Department of Primary Industries
and Regional Development

Low-THC Hemp Planting Notification & Sampling Request

Planting notifications **must** be submitted **within 7 days of planting** with a **map** showing property and crop location. If planting more than 1 variety, use a separate form for each variety.

Resubmit this form to **request sampling 2 weeks prior to optimal sampling time**.

Record the planting notification reference number provided by the Department following submission
PN:

Licence Holder Details	
Licence holder name:	Licence number:
Mobile:	Email:

Information Relating to the Low-THC Hemp Crop/Location				
Address:				
Lot / DP number(s):				
Name of property owner/manager:			Phone:	
Name of grower:			Phone:	
Date planted:				
Variety (1 only)	**Crop Area (ha or m²)**	**Sowing Rate (kg per ha)/# of Plants**	**Crop Type**	**Purpose**
			☐ Fibre ☐ Seed ☐ Flower ☐ Cuttings ☐ Whole plant / seedlings	☐ Viable seed/resowing ☐ Construction ☐ Food ☐ Cosmetics ☐ Textile ☐ Oil ☐ Resin ☐ Research ☐ Animal products ☐ Other

Source of Seed		
Name of seed supplier:		NSW licence number:
If sourced outside of NSW, provide name of supplier:		
Address:		
Phone:	Mobile:	Email:

Name:

Signature: Date:

☐ I am authorised to submit this form on behalf of the licence holder
☐ Map attached

COMPLETE THIS SECTION TWO (2) WEEKS PRIOR TO OPTIMAL SAMPLING TIMING AND RESUBMIT

Sampling Request	Date requested:	Intended harvest date:
	Stage of flowering:	

Please return this form by post or email to: PO Box 232, Taree NSW 2430
bfs.admin@dpird.nsw.gov.au