



**ARIZONA DEPARTMENT OF AGRICULTURE  
ENVIRONMENTAL & PLANT SERVICES DIVISION - HEMP PROGRAM**

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**INDUSTRIAL HEMP MICROGREENS/GREENS REPORT**

Dept. Use Only

This form is due within 5 business days after planting a crop. **Please send all forms to [azhemp@azda.gov](mailto:azhemp@azda.gov).** Make sure to include in the email subject line: License Number and "Microgreens Report".

**LICENSEE INFORMATION:**

Company Name:		License Number:	
Licensee Name:		Phone Number:	
Licensee Email:		Location POC Name:	
POC Email:		POC Phone #:	

**CROP INFORMATION:**

#	Variety Name (Only one):	Harvest Lot Number:
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Growing Location ID:	Planting Location ID:	County:
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Latitude <i>EX: 33.449517</i>	Longitude <i>EX: -112.095899</i>	Area Planted Outdoor Acres <input type="checkbox"/>   Indoor Sq./Ft. <input type="checkbox"/>
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Origin State/Country:	Origin License ID:	USDA-FSA ID Number
Planting Date:	Harvest Date:	

#	Variety Name (Only one):	Harvest Lot Number:
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Growing Location ID:	Planting Location ID:	County:
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Origin State/Country:	Origin License ID:	USDA-FSA ID Number
Planting Date:	Harvest Date:	

If reporting on more than 3 locations complete and submit additional planting report continuation reports.

Have these crops been registered with USDA-FSA?      YES      NO

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

For questions or assistance, please call (602) 542-0955 or send an email to [azhemp@azda.gov](mailto:azhemp@azda.gov).