



Oregon Industrial Hemp

Industrial Hemp Test Results Notification Form

A copy of the test results must be sent along with this notification to hemptestreports@oda.state.or.us
 ODA must be notified within 24 hours and at the same time or before reporting results to the medical grower or processor.

Test Laboratory Name:					
Laboratory Contact Name:		Phone Number:			
Sample Laboratory Name:		Date Sample Taken:			
Registrant's Name:					
Registrant's Number:		Harvest or Process Lot Number:			
Test Batch Number:		Date Sample Tested:			
Product Type:	Useable Hemp	Edible	Concentrate	Extract	Topical
Product Description/Name:					

Please answer the yes and no questions. If your laboratory's reporting software indicates any of the specific items that are ask to be listed below, such as marking them in red, you are not required to list them on this form.

Are there any associated test batch numbers from prior tests performed on the sample?

Yes No

If yes, please list:

Pesticide(s) Results at Detected Level?

Yes No

If yes, list pesticide/s found at detected level:

Test Above Action Limit: Yes No

Field Duplicate Above Action Limit: Yes No N/A

Pesticides THC Concentration Solvent Microbiological

List specific pesticide analyte/s or solvent/s found above the action limit:

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The Oregon Department of Agriculture must be notified by the laboratory that performed testing, and send a copy of the test results if any of the following are found:

- Any failed test results (except water activity and moisture)
- Any pesticide test with a “detected” level

Applicable Rules

Failed Tests (OAR 603-048-2300-603-048-2480), (OAR 333-007-0390(3), 333-007-0400(2), 333-007-0410(2), 333-007-0430(2) and (3), 333-064-0110 Reporting Detected Pesticide Levels (OAR 333-064-0110 (5) and (8)) Reporting Tentatively Identified Compounds (OAR 333-064-0100 (7))

If you have questions or concerns you can email industrial-hemp@oda.state.or.us