

Village of Oxford Clerk's Office 22 W. Burdick, Oxford, MI 48371

Phone: (248) 628-2543

Village of Oxford

Adult Use Marijuana Facility License Application

An electronic version of the completed application must be provided on a flash drive

Type of Application	Туре с	Type of License(s) being Applied for		
New			Microbusiness	
Renewal			Retailer	
Modification			Processor	
			Safety Compliance	
			Secure Transporter	
License Applicant:				
Name				
Address	City	State	Zip Code	
Phone Number	Cell Number	Email of Company Name		
Proposed Facility Address				
Proposed Facility Property I	D Number			
	For Village Us	e Only		
Date Received	Application Number	Fire Department	Building Department	
Time Received	Employee Initials	Planner	Administration	
Final Disposition:		1		

The names, home addresses and personal phone numbers for all owners, directors, officers and managers of the stated License Applicant and the Marijuana Business (Attach additional pages if necessary).

Full Legal Name (First Middle Last)				
				%
Official Position/Nature of Interest			Ownership Percentage	
Address	City	State	Zip	
				:
Phone Number	Cell Number		Email	
Fill Local Name (First Middle Last)		······································		
Full Legal Name (First Middle Last)				
OCC 1-1 D-1Hi/Nation of Interest			Ownership Percentage	%
Official Position/Nature of Interest			Ownership Fercentage	
	City	State	Zip	
Address	City	State	ΔIÞ	
	Call Number		Email	
Phone Number	Cell Number		EMail	
Full Legal Name (First Middle Last)				
Full Legal Name (First Middle Last)				%
Full Legal Name (First Middle Last) . Official Position/Nature of Interest			Ownership Percentage	%
			Ownership Percentage	%
	City	State	Ownership Percentage Zip	%
Official Position/Nature of Interest	City	State		%
Official Position/Nature of Interest	City Cell Number	State		%
. Official Position/Nature of Interest Address		State	Zip	%
Official Position/Nature of Interest Address Phone Number		State	Zip	%
. Official Position/Nature of Interest Address		State	Zip	
Official Position/Nature of Interest Address Phone Number Full Legal Name (First Middle Last)		State	Zip Email	%
Official Position/Nature of Interest Address Phone Number		State	Zip	
Official Position/Nature of Interest Address Phone Number Full Legal Name (First Middle Last) Official Position/Nature of Interest	Cell Number		Zip Email Ownership Percentage	
Official Position/Nature of Interest Address Phone Number Full Legal Name (First Middle Last)		State	Zip Email	
Official Position/Nature of Interest Address Phone Number Full Legal Name (First Middle Last) Official Position/Nature of Interest	Cell Number		Zip Email Ownership Percentage	

You must attach one copy of each of the following items/documents with the submittal of this Application:

- 1. Preliminary State License Approval. A letter from the Marijuana Regulatory Agency of the State of Michigan (or any designated successor) granting preliminary state license approval for the Applicant to operate a marijuana facility that the Applicant is requesting for approval within the Village of Oxford. The burden to obtain any and all State approvals shall be on the Applicant.
- 2. All documentation showing the proposed License Holder's valid tenancy, ownership or other legal interest in the proposed Facility location. If the Applicant is not the owner of the proposed Facility location, a notarized statement from the owner of such location authorizing the use of the location for a Marijuana Facility for all purposes under this Application.
- 3. If the proposed License Holder is a corporation, non-profit organization, Limited Liability Company or any other legal entity other than a natural person, indicate its legal status, attach a copy of all company formation documents (including amendments), proof of registration with the State of Michigan, and a certificate of good standing from the applicable jurisdiction.
- 4. A copy of a valid, unexpired driver's license or state issued ID for all owners, directors, officers and managers of the proposed Marijuana Facility.
- 5. Evidence of a valid sales tax license if such a license is required by state law or local regulations.
- 6. A Non-refundable Application fee/Renewal fee of \$5,000 per license requested in the form of a certified check made payable to the Village of Oxford.
- 7. A Business and Operations Plan, showing in detail the Marijuana Business's proposed plan of operation, including without limitation, the following information:
 - a. A written and complete description of the type of Marijuana Facility proposed and the anticipated or actual number of employees. The name of the proposed Manager of the Marijuana Facility. The days and hours the Marijuana Facility will be open and or in operation.
 - b. A security plan meeting the requirements of the Ordinance which shall include a general description of the security systems(s) and/or lighting plan showing the lighting outside of the Marijuana Facility.
 - c. A list of Material Safety Data Sheets for all nutrients, pesticides, and other chemicals and/or compounds proposed for use in the Marijuana Facility. A copy of a procedural plan for periodic testing of contaminants, including mold and pesticides.
 - d. A description and plan of all equipment and methods that will be employed to stop any impact to adjacent properties and uses, including enforceable assurances that no odor will be detected from outside the Facility location property lines. State of the Art proposed odor control technology should be described in detail.
 - e. A plan for the disposal of Marihuana and related by-products that will be used at the Facility which includes, at a minimum, how the Facility will protect against any marijuana being ingested by any person or animal, indicating how the waste will be stored and disposed of, and how any marijuana will be rendered unusable upon disposal. Disposal by on-site burning or introduction to the sewage system is strictly prohibited.

