

Alaska Department of Natural Resources  
Division of Agriculture  
Plant Materials Center  
5310 S. Bodenburg Spur  
Palmer, AK 99645  
PHONE: (907) 745-4469 FAX: (907) 746-1568



HEMP PRODUCT(S) ENDORSEMENT APPLICATION

Application for endorsement subject to 11 AAC 40.400 – 11 AAC 40.420. **Before being offered with or without compensation to a consumer in the state, any industrial hemp product processed beyond its raw form and intended for human or animal consumption must be endorsed by the division.**

**HEMP PRODUCT PROHIBITIONS:** The division may not endorse an industrial hemp product intended for human or animal consumption that contains delta- 9- THC or a non-naturally occurring cannabinoid, including a cannabinoid made from an ingredient extracted from industrial hemp and modified beyond its original form.

Date		Company Contact Person	
Telephone No.	Email Address	Fax No.	
Name of manufacturer/brand name/person (EXACTLY AS IT APPEARS ON THE PRODUCT LABEL). Often show as Distributed by: or Manufactured for:			
Physical Address	City	State	ZIP Code
Address (Mailing) <input type="checkbox"/> Same as physical	City	State	Zip Code
If this a white-labeled/private-labeled copacked product, list the name of the actual manufacturer here			
Physical Address	City	State	ZIP Code
Address (Mailing) <input type="checkbox"/> Same as physical	City	State	Zip Code
Name of firm submitting application			
Physical Address	City	State	ZIP Code
Address (Mailing) <input type="checkbox"/> Same as physical	City	State	Zip Code
Signature of responsible applicant (from firm submitting application)		Title	
By signing below, I attest that under penalty of unsworn falsification that 1) the application is true, correct, and complete; 2) the signatory has authority to bind the applicant; 3) the applicant has read and is familiar with AS 03.05.010, 03.05.076 – 03.05.100, and this chapter; and 4) the applicant has not been convicted of a felony described in AS 03.05.076(a)(3)(A) or (B). I understand that if the Division later determines that any of this information to be false or inaccurate, the registration may be suspended or revoked			
Name (print) of Licensee: _____		Date: _____	
Signature of Licensee: _____			
Business Name: _____			

<b>REGISTRATION FEE:</b> EFFECTIVE NOVEMBER 3, 2023, THE FEE FOR HEMP PRODUCT REGISTRATION IS \$25 PER PRODUCT. MULTIPLY \$25 BY THE NUMBER OF PRODUCTS YOU INTEND TO REGISTER AND ENTER THAT NUMBER IN THE LINE TO THE RIGHT. <b>Hold off on payment until you receive an invoice.</b>	Total number of products to register: _____  Fee attached _____
MY PRODUCTS WILL BE MOVED THROUGH THE FOLLOWING PLATFORMS (CHECK ALL THAT APPLY) <input type="checkbox"/> Wholesaler- Retailer Registration Required <input type="checkbox"/> Distributor- Retailer Registration Required <input type="checkbox"/> E-Commerce Platform (website)- Retailer Registration Required <input type="checkbox"/> Retail Store- Retailer Registration Required	
ENSURE THAT YOU HAVE ATTACHED PRODUCT LIST AND ELECTRONIC OR PAPER COPIES OF PRODUCT LABELS. ALSO ATTACH A FULL PANEL CERTIFICATE OF ANALYSIS FOR EACH PRODUCT IN ITS FINAL FORM.	