



Marijuana License Application Checklist

Applications must be complete. Please organize your application documents in the same order as the checklist below and place the checklist on top. Please do not use staples in any documents.

Required Documentation

___ Date you filed an application with the Colorado Marijuana Enforcement Division. [***Note:** You must file your State Application prior to or contemporaneously with the filing of this Town Application. If the Town does not receive confirmation that you have filed your State Application from the CO MED within fourteen (14) days of the date of the Application, this Application shall be rejected as incomplete.]

___ Copy of application filed with Colorado Marijuana Enforcement Division

___ Town of Morrison Marijuana License Application and all applicable fees

___ A set of fingerprints for each Controlling Owner Fingerprints will be run for a criminal background check.

___ Site Development Plan

___ Town of Morrison Business License Application and the \$2,500.00 Business License Fee

___ Odor mitigation plan

___ Business plan

___ Proof of Ownership of the proposed location in the name of the business, or a lease in the business name showing possession of one year (deed, lease, rental agreement or other appropriate documentation)

___ Floor plan of the facility, to scale, no larger than 8 ½ x 11-inch paper, identifying walls, fixtures, countertops and entrances

___ Copy of State of Colorado Sales Tax License

___ Articles of Organization and Operating Agreement (if LLC)

___ Articles of Incorporation and Bylaws (if corporation)

___ Certificate of Good Standing from jurisdiction where Entity was formed (must be a U.S. or country that authorizes the sale of marijuana)

____ Documentation evidencing authority for applicant to apply on behalf of owners with more than twenty-five percent (25%) ownership in license

____ Certification that Applicant and all individual Controlling Owners are not prohibited from becoming a licensee due to violating provisions of C.R.S. 44-10-307

Marijuana License Application

Business Information

Applicant Name: _____

Applicant Address: _____

Applicant Phone: _____

Applicant Email: _____

Applicant is: Agent Owner

Legal Business/Licensee Name: _____

Trade Name (DBA): _____

Business is applying for (check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Retail Marijuana Store | <input type="checkbox"/> Change in Location |
| <input type="checkbox"/> Change in Entity Structure | <input type="checkbox"/> License Renewal |
| <input type="checkbox"/> Transfer of Ownership | <input type="checkbox"/> Major Modification of Premises |

Business is a:

- Corporation Individual Partnership LLC Association Other

Physical Address of Proposed Location: _____

Mailing Address: _____

Business Phone Number: _____

Business Website: _____

Will you provide online ordering and pick up? ____ Yes ____ No

Applicant Certification
Applicant / Owner certifies and affirms that (initial all):

_____ I have read Article XIII of Chapter 11 of the Morrison Municipal Code regarding retail marijuana regulations.

_____ I am at least 21 years old

_____ I understand that the Town of Morrison makes no promises in connection with this application and all application fees are nonrefundable.

_____ I understand that federal laws concerning possession and distribution of controlled substances apply and the Town accepts no legal liability for approval and licensing of marijuana stores.

_____ I understand that this application and its accompanying documents are subject to Colorado Open Records Act. (CORA), including provisions of CORA that protect some information.

_____ I understand that no major changes to the license or the licensed premises may occur without a modification to the license, including a change of ownership structure.

_____ I understand that it is my responsibility (the collective responsibility of all Applicants who become Owners) to provide the Town with prompt written notice of any actual projected changes to the license, including ownership structure, or of any change in the information contained in the Application subsequent to the date of its submittal.

_____ I am granted full authority to act concerning this application filed for legal business/licensee on behalf of all controlling owners, including the submittal of this application under written authority, a copy of which has been provided.

_____ I declare under penalty of perjury that all of the information contained in this application and all attachments are true, correct and complete to the best of my knowledge, information and belief.

_____ I agree to indemnify and hold the Town harmless from any and all damages in connection with this application, including all damages in connection with this application, including paying for all Town Attorney fees and costs incurred as a result of any damage claim made against the Town.

Signature _____ Date: _____

Printed Name _____