



License Application – Commercial Industrial Hemp Producer

Kansas Department of Agriculture
Plant Protection and Weed Control
Commercial Industrial Hemp Program
1320 Research Park Drive Manhattan, KS 66502

License Application – Commercial Industrial Hemp Producer

Guidelines and Instructions

The Kansas Department of Agriculture (“KDA”) is implementing the Commercial Industrial Hemp Program (“Program”), as authorized by the Commercial Industrial Hemp Act (K.S.A. 2-3901 *et seq.*). To be considered for a commercial industrial hemp producer license for each growing season, you must submit a completed license application, including all required documentation, fingerprint cards, waiver forms, and applicable fees by the deadline. Submit all materials in one mailing to the Kansas Department of Agriculture, Commercial Industrial Hemp Program, 1320 Research Park Drive, Manhattan, KS 66502, postmarked by March 15 each year, to be considered for licensure during that year’s growing season.

- **Commercial Industrial Hemp Producer License Application.** The deadline for submitting all hemp producer license applications—including all required documentation, fingerprint cards, waiver forms, and applicable fees—is March 15 each year. Submissions postmarked after that date will not be accepted. KDA recommends that applicants use a delivery method with tracking capabilities when submitting a license application by mail; KDA is not responsible for license applications that are lost in the mail or not received. KDA must receive all required documentation and applicable fees before a license application will be considered.
 - License applications must be complete, accurate, and legible. Follow all instructions in this document to ensure your license application is complete. KDA is not required to request additional information to clarify a license application. **Incomplete or illegible license applications shall not be accepted, and applicable fees shall not be refunded.**
 - **Providing false, misleading, or incorrect information on your license application, or on any supporting documentation may result in your license application being denied, revocation of any existing license, or denial of future license applications.**
- **Fees.** A \$100 nonrefundable application fee, paid by check or money order made payable to the Kansas Department of Agriculture, must be submitted with your completed license application. **This application fee does not apply to any other Program costs.** If you are conditionally approved for participation in the Program, a full license fee of \$1,200 will be required before your license is issued.
 - **Carefully review the fees required for each license application submission (Table 2).** KDA will not accept partial payments or payment plans.
 - An application that does not include the full amount of the application fee will not be accepted or reviewed, and a license will not be issued if the required license fee is not paid in full within the timeframe specified herein following conditional approval of an application.
- **State and National Criminal History Record Check.** Each applicant must submit to the required fingerprint-based state and national criminal history record check no more than 30 days prior to that applicant’s application being submitted to KDA. KDA will collect payment of the \$47 criminal history record check fee. Such payment must be made by check or money order made payable to the Kansas Department of Agriculture. KDA will submit the required fingerprint card to the Kansas Bureau of Investigation (“KBI”). All records generated by the required fingerprint-based state and national criminal history record checks completed by the KBI must be received and reviewed by KDA for licensing consideration. **State and national criminal history records must be provided to KDA by the KBI; state or national criminal history records submitted by an applicant directly to KDA will not be accepted.** Information about how to initiate the fingerprint-based state and national criminal history record check process is available on the KDA’s industrial hemp website.
- **Review.** KDA will review applications for licensing consideration in the order they are received.

- **File Format.** Please complete the license application on the fillable PDF form included in this packet. If you do not have compatible software to do so, print the PDF form and complete it manually and legibly.
 - **KDA is not responsible for an application that is illegible or for information missing from an application due to formatting or printing errors and is not obligated to ask for additional clarifying information.**
- **Records Retention.** You must retain a copy of your completed license application, including all required supporting documentation, for your records, and should retain, if applicable, the mailing receipt and tracking number for your application. **Records retention is required by the KDA regulations adopted pursuant to the Commercial Industrial Hemp Act.** Failure to maintain records as required may result in penalties as provided for in the Commercial Industrial Hemp Act and the implementing regulations.
 - License applications and any documentation submitted to KDA are subject to public disclosure pursuant to the Kansas Open Records Act.
- **Deadlines.** The following table provides important licensing and reporting dates:

