

TOWN OF MANCOS

MARIJUANA RENEWAL APPLICATION

DOCUMENT CHECKLIST & WORKSHEET

This check list should be utilized to assist applicants with filing all required documents. All documents must be properly signed and correspond with the name of the application exactly. All documents must be typed or legibly printed. Upon final Town approval, the applicant will be contacted. **All fees are non-refundable.**

1. APPLICANT INFORMATION

- A. Applicant/Licensee identified
- B. Completed Renewal Application
- C. Return originals to Town Clerk

2. STATE INFORMATION

- A. Application
- B. Supporting Documentation

3. ADDITIONAL REQUIRED INFORMATION

- A. Copy of State License(s)
- B. Copy of Sale Tax License
- C. Updated Employee List

4. REQUIRED FEES

- A. Renewal Fees Current State Fees

Official Use Only

Application Received by Town Clerk	Date	Initials
Application & Fees Complete	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Application Reviewed by Town Marshal	Date	Initials
Application to Board of Trustees	Date	
Board of Trustees Action (attach meeting minutes)	<input type="checkbox"/> Approved <input type="checkbox"/> Denied	
Date Permits Issued	<input type="checkbox"/> Business Permit Exp. Date	

TOWN OF MANCOS

MARIJUANA BUSINESS PERMIT RENEWAL APPLICATION

Applicant is applying as a: <input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> LLC <input type="checkbox"/> Other _____ <input type="checkbox"/> Partnership (includes Limited Liability & Husband and Wife Partnerships)				
Applicant if an LLC, name of LLC; if Partnership, all partner's names; if Corp, name of Corp				
Trade Name of Establishment (DBA)				
Address of Premises(exact location of premises)				
City		County		State
				Zip Code
Mailing Address				
City		County		State
				Zip Code
FEIN #	State Sales Tax #	Business Phone	Business Fax	Email
Emergency Contact Name				
City		County		State
				Zip Code
Cell Phone		Fax Number		Email

If the applicant is a corporation, partnership or limited liability company, applicant must list all officers, directors, general partners, managing members and stockholders.

NAME	HOME ADDRESS, CITY & STATE	DOB	POSITION	% OWNED

- Total ownership must equal 100%

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 Town of Mancos and the State of Colorado which affect my license.

I understand that the employees of the proposed marijuana business, myself included, may be subject to prosecution under federal law.

I understand that the Town of Mancos accepts no legal liability in connection with the approval and subsequent operation of the dispensary. I hereby release the Town of Mancos, it's employees, and elected or appointed officials from any and all liability in connection to the approval and subsequent operation of the proposed dispensary.

 Authorized Signature & Title

 Date