Hemp Harvest Report/ Inspection Request Form

Plant Industry



Nevada Department of Agriculture

Hemp Program

405 South 21st Street, Reno, NV 89431

Contact: Audrey Blondfield Phone: (775) 353-3675

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Please complete the form in its entirety. Any forms submitted that are incomplete and/or illegible will be returned. Hemp crop should be sampled/inspected by the NDA a minimum of 15 days prior to harvest. Notification of 30 days prior to intended harvest is ideal for efficient sample inspection scheduling, which can reduce total inspection costs by allowing grouped inspections to split the travel expenses. All approved hemp producers must submit a harvest report. Failure to communicate with NDA staff may result in the issuance of non-compliance which can impact certification status and future recertification.

You may harvest the crop after it has been sampled by the Department.

Harvested crops must not be moved from the storage area indicated on this form and cannot be re-sampled if the crop tests above compliance. Do not dispose or relocate any crop material prior to Department approval. Once lab analysis has resulted in Total THC concentrations below the federally mandated threshold (0.3% Total THC on a dry weight basis using a post-decarboxylated or similarly reliable method), harvested material can be moved and sold at the producer's own risk.

Please attach a map of the production area to the back of this form, designating varietal separation, for inspector use.

Producer Information Grower Certification Number: Contact Name:		Business Name:	Business Name:				
		Physical Address/Growing Site:					
Business Phone:	Email Address:	Preferred Sampling Date: **Preferred Sampling Date is the date the grower would prefer to have their crop inspected/sampled. NDA inspectors will attempt to schedule inspections on the Preferred Sampling Dates; however, this date is not guaranteed**					
C-14*4* T6	-4						
Cultivation Inform Production County:	Varieties Planted:	Indoor or Outdoor:	Production Size per	Variet	y:	Intended Harvest Date:	
	1			Acres	Sq ft		
Total Production Size to be Sampled During Inspection:	2			Acres	Sq ft		
	3			Acres	Sq ft		
	4			Acres	Sq ft		
	5		*Include additiona	Acres I varieti	Sq ft es on th	e next page if necessary.	
Location Planting Occurre	ed – GPS Coordinates Requ	aired (Decimal Degree Form					
Storage Information Please provide the address location until a Report of	s and description of the stor	rage location for harvested h Total THC compliance has	emp crops. Harvested been issued by the De	crops	must not	t be moved from this	
Address:		=	Description of Storage Area:				
			1				

Additional Varieties – Add to Total Production Size on Pag	ge 1.		
Varieties Planted:	Indoor or Outdoor:	Production Size per Variet	y: Intended Harvest Date:
6		Acres	Sq ft
7		Acres	Sq ft
8		Acres	Sq ft
9		Acres	Sq ft
10		Acres	Sq ft
Disclaimer I attest, to the best of my knowledge, that the followin All crop (s) reported in this Hemp Harvest R		•	ave been reported as planted,
and were planted, within the location of the I intent to use the harvested crop material in			
Initials a final report.	a regar manner and	win provide details regard	ang na vested use within u
I will not move hemp crops from the storage material prior to Department approval.	e location indicated o	on this form and I will not	dispose any hemp crop
Signature		I	Date

Please draw a map or attach a PDF map of the production area to this form, designating varietal separation, for inspector use.