



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



## Hemp Transfer/Sales Report Form

### Instructions:

1. This form is due within **15 days** after any transaction for the transfer and sale of hemp genetics (clones, cuttings, transplants, seeds, etc.)
2. All sales of hemp seed or plants require documentation from the buyer, which includes contact information and planting address. Ensure that the recipient is aware of the documentation related to the transfer of genetics.
3. If client is selling hemp seeds, they **MUST** register under the seedsman's registration application. Applications can be located at: <https://nj.gov/agriculture/pdf/seedsmanregapp.pdf>
4. Failure to list Client and Buyer information will result in an immediate rejection of the report.

### Required → Initial the Following:

I certify and agree that my hemp stock is liable for random sampling and testing prior to transfer to recipient.

I will not sell or transfer plants that may be considered "**Cannabis**" with a THC higher than 0.3% Total THC.

I will not sell hemp stock or genetics to any unlicensed individuals.

State of New Jersey

DEPARTMENT OF AGRICULTURE  
PO Box 330  
TRENTON NJ 08625-0330

Official Use Only:

| Client Information               |                        |                 |                                   |              |  |                              |                                |             |                 |
|----------------------------------|------------------------|-----------------|-----------------------------------|--------------|--|------------------------------|--------------------------------|-------------|-----------------|
| Business Name or License Holder: |                        |                 |                                   |              |  |                              |                                |             |                 |
| Licensee Print Name:             |                        |                 |                                   |              |  | Hemp License #:              |                                |             |                 |
| Phone:                           |                        |                 |                                   |              |  | Seedsman Registration #:     |                                |             |                 |
| Email:                           |                        |                 |                                   |              |  | Certified Nursery Client ID: |                                |             |                 |
| Sale Information                 |                        |                 |                                   |              |  |                              |                                |             |                 |
| Name of Buyer                    | Buyer's Hemp License # | Buyer's Phone # | Buyers Planting Address           | Date of Sale | Product Type: (Seeds, clones, Transplants) | Variety                      |                                | Quantity    |                 |
|                                  |                        |                 |                                   |              |  | Cultivar (Name)              | Purpose: (Fiber, Floral, etc.) | # of Plants | weight of seeds |
| John Smith                       | 34_00000               | 609-XXX-XXXX    | 123 Planting Lane, City, NJ 08000 | 3/15/2025    | Transplants                                | BaOx                         | Floral                         | 300         | ---             |
|                                  |                        |                 |                                   |              |  |                              |                                |             |                 |
|                                  |                        |                 |                                   |              |  |                              |                                |             |                 |
|                                  |                        |                 |                                   |              |  |                              |                                |             |                 |
|                                  |                        |                 |                                   |              |  |                              |                                |             |                 |
|                                  |                        |                 |                                   |              |  |                              |                                |             |                 |
|                                  |                        |                 |                                   |              |  |                              |                                |             |                 |

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

Attach additional  
sheets as necessary

NJDA is not responsible for missing information due to formatting or printing errors by the applicant. All information submitted must be typed, accurate, and complete. If any information herein is later determined by NJDA to be inaccurate or falsified, the application and *Grower Licensing Agreement* may be withheld or terminated.