



# MARIJUANA FACILITY LICENSE APPLICATION

APPLICATION FEE: \$100.00

## REGISTERED BUSINESS INFORMATION

NAME OF REGISTERED BUSINESS

BUSINESS MAILING ADDRESS

CITY STATE ZIP CODE

SECRETARY OF STATE BUSINESS REGISTRATION #

CITY OF BEAVERTON BUSINESS LICENSE #

BUSINESS PHONE NUMBER

BUSINESS E-MAIL ADDRESS

## PERSON RESPONSIBLE FOR FACILITY INFORMATION

NAME OF PERSON RESPONSIBLE FOR FACILITY

DATE OF BIRTH

MAILING ADDRESS

CITY STATE ZIP CODE

OLCC LICENSE NUMBER

OHA MMD NUMBER

PHONE NUMBER

E-MAIL ADDRESS

## MARIJUANA FACILITY INFORMATION

NAME OF MARIJUANA FACILITY

PHYSICAL ADDRESS IN BEAVERTON

CITY STATE ZIP CODE

TELEPHONE NUMBER

CITY ZONE OF MARIJUANA FACILITY

- I certify that all information is complete and accurate to the best of my knowledge.
- I have attached the appropriate application fee.
- I have attached proof that the Oregon Health Authority (OHA) has registered the proposed facility at the location listed on this application or that the Oregon Liquor Control Commission (OLCC) has licensed the proposed facility at the location listed on this application (**Do not check unless OHA's registration or OLCC's license is final (i.e. not provisional); this application is incomplete until OHA's final registration or OLCC's final license is submitted**).
- The proposed facility is within a zone permitted by the City's Development Code.
- I understand that the City of Beaverton may conduct a criminal history background check if reasonably required to complete its review of this application.

Applications must be submitted in person. To make an appointment, call (503) 526-2254.

PRINT NAME

SIGNATURE

DATE