REPUBLIC OF VANUATU

INDUSTRIAL HEMP AND MEDICAL CANNABIS ACT NO. 31 OF 2021

Prescribed Application Forms and Fees Order No.16 of 2023

In exercise of the powers conferred on me by section 11 and paragraph 26(2)(h) of the Industrial Hemp and Medical Cannabis Act No. 31 of 2021, I, the Honourable NAKO IANATOM NATUMAN, Minister of Agriculture, Livestock, Fisheries, Forestry and Biosecurity, make the following Order.

1 Prescribed application forms

(1) The prescribed application form for Industrial Hemp is set out in Schedule 1.

(2) The prescribed application form for Medical Cannabis is set out in Schedule 2.

2 Prescribed application fees

The prescribed application fees for Industrial Hemp and Medical Cannabis is USD 2,000.

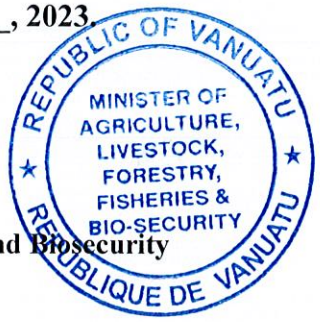
3 Prescribed license fees

The prescribed license fees for Industrial Hemp and Medical Cannabis is USD 100,000.

4 Commencement

This Order commences on the day on which it is made.

Made at Port Vila this 02 **day of** 02**, 2023.**



Honourable NAKO IANATOM NATUMAN
Minister of Agriculture, Livestock, Fisheries, Forestry and Biosecurity

SCHEDULE 1

APPLICATION FORM FOR INDUSTRIAL HEMP

1. Authorised activity for which the license is required

- ☐ Import Industrial Hemp Seeds
- ☐ Cultivate Industrial Hemp
- ☐ Harvest Industrial Hemp
- ☐ Process Industrial Hemp
- ☐ Manufacture Industrial Hemp
- ☐ Export Industrial Hemp Products

2. The Application is made on behalf of

- ☐ An individual
- ☐ Corporate body

PART 1 - GENERAL DETAILS

SECTION 1: GENERAL DETAILS		
Name of Applicant		
Details of proof of identity	(details of person's passport/Identity card/Driver's license)	
Overseas Mailing Address		
	Town	State
	Postcode	Country
	Tel	Email
Business Name of the Applicant (if different to name of applicant		
Person(s) authorised to discuss this application, if different to approved contacts	Name	
	Tel	Email
Vanuatu Business (Physical) address and contact details of applicant		
	Province	Tel:

	Email:	VFSC Registration No.

SCHEDULE 1
APPLICATION FORM FOR INDUSTRIAL HEMP

In the case that the Vanuatu company is a subsidiary of a parent company overseas, please provide address and contact details of parent company:		
	Town	State
	Postcode	Country
	Business Registration No.	
Postal address of applicant for correspondence		
	Town	Postcode

SECTION 2. DETAILS OF RELEVANT PERSONS (CEO/GM/OWNER OF COMPANY)	
Full Name	
Role	
Residential Address	
Date of Birth	
Place of Birth	
Date entered Vanuatu	
Tel	
Email	
Signature	

PART 2 – DESCRIPTION OF ACTIVITIES

SECTION 3. PROVIDE FULL DESCRIPTION OF ACTIVITIES FOR WHICH THE LICENSE IS REQUIRED *(If more space is required add a sheet to application)*

PART 3. IMPORT/ CULTIVATION/ HARVEST / PROCESSING/ MANUFACTURING/ EXPORT

(Ensure adequate information about what tasks will be done under Licence for each activity; how it will be done and what equipment is available to conduct the activity, if not processing describe what will be done with harvested material)

SECTION 4. IMPORTATION
(If importation activity is required as part of the license, complete the table below with as much detail as possible)

Species name	Variety/Strain name	Importing Country	Name of Approved Supplier	Mode of Shipment	Quantity (KG)

