



Village of Three Oaks Clerk's Office
21 North Elm Three Oaks, MI 49128

MARIHUANA BUSINESS MUNICIPAL LICENSE APPLICATION

Table of Contents – Each section is required by all applicants.

1 Applicant Information

Form 1.(a) – Individual Applicant Information

Form 1.(b) – Non-Individual Applicant Information

Form 1.(c) – Non-Individual Applicant Information (entity contact person)

2 Information on Proposed Location

Name of Marihuana Business

Address and Description of Marihuana Business

Location Area Map (that reflects compliance with separation distance requirements)

Copy of Special Land Use Permit

Copy of Approved Site Plan

Copy of Floor Plan

3 Applicant Affirmations

Form 2 – Applicant Affirmations

4 Affidavit of Non-Default and Compliant Transfer

Form 3 – Affidavit of Non-Default and Compliant Transfer

5 Proof of Financial Responsibility

Copy of Proof of Financial Responsibility Submitted to LARA with State Application

6 Ability to Perform

Satisfactory Evidence the Applicant can Perform and Complete the Improvements Contemplated in this Application

7 Ownership Interest

Proof of Ownership of the Premises

Written Consent from the Property Owner for use Requiring Licensure

8 Exterior Graphs of Building

Any Proposed Text or Graphical Materials to be Shown on Exterior

9 Sanitation Plan

Waste Storage Method(s)

Waste Disposal Method(s)

10 Crime Prevention Through Design Plan

Surveillance Methods

Access Control Strategies

Operational Elements/Site Features

Maintenance

Customer, Employee, Neighbor, and Neighborhood Safety

11 Good Neighbor Plan

Measures to Reduce Potential Negative Impacts on Residents & Businesses

Relationship with the Community

Implementation Program

12 Applicant Qualifications

Business History

Experience

Regulatory Compliance and/or Legal History

13 Prior Building, Zoning, or Code Violations

14 Executive Summary

Operational Vision

Demonstration of Success of Applicant's Approach in Other Marihuana Markets

Recruitment

Hiring Strategy

Training Programs

Compensation Packages

15 Grower Facilities (only required if applying for a Grower Facility License)

Chemical and Pesticide Storage Plan

16 Strategies to Mitigate Impacts

Village Services and Resources

Local Economy

Public Infrastructure and Utilities

Traffic and Parking

Natural Resources and Energy

Adjacent Uses of Land

17 Assessment

Form 4 - Self-Assessment Rubric

Directions for Completing this Application:

The response to this application is to be made in 3-ring binders, required to have color coded tabs according to the table of contents. Each tab in the applicant's response shall be color-coded and numbered according to the table of contents. The information that the applicant is requested to provide, for each section, is to be placed behind the respective tabbed section. The application is divided into 5 color coded sections as follows:

White Tabs	(Sections: 1 - 3)
Green Tabs	(Sections: 4 - 6)
Blue Tabs	(Sections: 7 - 11)
Yellow Tabs	(Sections: 12 - 14)
Red Tabs	(Sections: 15 - 17)

A sample assessment rubric is provided as Form 4 - Self-Assessment Rubric and shall be included under Tab 17. This Rubric is designed for the applicant to evaluate its own application materials and assess themselves in a fair and appropriate manner. The Self-Assessment Rubric will provide the applicant with a reflective tool and enhance understanding between the applicant and the Village.

One (1) hard copy of the application (binder) and the application fee shall be filed in the Village Clerk's Office. The application shall be reviewed by the Village Clerk for completeness within 14 days of receipt.

- A complete application (binder) shall receive Conditional Authorization.
- An incomplete application (binder) will be denied.
- The Village Clerk shall notify the applicant of the grant or denial of the Conditional Authorization by first-class mail.
- In the event of a denial, the applicant shall have 14 days from the mailing date of the denial to correct deficiencies.
- If all deficiencies are timely corrected, the Village Clerk shall issue a Conditional Authorization.

Within 10 days of Conditional Authorization, the applicant shall supply the Village Clerk with 10 hard copies of the complete application (binder) and one (1) digital copy of the complete application, recorded on a removable thumb drive.

Form 1.(a) Individual Applicant Information



Village of Three Oaks Clerk's Office
21 North Elm Three Oaks, MI 49128

MARIHUANA BUSINESS MUNICIPAL LICENSE APPLICATION

- 1. a) Individual Applicant Information** – Required if the Applicant is an Individual.
A copy of the Applicant's government issued photo identification is required.

