



LONGMONT MARIJUANA AUTHORITY

PHONE: 303-774-3763 | MARIJUANA@LONGMONTCOLORADO.GOV

TO: Potential Marijuana License Applicants

FROM: Longmont Marijuana Licensing Authority

DATE: November 8, 2017

SUBJECT: Request for Expression of Interest—Longmont Marijuana Licensing Authority

This memo and attachments constitute a Longmont Marijuana Licensing Authority Request for Expression of Interest (RFEI) to obtain a marijuana store license in the City of Longmont. City staff have worked to create a process that is impartial and thorough for selecting four marijuana store license holders as directed by the Longmont City Council in Ordinance O-2017-61.

Applicants can submit a response to the RFEI (the RFEI response is also referred to herein as the application) for either a retail or retail/medical marijuana license by submitting all forms and documents noted in the attached Marijuana Store Application Checklist. Many of the required sections of the application do not have associated forms; instead, those sections are to be written in narrative format using the attached Application Format Standards.

Applications must be received in person at the Longmont City Manager's Office, 350 Kimbark Street, Longmont, CO 80501 between 8:00 a.m. November 9 and 12:00 noon on November 29, 2017.

For questions or more information, please e-mail marijuana@longmontcolorado.gov or call (303) 774-3763. Individuals monitoring this e-mail and phone number will not be serving on or providing feedback to the Authority's Selection Division. Applicants and their representatives are strongly discouraged from reaching out to members of City staff other than through this e-mail address and phone number.

Thank you again for your interest and your willingness to invest in Longmont.



MARIJUANA STORE LICENSE APPLICATION CHECKLIST

Business Trade Name _____

Physical Address _____

State MED License Submittal Date _____ Longmont Application Submittal Date _____

All applicants responding to the City of Longmont's Request for Expression of Interest (RFEI) to open and operate a retail or retail/medical marijuana establishment in the City of Longmont, must submit a **complete** application package for consideration by the Selection Division as described below. Complete application packages will be accepted on or before 12:00 noon on 11/29/2017 in the Longmont City Manager's Office, Longmont Civic Center at 350 Kimbark St. Longmont, CO 80501. The following items are required:

- Completed application checklist (this form)
- Three (3) identical hard copies of the application package as described in the Application Format Standards document
- One (1) electronic version of the application in PDF format on a flash drive (identical to hard copies)
- One (1) electronic **public version** of the application in PDF format on a flash drive for posting on-line
 - Should redact only those portions of the application that the City is prohibited from releasing under the Colorado Open Records Act
 - Should redact all trade secret, privileged, or confidential information such as social security numbers and confidential financial information
 - Should redact all information regarding specialized details of security arrangements*
- Cover letter providing an overview of the proposed establishment and reasons the applicant has chosen to locate in Longmont (not to exceed 1,000 words)
- DR 8548 Retail Marijuana Application (provide Authority with an updated copy of form provided to the State)
- DR 8530 Medical Center (applicable only for co-located/dual license facilities; provide Authority with an updated copy of the form provided to State)
- DR 8520 Associated Person & Associated Key License Application for each owner of the applicant business, or any officer or director, who also acts as a Key executive, employee or agent while physically working in a licensed Medical or Retail Business (provide Authority with an updated copy of form provided to the State)
 - A copy of each person's Colorado ID or Driver's License for each Individual completing a DR 8520
 - Fingerprint card for each completing a DR 8520
 - A License Application Release and Acknowledgement Advisement (City of Longmont form) for each person, and one for the applicant if the applicant is a separate individual
- Statement of all violations and penalties for any infractions or offenses by the applicant or applicant's owners, principal officers, managers, or employees relating to any marijuana establishment in the state or a statement that no such violations or penalties have occurred
- Possessory documents demonstrating that the applicant has legal possession of the site (e.g. property ownership or lease, for at least one year's duration)
- Authorization to Use Property for Marijuana Business (City of Longmont form) – must be notarized
- Zoning verification from the Planning and Development Services Department (City of Longmont online form)

