



MARIJUANA ESTABLISHMENT LICENSE APPLICATION / RENEWAL

LICENSE TYPES AND FEES - Check ALL that apply			CITY LICENSE NUMBER			
RETAIL (Annual Operating Fee)	MEDICAL (Annual License Fee)	ACTION DESIRED (Check all that apply)				
<input type="checkbox"/> STORE \$1,500 <input type="checkbox"/> CULTIVATION \$600 <input type="checkbox"/> INFUSED PRODUCTS \$600 <input type="checkbox"/> TESTING LAB \$600 (A testing lab license is preclusive of other marijuana licenses.)	<input type="checkbox"/> CENTER \$1,000 <input type="checkbox"/> CULTIVATION \$1,000/\$160 <input type="checkbox"/> INFUSED PRODUCTS \$1,000/\$200 <input type="checkbox"/> TESTING LAB \$600 (CULTIVATION AND INFUSED MEDICAL PRODUCT LICENSE INITIAL FEE REDUCED IF MEDICAL CENTER LICENSED OR APPLYING AT THE SAME TIME)	NEW APPLICATION/ADDITION <input type="checkbox"/> RENEWAL <input type="checkbox"/> CO-LOCATION <input type="checkbox"/> CONVERSION <input type="checkbox"/> STOCK ACQUISITION <input type="checkbox"/> PREMISE MODIFICATION <input type="checkbox"/> PREMISE EXPANSION <input type="checkbox"/> MOVE LICENSED PREMISE <input type="checkbox"/>				
LEGAL BUSINESS NAME						
TRADE NAME						
PHYSICAL ADDRESS STREET				WHEAT RIDGE	CO	ZIP
BUSINESS PHONE		WEB PAGE		BUSINESS EMAIL ADDRESS		
PRIMARY CONTACT		PRIMARY'S PHONE		PRIMARY'S EMAIL ADDRESS		
ASSOCIATIONS PAST OR PRESENT WITH OTHER MARIJUANA BUSINESSES OR LOCATIONS HAVING PARTIES IN COMMON						
BUSINESS NAME	ADDRESS/CITY/ST	HOW ASSOCIATED	FROM	TO		

I certify that all information provided in this form is true and correct to the best of my knowledge.

Signature of Applicant _____ Title _____ Date _____

From: Tax Division Member _____ Date _____

City Use

Enc.	Item and Description	New App	Renewal
	Schematic diagram: square footage, dimensions per marijuana license type, security layout, doors, windows, partitions, orientation to the nearest street. Does NOT constitute appropriate plans for obtaining any building permits which may be necessary to receive the occupancy approval that is required for the license.	YES	If any changes
	Key person form for each individual with a 10% or greater ownership/investment stake, or who holds a management position.	YES	1x/year
	Business/Tax License Application: fully completed, including lawful presence affidavit if a sole proprietor or single member LLC.	YES	If changes
	Lease or lease summary containing landlord's acknowledgement of the marijuana use.	YES	If changes
	Colorado marijuana license application	YES	NO