Applicant Name

Date of Birth

Social Security #

Applicant Physical Residential Address

City

State

Zip

Applicant Physical Business Address

City

State

Zip

Primary Phone

Secondary Phone

Email

Emergency Contact (Name, Phone Number)

I affirm that I have included a copy of my government issued photo identification with this Application.

Dated: _____

Signature

Form 1.(b) Non-Individual Applicant Information



Village of Three Oaks Clerk's Office
21 North Elm Three Oaks, MI 49128

MARIHUANA BUSINESS MUNICIPAL LICENSE APPLICATION

1.b) Non-Individual Applicant Information – Required if the Applicant is **not** an Individual.
Each person holding an ownership interest in the Applicant Entity must be listed. **Make additional copies of this form as needed.** A copy of the Applicant's government-issued photo identification is required.

Applicant Entity	Stakeholder Name		
Date of Birth	Percentage Ownership		
Stakeholder Physical Residential Address	City	State	Zip
Stakeholder Physical Business Address	City	State	Zip
Primary Phone	Secondary Phone	Email	

I affirm that I have included a copy of my government issued photo identification with this Application.

Dated: _____ Signature _____

Applicant Entity	Stakeholder Name		
Date of Birth	Percentage Ownership		
Stakeholder Physical Residential Address	City	State	Zip
Stakeholder Physical Business Address	City	State	Zip
Primary Phone	Secondary Phone	Email	

I affirm that I have included a copy of my government issued photo identification with this Application.

Dated: _____
July 13, 2021

Signature _____

Form 1.(c) Non-Individual Applicant Information (Entity Contact Person)



Village of Three Oaks Clerk's Office
21 North Elm Three Oaks, MI

MARIHUANA BUSINESS MUNICIPAL LICENSE APPLICATION

1.(c) – Non-Individual Applicant Information (Entity Contact Person) – Required if the Applicant is **not** an Individual. The Applicant Entity Contact Person must be the highest ranking member of the Applicant Entity or the highest ranking managerial employee.

Applicant Entity		Stakeholder Name	
Entity Contact Person (i.e. highest ranking member)		Entity Contact Person Title	
Address	City	State	Zip Code
Primary Phone	Secondary Phone	Email	

I affirm that I have included the following required documents (as applicable to my entity):

- ☐ Articles of Incorporation (if corporation)
- ☐ Articles of Organization (if LLC)
- ☐ Assumed Name Registration Documents
- ☐ Internal Revenue Service SS-4 EIN Confirmation Letter
- ☐ Copy of the Operating Agreement (if LLC)
- ☐ Copy of the Partnership Agreement (if partnership)
- ☐ Name and Addresses of Beneficiaries (if trust)
- ☐ Copy of the By-laws or Shareholder Agreement (if corporation)

Dated: _____

Signature _____



Village of Three Oaks Clerk's Office
21 North Elm Three Oaks, MI 49128

MARIHUANA BUSINESS MUNICIPAL LICENSE APPLICATION

3. Applicant Affirmations – Required to be completed by all Applicants and Stakeholders.

I affirm that I, and each applicant, operator and stakeholder, is at least 18 years of age.

Initials

I affirm that I, and each applicant, operator and stakeholder, is not, or has not been within the preceding 24 months, employed by the Village, a consultant for the Village, or an advisor to the Village and involved in the implementation, administration, or enforcement related to a marijuana business.

Initials

I affirm that I, and each applicant, operator and stakeholder, acknowledge and understand that consumption and/or use of marihuana at the marihuana business is prohibited.

Initials

I affirm that I, and each applicant, operator and stakeholder, acknowledge and understand that the granting of a Marihuana Business Municipal License by the Village does not guarantee that the State of Michigan will issue me, the applicant, a license.

Initials

I affirm that I, and each applicant, operator and stakeholder, acknowledge and understand that all matters related to marihuana growing, cultivation, possession, testing, safety compliance and transporting are currently subject to state and federal laws, rules and regulations, and that the granting of a Municipal License by the Village does not exonerate or exculpate the applicant, stakeholders, and operators from abiding by the provisions and requirements and penalties associated with those laws, rules, and regulations, or exposure to any penalties associated therewith.