SECTION 5. Cultivation
(If cultivation activity is required as part of the license, complete the table below with as much detail as possible. If there are multiple cultivation sites, please provide details of each cultivation site)

CULTIVATION SITE 1	
Name of Site	
Name of Contract Grower	
Island	
Province	
Name of Location	
GPS Co-ordinates	
Total land area (Hectares	
Land Tenure Register Lease Tittle No. and Name of title holder	
Cultivation Method (field/greenhouse or mono-cropping or mixed cropping)	
Current land use (primary forest/ secondary/food production)	

If trees are to be cleared from site, please indicate proposed utilisation of timber	
CULTIVATION SITE 2	
Name of Site	
Name of Contract Grower	
Island	
Province	
Name of Location	
GPS Co-ordinates	
Total land area (Hectares	
Land Tenure Register Lease Tittle No. and Name of title holder	
Cultivation Method (field/greenhouse or mono-cropping or mixed cropping)	
Current land use (primary forest/ secondary/food production)	
If trees are to be cleared from site, please indicate proposed utilisation of timber	
CULTIVATION SITE 3	
Name of Site	
Name of Contract Grower	
Island	
Province	
Name of Location	
GPS Co-ordinates	
Total land area (Hectares	
Land Tenure Register Lease Tittle No. and Name of title holder	
Cultivation Method (field/greenhouse or mono-cropping or mixed cropping)	
Current land use (primary forest/ secondary/food production)	
If trees are to be cleared from site, please indicate	

proposed utilisation of timber	
CULTIVATION SITE 4	
Name of Site	
Name of Contract Grower	
Island	
Province	
Name of Location	
GPS Co-ordinates	
Total land area (Hectares	
Land Tenure Register Lease Tittle No. and Name of title holder	
Cultivation Method (field/greenhouse or mono-cropping or mixed cropping)	
Current land use (primary forest/ secondary/food production)	
If trees are to be cleared from site, please indicate proposed utilisation of timber	
CULTIVATION SITE 5	
Name of Site	
Name of Contract Grower	
Island	

Province	
Name of Location	
GPS Co-ordinates	
Total land area (Hectares	
Land Tenure Register Lease Tittle No. and Name of title holder	
Cultivation Method (field/greenhouse or mono-cropping or mixed cropping)	
Current land use (primary forest/ secondary/food production)	
If trees are to be cleared from site, please indicate proposed utilisation of timber	

SECTION 6. HARVEST

(If harvest activity is required as part of the license, complete the table below with as much detail as possible. Harvest sites must be that same as cultivation sites

Site number	Number of hectares	Harvest Method	No of harvests per year	Estimated quantity (kg) of harvest (Stem)	Estimated quantity (kg) of harvest (leaves)	Estimated quantity (kg) of harvest (flowers and seeds)
Cultivation Site 1						
Cultivation Site 2						
Cultivation Site 3						
Cultivation Site 4						
Cultivation Site 5						

SECTION 7. PROCESSING

(If a processing activity is required as part of the licence, complete the table below with as much detail as possible)

Part of the plant used	Product to be produced	End use of the product	Method of processing	What machinery will be used?	Where will the processing be done?
e.g. Stem	*Fibre*	*Textiles, building products*	*Extraction of fibres by decortication*	*Decorticator owned by AAA Hemp Co.*	*On premises described in ??*

SECTION 8. MANUFACTURING

(if manufacturing activity is required as part of the licence, complete the table below with as much detail as possible)

SCHEDULE 1
APPLICATION FORM FOR INDUSTRIAL HEMP

Semi-processed Product to be used	Supplier of semi-processed products	Product to be produced	Market (domestic/export)	Mode of Shipment	Method of Manufacturing	What machinery will be used?	Where will the manufacturing be done?
e.g. Fibre		Textiles					

SECTION 9. EXPORT
(If an export activity is required as part of the licence, complete the table below with as much detail as possible)

Name and Characteristics of Product to be exported	Quantities to be exported (kg)	Estimated Value (USD)	Destination country	Details of purchaser	Legality of product in export destination	Method of transport

PART 4 – FINANCE/BUSINESS EXPERIENCE

SECTION 10. BANKRUPTCY

Are you affected by bankruptcy proceedings? Yes ☐ No ☐

If yes, please give details .....

