## CITY OF BANGOR – APPLICATION FOR CERTIFICATE OF LOCAL AUTHORIZATION RETAIL (ADULT USE) MARIJUANA ESTABLISHMENT

RETURN TO: City Clerk, 73 Harlow Street, Bangor, Maine 04401 (207)992-4200 FAX: (207)945-4449

| License No.:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                | Date:          | License Fee:                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------|--------------------------------|
| Expiration Date of Current License:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                |                |                                |
| License Type: S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | itore: Cultiva | ation: Pro     | oducts Manufacturing: Testing: |
| Please note that a retail marijuana store may not be co-located with other marijuana facilities.                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                |                                |
| New: Renewal:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |                |                                |
| Business Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                |                |                                |
| Physical Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                |                |                                |
| Mailing Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                |                                |
| Telephone:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                | Email Address: |                                |
| Owner:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                |                |                                |
| Mailing Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                |                                |
| Telephone:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                |                |                                |
| Contacts:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |                |                                |
| Mailing Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                |                                |
| Telephone:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | [              | Email Address: |                                |
| If there is more than one owner, submit the above owner information for each other owner on a separate sheet or sheets.                                                                                                                                                                                                                                                                                                                                                                                                                                         |                |                |                                |
| Please Attach:  1) Copy of your conditional license from the State of Maine issued pursuant to 28-B M.R.S. § 205(3).  2) Proof of possession or entitlement to possession for the proposed licensed premises (e.g. lease or deed).  3) Plans or other evidence showing compliance with Bangor's Land Development Code (Chapter 165).  4) Plans, policies, or other evidence showing compliance with Bangor City Code § 177-7.  5) The license fee.  For Renewal Applications: Submit a copy of the current State of Maine License, renewal application and fee. |                |                |                                |
| I hereby certify that this business is in compliance with the criteria listed in § 177-8(E) of the Code of the City of Bangor.                                                                                                                                                                                                                                                                                                                                                                                                                                  |                |                |                                |
| Applicant's Signatur                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | re:            |                |                                |

This application is for a Certificate of Local Authorization. Other licenses may also be required; for example, a flammable liquids license may be required for a products manufacturing facility, or a building permit for a facility that requires renovation. Most or all facilities will require a Certificate of Occupancy as well. Please contact the City Clerk (992-4220) and Code Enforcement (992-4230) for more information.

(ALL FEES SUBMITTED SHALL BE RETAINED BY THE CITY CLERK REGARDLESS OF WHETHER SAID LICENSE OR PERMIT IS ISSUED)