



**RECREATIONAL MARIJUANA BUSINESS (RMB) 100% CONVERSION APPLICATIONS-
TO BE FILED AFTER JANUARY 2, 2014**

CHECKLIST OF REQUIRED DOCUMENTS

- City of Boulder Recreational Marijuana Business (RMB) Conversion or Co-location application-** fully completed and signed under oath of applicant signed by authorized representative of licensee applicant.
- City of Boulder Recreational Marijuana Business (RMB) License Application form-** answer all questions 1 to 27, complete information on top of page 5 and sign page 5 under oath of applicant section.

Please note that because Attach A (business entity documents), Attach B (background check documents), Attach C (notes and loans), Attach E (Insurance), Attach H (lighting plan), and Attach J (bank records) are not changing, then city licensing will not require new copies of those originally submitted documents. It is expected that licensee's Attach F (general diagram) and Attach G (Security diagram) will continue to be accurate as to, including but not limited to, business operations, product storage and premise security so new diagrams are not required. For Attach I (business license for sales tax account), the city sales tax area will note that the originally licensed medical marijuana business location is fully converted to recreational marijuana operations and as such will add to account the requirement for additional RMB sales and use tax or RMB excise tax as applicable.
- Letter from Landlord allowing change to Recreational Marijuana operations-** related to Attach D (lease), landlord must confirm in writing their approval for their leased premises to be changed to from medical marijuana to recreational marijuana business operations.
- Please note that MMB city original license will need to be turned in to the city at application meeting to receive RMB issued license.**
- Fees**
 - \$250 city conversion fee payable to "City of Boulder" received by city from State Marijuana Enforcement division (MED).

RECOMMENDED APPLICATION FILING PROCESS

Based on the above process and that city conversion applications are not considered complete until the \$250 city conversion fee is received by the city from the state MED, the following application timeline is recommended for 100% conversion applications:

- Boulder Licensee meets with state MED 3 to 4 days before meeting with city to file state conversion documents with state fees and to supply city conversion fee to state MED.
- Boulder licensee meets in person in pre-scheduled filing meeting with city licensing. Please note that only complete applications will be accepted by city licensing. By this time, it is hoped that city conversion fee would be received by state MED.
- City licensing receives city conversion fee from state. At that time, city licensing will re-issue the City of Boulder RMB license so that they city license is complete with a condition added that Medical Marijuana business operations may continue until such time as the state MED has issued their RMB state license.
- The state MED has informed city licensing that there is a 45 day waiting period for the state MED to issue state conversion licenses. As such, city licensing will issue their RMB city license and once the Boulder licensee has the state MED RMB license, the Boulder location may begin RMB business operations.

City of Boulder
P.O. Box 791
Boulder, Colorado 80302
303 -441- 4192

**CITY OF BOULDER MEDICAL MARIJUANA BUSINESS (MMB) LICENSE
CONVERSION OR CO-LOCATION TO RECREATIONAL MARIJUANA BUSINESS (RMB)
APPLICATION FORM AND ACKNOWLEDGEMENT OF
CHAPTER 6-16, BOULDER REVISED CODE**

This Application is for the following Premise Location License Type (please check only 1 license type and file a separate form for each existing medical marijuana business that you desire to convert or collocate:

Dispensary Greenhouse Nursery/Grow

MMB City License Number _____

Applicant Name _____

Trade Name of Establishment (doing business as) _____

Address of Premise Location _____

Street Address City State Zip Code

Business Mailing Address (if different from Premise location) _____

Street Address City State Zip Code

Business Telephone _____ Business Email Address _____

Plant Count _____ Lights Count _____ Lights Wattage Used _____

City Sales & Use Tax License No. _____ State Sales Tax License No. _____ FEIN No. _____

1. Select and Initial one of the following conversion or collocation processes:

- ___ initials: 100% conversion from MMB to RMB facility (not accepted before January 2, 2014) or
 ___ initials: Co-locate of both MMB & RMB within existing MMB facility foot print (not accepted before January 21, 2014)
 N/A ___ initials: Co-locate & expand existing MMB then divide for both MMB and RMB business facilities (not accepted before February 3, 2014).

Please note that any conversion or co-location construction must be in full compliance with all building and safety codes and future RM business operations must be operated in compliance with the attached BRC, Chapter 6-16, Recreational Marijuana Businesses law.

Please also note that in any conversion or collocation process, the current city license must be surrendered at the same time that the new license is issued. This application will not be considered complete until city has received the \$250 Conversion fee from the state.

