



HEMP PLANTING REPORT
 NORTH DAKOTA DEPARTMENT OF AGRICULTURE
 PLANT INDUSTRIES
 SFN 61979 (1-2024)

**This form must be emailed or sent hard copy no later than 2 weeks after planting.
 A separate form must be filled out for each variety and field location.**

Failure to fill out this report in its entirety can cause future ineligibility for hemp licensure.

Name	Telephone Number	License Number
<input type="checkbox"/> Check here if you did not plant or do not plan to plant any hemp, sign form and return to our office		

FIELD LOCATIONS

Provide a copy of the FSA map as well as a copy of the FSA-578:

Field Access Latitude	Field Access Longitude
Date(s) of Planting	Total Acreage or Square Footage Planted
Seed, Clone or Seedling Supplier	Variety Planted

Planting Information

Plant to Plant Distance		Row Spacing	
Number of Clones or Seedlings Planted		Average Height of Clone or Seedling Planted	
Seed Count (seeds per pound)	Germination Percentage	Purity Percentage	Amount of Seed Planted (weight)
Seeding Rate (lbs/acre)	Planting Depth	Soil Temperature at Planting Depth (degrees Fahrenheit)	
Previous Crop	Soil <input type="checkbox"/> Dry <input type="checkbox"/> Moist <input type="checkbox"/> Wet		Depth to Moisture at Planting
Herbicide	Rate of Application		Date of Application

Describe method and equipment used for tillage and planting:

I verify that to the best of my knowledge, the above information is accurate.

Licensee Signature	Date
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Email or send form to:
 North Dakota Department of Agriculture
 Attn: Hemp Program
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 Bismarck, ND 58505-0020
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 Phone: 701-328-4128