Table 1. Program Licensing and Reporting Deadlines

What	Who	Deadline	Additional Requirements
License Application	Each individual seeking a license to grow or cultivate industrial hemp	March 15 each year	
Planting Report	Each commercial industrial hemp producer licensee	No more than 15 days after each planting, including replanting, of seeds or propagules; must provide hemp acreage information to the United States Department of Agriculture (“USDA”) Farm Service Agency (“FSA”)	Hemp acreage reporting information must be filed with FSA; please consult your county FSA office
Pre-Harvest Report	Each commercial hemp producer licensee	No fewer than 30 days prior to the beginning date of each intended harvest	
Voluntary Destruction Report	Each commercial hemp producer licensee who elects to voluntarily destroy hemp plants	No fewer than 15 days prior to the beginning date of each intended destruction	
Harvest Report	Each commercial hemp producer licensee	No more than ten days after the completion of each harvest	
License Expiration	Each commercial hemp producer licensee	December 31 of each license year	

Table 2. Summary of Commercial Industrial Hemp Producer Fees

Fee Type	Program Fees^z	Fee Due Date
Criminal History Record Check Fee	\$47; nonrefundable (this is the KBI's standard fingerprint-based criminal history record check fee)	At the time the commercial hemp producer license application is submitted
Application Fee	\$100; nonrefundable (does NOT apply to license fee)	At the time the commercial hemp producer license application is submitted
License Fee	\$1,200; nonrefundable	Within 15 days of conditional approval of the license application
Initial Sampling and Testing Fee	\$225 per laboratory test (each lot must be sampled and tested separately)	Upon the licensee's receipt of the invoice provided by KDA
Subsequent Sampling Fee	Transportation and inspection time at \$45 per hour, and mileage at the rate established by the Kansas Department of Administration	Upon the licensee's receipt of the invoice provided by KDA
Modification Fee	\$50 for requested changes to a license previously issued by the department	At the time the license modification request is submitted

^zFees may be submitted in the form of a check or money order made payable to the Kansas Department of Agriculture.

Send the Commercial Industrial Hemp Producer License Application—including all required documentation, fingerprint cards, waivers, and applicable fees—postmarked no later than the application deadline, to:

Kansas Department of Agriculture
Commercial Industrial Hemp Program
1320 Research Park Dr. Manhattan, KS 66502

More information regarding the Program is available at agriculture.ks.gov/industrialhemp.

Please note that KDA can answer questions but will not provide direct assistance in completing the Commercial Industrial Hemp Producer License Application.

Example of Required Maps for Licensed Growing Area



Figure 1-Example map of licensed growing area

Table 3- Example licensed growing area section and lot information

Licensed Growing Area Section Description ^z			
Section	Township and Direction	Range and Direction	Description
12	19S	03E	NW4

Crop Address and Licensed Growing Area Entrance		
Crop Address:	1234 S CR 9 McPherson, KS 67460	
Entrance Information:	GPS Latitude: 38.12345	GPS Longitude: -97.12346

Lot Information					
Lot ^y Designation	Lot Name	GPS Latitude	GPS Longitude	Acres	Variety
1	Terrace 1	38.12345	-97.12345	116.25	Variety 1
2	Terrace 2	38.12351	-97.12353	14.37	Variety 2
3	Terrace 3	38.12345	-97.11904	15.58	Variety 3
4	Terrace 4	38.12347	-97.12034	12.37	Variety 4
5	Terrace 5	38.12356	-97.08346	3.25	Variety 1

^z**Licensed Growing Area** means an area identified on an application or license for cultivating or producing industrial hemp for commercial purposes, and which may consist of a single primary section legally designated by the public land survey system, and may include an additional half mile in any direction beyond the primary section.

^y**Lot** means a continuous area in a field, greenhouse, or indoor growing structure containing the same hemp variety throughout. Applicants must provide KDA a list all of Lot IDs received from FSA. The Lot ID is defined by the FSA-assigned farm, tract, and field/sub-field numbers. They should be combined in the following format to generate each Lot ID: FARM# TRACT# FIELD# SUBFIELD LETTER

Commerical Industrial Hemp Producer License Application

Submission Deadline: March 15, 2021

This Commercial Industrial Hemp Producer License Application is required by the regulations governing the Commercial Industrial Hemp Program. The cultivation or production of industrial hemp in Kansas is not permitted without a valid commercial hemp producer license issued by KDA. This application must be completed in full before a commercial industrial hemp producer license will be issued. Individuals may apply for multiple licenses; however, each license sought will require separate license application submissions, application fees, and license fees.