Initials

I declare that I, and each applicant, operator and stakeholder, waives and forever releases any claim, demand, action, legal redress, or recourse against the Village, its elected and appointed officials, and its employees and agents for any claims, damages, liabilities, causes of action or attorney fees that may be incurred as a result of the violation by the applicant, stakeholders, or operators of those laws, rules and regulations.

Initials

I affirm that I, and each applicant, operator and stakeholder, acknowledge and understand that a Municipal License applied for or issued under the Village of Three Oaks Regulation of Medical and Adult Use Marihuana Ordinance may be denied or revoked on any of the grounds set forth in Section 7 B. of said Ordinance.

Initials

I affirm that I, and each applicant, stakeholder and operator have not had a business license revoked or suspended.

Initials

If any business license has been revoked or suspended, please explain below including the facts and circumstances concerning the application, denial, restriction, suspension, revocation, or nonrenewal and the licensing authority, the date each action was taken, and the reason for each action:

--

Initials

I affirm, acknowledge, understand and consent to the fact that this application will be evaluated and assessed pursuant to the criteria set forth in the Village of Three Oaks Regulation of Medical and Adult Use Marihuana Ordinance.

Initials

I swear that the statements made in this Affirmation are true and complete as required by the laws and ordinances of the Village of Three Oaks.

Dated: _____
Signature _____

STATE OF MICHIGAN)
) ss.
COUNTY OF _____)

This instrument was acknowledged before me on _____,
2021 by _____.

_____, Notary Public
State of Michigan, County of _____
Acting in the County of _____
My Commission Expires: _____



Village of Three Oaks Clerk's Office
21 North Elm Three Oaks, MI 49128

MARIHUANA BUSINESS MUNICIPAL LICENSE APPLICATION

4. Affidavit of Non-Default and Compliant Transfer - Required for all Applicants

STATE OF MICHIGAN)
) ss.
COUNTY OF _____)

_____, being duly sworn, deposes and says:
Applicant

1. I am an adult and legally competent to make the statements in this affidavit, which I make from firsthand knowledge.
2. I, and each applicant, operator and stakeholder, am not in default to the Village of Three Oaks.
3. I, and each applicant, operator and stakeholder, have never failed to file or pay any income taxes, property taxes, special assessments, fines, fees or any other financial obligation to the Village of Three Oaks.

Dated: _____
Signature _____

This instrument was acknowledged before me on _____,
202____ by _____.

_____, Notary Public
State of Michigan, County of _____
Acting in the County of _____
My Commission Expires: _____



Village of Three Oaks Clerk's Office
21 North Elm Three Oaks, MI 49128

MARIHUANA BUSINESS MUNICIPAL LICENSE APPLICATION

Section 17. Self-Assessment Rubric – Required to be completed by all Applicants.

Assessed Factor	Assessment	Self Assessment
Whether the applicant or any stakeholder is a resident of the Village or otherwise demonstrates commitment to or investment in the Village that is not purely financial.		
The applicant's experience in operating or owning a business in the Village.		
The applicant's experience in operating other similarly licensed Marihuana Business(es) in Michigan.		
The applicant's general business management experience.		
Whether the applicant or any stakeholder has a history of non-compliance with any regulatory requirements in any other jurisdiction.		
How the proposed Marihuana Business will mitigate impacts of the operation on Village services and resources, including without limitation, impacts on the Village economy; impacts on local services, public infrastructure, and public utilities; and, impacts on parking and traffic.		
Whether the applicant has demonstrated the ability to execute and finance the proposed Marihuana Business.		
Quality of the employee training and education offered.		



Village of Three Oaks Clerk's Office
21 North Elm Three Oaks, MI 49128

MARIHUANA BUSINESS MUNICIPAL LICENSE APPLICATION

A nonrefundable Municipal License application fee shall be paid by each Marihuana Business applying to be licensed in the amount of \$5000.00.

Please note that any Application is not complete or accepted until payment has been received by the Clerk.

I affirm that the above is a true copy of the receipt submitted with this Application. I understand and affirm that my Application is not complete or accepted until payment has been received by the Clerk.

Dated: _____

Signature



Village of Three Oaks Clerk's Office
21 North Elm Three Oaks, MI 4918

Name of Individual who submitted the Receipt:

Driver's License Number of Individual who submitted the Receipt:

Entity or Individual Applicant Name for Fee Submission:

Clerk's Office

Certification of Receipt:

Name: _____ Signature: _____ Date: _____

Village Manager's Office

Certification of Receipt:

Name: _____ Signature: _____ Date: _____