

Notification of material change: licence to cultivate and/or supply low-THC hemp

Hemp Industry Act 2008 (NSW)

This is the approved form to notify of a material change to a Department of Primary Industries and Regional Development licence to cultivate and/or supply low-THC hemp. Complete the relevant fields for any details that have changed and submit the completed form with supporting documentation and payment (if required) via:

Email: bfs.admin@dpird.nsw.gov.au

Post: PO Box 232, Taree NSW 2430

1. Licence holder information

Licence number _____ Licence holder name _____

Brief description of change: _____

2. Have you changed licence holder details?

☐ Yes ☐ No

If the proposed change includes a new ABN and/or ACN, you will be required to submit an application to transfer the licence into the new entity name. Use the new application form accessed via

<https://www.dpi.nsw.gov.au/agriculture/broadacre-crops/nsw-hemp-industry>.

Change of company/association name (*attach the official change of name document*)

New trading name (*attach ASIC Business Name Registration Certificate*)

New partnership name

3. Have you changed contact details?

☐ Yes ☐ No

New postal address _____

New email address _____

New phone number _____

4. Have you changed Applicant or Close Associate details?

☐ Yes ☐ No

a. Applicants or Close Associates to be removed

First name(s)

Last name

b. Applicant or Close Associate to be added

- If applying for more than one Applicant or Close Associate, copy this page.
- All individuals, partners and trustees are Applicants.
- All company directors and principal contacts for associations are Close Associates. You may nominate additional Close Associates that have a relevant position, role or power in relation to the business (see the *Guidelines for Preparing a Low-THC Hemp Application* for advice on completing this section).
- You must provide a copy of photo identification for each person.
- Following receipt of the application, each person will receive a link emailed from [no-reply@police.nsw.gov.au](mailto:reply@police.nsw.gov.au) to conduct a National Criminal Record Check (\$37 per person to be paid on application – Complete Section 9 – Fee Payment).

Personal and contact details

☐ Applicant or ☐ Close Associate Role _____

Family name _____ First name(s) _____

Mobile _____ Email _____

Residential address _____

Driver's licence number _____ State of issue _____ Date of birth _____

Skills/experience relevant to this licence _____

Licensing history

- a. Is/has this person been licensed in NSW or another jurisdiction for the cultivation and/or supply of low-THC hemp? ☐ Yes ☐ No
- If yes, provide the jurisdiction and licence number _____
- b. Has this person ever had a licence to cultivate and/or supply low-THC hemp (or equivalent) refused, suspended or cancelled anywhere in Australia? ☐ Yes ☐ No
- If yes, provide details of the refusal/suspension/cancellation _____
- _____
- _____

Criminal background

Has this person ever been convicted of a drug-related offence anywhere in Australia? ☐ Yes ☐ No

If yes, provide details of the conviction/s _____

Declaration by Proposed Applicant or Close Associate

I declare that:

- the information provided by me in this application form is, to the best of my knowledge and belief, true and correct in every particular.
- I have read and understand the requirements and obligations of the *Hemp Industry Act 2008* and *Hemp Industry Regulation 2016*.
- I have read and understand the requirements and obligations of the *Hemp Industry New South Wales Licence Manual*.
- I understand that, in order for a licence to be granted, the Secretary must conduct a National Criminal Record Check of myself.
- I have read the information provided in the privacy statement at the end of this document and understand that the information provided by me in this application form will be used for the purposes of determining my suitability to hold or be associated with a licence under the *Hemp Industry Act 2008* and for other purposes associated with the administration and enforcement of that Act.
- I make this declaration in the knowledge that a person making a false declaration is liable to prosecution under the Oaths Act 1900.

