



NEW JERSEY
HEMP PROGRAM

2023 Harvest / Destruction Report

Directions

- This report is due for every field or indoor area planted.
- This report is **due at least 30 days prior to harvest or destruction.**
- Following the submission of this form, a NJDA inspector will schedule an appointment to collect sample(s). The NJDA must receive a sample and provide written approval prior to harvest or disposal.
- **Email to:** NJHemp@ag.nj.gov
- **Mail to:** NJDA Hemp Program, P.O. Box 330, Trenton, NJ 08625

License Holder:		Email:	
Signing Authority on License:		Phone:	License #:

1.) Indicate Registered Growing Address for this report.

Planting Address (MUST Match Address on Licensing)	City	Zip	County



2.) Indicate type of report: _____ **Harvest** _____ **Destruction** **Skip to question 9 if no harvest is reported

3.) Provide initial Harvest info in the table below.

Harvest Report

Location ID (MUST match Location Lot-Field# given to FSA)	Variety/Strain	Acres/square feet in this harvest	Primary Harvest (Grain, Fiber, Floral)	Expected Initial Harvest Date	Expected Completion Date (NO MORE than 15 days later)	Will this be a complete harvest for this plot?	
Field #1	Hemp18	10 ac	Grain	8/15/23	8/21/23	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
						Yes	No
						Yes	No
						Yes	No
						Yes	No

- 4.) indicate harvest location: _____ Outdoor/Field _____ Greenhouse/indoor
- 5.) Were any pesticides used on the hemp after planting? _____ Yes _____ No If “Yes”, indicate
- a.) Applicator license number(s): _____
- b.) Products used: _____
- 6.) Is any harvest listed in Question (4) of floral material? _____ Yes _____ No
If “Yes”, note that you are prohibited from co-mingling or moving your harvest from its storage location until you have received acceptable test results.
- 7.) Are the harvested industrial hemp materials to be transported offsite? _____ Yes _____ No
If “Yes”, indicate registered location: _____
- 8.) Are the harvested industrial hemp materials going to be transferred to a new owner immediately following harvest?
_____ Yes _____ No If “Yes”, indicate buyer: _____

- 9.) If the industrial hemp crop has failed and you intend to destroy, complete the information in the table below. **You must receive approval from NJDA PRIOR to destruction**, as NJDA may inspect and collect a sample. The Location ID below MUST correspond to the Location ID found on the registered site in the *Licensing Agreement*.

Destruction Report

Location ID (MUST match Location Lot-Field# given to FSA)	Variety/Strain	Acres/square feet proposed for destruction	Date of Proposed Destruction	Reason for Proposed Destruction	Proposed Method of Destruction	Will this be a complete destruction of all hemp in this plot? Y/N
Field #1	Hemp18	10 ac	7/15/23	Weed Pressure	Mowing	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
						Yes No
						Yes No
						Yes No
						Yes No
						Yes No

10.) indicate Destruction location: Outdoor/Field Greenhouse/indoor


11.) If planning to destroy your crop, attach pictures of the hemp plot(s) intended for destruction.

Picture Attached.

12.) Indicate if you have any other hemp remaining on your property. Yes No

NOTE: If you are growing any other hemp NOT reported on this form, you will need to complete another *Harvest/Destruction Report* form at least 15 days prior to harvest or destruction.

By writing my name below, I attest that I am authorized by the License Holder to submit this form, and that this information is accurate and complete.

Signature: _____	Date: _____	
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For more information on the NJDA Hemp Program, please visit:
www.state.nj.us/agriculture/divisions/pi/prog/nj.hemp.html