2. Please attach the following to submit a complete application for either conversions or co-locations:

- i. This completed and signed Conversion Application.
- ii. RM Business License Application fully completed and signed.
- iii. Letter from Landlord that confirms that proposed change to RM business operations, and physical change to property (if any), by tenant is permissible.

3. If the application is for a co-location, whether in same or expanded footprint, of MMB and RMB businesses, please also attach (items here are not required for 100% conversions):

- i. Permanent modification change form for MMB business licensed premises complete, including, MMB change form, new operating plan and general diagram for MMB licensed location, new security plan and security diagram for MMB licensed location, and \$1,100 modification fee to City of Boulder.
- ii. New operating plan and new general diagram for RM business premise.
- iii. New security plan and new security diagram for RM business premise.

- iv. New business license for sales and use tax application with zoning form completed and attached so building permits may be applied and reviewed with \$25 application fee to City of Boulder.
 - v. \$2,000 operating fee for licensing to City of Boulder.
4. If this application is for a co-located business within an area larger than the footprint of the existing MMB business pursuant to BRC 6-16-3(h), initial one of the following as your oath of accuracy:

This application is for a co-located dispensary and the size of both premises does not exceed 3,000 sq. ft. ____ Initials

This application is for co-located cultivation facility and the size of both premises does not exceed 15,000 sq. ft ____ Initials

5. Initial each of the following as your oath of accuracy:

- I will pay the additional state and city excise and sales and use tax, as appropriate, for the RMB on a monthly basis ____ [initials].
- I will use an ID scanner acceptable to the city as soon as possible upon entry of every person to the business premises to determine if the person is at least 21 years old and will remove any person from the premises that is not verified by the ID scanner as being at least 21 years of age ____ [initials].
- No owner, financier, business manager, or other licensee shall be added to the marijuana business(es) associated with this application prior to such time as the State of Colorado makes criminal history information available to the city for the purpose of processing RMB applications ____ [initials].
- The license(s) associated with this application will be revoked and I can no longer operate the related business(es) if an owner, financier, business manager, or other licensee is added to the marijuana business(es) associated with this application prior to such time as the State of Colorado makes criminal history information available to the city for the purpose of processing RMB applications ____ [initials].

Violations of the above provisions and other associated sections of the Boulder Revised Code may subject the business to penalties, including without limitation fines and license suspension, license revocations, and criminal penalties.

Oath of Application

I declare under penalty of perjury in the second degree that this application and all attachments are true, correct, and complete to the best of my knowledge. I also acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the Boulder Revised Code, Colorado Law, and all Rules and Regulations, and any other applicable law which govern this Application and any issued Medical Marijuana and Recreational Marijuana Business Licenses.

Authorized Signature	Printed Name and Title	Date

City of Boulder
P.O. Box 791
Boulder, Colorado 80302
303 -441- 4192

**CITY OF BOULDER RECREATIONAL MARIJUANA BUSINESS (RMB) LICENSE APPLICATION
CHAPTER 6-16, BOULDER REVISED CODE**

This Application is for the following Premise Location License Type (please check only 1 license type and file a separate complete license application if another license type is also applicable):

- Dispensary Greenhouse/Grow Greenhouse/Grow-Water Extract Manufacture Infused- MMB/RMB Testing Facility-MMB/RMB

"Applicant" is defined as Legal Name of Individual or Business Entity that will hold license if approved.

New License (w. \$2,500 state fee)
\$2,000 Operating Fee & \$2,475 License Fee

License Transfer
\$2,500 State Collected Fee &
\$2,000 Operating License Fee

License Renewal
[See Renewal Fee Schedule per Tier/Type]

Applicant is applying as (attach organizational documents): RMB 100% Conversion RMB Co-Location

Corporation

Individual

Partnership

Limited Liability Company

Association or Other

Applicant Name _____

Trade Name of Establishment (doing business as) _____

Address of Premise Location _____
Street Address City State Zip Code

Business Mailing Address (if different from Premise location) _____
Street Address City State Zip Code

Business Telephone _____ Business Email Address _____

City Sales & Use Tax License No. _____ State Sales Tax License No. _____ FEIN No. _____

Maximum Expected Plant Count: _____ Lights Count: _____ Lights Wattage Used: _____

1. Applicant Ownership and Management Structure (not required for Renewals unless there are Amendments).

(A) The Applicant must provide the name and address of ALL OWNERS, OFFICERS, DIRECTORS, PARTNERS, MANAGING MEMBERS, CITY KEYHOLDERS, FINANCIERS, AGENTS, AND ALL OTHER INDIVIDUALS NAMED IN THE APPLICATION. If necessary, provide additional information on a separate sheet.

