



# MARIJUANA MANAGER REGISTRATION- REGULATED MARIJUANA BUSINESS

<b>Check License business type: Please also include a copy of your MED Employee Badge</b>			
<input type="checkbox"/> <b>Medical</b> <input type="checkbox"/> <b>Retail</b> <input type="checkbox"/> <b>Combined</b> <b>License TYPE:</b>			
<b>Ft Collins License #'s:</b> Medical: _____ Retail: _____		<b>MED License #'s:</b> Medical: _____ Retail: _____	
<b>Entity Name:</b> _____ <b>DBA:</b> _____		<b>Manager's Name: First Name, Last Name</b>	
<b>Address of Premises Being Managed by New Manager:</b>		<b>Business phone #:</b>	
<b>New Manager's Cell Phone Number:</b>		<b>New Manager's Email Address:</b>	
<b>Date Manager Assumed Management Duties</b>		<b>Does the Manager have any financial interest in license?</b> <input type="checkbox"/> <b>YES</b> <input type="checkbox"/> <b>NO</b>	
<b>AFFIRMATION &amp; CONSENT LICENSEE (OWNER)</b>			
<b>If there are multiple owners, one owner MUST sign.</b>		<b>Review CRS 44-10-313(4 &amp;12)</b>	
<p>I _____, state under penalty for offering a false instrument for recording pursuant to 18-5-114 C.R.S. and other applicable criminal charges that the entire License Application, statements, and attachments are true and correct to the best of my knowledge and belief, and that this statement is executed with the knowledge that misrepresentation or failure to reveal information requested, may be deemed sufficient cause for the refusal to issue a Marijuana license by the Local Licensing Authority. Further, I am aware that the later discovery of an omission or misrepresentation made in the above statements, may be grounds for denial of a marijuana application or the revocation of the license. I am voluntarily submitting this application to the Fort Collins Marijuana Licensing Authority, under oath, with full knowledge that I may be charged with perjury or other crimes for intentional omissions and misrepresentations pursuant to Colorado law or for offering a false instrument for recording pursuant to 18-5-114 C.R.S. I further consent to any background investigation necessary to determine my present and continuing suitability and that this consent continues if I hold a Marijuana license from the City of Fort Collins.</p> <p><b>I also acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the City of Fort Collins Municipal Code and all Rules and Regulations which govern my Marijuana License Application.</b></p>			
Signature:	Title	% Ownership	
Printed Name:	Business (dba):	Date	