OFFICIAL USE ONLY	
Date of Receipt:	
Check Number:	
Date of Receipt of Fingerprint Card	
KDA Application #:	

Directions: Complete all parts of the commercial industrial hemp producer license application. Submit this application and all required documentation, fingerprint cards, waiver forms, and applicable fees, in one mailing, to: Kansas Department of Agriculture, Commercial Industrial Hemp Program, 1320 Research Park Drive, Manhattan, KS 66502.

KDA is not responsible for license applications lost in the mail or not received. All required documents and fees must be received by KDA before your license application will be considered. KDA is not responsible for information missing from an application due to formatting or printing errors by the applicant. All information submitted must be complete, accurate, and legible. KDA is not required to request additional information to clarify a license application. **Late, incomplete, or illegible license applications shall not be accepted, and the applicable fees shall not be refunded.**

Providing false, misleading, or incorrect information on your license application or any documentation may result in your license application being denied, revocation of any existing licenses, or denial of future license applications.

The license application cannot be filled out in the name of a business; licenses will only be issued to individuals.

If you own or are employed by a business wishing to participate in the Program, the license application must be completed by a designated licensee, who must be an individual. A license will not be granted if the license application is filled out in the name of a business. The designated licensee listed on industrial hemp producer license application must submit to a fingerprint-based state and national criminal history record check no more than 30 days prior to the license application being submitted to KDA.

If completing this form electronically, navigate the form with the mouse or select the next field using the down arrow key. Attach additional pages if necessary.

I. Licensing History

If applicable, the license numbers of any current or previous industrial hemp license issued by KDA or any other state's relevant licensing body:

II. Applicant Contact Information

Full Legal Name:

Home Address (Street, City, State, Zip Code):

Mailing Address [Street, City, State, Zip Code (if different than above)]:

Email (email is the primary method of communication):

Date of Birth [mm/dd/yyyy (must be at least 18 years of age)]:

Cell Phone:

Home Phone (if different):

Associated Business Name (not required as individuals are the only eligible license recipients):

Business Address (not required as individuals are the only eligible license recipients):

Business Phone (not required as individuals are the only eligible license recipients):

Pursuant to the regulations governing the Program, individuals are the only eligible license recipients; licenses will not be issued to a business entity. **Before applying, review KDA's regulations adopted pursuant to the Commercial Industrial Hemp Act to ensure that the applicant meets all the requirements and is able to comply with the responsibilities imposed upon a licensee.**

III. Licensed Growing Areas and Lots (complete a separate page for each section)

- a. Provide the information requested in this section for all locations proposed to be used to cultivate or produce industrial hemp. Complete the below table identifying your proposed licensed growing area and lot(s). Identify all locations that will be used for cultivating or producing industrial hemp, including but not limited to outdoor areas, indoor areas, greenhouse areas, etc. Attach additional pages as necessary.

Industrial hemp is not permitted to be cultivated or produced within a home or residential structure, and applications that include such growing areas will be denied. While KDA will issue industrial hemp licenses as permitted by the agency’s regulations, local jurisdictions may have their own laws and ordinances pertaining to the cultivation or production of industrial hemp. You are responsible for verifying such requirements with all law enforcement, regulatory, or other authorities who may have jurisdiction over your land area. Your licensed areas are not permitted to include land, buildings, facilities, or other structures that are rented or leased from any individual whose industrial hemp license has previously been revoked by KDA or who has been denied licensure in any KDA industrial hemp program. KDA regulations prohibit the cultivation or production of industrial hemp within 50 feet of a residential structure or within one-quarter mile of any public or private K-12 school or any public recreational area without special permission from the Secretary of Agriculture. If you wish to cultivate or produce industrial hemp in such an area, you must identify the location of the proposed area, fully explain your request, and fill out and submit, as an attachment to your license application, a *Request for Permission Form* located on the industrial hemp application webpage.

You may include multiple sections within a licensed growing area, but each area of land located more than a half mile in any direction beyond the boundaries of the primary section will require a separate license application, including all required documentation, fingerprint cards, waivers, and applicable fees. Each lot that is in a separate Section/Township/Range, even if within the same growing area, must be identified on an additional page, including a map and all other required information.