- A vicinity map and description showing the proposed locations relative to the nearest residentially zoned area and the nearest school serving students in any grade from kindergarten through 12th grade
- A site plan showing the entire vicinity in which the marijuana establishment is located, including buildings, street(s), parking lot(s), exterior lighting plan, landscaping plans, identification of other tenants on and surrounding the property
- A general description of site improvements proposed and the anticipated City of Longmont Land Development Code approvals required (not to exceed 2 pages, including attachments)
- A general business plan that includes the following (not to exceed 25 pages, including attachments):
 - Description of the business
 - Market analysis
 - Overall marketing plan
 - Details of overall management and operations including hours of operation
 - Curricula vitae/resumes of all principal officers and managers
 - Staffing plans, including any specific commitments of the licensee toward staffing the establishment with a diverse workforce of Longmont residents
 - Financial information demonstrating a formalized relationship with an established financial institution, demonstrated liquid assets of \$250,000 in the applicant's control, financial projections including assumptions used, and sources of funds (this should be either through the State's DR8522 form or other necessary documents)
 - A description of the applicant's experience operating licensed marijuana businesses in Colorado or elsewhere, including compliance with state and local laws or violations thereof
 - An indication of whether the marijuana store would sell retail or both retail and medical marijuana.
- A detailed security plan that includes the following:
 - A detailed floor plan:
 - Labeled with the name of business, type of facility, street address
 - Perimeter of the licensed facility outlined in **bold black**
 - All entrances and exits to the establishment,
 - The location of any windows, skylights, and roof hatches
 - The location of all cameras and their field of view
 - The location of all alarm inputs (door contacts, motion detectors, duress/hold up devices) and alarm sirens
 - The location of the digital video recorder and alarm control panel including the location of the off-site storage or network service provider for storage of the required copies of surveillance recording and evidence that the premises comply with all security and video surveillance requirements set forth by the State of Colorado
 - Restricted and public areas including sales counters
 - Loading zones
 - Areas where marijuana/products will be stored and dispensed or sold
 - A description of type of security training provided for, and completed by, establishment personnel, including conflict resolution training and procedures for handling violent incidents
 - A description of how the licensee intends to use and maintain an incident log
 - A description of the establishment's procedures for preventing the use of marijuana on the licensed premises
 - Security measures taken by the licensee to prevent individuals from entering the limited access area portion of the licensed premises
 - The licensee's closing procedures after the cessation of business each day
 - The licensee's plan to prevent theft or the diversion of marijuana, including maintaining all marijuana in a secure, locked room that is accessible only to authorized persons
 - The type of alarm system and outdoor lighting to be used by the licensee

- The licensee's procedures for accepting delivery of marijuana at the establishment, including procedures for how it is received, where it is stored, and how the transaction is recorded
- A copy of the licensee's security alarm system monitoring contract
- A plan for disposal of any marijuana that is not sold
- A plan for preventing underage persons from entering the premises
- Evidence that the premises will comply with all security and video surveillance requirements set forth in Rules 305 and 306 of the Code of Colorado Regulations 1 CCR 212-2 (Retail Marijuana Code), and Rules 305 and 306 of the Code of Colorado Regulations 1 CCR 212-1 (Medical Marijuana Code) if applicable
- Community Outreach Plan (not to exceed 10 pages including attachments)
 - Applicant's history of community and neighborhood involvement with other similar businesses
 - Written policies and procedures to address community concerns and complaints
 - A designated point of contact, with comprehensive contact information, for public questions and concerns
 - Measures and procedures for mitigating any impacts to the neighborhood
- Odor Management Plan
 - A description of what methods and measures the business intends to take for preventing any odors from emanating from the business
- City's Vision, Values, and Goals
 - A description of how the licensee and licensed establishment would contribute to and support the overall vision, values and goals identified by the city and specified in adopted city plans such as Envision Longmont and the Sustainability Plan (may be included in cover letter rather than separate document)
- Separate from the Application Package:
 - Annual operating fee (a cashier's check) due for the first year of operations. The city shall not retain, or shall refund, the annual operating fee if the application is not selected for approval.
 - Manager Registration Fee (\$300 per proposed manager), if applicable
- Any other items required by the Ordinance O-2017-61, any applicable State law/regulations or the Longmont Marijuana Licensing Authority

