

# CANNABIS CONTROL LICENSE APPLICATION

FEE: \$2,000



PAYABLE TO: Town of Maynard

DATE: \_\_\_\_\_

**MGL, CHAPTER 94G, and SECTION 3: The Local Licensing Authorities may issue licenses for Marijuana Establishments, subject to any and all amendments to MGL, Chapter 94G, 935 CMR 500, the Town Charter, Bylaws, Rules and Regulations**

MARIJUANA LICENSE APPLICATION TOWN OF MAYNARD LOCAL LICENSING AUTHORITY (LLA)

( ) Retail off premise ( ) Cultivator ( ) Product Manufacturer ( ) Testing Facility ( ) Other

**Business Entity Information Applying** (name to appear on license and have operational control of the premises.)

Entity Name: \_\_\_\_\_

FEIN: \_\_\_\_\_ DBA: \_\_\_\_\_

State License number: \_\_\_\_\_

Owner of Record: \_\_\_\_\_

Street Address: \_\_\_\_\_

Applicant's Cell: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_ Website: \_\_\_\_\_

Applicant's Email: \_\_\_\_\_ Business Email: \_\_\_\_\_

Name of Manager: \_\_\_\_\_

Date: \_\_\_\_\_ Contact information: \_\_\_\_\_

Hours of Operation: \_\_\_\_\_

Description of Premises \_\_\_\_\_  
(Total Square footage, Number of Entrances/Exits, Number of Floors, Occupancy Number)

**Applicant Contact:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Title: \_\_\_\_\_ Email: \_\_\_\_\_

## Corporate Structure

Entity Legal Structure: \_\_\_\_\_

Date of Incorporation: \_\_\_\_\_

1. For Retailers, please **describe the manner in which Cannabis will be sold** to your customers to insure compliance with existing laws (check IDs, service/ etc.) and specify the manner by which service of such cannabis, if minors are in attendance, will be controlled. Minors are not allowed within the area where of cannabis are dispensed.
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2. Please **attach a floor plan (8.5x11 paper)** of the facility showing the exact location where Cannabis will be cultivated, processed, delivered, sold and stored as applicable, and indicate all entrances and exits.

### TOWN OF MAYNARD LIABILITY DISCLAIMER FOR LICENSE

By signing this form, the Applicant acknowledges that he/she understands and will comply with all applicable cannabis regulations set forth by the Cannabis Control Commission (CCC) and the Local Licensing Authority (BOS) of the Town of Maynard.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

### REQUIRED FORMS TO SUBMIT WITH APPLICATION:

- Completed license application with check fee: Town of Maynard
- CORI Authorization Form. Complete one for each individual with beneficial Interest in the entity that is apply AND one for the proposed manager of record.
- Beneficial Interest – Individual. Complete one for each individual with beneficial interest in the entity that is applying.
- Beneficial Interest – Organization. Complete one for each organization / parent company with beneficial interest in the entity that is applying.
- Vote of the Corporate Board. Include a vote to apply for a new transfer of license AND a vote appointing the manager of record, signed by an authorized signatory for the entity.
- Proof of Citizenship for the proposed Manager of Record.
- Business Structure Documents
- If Sole Proprietor, Business Certificate
- If partnership, Partnership Agreement
- If corporation or LLC, Articles of Organization from the Secretary of the Commonwealth
- Purchase & Sales Agreement, which is only required for a transfer of license.
- Supporting Financial Records for all financing and or loans, including pledges documents, if applicable.
- Legal Right to Occupy, such as a lease or deed.
- Floor Plan, which is only required for a new license.
- Abutter's Notification, which is only required for a new license.
- Advertisement
- Certificate of Good Standing required. <https://www.mass.gov/how-to/request-a-certificate-of-good-standing-tax-compliance-or-a-corporate-tax-lien-waiver>.
- Fees:
- Submit your application to your Local Licensing Authority (LLA) (Maynard Board of Selectmen, 195 Main Street, Maynard, MA. 01754 phone 978-897-1301.
- The application will be heard act at one of the LLA's next two regularly scheduled meetings of the application being filed.
- If the LLA grants the license, a copy of your Application and license will stay on file at the Local Licensing Authority and the original license will be mailed to you.
- Certificate of Liability Insurance.
- Bond.

- Sketch of premises of a reasonably precise nature that clearly delineates the location and manner in which cannabis will be sold , and/or dispensed, cultivated, processed, stored, as applicable.
- Designation and identification, in writing, of ALL individuals who will sell, deliver, and/or dispense, cultivate or process marijuana with current proof of completion (within the last three years) of an appropriate training.
- **Please Note: you may be requested to submit additional supporting documentation if necessary.**

**Date of Hearing:** \_\_\_\_\_

**Date of Advertised:** \_\_\_\_\_ **Publication:** \_\_\_\_\_

**Abutters Notified:** \_\_\_\_\_ **Date of Notice:** \_\_\_\_\_

**The Local Licensing Authorities BY**

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