



UNITED STATES DEPARTMENT OF AGRICULTURE
AGRICULTURAL MARKETING SERVICE
USDA DOMESTIC HEMP PRODUCTION PROGRAM
USDA HEMP PLAN PRODUCER DISPOSAL FORM

If a producer has produced cannabis that tested above the acceptable delta-9 tetrahydrocannabinol (THC) level, the material must be disposed of in accordance with the Controlled Substances Act (CSA) and the Drug Enforcement Administration (DEA) regulations because such material constitutes marijuana, a schedule I controlled substance under the CSA. Consequently, the material must be collected for destruction by a person authorized under the CSA to handle marijuana, such as a DEA-registered reverse distributor, or a duly authorized federal, State, or local law enforcement officer. This form is used to document the disposal process. Producers must fill out and submit this form no later than 30 days after the disposal is completed. If a producer is disposing of marijuana in more than one plot, this form may be used to document disposal in multiple locations.

All information submitted must be accurate, legible, and complete. Completed disposal reports should be submitted to:

By Mail:
USDA/AMS/Specialty Crops Program
Hemp Branch
470 L'Enfant Plaza S.W.
Post Office Box 23192
Washington, D.C. 20026

Or via Email at:
FarmBill.Hemp@usda.gov

Or via Fax at:
(202) 720-8938

The following statements are made in accordance with the Privacy Act of 1974 (5 U.S.C. § 552a) and the Paperwork Reduction Act of 1995. The authority for requesting this information to be supplied on this form is the 7 CFR Part 990 Domestic Hemp Program (Program). The purpose of collecting this information is for USDA to administer the Program and the information provided on this form will be used to monitor Program participants. Failure to provide the information requested on this form may result in ineligibility to participate in the Program.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is OMB 0581-NEW. The time required to complete this information collection is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotope, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English. To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.

Name of Producer (First, Middle, Last): _____

USDA License Number: _____

Address of Producer: _____

Street _____ City _____ State _____ Zip Code _____

Lot #	Location Type (Greenhouse, Indoor, Field)	Geospatial Location (or other valid land descriptor)	Date of Completion of Disposal

By signing below, you are attesting to the disposal of product as described in the chart above.

Name of Producer/Business _____ Signature of Producer/Key Business Participant _____ Date _____

Name and Organization of Disposition Agent _____ Signature of Disposition Agent _____ Date _____

The signature above indicates certification of the completion of the disposal.