Proposed Licensed Section	Crop Address	City	Zip	County	Own or Rent
	Full Legal Description (Section/Township/Range/Description)				
	Entrance Information (GPS Latitude and GPS Longitude)				
	Identify all legal owners of the location: Attach additional pages as necessary				
	Lot Name ^z	GPS: Latitude ^y Ex: 39.12345	GPS: Longitude ^y Ex: -96.12345	Acres	
Lot 1					
Lot 2					
Lot 3					
Lot 4					
Lot 5					

^z “Lot” means a continuous area in a field, greenhouse, or indoor growing structure containing the same variety throughout. You must provide KDA all Lot IDs received from FSA. “Lot Name” is a unique identifier or common name that you designate for each lot. The Lot Name may be used by KDA to identify the lot. The Lot ID is the FSA-assigned farm, tract, and field/sub-field numbers, combined in the following format to generate each Lot ID: FARM# TRACT# FIELD# SUBFIELD LETTER.

^yThe GPS coordinates that you provide must be the coordinates for the point of access to the lot and must be provided in DECIMAL DEGREES. Any addition or change to a GPS coordinate will require the completion of a request for modification of license and a modification fee of \$50.00.

III. Licensed Growing Area and Lots, continued

b. To the best of your knowledge and belief, has any location identified on page 2 been previously approved by KDA for the cultivation or production of industrial hemp, or has it been or is it intended to be included in a license application submitted to KDA for the current license year?

Yes No If you answered "Yes," identify each location and provide an explanation for your request to include the area in your license application in the below space. Attach additional pages if necessary.

c. The total acres planned for cultivating or producing industrial hemp plants, plant parts, grain, or seeds, as identified in the table on page 2:

Total Acres: _____

d. Attach maps for each location identified in the table on page 2. Submit separate maps for each area located in different Section/Township/Range. Each map must include the following:

- 1) The applicant's full legal name;
- 2) licensed growing area description (Section/Township/Range/Description);
- 3) licensed growing area entrance (GPS coordinates); and
- 4) lot name, boundaries, GPS coordinates, and area for each appropriate lot designation.

***Please view the example on page 4 depicting the appropriate map submission for licensed growing areas and lot designations.**

e. Indicate the intended end-use for all the industrial hemp to be cultivated or produced in all areas proposed for licensure. The intended end-use should be consistent with the activities being conducted and the varieties of industrial hemp being produced (mark all that apply):

Grain^z Floral^y Fiber^x Seed^w Seedlings^v Clones^u

^zused for hemp hearts, crushed seed oil (not CBD), protein supplements, etc. (human consumption)

^ygrown for extraction of cannabidiol (CBD) and other phytocannabinoids

^xused for cloth, pressed plastics, ropes, animal bedding, paper, biofuel, packaging, concrete additives, etc.

^wused for propagation stock, hybrids (non-human consumption)

^vgrowing or cultivating industrial hemp seedlings for use or sale

^ugrowing or cultivating industrial hemp clones for use or sale

f. Be aware that the following actions may result in KDA requiring effective disposal of an industrial hemp crop, the licensee being placed on a corrective action plan, license revocation, or ineligibility for future licensure:

- 1) Cultivating or producing *Cannabis sativa* L. that does not meet the requirement that industrial hemp originate from authorized seed or clone plants;
- 2) cultivating or producing multiple varieties of industrial hemp in a single lot; or
- 3) cultivating or producing industrial hemp in unlicensed locations.

IV. Industrial Hemp Producer License Application Acknowledgments

These acknowledgments must be completed **by the applicant** listed on this license application. **Read each of the acknowledgment statements below and check “Yes” or “No” to indicate your understanding and affirmation of each statement. Failure to check a box for any acknowledgement will render the license application incomplete and the application therefore will not be considered by KDA.**

