

Oklahoma Department Of Agriculture, Food  
and Forestry  
2800 North Lincoln Boulevard  
Oklahoma City, OK 73105-4972  
Phone 405-522-5974  
[hemp@ag.ok.gov](mailto:hemp@ag.ok.gov)



## **2024 ODAFF Hemp Grower License Application**

### Checklist

- Must be submitted at least 30 days before you begin growing
- All Hemp Grower Licenses expire on December 31 of the year they are earned
- A criminal history report for each key participant dated within sixty (60) days prior to the application submission date
- Provide proof of ownership for growing area OR provide a lease for the property in which the property owner grants permission to the grower to grow hemp on their property-must provide proof of ownership as well
- Must submit a separate application for each grow area
- You must include a map of the grow area-see PowerPoint on ODAFF Hemp Webpage for examples of acceptable maps
- Each key participant will sign their own Acknowledgement and Agreement Page
- Complete all pages of the application and submit all required information-incomplete applications cannot be processed
- All fees submitted to ODAFF are nonrefundable

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Applicant Information *\*include contact information for each key participant associated with the business*

Company/Trade Name (if applicable): \_\_\_\_\_

Employer Identification Number (if applying as a business): \_\_\_\_\_

Contact Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Email: \_\_\_\_\_

If renewing license, please provide Lic#: \_\_\_\_\_

**Important Definitions:**

**Key Participant:** means a person or persons who have a direct or indirect financial interest in an entity producing hemp, such as an owner or a partner in a partnership. Executive level corporate employees, including chief executive officer, chief operating officer, and chief financial officer shall be considered Key Participants. Management level positions such as farm, field, and shift managers shall not be considered Key Participants.

**Postdecarboxylation:** means testing methodologies for THC concentration levels in hemp, where the total potential delta-9-tetrahydrocannabinol content, derived from the sum of the THC and THCA content, is determined and reported on a dry weight basis. The postdecarboxylation value of THC can be calculated by using a chromatograph technique using heat, known as gas chromatography, through which THCA is converted from its acid form to its neutral form, THC. The result of this test calculates total potential THC. The postdecarboxylation value of THC can also be calculated by using a high-performance liquid chromatograph technique, which keeps the THCA intact, and requires a conversion calculation of that THCA to calculate total potential THC.

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**Industrial Hemp Production Acreage Information (Outdoor)**

**Contiguous Grow Field**

Legal	Section:	Township:	Range:
Description:			
Field GPS:	Lat:	Long:	
Decimal			
List varieties present: <i>(attach map listing and showing locations)</i>			Acres:
County:			

**Greenhouse Industrial Hemp Production Information (Indoor)**

Address and location with the property of each growing area is required. Use attachment if more space is required.

**Grow Site 1**

Building Address:			
Building GPS:	Lat:	Long:	
Decimal Degrees			
List varieties present: <i>(attach map listing and showing locations)</i>			Sq. Ft:
County:			

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### Fee Table

Application Fee -----	\$500.00
Acres @ \$5.00/Acre  _____ acres * \$5.00=	
Sq Ft Greenhouse @ \$0.33/Sq Ft  _____ sq.ft. * \$0.33=	
TOTAL	

Please check all that apply. If not listed, choose 'other' and describe what type of hemp you will be growing.

Type of Hemp Grown	Check all that apply
Fiber	
CBD	
Smokable Products	
Paper Products	
Plastics	
Clones	
Seed	
Construction	
CBG	
Other (explain)	

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Acknowledgement and Agreement Page

\*Each key participant shall sign and submit their own Acknowledgement and Agreement Page\*

By signing this form and submitting the Hemp Grower License Application, you are acknowledging and agreeing to the following:

\_\_\_\_\_Any information provided by the grower licensee shall be subject to public disclosure under the Open Records Act

\_\_\_\_\_Any information provided by the grower licensee may be released by the ODAFF to law enforcement agency without notice

\_\_\_\_\_The grower licensee shall fully cooperate with the ODAFF, grant the ODAFF physical access to any part of the grow site and allow the ODAFF to conduct inspection and sampling

\_\_\_\_\_The grower licensee shall submit all required reports by the dates specified by the ODAFF

\_\_\_\_\_The grower licensee shall follow the law and rules of the Oklahoma Industrial Hemp Program

\_\_\_\_\_The grower licensee shall retain all records pertaining to their Hemp Grower License for a minimum of three (3) years

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

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Card Number:  _____	Amount Paid: _____
Type of Card ( <i>check your card type</i> ) <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover	Expiration Date (MM/YY): _____
Print Name on Card:  _____	

Office Use Only

License #	
Paid	Yes      No
Receipt #	
Rev. Code:	270