SECTION 11. FINANCIAL RESOURCES

Describe the financial resources available to carry out the activities to be authorised by the Licence

(Note: If there is insufficient space on this form to provide details of resources, provide the details on a separate sheet of paper, a template is provided in the notes)

SECTION 12. PREVIOUS EXPERIENCE/TRAININGS/BUSINESS/TECHNICAL SKILLS

Describe the previous experience, trainings and business / technical skills that will enable you to undertake the licensed activities (*provide supporting documents as evidence/proof of previous engagement*).

PART 5. PREMISES WHERE ACTIVITIES WILL OCCUR

SECTION 13. PREMISES WHERE CULTIVATION NURSEY/PROCESSING/MANUFACTURING ACTIVITIES WILL OCCUR		
PREMISES 1		
Type of Activity		
Owner of premises		
Address		
Contact details for person primarily responsible for activities at the premises	Name	
	Address	
	Tel	
	Mob	
	Email	
PREMISES 2		
Type of Activity		
Owner of premises		
Address		

Contact details for person primarily responsible for activities at the premises	Name	
	Address	
	Tel	
	Mob	
	Email	
PREMISES 3		
Type of Activity		
Owner of premises		
Address		
Contact details for person primarily responsible for activities at the premises	Name	
	Address	
	Tel	
	Mob	
	Email	
PREMISES 4		
Type of Activity		
Owner of premises		
Address		
Contact details for person primarily responsible for activities at the premises	Name	
	Address	
	Tel	
	Mob	
	Email	

SECTION 14. SUPPORTING DOCUMENTS

1. **Attach a copy of the lease agreement(s) or negotiators' certificate, or business arrangement(s) permitting use of each premises for the proposed activities** (if you are not the owner)

2. **Attach a plan of each premises showing the proposed location of crops, storage and/or processing** (as applicable)

PART 6. SECURITY

SECTION 15. SECURITY ARRANGEMENTS

Outline proposed security arrangements at each premises where the activities will occur. Include details of crop fencing, storage etc.

PART 7. CHARACTER

SECTION 16. CHARACTER

Have you or any relevant person on this application, ever been convicted of, or found guilty of any offences?

Yes ☐ No ☐

Are you aware of any proceedings against you, or any relevant person on this application, for an offence, including proceedings by way of appeal or review?

Yes ☐ No ☐

Have you, or any relevant person on this application, ever been disqualified from holding a Licence by any occupational licensing board?

Yes ☐ No ☐

If you answered "**yes**" to any of the above, you must give details of all occurrences. Include the following

The name of the court or board:

The offence:

The sentence received: .....

.....

.....

Relevant dates: .....

Note: If there is insufficient space on this form to provide details of offences, provide the details on a separate sheet of paper.

SECTION 17. CHARACTER REFERENCES

Submit two character references for each Relevant Person.

PART 8. DECLARATION

SECTION 18. DECLARATION

(a) I am aware that a police check on me and relevant persons will be undertaken in determining the suitability of my application;

(b) The information I have supplied in the application is to the best of my knowledge and belief, true and correct in every particular;

(c) I have read and understand the requirements and obligations of the *Industrial Hemp and Medical Cannabis Act no. 31 of 2021* and Regulations.

IF A BODY CORPORATE:

This application has been completed by: .....
who is a duly authorised director/senior executive officer of the body corporate.

Director: ..... Date: .....

Counter signatory: ..... Date: .....

IF AN INDIVIDUAL OR PARTNERSHIP:

Applicant Name: ..... Signature: ..... Date: .....

Witness Name: ..... Signature: ..... Date: .....

Address of witness: .....

