



APPLICATION FOR HEMP PROCESSOR LICENSE

NORTH DAKOTA DEPARTMENT OF AGRICULTURE
PLANT INDUSTRIES DIVISION
SFN 61613 (2-2025)

Return to:

North Dakota Department of Agriculture
600 E Boulevard Ave, Dept 602
Bismarck ND 58505-0020
Telephone: 701-328-2231

PLEASE TYPE OR PRINT CLEARLY (Incomplete or illegible forms will be returned)

Background checks must be approved prior to submitting this application.

APPLICANT INFORMATION

The undersigned is applying for a Hemp License under provisions of the laws of the State of North Dakota.

Check One:			
<input type="checkbox"/> Initial license application		<input type="checkbox"/> Renewal license application	
Applicant Name (Last, First) (no initials)			
Physical Address	City	State	ZIP Code
Mailing Address	City	State	ZIP Code
Email Address	Home Telephone Number		Cell Phone Number

Legal description or GPS Coordinates of each facility is required.

HEMP PROCESSING FACILITY INFORMATION

Company Name				
Physical Address		City	State	ZIP Code
Mailing Address		City	State	ZIP Code
Legal Description	County	Township	Range	Section/Quarter
GPS Coordinates	Latitude		Longitude	
Website				
Business Telephone Number		Email Address		
What will this facility be processing?				
<input type="checkbox"/> Grain <input type="checkbox"/> Fiber <input type="checkbox"/> Seed <input type="checkbox"/> CBD <input type="checkbox"/> Other (specify):				
Can we post the company's information on our website? <input type="checkbox"/> Yes <input type="checkbox"/> No				

**License Fee is \$200.00. License fees are non-refundable once a license is issued.
Make checks payable to the North Dakota Department of Agriculture.**

1. I will abide by all applicable laws and regulations related to the processing or marketing of hemp.
2. I will allow, upon request, federal, state, or local authorities to inspect and/or sample, at any time, the on-site equipment or facilities related to the processing or marketing of hemp and hemp products, without subpoena or any other authorization.
3. I will complete and submit all reports and/or statements requested by NDDA relative to my processing or marketing of hemp or hemp products and acknowledge and agree that a failure to submit any required or requested report may result in immediate suspension or revocation of my hemp processor license.
4. I acknowledge NDDA will charge additional fees for official NDDA samples.
5. I understand that the Total THC of the hemp and hemp products must measure at or below 0.3% Total THC based on the official sample and test conducted by the NDDA. $\text{Total THC} = \text{THCa} * 0.877 + 9\text{-THC}$.
6. I acknowledge that I am responsible any costs associated with the destruction and/or confiscation of non-compliant hemp.
7. I acknowledge it is recommended to test and monitor Total THC levels in processed products.
8. I certify that I have not been convicted of a felony relating to a controlled substance since the submission of my background check.
9. I acknowledge that if retail of hemp products will be occurring in conjunction with this license, I have reviewed and agree to the provisions in North Dakota Century Code Chapter 4.1-18.1 and North Dakota Administrative Code Article 7-20.

Signature of Applicant	Date
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