



SUBMIT REPORT TO:  
NJ Department of Agriculture  
Division of Plant Industry  
P.O. Box 330, Trenton, NJ 08625  
NJHemp@ag.nj.gov



Official Use Only:



## Instructions:

# 2026 Site Modification Request

- The submission of this request form and a subsequent *Licensing Agreement Amendment* must be executed prior to the growing, handling, processing, or storage of hemp materials at any location (GPS coordinates) NOT already listed on your *Licensing Agreement*.
- The submission of this request will cost \$300 plus \$15 per additional acre.
- The fee shall not apply to storage-only sites, but the Department must approve such sites prior to use. In the event the site modification is not approved, this fee will be refunded.

Business Name or License Holder:		License #		Phone:	
Licensee Print Name:		Email:			

### 1. Check the appropriate box(es) below regarding this request.

<p>Prior to signing <i>Licensing Agreement (No fees assessed)</i></p> <p>Growing or Processing sites after signing <i>Licensing Agreement (Fees assessed*)</i></p> <p>Storage only. (<i>No fees assessed</i>)</p> <p>University/College location. (<i>No fees assessed</i>)</p>	<p>If locations are leased, please indicate whether you have authorization from the owner allowing industrial hemp research to be conducted on the property. NJDA reserves the right to request a notarized letter of support from the property owner.</p> <p>Yes      No</p> <p><i>If yes, please provide copy of lease agreement authorizing the production of hemp on the property.</i></p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

### 2. Provide the following information for your request:

<p><b>a) If you are requesting this change after your <i>Licensing Agreement</i> has been signed, you must include a \$300 Site Modification Surcharge fee for each new set of GPS Coordinates.</b> A new growing or processing location is defined as any GPS location that was not listed on the initial <i>Licensing Agreement</i> (i.e., any change to or addition of GPS coordinates at an address on the <i>Licensing Agreement</i>, or for the addition of a new address). The Site Modification Surcharge does not apply to storage-only sites, but prompt request to the NJDA and approval is required for storage-only sites. <b>The check or money order must be made payable to the New Jersey Department of Agriculture and attached to this form.</b></p> <p>Attached check in the amount of : → \$ _____</p> <p><i>(Total amount equals the number of new locations, i.e., each set of GPS coordinates x \$300.)</i></p>	<p><b>b) Provide a list of the additional locations you wish to license by completing the tables below in questions (3)fields, (4) greenhouses/ indoor growing spaces, (5) processing (Licensed Processors/ Handlers ONLY), and (7) storage sites. Complete only the tables that apply to your request.</b></p> <ul style="list-style-type: none"> <li>• Locations must be approved in writing by NJDA and included in your <i>Licensing Agreement</i> prior to the planting, handling, processing, or storage of any industrial hemp in this location.</li> <li>• You are required to provide precise GPS coordinates in DEGREES DECIMAL MINUTES for each field, building, and storage structure at each address. <i>Example: lat: 38°9.919'N, long: 84° 49.267'W</i></li> <li>• You are required to provide a map depicting each address and the items listed in the <i>Instructions for Creating Maps for Submission</i> at the end of this form, pages i-iii.</li> <li>• <b>The field and building IDs used in these tables MUST be consistent on all future report forms used in the program.</b></li> </ul> <p>Check here to indicate that you have read the instructions above.</p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

### c) If your mailing address has changed, please provide your new mailing address in the table below:

Mailing Address	City	State	Zip

## 3. Complete Outdoor location information listed below. Attach additional page(s) as necessary.

a) Enter information for the ADDITION of requested field address(es) or additional field(s) to already approved address(es) in the cells below. Be sure to include a Location ID and GPS coordinates for each growing site.

Outdoor Location 1								
Address 1	Farm Address		City	State	Zip	County	Own or Rent	
				NJ				
	FSA Farm #:			FSA Tract #				
Field 1	Site ID		GPS: Latitude		GPS: Longitude		Acres	
Field 2								
Field 3								
Outdoor Location 2								
Address 2	Farm Address		City	State	Zip	County	Own or Rent	
				NJ				
	FSA Farm #:			FSA Tract #:				
Field 1	Site ID		GPS: Latitude		GPS: Longitude		Acres	
Field 2								
Field 3								

b) Enter information for the REMOVAL of requested field locations. Be sure to include Location IDs (as they appear on your current *Licensing Agreement*) for each growing site.