Occupation of witness: .....

SECTION 19. SUBMITTING APPLICATIONS

Application checklist

Ensure all these points have been addressed prior to sending your application

- ☐ Application is signed appropriately
- ☐ Copies of lease certificates or negotiators certificate
- ☐ Evidence of land use on cultivation sites
- ☐ Financial documentation
- ☐ Thorough explanation of the activities for which a Licence is sought
- ☐ Police clearance is attached for each relevant person
- ☐ 2 character references attached for each relevant person
- ☐ Maps for each property showing proposed location of crops or other licensed activities.

SCHEDULE 2

APPLICATION FORM FOR MEDICAL CANNABIS

1. **Authorised activity for which the license is required**
   - ☐ Import Medical Cannabis Seeds and Planting Material
   - ☐ Cloning or Tissue Culture
   - ☐ Cultivate Medical Cannabis
   - ☐ Harvest Medical Cannabis
   - ☐ Process Medical Cannabis
   - ☐ Manufacture Medical Cannabis
   - ☐ Export Medical Cannabis Products

2. **The Application is made on behalf of**
   - ☐ An individual
   - ☐ Corporate body

PART 1 - GENERAL DETAILS

SECTION 1: GENERAL DETAILS		
Name of Applicant		
Details of proof of identity	(details of person's passport/Identity card/Driver's license)	
Overseas Mailing Address		
	Town	State
	Postcode	Country
	Tel	Email
Business Name of the Applicant (if different to name of applicant		
Person(s) authorised to discuss this application, if different to approved contacts	Name	
	Tel	Email
Vanuatu Business (Physical) address and contact details of applicant		

SCHEDULE 2
APPLICATION FORM FOR INDUSTRIAL HEMP

	Province	Tel:
	Email:	VFSC Registration No.
In the case that the Vanuatu company is a subsidiary of a parent company overseas, please provide address and contact details of parent company:		
	Town	State
	Postcode	Country
	Business Registration No.	
Postal address of applicant for correspondence		
	Town	Postcode

SECTION 2. DETAILS OF RELEVANT PERSONS (CEO/GM/OWNER OF COMPANY)	
Full Name	
Role	
Residential Address	
Date of Birth	
Place of Birth	
Date entered Vanuatu	
Tel	
Email	
Signature	

PART 2 – DESCRIPTION OF ACTIVITIES

SECTION 3. PROVIDE FULL DESCRIPTION OF ACTIVITIES FOR WHICH THE LICENSE IS REQUIRED
(If more space is required add a sheet to application)

SCHEDULE 2
APPLICATION FORM FOR INDUSTRIAL HEMP

PART 3. IMPORT/ CLONING OR TISSUE CULTURE/CULTIVATION/ HARVEST / PROCESSING/ MANUFACTURING/ EXPORT

(Ensure adequate information about what tasks will be done under Licence for each activity; how it will be done and what equipment is available to conduct the activity, if not processing describe what will be done with harvested material)

SECTION 4. IMPORTATION
(If importation activity is required as part of the license, complete the table below with as much detail as possible)

Species name	Variety/Strain name	Importing Country	Name of Approved Supplier	Mode of Shipment	Quantity (KG)

SECTION 5. CLONING OR TISSUE CULTURE
(If cloning or tissue culture activity is required as part of the license, complete the table below with as much detail as possible. Provide detail plans and diagrams of cloning or tissue culture lab and nursery)

SCHEDULE 2
APPLICATION FORM FOR INDUSTRIAL HEMP

Species name	Variety/Strain name	Importing Country	Number of Clones to be produced	Length of time to maintain in Culturing Facility	Quantity (KG)

SECTION 6. Cultivation

(If cultivation activity is required as part of the license, complete the table below with as much detail as possible. If there are multiple cultivation sites, please provide details of each cultivation site. Provide details and plans of the cultivation site(s) as supporting documents to this application)

