Application for a Licence

under the *Industrial Hemp Act 2004* of Western Australia

Refer to ‘IHP-3 Notes to assist in applying for an industrial hemp Licence’ available from the [DPIRD website](http://www.agric.wa.gov.au/industrial-hemp): www.agric.wa.gov.au/industrial-hemp

The applicant hereby applies to the Registrar, Department of Primary Industries and Regional Development for a Licence under the [*Industrial Hemp Act 2004*.](http://www.austlii.edu.au/au/legis/wa/consol_act/iha2004176/)

1. Authorised activity for which the Licence is required:

[ ]  Cultivate industrial hemp

[ ]  Harvest industrial hemp

[ ]  Process industrial hemp

1. The application is made on behalf of an:

[ ]  Individual

[ ]  Partnership

[ ]  Body corporate

1. Full name of applicant

|  |
| --- |
|       |

1. Business name of applicant (if different than the applicant name)

|  |
| --- |
|       |
|       | ABN Number:  |       |

1. Business (physical) address and contact details of applicant

|  |  |
| --- | --- |
| Address: |       |
| Town: |       | Postcode:  |      |
| Tel:  |       | Mob: |       | Email: |       |

1. Postal address of applicant for correspondence

|  |  |
| --- | --- |
| Address: |       |
| Town: |       | Postcode:  |      |

1. Details of Relevant Persons (see section A of notes)

(If more space is required add a sheet to the application)

|  |
| --- |
| **Relevant Person 1** |
| Full name: |       | Any previous names: |       |
| Role: |       |
| Residential address: |       |
| Postal address: |       |
| Date of birth: |      | Place of birth: |       |
| Date entered Australia (if applicable): |       | Signature: |       |
| Tel: |       | Mob: |       | Email: |       |
| **Relevant Person 2** |
| Full name: |       | Any previous names: |       |
| Role: |       |
| Residential address: |       |
| Postal address: |       |
| Date of birth: |      | Place of birth: |       |
| Date entered Australia (if applicable): |       | Signature: |       |
| Tel: |       | Mob: |       | Email: |       |
| **Relevant Person 3** |
| Full name: |       | Any previous names: |       |
| Role: |       |
| Residential address: |       |
| Postal address: |            |
| Date of birth: |      | Place of birth: |       |
| Date entered Australia (if applicable): |       | Signature: |       |
| Tel: |       | Mob: |       | Email: |       |

1. Full description of activities for which a Licence is required (If more space is required add a sheet to the application)

**Cultivation and / or Harvest** (Ensure adequate information about what tasks will be done under Licence; how it will be done and what equipment is available to conduct the activity, if not processing describe what will be done with harvested material)

|  |
| --- |
|  |
|  |
|  |
|  |
|  |

**Processing** (If a processing Licence is required, complete the table below with as much detail as possible)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Part of the plant used** | **Product to be produced** | **End use of the product** | **Method of processing** | **What machinery will be used?** | **Where will the processing be done?** |
| e.g. Stem | Fibre | Textiles, building products | Extraction of fibres by decortication | Decorticator owned by AAA Hemp Co. | On premises described in Section 12 |
| e.g. Seed | De-hulled seed | Food | De-hulling of seed | De-huller owned by AAA Hemp Co. | On premises described in Section 12 |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |

1. Are you affected by bankruptcy proceedings? Yes [ ]  No [ ]

|  |  |
| --- | --- |
| If yes, please give details |       |
|       |
|       |

1. Describe the financial and material resources available to carry out the activities to be authorised by the Licence (see section G of notes)

|  |
| --- |
| Note: Provide a financial statement or other suitable evidence. Please refer to Section G. notes to help complete a financial statement. Other suitable evidence can be in the form of a recent bank statement or the latest available financial statements certified from an accountant.      |
|       |
|       |
|       |
|       |
|       |
|       |
|       |
|       |
|       |

1. Describe the relevant training, business / technical skills, and previous experience that will enable you to undertake the licensed activities.