- 1) I affirm that I have submitted my fingerprint card and waiver form to KDA. I understand the waiver and FBI Privacy Act Statement, I consent to KDA submitting my fingerprint card to the KBI for completion of the required state and national criminal history record check, and I authorize KDA as the recipient of my state and national criminal history record check.
 Yes No
- 2) I acknowledge that license applications for each subsequent growing season shall be submitted to KDA no later than March 15 of each year in which I intend to cultivate or produce industrial hemp.
 Yes No
- 3) I acknowledge that before cultivating or producing industrial hemp plants, plant parts, grain, or seeds in Kansas, I must obtain a license issued by KDA. I acknowledge that industrial hemp plants, plant parts, grain, or seeds are only permitted to be cultivated or produced at locations listed on such license. I acknowledge that I shall be held responsible for any plants, plant parts, grain, or seeds cultivated or produced in violation of the Act and for the actions of all employees, agents, contractors, or volunteers engaged in the cultivation or production of industrial hemp taken in relation to such license.
 Yes No
- 4) I affirm that I will only cultivate or produce industrial hemp plants, plant parts, grain, or seeds from authorized seed or clone plants as those terms are defined in K.S.A. 2-3901, and that, if I am issued a license by KDA, I will not cultivate or produce plants, plant parts, grain, or seeds of the genus cannabis that are not industrial hemp. I acknowledge that if I do cultivate or produce, or otherwise possess, plants, plant parts, grain, or seeds of the genus cannabis that are not considered industrial hemp, I will be required to destroy them at my expense, may be subject to investigation by the KBI or other law enforcement agencies, and may face disciplinary sanctions, including revocation of any industrial hemp license I hold and denial of future license applications.
 Yes No
- 5) I acknowledge that if I am issued a commercial industrial hemp license by KDA I am accepting all of the inherent risk associated with my participation in the Program. I acknowledge that both personal and financial loss may be possible, and I understand and acknowledge that KDA is not responsible for reimbursing or compensating me for any loss resulting from any industrial hemp-related activities I undertake.
 Yes No
- 6) I acknowledge that if I am issued a commercial industrial hemp license by KDA any violation of the terms or conditions of such license may result in the revocation of any industrial hemp license that I hold and the denial of any future industrial hemp license application I submit to KDA.
 Yes No

- 7) I acknowledge that if I am issued a commercial industrial hemp license by KDA the license shall be nontransferable, unless the Secretary of Agriculture determines that a transfer of the license is necessary because the licensee dies or becomes disabled or because an individual who is an employee or agent of a bank, financial institution, or other creditor that has a legal right to take possession of industrial hemp for the purposes of settling a debt is required to obtain a license to do so.
- Yes No
- 8) I affirm that if I am issued a commercial industrial hemp license by KDA I will cooperate with any actions taken by KDA for the purpose of investigating or verifying the lawfulness of any industrial hemp-related activities I conduct.
- Yes No
- 9) I acknowledge that if I am issued a commercial industrial hemp license by KDA my license will expire December 31 of the year in which the license was granted. I understand that if I wish to participate in the Program in subsequent years, I must submit a new license application and all required documentation, fingerprint cards, waiver forms, and applicable fees on an annual basis. I understand that the issuance of a commercial industrial hemp license in one year does not guarantee issuance of a license in subsequent years. I acknowledge that the completion of subsequent license applications and fingerprint-based state and national criminal history record checks and payment of applicable fees will be required on an annual basis.
- Yes No
- 10) I acknowledge that any information created or submitted in conjunction with the Program is subject to the Kansas Open Records Act and that information contained in this license application, including any documents, records, or reports submitted to KDA, may be subject to public disclosure. I understand that KDA may provide license information to USDA; federal, state, and local law enforcement agencies; fire and rescue agencies; and the public.
- Yes No
- 11) I affirm that by accepting a commercial industrial hemp license from KDA I am granting consent to representatives of KDA to perform any number of inspections and collect samples of any hemp plants, plant parts, grain, or seeds in my possession or on any of my licensed premises at any time. I affirm that I am authorizing KDA to have access to all land, buildings, facilities, motor vehicles, and other structures being used for hemp-related activities. I consent to KDA officials being granted such access without interference or obstruction, whether I am present or not, with or without cause, and with or without advance notice. Additionally, I consent to KDA inspecting any reports, records, or documentation maintained by me that pertain to hemp plants, plant parts, grain, or seeds or any hemp-related activity.
- Yes No
- 12) I acknowledge that I have read, understand, and will abide by all of the requirements and fees related to commercial industrial hemp licenses established in K.A.R. 4-34-22, including those for license modifications and required reports. I understand that said requirements include but are not limited to complying with all instructions from representatives of KDA and law enforcement agencies; retaining records and providing them as requested; using authorized industrial hemp seed or clone plants; notifying KDA of interactions with law enforcement; notifying KDA and law enforcement regarding theft of any industrial hemp plants, plant parts, grain, or seeds; application of pesticides to industrial hemp; obligations relating to educational activities; land-use restrictions including, the requirement that all locations be licensed; and the prohibition of hemp-related activities that are unrelated to the approved license.
- Yes No

