



Texas Department of Agriculture
Disposal Report

RHP-823

COMMISSIONER SID MILLER

SEC.A	¹ BUSINESS INFORMATION	
	Producer Name	TDA License No.

SECTION B	¹ MATERIAL INFORMATION		
	PRODUCTION INFORMATION		
	TDA Facility Location ID	Lot Crop Permit #	<input type="checkbox"/> Field <input type="checkbox"/> Greenhouse <input type="checkbox"/> Storage Unit
	LOCATION OF MATERIAL		
	Is material for disposal located at Producer Facility Location listed above? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> If no, where is material located	<input type="checkbox"/> Producer	<input type="checkbox"/> Handler License No.
	Facility Location ID	<input type="checkbox"/> Field	<input type="checkbox"/> Greenhouse <input type="checkbox"/> Storage Unit
	DESTRUCTION/DISPOSAL INFORMATION		
	Size for Destruction/Disposal <input type="checkbox"/> Acres <input type="checkbox"/> Sq. Ft		
	Non-Compliant? (exceeding acceptable levels of THC) <input type="checkbox"/> Yes <input type="checkbox"/> No		
If Yes: THC Test Results		Date Final Test Results Received	
If No, explain reason for request for disposal:			

SECTION C	¹ PROPOSED METHOD OF DISPOSAL		
	Please check all disposal activities that will be used Disposal methods can be viewed at https://www.ams.usda.gov/rules-regulations/hemp/disposal-activities		
	<input type="checkbox"/> Plowing Under	<input type="checkbox"/> Mulching/Composting	<input type="checkbox"/> Disking
	<input type="checkbox"/> Shredding (Brush Mower/Chopper)	<input type="checkbox"/> Deep Burial	<input type="checkbox"/> Burning
	<input type="checkbox"/> Drug Enforcement Administration (DEA) approved method. List:		
	<input type="checkbox"/> Other (specify)		
	Name of Person completing form		
Title		Date	

**Producer - Email completed form Section A – C to Hemp@TexasAgriculture.gov
 TDA response will be emailed to Producer Contact Person within 7 days after receipt**

SECTION D	¹ RESPONSE - TDA USE ONLY		
	Proposed Method(s) of Disposal	<input type="checkbox"/> Approved	<input type="checkbox"/> Rejected
	Comments:		
Date:		Reference No.	

This document becomes public record and is subject to disclosure. With few exceptions, you have the right to request and be informed about the information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. (Reference: Government Code, Sections 552.021, 552.023, and 559.004.)

Producer - Email completed Disposal Report including completed Section E Producer Affirmation of Disposal Report to Hemp@TexasAgriculture.gov

¹PRODUCER AFFIRMATION OF DISPOSAL REPORT		
Date of Disposal		
Check all disposal activities that were used:		
<input type="checkbox"/> Plowing Under	<input type="checkbox"/> Mulching/Composting	<input type="checkbox"/> Disking
<input type="checkbox"/> Shredding (Brush Mower/Chopper)	<input type="checkbox"/> Deep Burial	<input type="checkbox"/> Burning
SECTION E	<input type="checkbox"/> Drug Enforcement Administration (DEA) approved method. List:	
	<input type="checkbox"/> Other (specify)	
	Did TDA Inspector witness Disposal? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Inspector Name
By signing below, I am affirming that the hemp material identified in this Disposal Report has been destroyed using the methods as indicated in Section E.		
Name of Business Representative Supervising Disposal		Title
Signature		