Oklahoma Department Of Agriculture, Food and Forestry 2800 North Lincoln Boulevard Oklahoma City, OK 73105-4972 Phone 405-522-5974



hemp@ag.ok.gov

## **2023 Hemp Inspection Request Form**

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#:	FSA#:		
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:	umber of Acres: Number of Sq.Ft:		
Grow Location (GPS or stre	et address):		
*please p	rovide the above information	on for each variety yo	ou intend to harvest*
Signature:			
Printed Name:			
Date:			