- 13)** I affirm that, in addition to abiding by the reporting requirements in K.A.R. 4-34-22 and 4-34-23, I will report all planting information directly to FSA as required by any USDA rules or requirements regarding commercial industrial hemp.
- Yes No
- 14)** I acknowledge that all industrial hemp I cultivate or produce must be derived from an authorized seed or clone plant source and that I am required to maintain documentation verifying that all industrial hemp plants, plant parts, grain, or seeds in my possession have a lawful origin. I also acknowledge that I am required to abide by the planting and pre-harvest reporting requirements in K.A.R. 4-34-23 and maintain documentation regarding the same.
- Yes No
- 15)** I acknowledge that I have read and understand the sampling, testing and harvest requirements in K.A.R. 4-34-24, and I understand that all fees set out therein will be due in full at the times established in that regulation.
- Yes No
- 16)** I acknowledge that I have read, understand, and will abide by the effective disposal requirements in K.A.R. 4-34-25, for all plants or plant parts deemed to be in violation of the Commercial Industrial Hemp Act or the Act's implementing regulations for any reason. Additionally, I acknowledge that I am responsible for reimbursing KDA and any law enforcement agency whose agents or officers are required to participate in or be present during effective disposal for any and all costs associated with the effective disposal.
- Yes No
- 17)** I acknowledge that I have read, understand, and will abide by the requirements regarding the movement, sale, or transfer of industrial hemp, both within Kansas and across state lines, as set forth in K.A.R. 4-34-26. I acknowledge that it is my responsibility to know, understand, and abide by any and all federal, state, or local laws, regulations, ordinances, or other requirements that may affect my activities related to industrial hemp.
- Yes No
- 18)** I acknowledge that I have read, understand, and will abide by the requirements in K.A.R. 4-34-24 relating to pre-harvest inspection, sample collection, testing, and post-testing actions by KDA.
- Yes No
- 19)** I acknowledge that I have read, understand, and will abide by the requirements in K.A.R. 4-34-24 relating to post-harvest inspection, sample collection, testing, and post-testing actions by KDA.
- Yes No
- 20)** I acknowledge that I have read, understand, and will abide by the requirements in K.A.R. 4-34-27 relating to additional restrictions on commercial industrial hemp producers.
- Yes No

21) I acknowledge that I have read and understand the list of violations and the disciplinary sanctions that may result from violations of the Act and the regulations governing the Program as set forth in K.A.R. 4-34-29, and I affirm that I will abide by all requirements of the Act and regulations governing the Program.

Yes No

22) I acknowledge that this form is not an exhaustive statement of the requirements of the Program. I certify that I have read and understand the regulations implementing the Program, K.A.R. 4-34-1 and K.A.R. 4-34-22 through K.A.R. 4-34-31, and that it is my responsibility to be aware of the regulations and abide by their requirements. I understand that my acceptance into and continuing involvement in the Program is contingent upon my adherence to the requirements set forth in such regulations at all times.

Yes No

23) I affirm that the individual designated as the Applicant in this license application is at least 18 years of age and resides at the address provided in Section II.

Yes No

I hereby verify and affirm that my answers contained above are true and accurate. I understand that if KDA later determines this information to be false, misleading, or incorrect, KDA may deny my license application, or revoke any license issued, and any future license applications that I submit may be denied.

Signature of Applicant

Date

Printed name

Title, if applicable

**WAIVER AGREEMENT
AND
FBI PRIVACY ACT STATEMENT**

Fingerprint-Based Record Checks for Noncriminal Justice Purposes

I hereby authorize (*Name of Authorized Recipient*) KS Dept. of AG to submit a set of my fingerprints to the Kansas Bureau of Investigation (KBI) for the purpose of identifying me and accessing and reviewing Kansas and/or national criminal history records that may pertain to me. Pursuant to K.S.A. 22-4701 et seq. and K.S.A. 22-5001, the Authorized Recipient may obtain my criminal history record information for noncriminal justice purposes. By signing this waiver, it is my intent to authorize release to the above-referenced Authorized Recipient of any Kansas and/or national criminal history record that may pertain to me. I further understand that, if applicable, the Authorized Recipient may choose to deny me unsupervised access to children, the elderly, or individuals with disabilities until the criminal history background check is completed.