CULTIVATION SITE 1	
Name of Site	
Name of Contract Grower	
Island	
Province	
Name of Location	
GPS Co-ordinates	
Total land area (Hectares	
Land Tenure Register Lease Tittle No. and Name of title holder	
Cultivation Method (field/greenhouse or mono-cropping or mixed cropping)	
Current land use (primary forest/ secondary/food production)	
If trees are to be cleared from site, please indicate proposed utilisation of timber	
CULTIVATION SITE 2	
Name of Site	

SCHEDULE 2
APPLICATION FORM FOR INDUSTRIAL HEMP

Name of Contract Grower	
Island	
Province	
Name of Location	
GPS Co-ordinates	
Total land area (Hectares	
Land Tenure Register Lease Tittle No. and Name of title holder	
Cultivation Method (field/greenhouse or mono-cropping or mixed cropping)	
Current land use (primary forest/ secondary/food production)	
If trees are to be cleared from site, please indicate proposed utilisation of timber	
CULTIVATION SITE 3	
Name of Site	
Name of Contract Grower	
Island	
Province	
Name of Location	
GPS Co-ordinates	
Total land area (Hectares	
Land Tenure Register Lease Tittle No. and Name of title holder	
Cultivation Method (field/greenhouse or mono-cropping or mixed cropping)	
Current land use (primary forest/ secondary/food production)	
If trees are to be cleared from site, please indicate proposed utilisation of timber	
CULTIVATION SITE 4	
Name of Site	
Name of Contract Grower	
Island	
Province	
Name of Location	

GPS Co-ordinates	
Total land area (Hectares	
Land Tenure Register Lease Tittle No. and Name of title holder	
Cultivation Method (field/greenhouse or mono-cropping or mixed cropping)	
Current land use (primary forest/ secondary/food production)	
If trees are to be cleared from site, please indicate proposed utilisation of timber	
CULTIVATION SITE 5	
Name of Site	
Name of Contract Grower	
Island	
Province	
Name of Location	
GPS Co-ordinates	
Total land area (Hectares	
Land Tenure Register Lease Tittle No. and Name of title holder	
Cultivation Method (greenhouse or mono-cropping or mixed cropping)	
Current land use (primary forest/ secondary/food production)	
If trees are to be cleared from site, please indicate proposed utilisation of timber	

SECTION 6. HARVEST

(If harvest activity is required as part of the license, complete the table below with as much detail as possible)

Site number	Number of hectares	Harvest Method	No of harvests per year	Estimated quantity (kg) of harvest (Stem)	Estimated quantity (kg) of harvest (leaves)	Estimated quantity (kg) of harvest (flowers and seeds)
Cultivation Site 1						
Cultivation Site 2						

Cultivation Site 3						
Cultivation Site 4						
Cultivation Site 5						

SECTION 7. PROCESSING

(If a processing activity is required as part of the license, complete the table below with as much detail as possible)

Part of the plant used	Product to be produced	End use of the product	Method of processing	What machinery will be used?	Where will the processing be done?
e.g. Stem	*Fibre*	*Textiles, building products*	*Extraction of fibres by decortication*	*Decorticator owned by AAA Cannabis Co.*	*On premises described in ??*

SECTION 8. MANUFACTURING

(if manufacturing activity is required as part of the licence, complete the table below with as much detail as possible)

Semi-processed Product to be used	Supplier of semi-processed products	Product to be produced	Market (domestic/export)	Mode of Shipment	Method of Manufacturing	What machinery will be used?	Where will the manufacturing be done?
e.g. flower		capsules					

SECTION 9. EXPORT
(If an export activity is required as part of the licence, complete the table below with as much detail as possible)

Name and Characteristics of Product to be exported	Quantities to be exported (kg)	Estimated Value (USD)	Destination country	Details of purchaser	Legality of product in export destination	Method of transport

PART 4 – FINANCE/BUSINESS EXPERIENCE

SECTION 10. BANKRUPTCY

Are you affected by bankruptcy proceedings? Yes ☐ No ☐

If yes, please give details .....

