

MARIHUANA FACILITIES APPLICATION PERMIT RENEWAL

City of White Cloud
 12 N. Charles St. White Cloud, MI 49349
 (231) 689-1194 www.cityofwhitecloud.org

PERMIT RENEWAL APPLICATION INFORMATION	
Permit Number:	Date Current Permit Received:
Date Current Permit Expires:	

PERMIT HOLDER INFORMATION		
Entity Name:	Doing Business As:	
Entity Mailing Address:	City:	State and Zip:
Entity Physical Address:	City:	State and Zip:
Telephone Number:	Email Address:	

PERMIT TYPE (Note: One application per facility type and location.)
☐ Provisioning Center (MMFLA) ☐ Retailer (MRTMA) ☐ Microbusiness ☐ Safety Compliance Facility ☐ Grower: ☐ Class A ☐ Class B ☐ Class C ☐ Excess Grower ☐ Processor ☐ Secure Transporter

FACILITY SITE INFORMATION		
Property Address:	Zoning District:	Parcel Number:
Property Status: ☐ Owned ☐ Leasing ☐ Option ☐ Land Contract		

PERSON COMPLETING THE APPLICATION (if different than the Permit Holder)		
Name:	Affiliation with Applicant:	
Mailing Address:	City:	State and Zip:
Telephone Number:	Email Address:	

APPLICATION ATTACHMENTS

The following is a checklist of items that must be submitted with the Permit Renewal Marihuana Facilities Application. See the Application Instructions for item details. Incomplete Applications will not be processed.

- ☐ A copy of the Applicant's active State License from LARA/MRA.
- ☐ Updated Staffing Plan, with current data.
- ☐ Updated Explanation of Economic Benefits to the City, with current data.

- ☐ Nonrefundable Application Fee of \$5,000.

CERTIFICATION

I, the undersigned, have the authority to sign this Application on behalf of the above-named entity. I have read all of the above answers and attached materials and they are true and correct. The entity certifies the following:

Neither the Applicant nor any true party of interest is in default to the City for any property tax, special assessment, utility charge, fines, fees, or other financial obligation owed to the City,

The Applicant has reviewed and agrees to conform its hiring and public accommodation practices to the state and federal anti-discrimination laws,

Neither the Applicant nor any true party of interest is ineligible from holding a license for any of the reasons set forth in the MMFLA, MCL 333.27402, and

The Applicant consents to inspections, examinations, searches and seizures required or undertaken pursuant to enforcement of this Ordinance.

The Applicant acknowledges that their facility will not be allowed to continue operation within the City of White Cloud after their current permit expires unless they successfully renew the permit.

Signature: _____ Date: _____

Printed Name: _____