I understand that, upon my request, the Authorized Recipient will provide me a copy of the criminal history background report, received on me, for the purpose to challenge the accuracy and completeness of any information contained in any such report. I may be afforded a reasonable amount of time to correct or complete the criminal history record (or decline to do so) before the Authorized Recipient makes a final decision about my status as an employee, volunteer or contractor, or my eligibility for any pertinent license, certification or registration, or adoption. See 28 CFR 50.12(b).

I understand that officials receiving the results of the criminal history record check are to use those results only for authorized purposes and are prohibited from retaining or disseminating such results in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council. (See 5 United States Code (USC) 552a(b); 28 USC 534(b); 42 USC 14616, Article IV(c); 28 CFR 20.21(c), 20.33(d), and 906.2(d).)

FBI PRIVACY ACT STATEMENT

Authority:

The FBI's acquisition, preservation, and exchange of information requested by this form is generally authorized under 28 U.S.C.534. Depending on the nature of your application, supplemental authorities include numerous Federal statutes, hundreds of State statutes pursuant to Pub.L. 92-544, Presidential executive orders, regulations and/or orders of the Attorney General of the United States, or other authorized authorities. Examples include, but are not limited to: 5 U.S.C. 9101; Pub.L. 94-29; Pub.L. 101-604; and Executive Orders 10450 and 12968. Providing the requested information is voluntary; however, failure to furnish the information may affect timely completion or approval of your application.

Social Security Account Number (SSAN).

Your SSAN is needed to keep records accurate because other people may have the same name and birth date. Pursuant to the Federal Privacy Act of 1974 (5 USC 552a), the requesting agency is responsible for informing you whether disclosure is mandatory or voluntary, by what statutory or other authority your SSAN is solicited, and what uses will be made of it. Executive Order 9397 also asks Federal agencies to use this number to help identify individuals in agency records.

Principal Purpose:

Certain determinations, such as employment, security, licensing, and adoption, may be predicated on fingerprint-based checks. Your fingerprints and other information contained on (and along with) this form may be submitted to the requesting agency, the agency conducting the application investigation, and/or FBI for the purpose of comparing the submitted information to available records in order to identify other information that may be pertinent to the application. During the processing of this application, and for as long hereafter as may be relevant to the activity for which this application is being submitted, the FBI may disclose any potentially pertinent information to the requesting agency and/or to the agency conducting the investigation. The FBI may also retain the submitted information in the FBI's permanent collection of fingerprints and related information, where it will be subject to comparisons against other submissions received by the FBI. Depending on the nature of your application, the requesting agency and/or the agency conducting the application investigation may also retain the fingerprints and other submitted information for other authorized purposes of such agency(ies).

**WAIVER AGREEMENT
AND
FBI PRIVACY ACT STATEMENT (Cont.)**

Fingerprint-Based Record Checks for Noncriminal Justice Purposes

Routine Uses:

The fingerprints and information reported on this form may be disclosed pursuant to your consent, and may also be disclosed by the FBI without your consent as permitted by the Federal Privacy Act of 1974 (5 USC 552a(b)) and all applicable routine uses as may be published at any time in the Federal Register, including the routine uses for the FBI Fingerprint Identification Records System

(Justice/FBI-009) and the FBI's Blanket Routine Uses (Justice/FBI-BRU). Routine uses include, but are not limited to, disclosures to: appropriate governmental authorities responsible for civil or criminal law enforcement, counterintelligence, national security or public safety matters to which the information may be relevant; to State and local governmental agencies and nongovernmental entities for application processing as authorized by Federal and State legislation, executive order, or regulation, including employment, security, licensing, and adoption checks; and as otherwise authorized by law, treaty, executive order, regulation, or other lawful authority. If other agencies are involved in processing this application, they may have additional routine uses.

Additional Information:

The requesting agency and/or the agency conducting the application-investigation will provide you additional information pertinent to the specific circumstances of this application, which may include identification of other authorities, purposes, uses, and consequences of not providing requested information. In addition, any such agency in the Federal Executive Branch has also published notice in the Federal Register describing any system(s) of records in which that agency may also maintain your records, including the authorities, purposes, and routine uses for the system(s).

**RIGHT TO OBTAIN AND CHALLENGE ACCURACY
OF CRIMINAL HISTORY RECORDS**

You may request a copy of your state and/or national criminal history record from the Authorized Recipient for the purpose of challenging for accuracy and completeness.

