NEW APPLICATION AND PERMANENT MODIFICATION
MMB LICENSE APPLICATION INTERNAL PROCESS

Final

1. ***Action*: Complete MMB license application or Change form for perm. modifications accepted by licensing**
Applicant submits legally complete license application or Change form for perm. modifications with zoning form.

For new licenses, Licensing runs CBI background check online for preliminary results and mails fingerprint cards to CBI for processing (FBI results can take up to 2 months) for new applications. With MMB license application, Applicant provides new sales tax for business license application with completed P and DS zoning form attached and Licensing area provides same to sales tax area. Sales Tax area routes new business license application with zoning form as it usually would to zoning for sales tax licenses. Zoning responds back with answer on sales tax application as to if zoning location is approved. After zoning approval, Sales tax provides zoning form to Licensing that zoning is allowed and that sales tax for business license can be approved for new applications and Licensing makes time/date stamped copy for applicant.
For perm. modifications, Licensing makes a copy of the zoning form for applicant immediately. In either case, Licensing provides for pick up or take way a time/date stamped copy of the zoning form so that applicant can apply for building permits.

***Proof*: Time/date stamped copy of zoning form attachment for Sales tax for business license**
Licensing provides applicant with a copy of a date & time-stamped of zoning form document. Applicant provides this to P&DS when submitting plans for building permit application.

2. ***Action*: Applicant submits plans for building permit, permit issued, premise built**
Applicant applies for building permits and the plans are reviewed for zoning, planning, and building services. Once approved, applicant picks up permits and builds premise. Premise is inspected by building inspectors and Fire Department (and re-inspected as necessary) and receives final inspection sign-off/compliance letters showing all work is complete. Applicant completes entire building process before application will proceed forward.

***Proof*: Letter of completion from P&DS**
Applicant requests letter of completion from P&DS as proof that P&DS and Fire have approved the MMB premise. Applicant drops off, emails or faxes a copy of the letter of completion and the final, complete general floor plan and security diagrams to the licensing office.

3. ***Action*: Sales Tax, FBI results reviewed, inspection scheduled**
Licensing schedules premise inspection for Police Department and Licensing (and Fire if they wish to inspect). Licensing checks with Sales tax to make sure that applicant has a sales tax license for businesses set up for a sales & use tax account in good standing. PD and Licensing complete walk-through and provide applicant with an inspection checklist noting deficiencies and a time frame to resolve. PD completes re-inspections as needed to confirm compliance with security requirements.

***Proof*: Compliance written confirmation letter from PD (and Fire if they inspected)**
This compliance letter completes the 3rd and final sign off needed prior to licensing. The P&DS, Fire and PD compliance letters now are placed in the MMB file along with the licensing inspection checklist.

4. ***Action*: Licensing meeting**
Licensing schedules a 30 minute MMB license issuance meeting with at least one owner of the MMB. Licensing staff sends applicant floor plan checklists to ensure applicant brings complete plans to licensing meeting. At meeting, applicant confirms complete general floor plan and security floor plan. Applicant signs license issuance form representing that the application and submitted diagrams are true statements of how location will operate.

***Proof*: City MMB license**
Issued MMB city license now posted at licensed location and may be provided to state MMED as proof of local licensure and evidence of license expiration date.

City of Boulder
Finance Department · Licensing Division
1777 Broadway, Boulder, Colorado 80302 · 303 441-4192

MEDICAL MARIJUANA BUSINESS LICENSE
APPLICATION FOR MODIFICATION

Applicant/licensee business type:

☐ Corporation ☐ LLC ☐ Individual ☐ Partnership ☐ Association or other

Applicant/license type:

☐ Wellness Center/Dispensary ☐ Greenhouse/Grow ☐ Manufacturer Infused Products

Licensee name: _____

Trade name/DBA: _____

Premise address: _____
Street address City State Zip Code

Mailing address: _____
(if different from premise location)

Telephone: _____ **Email:** _____

City Sales Tax # _____ **State Sales Tax #** _____ **FEIN:** _____

Change(s) reported (check all that apply)

Permanent modification to licensed premises [$3,000 payable to City of Boulder]:

☐ Modification adding or subtracting square footage to licensed premise

☐ Change of business use classification

Only licensees may make the above changes (not applicants)

SECTION A - PERMANENT MODIFICATIONS TO LICENSED PREMISES

STEP 1: Complete this change form and a zoning confirmation form (page 3 and 4) and submit to licensing. You must have a date/stamped copy of zoning form from complete application from licensing before you may proceed to step 2.
STEP 2: Apply for building permits at the City P&DS department. Bring a copy of your MMB license and your date/stamped certificate of complete application to submit to the P&DS project specialist along with your building plans.
STEP 3: Complete changes of premise in accordance with permits. When you are done, request a copy of a letter of completion from P & DS and provide a copy to Licensing, along with final operating diagram and security diagram.
STEP 4: Licensing will schedule inspection for licensing/PD/Fire. Once PD and Fire sign-off is received, approval letter issued.
Describe all changes proposed to licensed premises:
Does this change add square footage to a Wellness Center so that total square footage is over 3,000 sq. ft.?:
.
Does this change reduce a Wellness Center below 3 room minimum or eliminate a private consulting room?:
.
Effective date:
Attach to this change form:
☐ "Before" modification and "after" modification diagrams of the licensed premise
☐ If premise is leased, acknowledgement letter from landlord to consent to modification or new lease
☐ New zoning confirmation form to confirm compliance with zoning department (page 3 and 4 of this document)
☐ Amended documents such as operating plan, security plan and lighting plan, if impacted by the proposed change

SECTION F - CHANGE OF BUSINESS USE CLASSIFICATION

Please Note: Licensees may not begin the new type of business before the change is approved by the City and the State, and before the premise is inspected by all required City staff. Please allow proper processing and await notice of inspection and approval from the City before proceeding.