* As described in § 24-72-204(2)(a), Colorado Revised Statutes



LICENSE APPLICATION RELEASE AND ACKNOWLEDGEMENT ADVISEMENT

1. I hereby represent and warrant that I am authorized to submit the attached application on behalf of the entity listed on the application because I am an owner of the entity or because I have authority from the owner.
2. I hereby represent and warrant that all the documents that I am submitting with this application are true and accurate to the best of my knowledge and that all executed documents are valid and enforceable.
3. I hereby represent and warrant that I have read and understand all the laws, rules and regulations, and policies and procedures associated with my application; and that I fully understand the nature, meaning, and content of such laws, rules, and policies. I warrant and represent that I will abide by such laws, rules, and policies during the application process and after my license is issued by the Local Licensing Authority (Authority) of the City of Longmont (City).
4. I hereby represent and warrant that I have conducted my own research and investigation regarding the compliance of my proposed location with state and local laws, including but not limited to proximity restrictions, zoning regulations, and address requirements. I further warrant and represent that the proposed location of my marijuana business license fully complies with such state and local law.
5. I understand that any promise, representation, or any other statement made to me by any agent or employee of the Authority that is not contained within this application is null, void, and unenforceable and that I am not relying on any such promise, representation, or statement.
6. I understand that any license which I am purchasing, or to which I am being added as an owner, may be subject to existing agreements, actions, or restrictions, including disciplinary action, suspended sentence associated with disciplinary action, good neighbor agreement or any other limitation imposed by the Authority or third party and I voluntarily agree to be bound by any such limitation on the license.
7. I understand that it is my responsibility to review any applicable license history and license file associated with this application, and I hereby represent and warrant that I have had the opportunity to do so and I am knowingly submitting my application with full knowledge of any licensing history.
8. I understand that the Authority will review the application for compliance with local laws, and that my application may be denied before or after a public hearing as required or allowed by laws, rules, or policies of the State and City.
9. I understand that the Authority may initiate disciplinary action on this license based upon any conduct associated with the license, including conduct by previous owners, manager or employees. I further understand that this license constitutes a revocable privilege and that I am liable for all actions associated with this license.

10. I understand that this application is neither an entitlement nor a vested right, and I acknowledge that I must qualify for and obtain the license or license status that I am seeking prior to operating or otherwise claiming that I have any right to such.
11. I represent and warrant that I have read this Release and Acknowledgment, that I have had the opportunity to consult with legal counsel, and that I am knowingly and voluntarily submitting my application in compliance with this Release and Acknowledgment and all applicable laws.

INVESTIGATION AUTHORIZATION

As an authorized agent for the applicant, I hereby authorize the Authority, to conduct a complete investigation into my personal background, using whatever legal means it deems appropriate. I hereby authorize any person or entity contacted by the Authority to provide any and all such information deemed necessary by the Authority. I hereby waive any rights to confidentiality in this regard. I understand that by signing this authorization, a financial record check may be performed. I authorize any financial institution to surrender to the Authority a complete and accurate record of such transactions that may have occurred with that institution, including, but not limited to, internal banking memoranda, past and present loan applications, financial statements and any other documents relating to my personal or business financial records in whatever form and whatever located. I understand that by signing this authorization, a financial record check of my tax filing and tax obligation status may be performed. I authorize the Internal Revenue Service, the Colorado Department of Revenue and any other taxing authorities to surrender to the Authority a complete and accurate record of any and all tax information or records relating to me. I authorize the Authority to obtain, receive, review, copy, discuss and use any such tax information or documents relating to me. I authorize the release of this type of information, even though such information may be designated as "confidential" or "nonpublic" under the provisions of state or federal laws. I understand that by signing this authorization a criminal history background check will be performed. I authorize the Authority to obtain and use from any source, any information concerning me contained in any type of criminal history record files, wherever located. I understand that the criminal history record files contain records of arrests which may have resulted in a disposition other than a finding of guilt (i.e., dismissed charges, or charges that resulted in a not guilty finding). I understand that the information may contain listings of charges that resulted in suspended imposition of sentence, even though I successfully completed the conditions of said sentence and was discharged pursuant to law. I authorize the release of this type of information, even though this record may be designated as "confidential" or "nonpublic" under the provisions of state or federal laws.

The Authority reserves the right to investigate all relevant information and facts to their satisfaction. I understand that the Authority may conduct a complete and comprehensive investigation to determine the accuracy of all information gathered. However, the City, and its elected officials, officers, employees, and agents, shall not be held liable for the receipt, use, or dissemination of inaccurate information. I, on behalf of the applicant, its legal representatives, and assigns, hereby release, waive, discharge, and agree to hold harmless, and otherwise waive liability as to the Authority, the City, and their elected officials, officers, employees and agents, for any damages resulting from any use, disclosure, or publication, in any manner, other than a willfully unlawful disclosure or publication, of any material or information acquired during inquiries, investigations, or hearings, and hereby authorizes the lawful use, disclosure, or publication of this material or information. Any information contained within my application, contained within any financial or personal record, or otherwise found, obtained, or maintained by the Authority, shall be accessible to law enforcement agents of this or any other city, or state, the government of the United States, or any foreign country.