.....

.....

SECTION 11. FINANCIAL RESOURCES

Describe the financial resources available to carry out the activities to be authorised by the Licence

(Note: If there is insufficient space on this form to provide details of resources, provide the details on a separate sheet of paper, a template is provided in the notes)

.....

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PART 5. PREMISES WHERE ACTIVITIES WILL OCCUR

SECTION 13. PREMISES WHERE CULTIVATION NURSEY/PROCESSING/MANUFACTURING ACTIVITIES WILL OCCUR		
PREMISES 1		
Type of Activity		
Owner of premises		
Address		
Contact details for person primarily responsible for activities at the premises	Name	
	Address	
	Tel	
	Mob	
	Email	
PREMISES 2		
Type of Activity		
Owner of premises		
Address		
Contact details for person primarily responsible for activities at the premises	Name	
	Address	
	Tel	
	Mob	
	Email	
PREMISES 3		
Type of Activity		
Owner of premises		
Address		

Contact details for person primarily responsible for activities at the premises	Name	
	Address	
	Tel	
	Mob	
	Email	
PREMISES 4		
Type of Activity		
Owner of premises		
Address		

Contact details for person primarily responsible for activities at the premises	Name	
	Address	
	Tel	
	Mob	
	Email	

SECTION 14. SUPPORTING DOCUMENTS

3. **Attach a copy of the lease agreement(s) or negotiators' certificate, or business arrangement(s) permitting use of each premises for the proposed activities** (if you are not the owner)

4. **Attach a plan of each premises showing the proposed location of crops, storage and/or processing** (as applicable)

PART 6. SECURITY

SECTION 15. SECURITY ARRANGEMENTS

Outline proposed security arrangements at each premises where the activities will occur. Include details of crop fencing, storage etc.

PART 7. CHARACTER

SECTION 16. CHARACTER

Have you or any relevant person on this application, ever been convicted of, or found guilty of any offences?

Yes ☐ No ☐

Are you aware of any proceedings against you, or any relevant person on this application, for an offence, including proceedings by way of appeal or review?

Yes ☐ No ☐

Have you, or any relevant person on this application, ever been disqualified from holding a Licence by any occupational licensing board?

Yes ☐ No ☐

If you answered "**yes**" to any of the above, you must give details of all occurrences. Include the following

The name of the court or board:

The offence:

The sentence received: .....

Relevant dates: .....

Note: If there is insufficient space on this form to provide details of offences, provide the details on a separate sheet of paper.

SECTION 17. CHARACTER REFERENCES

Submit two character references for each Relevant Person.

PART 8. DECLARATION

SECTION 18. DECLARATION

(a) I am aware that a police check on me and relevant persons will be undertaken in determining the suitability of my application;

(b) The information I have supplied in the application is to the best of my knowledge and belief, true and correct in every particular;

(c) I have read and understand the requirements and obligations of the *Industrial Hemp and Medical Cannabis Act no. 31 of 2021* and Regulations.

IF A BODY CORPORATE:

This application has been completed by: .....
who is a duly authorised director/senior executive officer of the body corporate.

Director: ..... Date: .....

Counter signatory: ..... Date: .....

IF AN INDIVIDUAL OR PARTNERSHIP:

Applicant Name: ..... Signature: ..... Date: .....

Witness Name: ..... Signature: ..... Date: .....

Address of witness: .....

Occupation of witness: .....

SECTION 19. SUBMITTING APPLICATIONS

Application checklist

Ensure all these points have been addressed prior to sending your application

- ☐ Application is signed appropriately
- ☐ Copies of lease certificates or negotiators certificate
- ☐ Evidence of land use on cultivation sites
- ☐ Financial documentation
- ☐ Thorough explanation of the activities for which a Licence is sought
- ☐ Police clearance is attached for each relevant person
- ☐ 2 character references attached for each relevant person
- ☐ Maps for each property showing proposed location of crops or other licensed activities.