



2019 Maryland Industrial Hemp Research Pilot Program Application

1) Applicant Information										
Business/Farm Name:										
Owner Name:	Last:				Middle Initial:		First:			
Mailing Address:										
City:					State:		Zip Code:			
Email:										
Phone Number:										
2) Location Description (1 property site per application)										
GPS coordinates (see Google Maps and double click on location)					Latitude:			Longitude:		
List most common soil type(s) area according to its prevalence with approximate % of each within the designated research (County Soils Maps)										
1.				%		5.				%
2.				%		6.				%
3.				%		7.				%
4.				%		8.				%
Land area designated for research (how many acres are you planning to put into IH research):										
What is the current land use of the designated area?										
3) Available Equipment or Method (Describe what you have access to)										
a) Preparation (Tillage):										
b) Nutrient Application										
c) Planting										
d) Harvesting										

4) Give a brief description of your farming experience (how long, with what crops etc.)

5) Give a brief description of any experience you have with research

6) Apart from agreeing to perform nutrient fertility research on your land, do you have any other research questions?

Research Question #1

Research Question #2

7) List seed or plant sources

8) Other personnel involved in this project:

Name	Address	Responsibilities	Qualifications

9) Storage locations if material will be transferred away from designated farm - Storage addresses must be in Maryland. List all facility addresses where purchased hemp seed and harvested hemp materials or any products or substances produced will be stored. Color-printed, aerial maps (with boundaries and GPS coordinates labelled) must be submitted by applicant for each location. Google maps are acceptable with details added.

Address	City	County	Owner

10) Anticipated Products

Hemp Products	Anticipated Volume or weight

11) Processing Locations - List all intended processing facility addresses if in Maryland. Color-printed, aerial maps (with boundaries and GPS coordinates labelled) must be submitted by applicant for each location. Google maps are acceptable with details added.

Address	City	County	Owner

12) Who is your University of Maryland or University of Maryland Extension Contact? Please provide name and email address.

Name:	
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Acknowledgements													
The Agricultural Act of 2014 (Farm Bill) states that “notwithstanding the Controlled Substance Act, an institution of higher education or a State department of agriculture may grow or cultivate industrial hemp. (7 U.S.C.§5940 (regarding legitimacy of industrial hemp research)). I hereby attest that this proposed research project does not involve any activity regulated under the Controlled Substances Act or any other federal law or regulation for which I do not possess legal authority from the appropriate federal agency with jurisdiction.	<input type="checkbox"/> Yes <input type="checkbox"/> No												
I affirm that I am prepared to conduct a research project with the University of Maryland, comply this agreement and with all other requirements of the Maryland Department of Agriculture Industrial Hemp Research Pilot Program, including timely submission of samples, reports and other required documents.	<input type="checkbox"/> Yes <input type="checkbox"/> No												
I acknowledge that there may be no follow-up questions during the application review process. The written responses on this application and attachments may be the sole source of information under University of Maryland consideration for potential participation in the Maryland Department of Agriculture Industrial Hemp Research Pilot Program.	<input type="checkbox"/> Yes <input type="checkbox"/> No												
I acknowledge that this is a selective process and not every application may be approved for participation. I understand that University of Maryland is not obligated to conduct research with me. Furthermore, the decisions made by University of Maryland are final.	<input type="checkbox"/> Yes <input type="checkbox"/> No												
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 University of Maryland personnel access to any research pilot locations as deemed necessary by University of Maryland for evaluation, including verification of compliance and progress of research.	<input type="checkbox"/> Yes <input type="checkbox"/> No												
I affirm that all individuals listed in the application are part of a validly-formed legal entity (i.e., an LLC, corporation, etc.) with myself, the project director, and assume full liability and responsibility for their actions and violations.	<input type="checkbox"/> Yes <input type="checkbox"/> No												
I acknowledge that all plant material produced as part of this research project (includes seeds, leaves, stalks, flowers, etc.) that has not been processed must be rendered non-viable at the end of the growing season, unless another site license is granted by Maryland Department of Agriculture for the following year. This will be confirmed by Maryland Department of Agriculture inspectors or University of Maryland faculty and that follow up visits may continue for 3 years after the project has concluded.	<input type="checkbox"/> Yes <input type="checkbox"/> No												
I acknowledge that any finished products produced as part of this research project which are to be marketed, distributed or sold must comply with all laws, regulations and requirements of any governmental agency or other regulating authority.	<input type="checkbox"/> Yes <input type="checkbox"/> No												
I acknowledge that any research plots with THC levels over 0.3% will no longer be classified as Industrial Hemp. If THC levels are found to be greater than 0.3% Maryland Department of Agriculture will issue an order for the owner of the designated certified farm to immediately destroy the plants and law enforcement will be notified and has the authority to pursue prosecution under any applicable laws.	<input type="checkbox"/> Yes <input type="checkbox"/> No												
I hereby verify and affirm that all information contained in this application is true and accurate													
Printed Full Name:													
Signature:	Date:												
ATTACHMENTS: Please list any attachments including: maps, FBI background check response (or receipt), extended answers to any questions in the above sections, or other supporting documents. If the attachment is supplementary information to a question on this form, be sure to include the question number on the document.													
List of Attachments:	<table border="1"> <tr><td style="background-color: #d9ead3;">1</td><td></td></tr> <tr><td style="background-color: #d9ead3;">2</td><td></td></tr> <tr><td style="background-color: #d9ead3;">3</td><td></td></tr> <tr><td style="background-color: #d9ead3;">4</td><td></td></tr> <tr><td style="background-color: #d9ead3;">5</td><td></td></tr> <tr><td style="background-color: #d9ead3;">6</td><td></td></tr> </table>	1		2		3		4		5		6	
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University of Maryland will charge a \$50 fee for application process, and does not guarantee acceptance into the Industrial Hemp Research Pilot Program. Checks are made payable to <u>University of Maryland</u> and should be sent to:	Attn: Taylor Garrett University of Maryland, WyeREC P.O. Box 169 Queenstown, MD 21658												