



**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)

**NEW JERSEY**  
 DEPARTMENT OF AGRICULTURE  
**HEMP PROGRAM**  
 Division of Plant Industry



## Hemp Harvest Report Form

**Required → Initial the Following:**

1. This form is due **30 days** prior any harvest of hemp growing material for indoor or outdoor grows.
2. In order to harvest your material, a sample of each variety listed will need to be collected for a pre-harvest sample. The sample **MUST** pass at **0.3% Total-THC** to harvest.
3. Ensure that both Location I.D.'s are filled out. Failure to list both will result in a rejection of this report.

I certify and agree that any variety listed will only be harvested if the pre-harvest sample passes within the **0.3% Total-THC** threshold.

If destruction is warranted, I agree to fully cooperate with Program Staff.

**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 #:						
Email:						Phone:						
Planting Information												
Planting Address					City				Zip		County	
Location I.D. Site I.D: Personal location name FSA Lot #: (Farm #) – (Tract #) – (Field #)		Variety/Strain		Primary harvest (Grain, Fiber, Floral)	Harvest Date Initial: Harvest start date Completion: expected completed harvest date		Area Harvested Acres: Outdoor Sqft: Indoor		Will this be a complete harvest for this plot?			
Site I.D.	FSA Lot #	Name	Type		Initial	Completion	Acres	Sqft				
ex: Field 1	1234-89-2A	Hemp18	CBD	Floral	9/5/2025	9/20/2024	5	N/A	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		

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: \_\_\_\_\_

**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.