Alternatively, you may obtain a copy of your **Kansas criminal history record information (CHRI)** to review for accuracy and completeness, by submitting a set of your fingerprints, a letter requesting your criminal history record, and payment of the appropriate fee to the KBI. For further details, including the current fee, visit the following Internet website: http://www.kansas.gov/kbi/info/info_brochures.shtml then find the brochure named "Record Checks for Non-Criminal Justice Purposes". Or, to provide official court documents to make a correction you may write to:

Kansas Bureau of Investigation
Attn: Criminal History Records
1620 SW Tyler
Topeka, Kansas 66612-1837

If a change is made to your Kansas criminal history record due to a challenge, a new copy of your Kansas criminal history record will be sent to the Authorized Recipient to make a final decision about your status as an employee, volunteer or contractor, or your eligibility for any pertinent license, certification or registration, or adoption.

To obtain a copy of your **national CHRI, also known as the Identity History Summary**, for review and challenge you must submit a set of your fingerprints and the appropriate fee to the FBI. Information regarding this process may be obtained at: <https://www.fbi.gov/services/cjis/identity-history-summary-checks>. Or, you may write to:

FBI CJIS Division
Attn: Criminal History Analysis Team 1
1000 Custer Hollow Road
Clarksburg, West Virginia 26306

**WAIVER AGREEMENT
AND
FBI PRIVACY ACT STATEMENT (Cont.)**

Fingerprint-Based Record Checks for Noncriminal Justice Purposes

The FBI will forward your challenge to the appropriate contributing agency to verify or correct the entry. Upon receipt of an official communication directly from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency (see 28 CFR 16.30 through 16.34). The Authorized Recipient must submit a new set of fingerprints and fee to receive the updated federal criminal history record.

I have ____ *OR* have not ____ been convicted of a crime.

If convicted, describe the crime(s), the date and location of the crime(s), and the name of the convicting court:

Under penalty of perjury, I hereby declare that I am the person described below, and understand that any falsification of this statement constitutes a severity level 9, nonperson felony under the provisions of Title 21 Kansas Statutes Annotated, Section 5903.

I have been provided the Waiver Agreement, FBI Privacy Act Statement, and information how to challenge my criminal records for accuracy and completeness.

Signature _____ Date _____

Printed Name _____ Date of Birth _____

Residential Address _____ City _____ State _____ Zip _____

TO BE COMPLETED BY THE FINGERPRINTING AGENCY:

Method of Verifying Identity:	<input type="checkbox"/> Driver's License	<input type="checkbox"/> State Issued ID Card
	<input type="checkbox"/> Military ID Card	
State/Branch: _____	ID Number: _____	

Agency Name: _____

Address: _____

Telephone: _____ Fax: _____

Name of Individual Verifying Identity: _____

V. Additional Documentation

Check below to affirm that you have submitted all required documentation and to indicate whether you are submitting any additional optional documentation with this license application. Additional documentation may include extended answers to any question in the license application. If documentation provides supplementary information to a section in this license application, you must start each new response on a separate page and identify the relevant section on the additional page.

- REQUIRED: Application Fee—Check or money order in the amount of \$100 made payable to the Kansas Department of Agriculture.
- REQUIRED: Criminal History Record Check Fee—Check or money order in the amount of \$47 for the applicant listed on this license application, made payable to the Kansas Department of Agriculture, for completion of the fingerprint-based state and national criminal history record check.
- REQUIRED: Acknowledgment pages completed by the applicant.
- REQUIRED: Documentation for Criminal History Record Check—Waiver Agreement, FBI Privacy Act Statement, and legible fingerprint card.
- REQUIRED: Maps for the proposed licensed growing area that include the following information: the applicant’s full legal name, the legal description of the land identified in the application, lot names, appropriate lot designations for field identification, field boundaries, and required global positioning system (GPS) coordinates.
- REQUIRED: A copy of your state or government-issued photo ID.
- Other Document (describe): _____.
- Other Document (describe): _____.

I hereby verify and affirm that my answers contained above are true and accurate. I understand that if KDA later determines this information to be false, misleading, or incorrect, KDA may deny my license application or revoke any license already issued, and any future license applications that I submit may be denied.

Signature of Applicant

Date

Printed name

Title, if applicable