Signature _____ Date _____

5. Are you requesting to add a location to your licence?

☐ Yes ☐ No

Copy this page if more than one location is being applied for.

a. Property details

Property name _____

Address _____

Lot/DP number/s _____

PIC (Property Identification Code) N _____

b. Proposed maximum area of cultivation _____ hectares

c. Are all the property owners listed as an Applicant or Close Associate on the licence and/or this application form? ☐ Yes: Consent not required

☐ No: Consent required

Consent to use of property for the cultivation of low-THC hemp

Consent must be signed by all property owners not listed as an Applicant or Close Associate under the licence or licence application. If the property owner is a company, all directors must sign the consent and the ASIC Company Extract listing the directors must be submitted.

I, (full name) _____

being the legal owner of the property below, give to the licence applicant/holder below consent for the use of this property for the cultivation of low-THC hemp, pursuant to a licence issued under the *Hemp Industry Act 2008*.

Address: _____

Lot/DP number/s: _____

PIC (Property Identification Code) N: _____

Maximum area allowed for cultivation (hectares): _____

Licence applicant/holder name: _____

Licence number (if applicable/known): _____

Signature: _____

Date: _____

Phone: _____

Email: _____

Note for the property owner

- A crop cannot be grown at this location until notification of approval has been provided by the NSW Department of Primary Industries and Regional Development. The licensee will be issued with a licence to cultivate at this location, once approved.
- To withdraw consent, please provide notice of withdrawal to bfs.admin@dpird.nsw.gov.au
- Once the location is no longer an approved location for hemp cultivation under this licence, you will be responsible for controlling any volunteer plants. Failure to do so may be an offence under the *Drug Misuse and Trafficking Act 1985*.

d. Attachments

☐ I have attached proof of property ownership (e.g. a rates notice).

☐ I have attached a map showing the location of the property within the broader area.

☐ I have attached a plan showing cultivation, storage and/or processing areas within the property.

6. Are you requesting to remove a location from your licence? ☐ Yes ☐ No

Location details

7. Are you requesting to increase or decrease cultivatable area on an approved location? ☐ Yes ☐ No

Location details and nature of request (e.g. address and increase from 5 hectares to 10 hectares)

☐ I have attached a map of the revised area.

8. Are you requesting changes to the activities listed on your licence? ☐ Yes ☐ No

Refer to Part 6 of the *Guidelines for Preparing a Low-THC Hemp Application* for advice on completing this section.

Select the activities for addition or removal

	Add	Remove
Cultivate low-THC hemp for commercial production	☐	☐
Supply low-THC hemp for commercial production	☐	☐
Cultivate low-THC hemp for use in a manufacturing process	☐	☐
Supply low-THC hemp for use in a manufacturing process	☐	☐
Cultivate low-THC hemp for scientific purposes (own research)	☐	☐
Cultivate to supply low-THC hemp for scientific purposes (not own research)	☐	☐
Supply low-THC hemp for scientific purposes	☐	☐

If adding an activity, provide a description of the intended business activity

(For example, intended cultivation and production processes, proposed products and target customers. If applying to add cultivate for your own scientific research, you are required to provide separate documents including a research proposal and evidence of qualifications and experience relevant to the research.)

9. Fee Payment

If the application relates to additional applicants or close associates, a National Criminal Record Check Fee of \$37.00 per person is payable on submission of the application.

☐ Cheque/money order made payable to Department of Primary Industries and Regional Development

☐ Credit/debit card:

Name on card																	
Card number																	
Expiry date			/			CVC (3 or 4 digits)											

10. Declaration

This section should be completed by an approved Applicant or, if the licence is held in a company or association name, an approved Close Associate who is a director or principal contact.

I agree that all the information contained in this form is true and correct and certify that I am authorised to submit this form on behalf of this business.

Full name

Signature

Date

Privacy and personal information

In completing this application, you will be required to provide specific personal information, for example, your name and address, contact information and a National Criminal Record Check. You must provide this information, otherwise we may not be able to issue you with a licence under the Hemp Industry Act 2008 (Act).

We will not disclose information about you to any person except for the purposes of regulating and enforcing the provisions of the Act or where the disclosure is permitted by law, for example through an information sharing arrangement between the Secretary and a relevant agency (see section 37 of the Act).

For more details about privacy, please contact gipa@regional.nsw.gov.au.

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