|  |
| --- |
|       |
|       |
|       |
|       |
|       |

1. Details of the premises where the activities will occur

|  |  |  |
| --- | --- | --- |
| **Premises 1** | Type of activity: | [ ]  Cultivate [ ]  Harvest [ ]  Process |
| Address: |       |
| Owner of premises: |       |
| Contact details for person primarily responsible for activities at the premises |  |
| Name: |       | Address: |       |
| Tel:  |       | Mob: |       | Email: |       |
| **Premises 2** | Type of activity: | [ ]  Cultivate [ ]  Harvest [ ]  Process |
| Address: |       |
| Owner of premises: |       |
| Contact details for person primarily responsible for activities at the premises |  |
| Name: |       | Address: |       |
| Tel:  |       | Mob: |       | Email: |       |
| **Premises 3** | Type of activity: | [ ] Cultivate [ ]  Harvest [ ]  Process |
| Address: |       |
| Owner of premises: |       |
| Contact details for person primarily responsible for activities at the premises |  |
| Name: |       | Address: |       |
| Tel:  |       | Mob: |       | Email: |       |

1. Attach a copy of the lease agreement(s) or business arrangement(s) permitting use of each premises for the proposed activities (if you are not the owner)
2. Attach a plan of each premises showing the proposed location of crops, storage and/or processing (as applicable)
3. Area of industrial hemp intended to cultivate (if applicable)

[ ]  Less than 2 hectares

[ ]  2-10 hectares

[ ]  More than 10 hectares

1. Proposed security arrangements at each premises where the activities will occur (see section B of notes). Include details of crop fencing, storage etc.

|  |
| --- |
|       |
|       |
|       |
|       |
|       |
|       |

1. Source of seed to be sown (see section C of notes)

|  |
| --- |
|       |
|       |
|       |
|       |
|       |
|       |

1. Character (see section A of notes)

Have you or any relevant person on this application, ever been convicted of, or found guilty of any offences?

(exclude traffic offences and convictions ‘spent’ under the *Spent Convictions Act*) Yes [ ]  No [ ]

Are you aware of any proceedings against you, or any relevant person on this application, for an offence, including proceedings by way of appeal or review? Yes **[ ]** No **[ ]**

Have you, or any relevant person on this application, ever been disqualified from holding a Licence by any occupational licensing board? Yes **[ ]** No **[ ]**

If you answered yes to any of the above, you must give details of alloccurrences. Include the following

|  |  |
| --- | --- |
| The name of the court or board: |       |
| The offence: |       |
| The sentence received: |       |
| Relevant dates: |       |

Note: If there is insufficient space on this form to provide details of offences, provide the details on a separate sheet of paper.

1. Character references

Submit two character references for each Relevant Person (see section A of notes).

1. Declaration

(a) I am aware that a police check on me and relevant persons will be undertaken in determining the suitability of my application;

(b) The information I have supplied in the application is to the best of my knowledge and belief, true and correct in every particular;

(c) I have read and understand the requirements and obligations of the *Industrial Hemp Act 2004* and Regulations.

**If a body corporate:**

|  |  |
| --- | --- |
| This application has been completed by: |       |
| who is a duly authorised director/senior executive officer of the body corporate. |
| Director: |       | Signature: |  | Date: |       |
| Counter signatory: |       | Signature: |  | Date: |       |

**If an individual or partnership:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Applicant Name: |       | Signature: |  | Date: |       |
| Witness Name: |       | Signature: |  | Date: |       |
| Address of witness:  |       |
| Occupation of witness: |       |

1. Credit Card Payments

Application for a hemp Licence $328.00 (GST exempt)

|  |  |
| --- | --- |
| Card Type: |  [ ]  VISA [ ]  MasterCard |
| Cardholders Name: |       |
| Card Number: |       |
| Expiry Date: |       |
| Total Amount: |       |

1. Submitting Applications

**Application checklist**

Ensure all these points have been addressed prior to sending your application

[ ]  A corporate structure or a current Certificate of Incorporation (Body corporate applicants only)

[ ]  Application is signed appropriately (Section 7 and Section 20)

[ ]  Police clearance is attached for each relevant person

[ ]  2 character references attached for each relevant person

[ ]  Thorough explanation of the activities for which a Licence is sought

[ ]  Financial statement or other suitable evidence

[ ]  Lease agreement for each property (if you are not the owner)

[ ]  Title deeds for each property (if you are the owner)

[ ]  Maps for each property showing proposed location of crops or other licensed activities

Submit this signed application to:

hempregistrar@dpird.wa.gov.au

Including all supporting documents as separate attachments

Or

Dispatch this signed application to:

The Registrar

*Industrial Hemp Act 2004*
Department of Primary Industries and Regional Development
3 Baron-Hay Court
South Perth WA 6151

Pleas allow 10 days extra processing time for applications sent by mail.

For assistance completing this form telephone (08) 9368 3467 or email hempregistrar@dpird.wa.gov.au