REQUEST TO RELEASE INFORMATION

1. I/We hereby authorize and request all persons to whom this request is presented having information relating to or concerning the above named applicant to furnish such information to an agent of the Authority, whether or not such information would otherwise be protected from the disclosure by any constitutional, statutory or common law privilege.
2. I/We hereby authorize and request all persons to whom this request is presented having documents relating to or concerning the above named applicant to permit an agent of the Authority to review and copy any such documents, whether or not such documents would otherwise be protected from disclosure by any constitutional, statutory, or common law privilege.
3. I/We hereby authorize and request the Internal Revenue Service, the Colorado Department of Revenue and any other taxing authorities to permit an agent of the Authority to obtain, receive, copy, discuss and use any such tax information or documents relating to or concerning the above named applicant, whether or not such information or documents would otherwise be protected from disclosure by any constitutional, statutory, or common law privilege.
4. If the person to whom this request is presented is a brokerage firm, bank, savings and loan, or other financial institution or an officer of the same, I/we hereby authorize and request that an agent of the Authority be permitted to review and obtain copies of any and all documents, records or correspondence pertaining to me/us, including, but not limited to, past loan information, notes co-signed by me/us, checking account records, saving deposit records, safe deposit records, passbook records, and general ledger folio sheets.
5. I/We do hereby make, constitute, and appoint an agent of the Authority as my/our true and lawful attorney in fact for me/us in my/our name, place, stead, and on my/our behalf and for my/our use and benefit:
 - a) To request, review, copy, sign for, or otherwise act for investigative purposes with respect to documents and information in possession of the person to whom this request is presented as I/we might;
 - b) To name the person or entity to whom this request is presented and insert that person's name in the appropriate location in this request;
 - c) To place the name of the agent presenting this request in the appropriate location on this request.
6. I/We grant to said attorney in fact full power and authority to do, take, and perform all and every act and thing whatsoever requisite, proper, or necessary to be done, in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as I/we might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that said attorney in fact, or his substitute or substitutes, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and power herein granted.
7. This power of attorney ends twenty-four (24) months from the date of execution.
8. The below-named applicant has filed with the Authority an application for a marijuana establishment license. Said applicant understands and acknowledges that in seeking the granting of this privilege that the burden of proving its qualifications for a favorable determination is at all times on the applicant. Said applicant accepts any risk of adverse public notice, embarrassment, criticism, or other action, or financial

County of _____)

The foregoing instrument was acknowledged before me by _____,
(Name)

as _____ of _____,
(Title) (Name of Business Entity)

a _____, on behalf of the business entity, this _____ day of
(Business Association Structure)

_____, 2017.

Witness my hand and official seal.

Notary Public

My Commission expires _____.



APPLICATION FORMAT STANDARDS

COVER PAGE FORMAT

**A Response to the Request for Expressions of Interest
for Marijuana Licensing in the City of Longmont**

Calibri Font
20 point
Bold

<LOGO OR GRAPHIC OF CHOICE>

Submitted by <Name of Individual or company submitting>

Calibri Font
18 point
Italicized

Proposed Location: <Address>

<Date Submitted>

Calibri Font
16 point

**DOCUMENT
FORMAT**

The application packet (excluding forms provided by the City of Longmont/State) must follow the format shown/described below.

- Paper: 8.5" x 11" standard white paper
- Exception: 11" x 17" paper may be used for location/ vicinity maps and detailed floor plan if desired; all pages that are larger than 8.5" x 11" should be folded to 8.5 x 11 dimensions
- Single sided
- Binding: No stapling or comb/book binding allowed, but four binder clips should be used to bind the original and three copies; copies should be stamped "COPY" in the top right corner
- Photos and other graphics: Insert and include as needed (graphics do count as part of the page limit noted on the checklist)
- Page Margins: 1 inch on all sides
- Font: Calibri
- Body text font size: 12 point
- Headings font size: 14-18 point, bold
- Footer for page 2 & following: Include company/individual name & page # as shown below using 10 point Calibri font
- Section title pages: See following page for section title page format (section title pages do not count against the page limits).
- Section title pages should be inserted for the following application sections:
1. Forms
 2. Background
 3. Site Control Plan
 4. Business Plan
 5. Security Plan
 6. Community Outreach Plan
 7. Odor Management Plan
 8. City of Longmont Vision, Values & Goals

**SECTION TITLE
PAGE FORMAT**

Forms



Calibri Font
48 point,
bold