Anticipated date of change of business use:
Current use (wellness center/MIP/grow):
Proposed new use (wellness center/MIP/grow):
Zoning district of premise (if known):
☐ New zoning confirmation & request for City map to confirm compliance with zoning attached
☐ Amended premise diagram for new proposed use classification (if applicable) attached
☐ Other amended documents, such as operating plan, security plan & diagram, general floor plan diagram, and lighting plan impacted by the proposed use classification change attached

Oath of Applicant (Owner or Manager)

I declare under penalty of perjury in the second degree that this application and all attachments are true, correct, and complete to the best of my knowledge. I also acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the Boulder Revised Code and all Rules and Regulations which govern my medical marijuana business license application and any issued medical marijuana business license.

Signature	**Printed name**	**Title**	**Date**

CITY OF BOULDER BUSINESS LICENSE APPLICATION
SALES/USE TAX - ADMISSIONS - ACCOMMODATIONS LICENSE

ATTACHMENT FOR BUSINESS LICENSES:

ZONING CONFIRMATION FORM

City of Boulder – Planning & Development Services
1739 Broadway, 3rd Floor
P.O. Box 791, Boulder, Colorado, 80306
(303) 441-1880

The information provided on this form is intended to help specify the use category of the business operation. Please note that the type of business specified for Standard Industrial Coding (SIC) and sales tax licensing may be different than the use category determined for planning purposes.

GENERAL DATA

(To be completed by the applicant.)

PROPERTY

- Street Address: _____
- Lot Area (in square feet or acres): _____ Existing Zoning: _____
- Existing Use of Property: _____
- Is this application a renewal of current sales tax license? (check one) ❒ New ❒ Modification

PROPOSED USE

- Business Name: _____
- Description of proposed use (Include as applicable, proposed use, if it is a home occupation business, and summarize type of business activity):

_____

_____

_____

CONTACT INFORMATION

- Name of Owner or Representative: _____ E-mail: _____
- Address: _____ Phone: _____
- City: _____ State: _____ Zip Code: _____ FAX: _____
- Size of Business (in square feet): _____
- Hours of Operation: _____
- Use Category (see page 2): _____

Complete all applicable portions of page 2 of this form and return this form with your sales tax application.

I have read and understood and agree to all of the conditions in this 2 page form. I certify that the information and exhibits herewith submitted are true and correct to the best of my knowledge and that in filing the application I understand that there may be additional reviews required to complete the planning process.

Signature: _____ Date: _____

STAFF USE ONLY

Application reviewed by: _____ Date: _____

Zoning District: _____ Use Category: _____

Previous Reviews: _____

Further Discretionary Review Required: _____

☐ ___ **For Restaurant Businesses**:

- Total Business Size (in square feet): _____ Number of Interior Seats (if applicable): _____
- Size of Outdoor Patio (in square feet): _____ Number of Patio Seats (if applicable): _____
- Hours of Operation: _____
- Use Category (see page 3): _____

☐ ___ **For Home Occupation Businesses:**

I, _____, understand the provisions of the Home Occupations Statute (Title 9, Chapter 6-3 (e) of the Revised Code of the City of Boulder) which are listed below, and agree that all actions at my home located at _____, will be in conformance with these regulations. The nature of my home occupation business is as described in the description of proposed use herein.

Title 9, Chapter 6-3 (e) Home Occupations.

(a) Standards. A home occupation is a permitted accessory use if the following conditions are met.

(1) Such use is conducted entirely within a principal or accessory building and is not carries on by any other person other than the inhabitants living there.

(2) Such use is clearly incidential and secondary to the residential use of the dwelling and does not change the residential character thereof.

(3) The total area used for such purposes does not exceed one-half the first floor area of the user's dwelling unit.

(4) There is no change in the outside appearance of the dwelling unit or lot indicating the conduct of such home occupation, including without limitation, advertising signs or displays.

(5) There is no sale of materials or supplies except incidential retail sales.

(6) There is no exterior storage of material or equipment used as part of the home occupation.

(7) No equipment or process is used in such home occupation that creates any glare, fumes, odors, or other objectionable condition detectable to the normal senses at boundary of the lot if the occupation is conducted in a detached dwelling unit, or outside the dwelling unit if conducted in an attached dwelling unit.

(8) No traffic is generated by such home occupation in a volume that would create a need for parking greater than that which can be accommodated on the site or which is consistent with the normal parking of the district.

(b) Prohibitions. No person shall engage in a home occupation except in conformance with all of the requirements of subsection (a) of this section.

☐ ___ **For Medical Marijuana Businesses**: ☐ New Application ☐ Modification to an Existing Application

- Size of Business (in square feet): _____ Hours of Operation: _____ No. of Rooms: _____
- Use Category (please check one): ☐ Medical marijuana business, Personal Service ☐ Medical marijuana business, Greenhouse/Nursery ☐ Medical marijuana business, Manufacturing

☐ ___ **For All City Businesses:**

- Will you allow consumption of alcohol on your business premise: _____
- Will you obtain a liquor license from the state or city for alcohol service: _____

For Business Use Classification Modification application and with the expectation that the Tax ID number is not changing:

Please include a letter directed to City Sales Tax area to explain that the businesses' business use classification is requested to be changed and include the old use and the new use and detailed description of the nature of the business.

Please have the managing member of the LLC or the corporate president sign the letter, date the letter, and write their title at the bottom of the letter.