

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 Hemp Products Note: If mobile, please describe business location; If online, ple Retail Address City Address 1 City	
Note: If mobile, please describe business location; If online, ple Retail Address City	ease include a web address:
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Retail Address City	
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	nal degrees
Retail AddressCityAddress 2	State Zip Code Own/Rent
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Mailing Address:

(If different than physical address)

Same as above \Box

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 other correspondence will be sent to this email address. It is the responsibility of the registrant to inform the hemp program of any changes to their registration)

Telephone Number:

Legal Owner Home Address:

Store type(s):

🗌 Permai	nent	Build	ing
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🗌 Online

🗆 Kiosk

□ Mobilized Unit/Tent

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						
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 in Alaska.							
Registration Che	ecklist:						
□ REQUIRED: Completed the Retailer Registration/Distributor Form to Completion							
□ 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:					

Date Received by Division:

Received By:

Approved or Denied:

Date Registration Approval Sent by Division:

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 <u>industrialhemp@alaska.gov</u>. 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. <u>An</u> **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