

Oklahoma Department Of Agriculture, Food
and Forestry
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2021 Hemp Pre-Harvest Report

This form is for licensees to report when they plan to harvest and to schedule their hemp sampling.

Must be submitted at least 30 days before harvest

Lic#: _____

Company/Trade Name (if applicable): _____

Contact Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ County: _____

Work phone: _____ Alternate Phone: _____

Email: _____

Variety Name: _____

Planned Harvest Date: _____

Number of Acres: _____ Number of Sq.Ft: _____

Grow Location (GPS or street address): _____

please provide the above information for each variety you grew

Signature: _____

Date: _____