NAME	MAILING ADDRESS, CITY STATE, ZIP	POSITION	% OWNED

Name of on-site city keyholder for licensed premises: _____

Business Cell Phone Number: _____

Are any of the individuals listed above with the Applicant under 21 years of age? _____ Yes _____ No

Attach as Attachment J Financial Records for the last 3 months for an existing business of all checking, savings, and other bank accounts or other records that include deposits and expenditures for business-related activities, including without

limitation, all sales and use taxes paid to the state and the city, purchase of inventory and equipment, and payment of owners and employees. This applies to the business entity submitting the Recreational Marijuana Business License Application. Please note that maintenance of complete books and records of the above business accounting is an on-going obligation of a licensee and that such records are subject to review and audit by City.

(B) In addition, all of the above named individuals, MUST ALSO BE FINGERPRINTED, MUST PROVIDE A BACKGROUND CHECK AND FINANCIAL INTERESTS RECORD FORM, MUST UNDERGO A BACKGROUND CHECK, and provide any other documentation required by Chapter 6-16, B.R.C. evidencing good moral character.

2. Who, besides the owners listed in this application (including persons, firms, partnerships, corporations, limited liability companies etc.) has loaned, will loan or give money, inventory, furniture or equipment to or for use in this business or who will receive money from this business. Attach a separate sheet if necessary (not required for Renewals unless there are Amendments).

Name	Title	% Owned	Background Included?

Attach copies of all notes and security instruments, and any written agreement, or details of any oral agreement, by which any person (including partnerships, corporations, limited liability companies, etc.) will share in profits or gross proceeds of this establishment, and any agreement relating to business which is contingent or conditional in any way by volume, profit, sales, giving of advice or consultation.

3. Has any person listed in response to questions 1 or 2 violated any law (as defined in BRC 6-16-2)? Yes No

4. Has any person listed in response to questions 1 or 2 ever violated any law related to driving or operating other machinery under the influence of alcohol, drugs or medication, or driving while impaired or driving with excessive alcohol content in a federal, state, or other court? Yes No

If the answer is yes to questions 3 or 4, please provide the information on the below chart: (if necessary, provide additional information on a separate sheet)

Person's Name	Name and Location of Court	Charge alleged	Sentence or Disposition	Date of Sentencing or Disposition	Last date of incarceration /parole/probation/monitor payment of fines or fees

5. Has any individual listed in questions 1or 2 been denied an application for a medical marijuana or recreational business or had a medical marijuana or recreational business license revoked by any jurisdiction? Yes No
 Explain: _____

6. Has any individual listed in response to questions 1or 2 had a liquor license denied, suspended or revoked by any jurisdiction? Yes No
 Explain: _____

7. Has any individual listed in response to questions 1or 2 had a professional or other license denied, suspended or revoked by any jurisdiction? Yes No
 Explain: _____

8. Does any individual listed in response to questions 1 or 2 hold or ever held a Medical Marijuana Business License or Recreational Marijuana in Boulder or any other jurisdiction? __ Yes __ No

Name: _____ Address: _____

Type of Business: _____ Date/ License #: _____

Explain: _____

9. Has any individual listed in response to questions 1 or 2 had a business temporarily or permanently closed for failure to comply with any health or safety law? __ Yes __ No

Explain: _____

10. Has any individual listed in response to questions 1 or 2 had an administrative, civil, or criminal finding of delinquency for failure to pay sales or use tax, or any other tax? __ Yes __ No

Explain: _____

11. Does the Applicant have legal possession of the proposed licensed premises for at least 12 months from the date that this RMB license application was filed by virtue of ownership, lease or other arrangement?

Applicant must provide copy of recorded Deed, or signed Lease or other possession evidence.

Ownership Lease Other (explain in detail- use extra sheet) _____

If leased, list name of landlord and tenant, and date of expiration EXACTLY as they appear on the lease:

Landlord	Tenant	Expires
<p>If premises are leased, attach written lease allowing a recreational marijuana business in space or landlord letter.</p>		

12. Is this proposed premise location the only location that is affiliated with this business? __ Yes __ No

If there is another location associated with this business entity, please list all other premise location addresses both in and outside of Boulder (i.e. all dispensaries, grow locations and MIPs which operate in concert to form this business entity):

13. Are proposed premises within 1,000 feet of any school, university, addiction recovery center or licensed day care? __ Yes __ No

14. Is this proposed premise within 500 feet of any other marijuana business, in a mixed use development, or the Mall proper or in the University Hill commercial area (as defined in 6-16-2)? __ Yes __ No

Applicant must know requirements of BRC Chapter 6-16 and answer the following questions on local RMB laws:

15. Does the Applicant propose to have retail sales of marijuana infused products? __ Yes __ No

If yes, what items will be sold? _____

16. Describe how Applicant will offset 100% of its electrical consumption with renewable energy or carbon offsets at its Recreational Marijuana business location:

17. If location is a store, what ID scanner is to be used and applicant's plan for preventing those under 21 from entry into the business and for removal from the premises of any person that ID scanner does not verify as at least 21 years of age?

