

Alaska Division of Agriculture Hemp Program

Retailer/Distributor Registration Form

OFFICIAL USE ONLY	
OFFICIAL STAMP HERE	

Name of Retail Store (or Chain): Physical Address of Store where H Note: If mobile, please describe business local	•		ı web a	ddress:	
Note: If mobile, please describe business local	•		ı web a	ddress:	
Note: If mobile, please describe business local	•		ı web a	ddress:	
Note: If mobile, please describe business local	•		a web a	ddress:	
Retail Address	ation, it offine,	piease ilicidue a	weba	uui ess.	
	City		State	Zip Code	Own/Rent
Address 1				p =====	
GPS: Latitude	GPS	S: Longitude			
Decimal degrees	Ded	cimal degrees			
Retail Address Address 2	City		State	Zip Code	Own/Rent
GPS: Latitude Decimal degrees		S: Longitude cimal degrees			
Note: Attach a color copy map of each addre		_	r regist	tration will b	e delayed.
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Mailing Address: Same as above □	
(If different than physical address)	
Retail Store Telephone Number:	
Note: This number will be on a registrant list and available to the public.	
Legal Name of Owner:	
Email Address:	
(This is the primary means of communication for the hemp program. Program forms, deadline reminders and any communication for the hemp program.	other
correspondence will be sent to this email address. It is the responsibility of the registrant to inform the hemp program o	
changes to their registration)	·
Telephone Number:	
Logal Owner Home Address	
Legal Owner Home Address:	
Store type(s):	
☐ Permanent Building	
□ Kiosk	
☐ Mobilized Unit/Tent	

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Day of Operation and Time:					
(Check day and times which apply)					
☐ Monday	Time	☐ Friday	Time		
☐ Tuesday	Time	☐ Saturday	Time		
□ Wednesday	Time	☐ Sunday	Time		
☐ Thursday	Time				
hemp products i	Note: All retail establishments are required to register with the Division to sell industrial hemp products in Alaska. Retail establishments include physical locations in the state, online retailers, and physical locations located out of state selling product to consumers				
Registration Che	ecklist:				
	pleted the Retailer Registration	/Distributor Form to Comple	cion		
☐ REQUIRED: Included the Required non-refundable New Application or Registration Renewal Fee and Annual Retailer Registration Fee.					
☐ REQUIRED: Completed List of Hemp Products Intended for Sale					
☐ REQUIRED: Maps, one per address – Retail Locations.					
Name of Responsible Applicant (print):					
Signature:		Date:			

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Date Received by Division:	Received By:
Date Desistantian Assurant Contlan Division	Annuaria de a Descia de
Date Registration Approval Sent by Division:	Approved or Denied:
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The completed application may be filed electronically, mailed, or hand-delivered to the division. For the electronic mail submission of an application please send completed forms to industrialhemp@alaska.gov. To facsimile a completed application, send to 907-746-1568. To post mail a completed application, send to Alaska Plant Materials Center Hemp Program, 5310 S. Bodenburg Spur, Palmer, AK 99645. The request must be complete, accurate and legible. Follow all instructions in the document. Be sure to keep a copy of the full report for your records.

Please allow 5-10 days for the Division to review. All registration approval notices will be sent to the applicant once approved and upon receiving payment. Fees may be in the form of cash, check, money order or the applicant may contact the division at 907-745-4469 to pay electronically.

List of Hemp Products Intended for Sale

Please fill out the table with the correct information. If your have more products then room available, please attach additional page (s) as necessary with the application. All products offered for sale must also carry a **product endorsement** from the division as stated in 11 AAC 40.400. Endorsement. **An endorsement** is a separate application. Only after an individual product carries an endorsement from the Division can it then be offered for sale to consumers.

Product Type (example: tincture, topical, smokable flower, etc.)	Full Name of Product	Brand Name

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