- 8. The identification of any business, other than the Applicant, that will be directly or indirectly involved in the operations at the Facility.
- 9. A signed attestation in a form approved by the State of Michigan indicating all prior applications, approvals or denials in other jurisdictions and a statement describing the facts and circumstances concerning the application, denial, restriction, suspension, revocation, or nonrenewal, including the licensing authority, the date each action was taken and the reason for each action.
- 10. A Site Plan for the Facility. The site plan shall include an interior floor plan as well as a scale diagram illustrating the Facility location upon which the Facility (s) is to be operated, including all available parking spaces and specifying which parking spaces, if any, are handicapped accessible. A location area map of the Marijuana Facility and the surrounding area that identifies that the location of the Facility is situated. The Site Plan shall comply with the applicable and controlling Village of Oxford ordinances in terms of scope, copies and submittal process.
- 11. Information regarding any other Marijuana Business Facility that the Applicant/Licensee is currently authorized to operate in any other jurisdiction within the State of Michigan, or another State, and the Applicant's involvement in each Facility identified.
- 12. Proof of Insurance. Any Licensee in the Village of Oxford shall, at all times, maintain in full force and effect for duration of the License, worker's compensation insurance as required by state law, and general liability insurance with minimum limits of \$1,000,000 per occurrence and a \$2,000,000 aggregate limit issued from a company licensed to do business in Michigan. A Licensee shall provide proof of insurance to the Village Clerk in the form of a certificate of insurance evidencing the existence of a valid and effective policy which discloses the limits of each policy, the name of the insurer, the effective date and expiration date of each policy, the policy number and the names of the additional insureds. The policy shall name the Village of Oxford and its appointed and elected officials and employees as additional insureds to the limits required by this section. A License or its insurance broker shall notify the Village of any cancellation or reduction in coverage within seven (7) days of receipt of insurers' notification to that effect. The license Holder shall forthwith obtain and submit proof of substitute insurance to the Village Clerk within five (5) business days in the event of expiration or cancellation of coverage.

Release of Liability, Indemnification and Waiver

This Application process or the granting of a license hereunder is not intended to grant, nor shall it be construed as granting, immunity of any kind from criminal prosecution for growing, sale, consumption, use, distribution, or possession of marijuana not in strict compliance with state or federal law. Also, because federal law is not affected by state law or local ordinance, nothing in this Application; the granting of a license hereunder; or any Village of Oxford ordinance, policy, or rule is intended to grant, nor shall they be construed as granting, immunity from criminal prosecution under federal law or state law. This Application, or the issuance of a Village of Oxford license does not protect users, caregivers, or the owners of properties on which the use of marijuana/marihuana is occurring from federal prosecution, or from having their property seized by federal authorities under the Federal Controlled Substances Act or other federal statutes.

Upon issuance and acceptance of a license for a Marijuana Facility and/or renewal, the

undersigned individually, and on be			
authorized agent, hereby uncondit Village of Oxford, its agents, emplo	•	, ,	
claims, damages, and liability in an	• •		•
License holder expressly agrees to	·	•	•
including its agents, employees, of	· ·		•
law and equity for any and all clain arising out of or related to any acts			
in any way related to the premises		•	
Additionally, the applicant herby ag	•		_
the ordinances of the Village of Oxfo and that a violation on the premise	_		
revocation of the license.		, 3	
The applicant agrees to make the	nremises onen for ir	snection upon reque	st by the Village
Administration, Building Official,	·		
compliance with all applicable la		•	
operation/use and as such other agrees to inspections by the Villa	•	•	• •
operating in accordance with appl	-	_	•
ordinances.	3,	,	
Authorized Signature	Title		 Date
-			

Oath of Application

I declare under penalty of perjury that this application, the information presented herein, 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 all applicable ordinances, law and regulations. I acknowledge and understand that I am required to immediately provide the Village of Oxford with any changes in the information submitted with the Application or any other changes that materially affect a License if granted.

Signature of Applicant				
Sworn to and subscribed before me this				
day of , 20				
/s/				
Notary Public,				
County of, Michigan				
My Commission Expires				