	Site Id	Address	City	Zip
Location 1				
Location 2				

\*\* Attach additional maps as necessary. Please ensure to add new site IDs to the new map for submission



## 4. Complete Greenhouse location information listed below. Attach additional page(s) as necessary.

## a) Indicate type of greenhouse production (check or circle all that apply):

Transplants only (either seeded or vegetative cuttings), or seasonal stock plants  
 Stock plants, year round  
 Year-round production with intent to harvest indoor plants

## b) Enter information for the ADDITION of requested greenhouse/indoor growing address(es) or additional building(s) to already approved address(es) in the cells below. Be sure to include a Location ID and GPS coordinates for each growing site.

## Indoor Location 1

Address 1	Greenhouse Address		City		State	Zip	County	Own or Rent
	FSA Farm #:				NJ			
	Site ID	Type of Structure	GPS: Latitude		GPS: Longitude		Sq Ft	
Structure 1								
Structure 2								
Structure 3								

## Indoor Location 2

Address 2	Greenhouse Address		City		State	Zip	County	Own or Rent
	FSA Farm #:				NJ			
	Site ID	Type of Structure	GPS: Latitude		GPS: Longitude		Sq Ft	
Structure 1								
Structure 2								
Structure 3								

c) Enter information for the REMOVAL of requested processing locations. Be sure to include Location IDs (as they appear on your current *Licensing Agreement*) for each processing site.

	Site ID	Address	City	Zip
Location 1				
Location 2				

\*\* Attach additional maps as necessary. Please ensure to add new site IDs to the new map for submission.



## 5. Complete Storage location information listed below. Attach additional page(s) as necessary.

**Storage Addresses. Complete parts a) and b) below.** Attach additional page(s) as necessary. NOTE 1: The Site Modification Surcharge does **not** apply to storage-only addresses.

NOTE 2: Storage addresses must be listed in the below table even if listed in tables for Questions 4-6 above, in order to provide GPS coordinates for the storage building(s).

a) Enter information for the **ADDITION** of requested storage building(s) in the cells below. Be sure to include a Location ID and GPS coordinates for each storage site.

## Storage Location 1

Address 1	Storage Address		City		State	Zip	County	Own or Rent
					NJ			
	Site ID	Type of Structure	GPS: Latitude			GPS: Longitude		
Structure 1								
Structure 2								
Structure 3								

## Storage Location 2

Address 2	Storage Address		City		State	Zip	County	Own or Rent
					NJ			
	Site ID	Type of Structure	GPS: Latitude			GPS: Longitude		
Structure 1								
Structure 2								
Structure 3								

b) Enter information for the **REMOVAL** of requested storage locations. Be sure to include Location IDs (as they appear on your current *Licensing Agreement*) for each storage site.

	Site ID	Address	City	Zip
Location 1				
Location 2				

\*\* Attach additional maps as necessary. Please ensure to add new site IDs to the new map for submission.



6. Complete Processing/Handling location information listed below (**PROCESSOR/HANDLER ONLY**).*Attach additional page(s) as necessary.*

Enter information for the ADDITION of requested processing address(es) or additional building(s) to already approved address(es) in the cells below. Be sure to include all Location ID and GPS coordinates for each processing site.

## Processing/Handling Location 1

Address 1	Processing/Handling Address		City	State	Zip	County	Own or Rent
	Site ID	GPS: Latitude	GPS: Longitude	Type of Structure		Purpose	
Structure 1							
Structure 2							
Structure 3							

## Processing/Handling Location 2

Address 2	Processing/Handling Address		City	State	Zip	County	Own or Rent
	Site ID	GPS: Latitude	GPS: Longitude	Type of Structure		Purpose	
Structure 1							
Structure 2							
Structure 3							

c) Enter information for the REMOVAL of requested storage locations. Be sure to include Location IDs (as they appear on your current *Licensing Agreement*) for each storage site.

	Site ID	Address	City	Zip
Location 1				
Location 2				

\*\* Attach additional maps as necessary. Please ensure to add new site IDs to the new map for submission.





I certify that all of the information contained in this application is true and accurate. I understand that if NJDA later determines any of this information to be inaccurate, the *Site Modification Request* may be withheld or terminated. I also agree to abide by all of the provisions of the New Jersey Hemp Program found in N.J.A.C. 2:25-1 et seq.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_  
Printed Name \_\_\_\_\_ Title, if applicable \_\_\_\_\_

NJDA is not responsible for missing information due to formatting or printing errors on the user end.

NJDA is not responsible for requests lost in the mail or not received.

NJDA is not required to request additional information for clarity of the request.

**Send attachments to:**

New Jersey Department of Agriculture  
Attn: Hemp Program  
P.O. Box 330  
Trenton, New Jersey 08625

For more information about the NJDA Hemp Program, please visit

[https://www.state.nj.us/agriculture/divisions/pi/prog/nj\\_hemp.html](https://www.state.nj.us/agriculture/divisions/pi/prog/nj_hemp.html)