18. Is Applicant aware of the additional monthly RMB state and city excise tax for Grows and MIPs and the added sales and use tax for RM dispensaries? Yes No

19. Has Applicant implemented Neighborhood Responsibility Plan submitted with this application? Yes No

20. If Applicant intends to operate as a greenhouse/ nursery or a manufacturing use, is the plan to prevent mold and wastewater discharge attached to this application? Yes No

21. If Applicant intends to operate a manufacturer infused product location, has an Industrial Hygienist been hired yet? Please state, yes/no and provide name of Industrial Hygienist: _____

22. Has Applicant had proper ventilation for filtration of product odor inspected and approved as required by City of Boulder? Yes No

23. Does the Applicant have a statement on the amount of projected daily average and peak electrical load for the business and a certification from the landlord and the utility provider that the location is equipped to meet those requirements? Yes No

24. Will the Applicant maintain 40 days of video recordings in an off-site location in the city or through a service over a network that provides on demand access for the camera recordings as required by 6-16, B.R.C? Yes No

25. State the name and contact information for the company monitoring alarm system for RMB location _____

26. Is Applicant familiar with Boulder's laws regarding recreational marijuana and agree to comply with all of its requirements and prohibitions? Yes No

Related to City Business License and Business Operations, the Applicant should answer the Following:

27. Does the Applicant already have or applied for a City sales and use tax license? Yes No
If yes, what is the Issued Date _____ OR Application filing date _____ of the City license?
Anticipated Business Opening Date: _____

28. If Applicant is a business entity, provide Registered Agent's Name, electronic mail address, and Street Mailing Address:

Registered Agent's Name, Street Mailing Address and electronic mail address Included above

Applicant Name: _____ Trade Name: _____

Premise Address: _____

Application Contact Name (please print): _____

Two (2) Application Contact Business Cell Phone Numbers: _____

Two (2) Application Contact Business E-mail Addresses: _____

ADDITIONAL DOCUMENTS TO BE SUBMITTED WITH NEW LICENSE APPLICATIONS BUT NOT REQUIRED FOR ANNUAL RENEWAL APPLICATIONS UNLESS THERE ARE CHANGES.

For Renewals, are there changes to any information in Attachments A to J most recently submitted to the city?

_____ **Renewing Representative's Initials** _____ **Yes** _____ **No**

For any changes, Licensee should submit new ATTACHMENTS to properly report any and all changes.

STAFF REVIEW DATABASE DOCUMENTS: Checklist of Required Documents, City License Application, Zoning Locate Review Form, and Attachment F-Operating Plan entire and General Floor Plan diagram.

ALL ATTACHMENTS IN HARD COPY FORM

N/A > ATTACHMENT A: Applicant Corporation, Partnership, or Limited Liability business formation documents, management agreements, and operation agreements as specified in B.R.C. 6-16-5 (a) (1) .

N/A > ATTACHMENT B: Background Check and Financial Interests Reports, Fingerprints, and Identification copies for all Owners, Officers, Directors, Partners, Managing Members, Members, City Keyholders, Financiers, and Agents and individuals named in the application. Evidence of Rehabilitation or Court Documents for Disposition if applicable as specified in B.R.C.6-16-5 (a) (2) and (3) and 6-16-5 (a) (10).

N/A > ATTACHMENT C: Summary List of all loans, notes, and gifts, and executed and complete copies of same as specified in B.R.C. 6-16-5-(a) (2).

Required > ATTACHMENT D: Landlord Letter and Lease or Deed to Business Premise, signed by all parties, term current, & valid for 1 year from License Issuance as specified in B.R.C. 6-16-5 (a) (4)

N/A > ATTACHMENT E: Insurance Certificate or compliance evidence with B.R.C. 4-1-8 as in B.R.C. 6-16-5 (a) (5)

Should remain as-is > ATTACHMENT F: Operating Plan with products and services description, dimensioned floor plan, neighborhood responsibility plan, ingestible items production (if any), energy reporting & offsets, electrical availability, and mold and wastewater discharge plan (if any) as specified in B.R.C. 6-16-5 (a) (6).

