS FORM (Background Check Request) MUST BE MAILED TO Kentucky State Police, NOT KDA.
REQUEST FOR CONVICTION RECORDS - EMPLOYMENT/PROFESSIONAL LICENSE

Request is made for any record of conviction found in the files of the Kentucky centralized criminal history record information system regarding the person identified herein. This information shall be released to:

**Kentucky Department of Agriculture, ATTN: 7606, 111 Corporate Drive, Frankfort, KY 40601**

Agency/Organization Name and Address

ACKNOWLEDGMENT BY APPLICANT

I am requesting that the Kentucky State Police provide the above named agency/organization with any record of conviction found in the files of the Kentucky centralized criminal history record information system. I know that I have the right to inspect my criminal history record and to request correction of any inaccurate information. If I do not exercise that right, I agree to hold harmless the Kentucky State police and any Kentucky State Police employee(s) from any claim for damages arising from the dissemination of inaccurate information.

APPLICANT INFORMATION (PLEASE PRINT)

<table>
<thead>
<tr>
<th>NAME:</th>
<th>First</th>
<th>Middle</th>
<th>Last</th>
<th>Maiden</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>ADDRESS:</th>
<th>Street</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
</table>

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<thead>
<tr>
<th>SEX</th>
<th>RACE</th>
<th>DATE OF BIRTH</th>
<th>SOC SEC NO</th>
</tr>
</thead>
</table>

Signature ____________________________ Date ____________

Witness ____________________________ Date ____________

INSTRUCTIONS:

Requesting agencies/organizations should ensure that all application information is completed.

Requesting agencies/organizations should forward a check or money order made payable to the Kentucky State Treasurer in the amount of $20.00 for each submitted form. Requests should be accompanied by two, self-addressed stamped envelopes – one bearing the name and address of the requesting agency/organization and the other bearing the name and address of the applicant.

The Kentucky State Police will charge a $25.00 fee on each returned check.

RETURN THIS FORM TO: Kentucky State Police Criminal Identifications and Records Branch Criminal Records Dissemination Section 1266 Louisville Road Frankfort, KY 40601

Visit us online @ http://kentuckystatepolice.org

Revised 10/08