Should remain as-is > ATTACHMENT G: Security Diagram and Text Explanation with Confidential Portions Marked and Confidentiality Reason Identified as specified in B.R.C. 6-16-5 (a) (7), including the location of the off-site camera recordings and the identity of the alarm system monitoring company.

N/A > ATTACHMENT H: Lighting Diagram and Text Explanation for Premises as specified in B.R.C. 6-16-5 (a) (8).

N/A > ATTACHMENT I: Business License for Sales tax with Zoning Confirm Form; B.R.C. 6-16-5 (a) (9) & 6-16-7 et seq.

N/A > ATTACHMENT J: Business Entity Financial Records for the last 3 months for an existing business of all checking, savings, and other bank accounts and other financial records depicting deposits and expenditures for business-related activities, including without limitation, all sales and use taxes paid to the state and the city, purchase of inventory and equipment, and payment of owners and employees. This applies to business entity submitting the RMB License Application. Please note that maintenance of complete books and records of the above business accounting is an on-going obligation of a licensee and that such record are subject to review and audit by City Finance department.

THIS APPLICATION IS NOT CONSIDERED COMPLETE UNTIL PAYMENT OF ALL FEES AS REQUIRED BY B.R.C. 4-20-67, INCLUDING RECEIPT OF \$2,500 PORTION OF FEE FOR NEW LICENSE APPLICATIONS DUE FROM THE STATE.

OATH OF APPLICANT

I declare under penalty of perjury in the second degree that this application and all attachments are true, correct, and complete to the best of my knowledge. I also acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the Boulder Revised Code and all Rules and Regulations which govern my Recreational Marijuana Business License Application and any issued Recreational Marijuana Business License.

Authorized Signature	Printed Name and Title	Date

FOR CITY INTERNAL USE ONLY:

CITY ASSIGNED MMB LICENSE NO: _____

APPLICANT NAME: _____ TRADE NAME: _____

PREMISE ADDRESS & SUITE/UNIT NUMBER: _____

PLANNING/ZONING (Date Sent: ____) AS TO BUSINESS DENSITY, DISTANCE MEASUREMENT, & ALLOWED ZONING
MMB NEW LICENSE OR ANNUAL RENEWAL IS RECOMMENDED TO BE: ____ APPROVED ____ DENIED

BASIS FOR RECOMMENDATION: _____

City Staff's Name Title Date

CITY SALES TAX DEPARTMENT (Date Sent: ____) AS TO CITY SALES AND USE TAX LICENSE AND TAX REMITTANCE

MMB NEW LICENSE OR ANNUAL RENEWAL IS RECOMMENDED TO BE: ____ APPROVED ____ DENIED

FILING DATE OF INITIAL SALES AND USE TAX LICENSE: _____

BASIS FOR RECOMMENDATION: _____

City Staff's Name Title Date

BOULDER POLICE DEPARTMENT (Date Sent: ____) AS TO BACKGROUND CHECK, OPERATING PLAN, SECURITY PLAN, LIGHTING PLAN AND OPERATING CHARACTERISTICS

MMB NEW LICENSE OR ANNUAL RENEWAL IS RECOMMENDED TO BE: ____ APPROVED ____ DENIED

BASIS FOR RECOMMENDATION: _____

City Staff's Name Title Date

FIRE DEPARTMENT (Date Sent: ____) AS TO OPERATING PLAN, SECURITY PLAN, LIGHTING PLAN AND OPERATING CHARACTERISTICS FOR PREMISE AND OCCUPANCY

MMB NEW LICENSE OR ANNUAL RENEWAL IS RECOMMENDED TO BE: ____ APPROVED ____ DENIED

BASIS FOR RECOMMENDATION: _____

City Staff's Name Title Date

BUILDING SERVICES (Date Sent: ____) AS TO BUILDING PLANS/ PERMITS, PROPER CONSTRUCTION, AND LOCATION COMPLIANCE HISTORY FOR RENEWALS

MMB NEW LICENSE OR ANNUAL RENEWAL IS RECOMMENDED TO BE: ____ APPROVED ____ DENIED

BASIS FOR RECOMMENDATION: _____

City Staff's Name Title Date

CLIMATE + SUSTAINABILITY DIVISION (Date Sent: ____) AS TO USAGE AND QUARTERLY REPORTING OF ENERGY USE AND CARBON OFFSETS

MMB NEW LICENSE OR ANNUAL RENEWAL IS RECOMMENDED TO BE: ____ APPROVED ____ DENIED

BASIS FOR RECOMMENDATION: _____

City Staff's Name Title Date