



## VILLAGE OF HOLLY

### Recreational Marihuana Establishment Application

Pursuant to applicable provisions of the Village of Holly Code of Ordinances, the following application is intended to collect information and documentation to evaluate the applicant's conformance with Village codes and ordinances pertaining to Marihuana Facilities and Establishments allowed under the Michigan Regulation and Taxation of Marihuana Act, *MCL 333.27951, et seq.* and any state Administrative Rules adopted thereunder. In addition to demonstrating compliance with all applicable standards, criteria and requirements under applicable codes, ordinances and state laws, all applicants should note that the approval of a Village Operating License will be based upon the accuracy and completeness of the information provided. In the event the number of qualifying applications exceed the permitted number of facilities/establishments provided by Ordinance or two or more applicants have similar qualifications, the Village of Holly reserves its right to approve a license which in the opinion of the Village best meets its goals and safeguards as set forth in the ordinance or any applicable administrative rules adopted by the Village. No financial or other right is established by the payment of the non-refundable application fee. All applications for renewal of a permit shall be reviewed per the standards set forth in the Ordinance. The Village of Holly reserves the right to approve or deny the license based upon the failure of any applicant to establish to the satisfaction of the Village any requirement, standard or goal of the ordinance. The applicant understands this determination may involve a subjective interpretation of the application and whether the applicant has demonstrated satisfaction of the applicable standards and criteria. Any license granted by the Village is conditional upon all conditions established by applicable code, ordinance or rule including, without limitation, the State of Michigan granting a state license for the specific license applied for under this application. By submitting and signing this application, the applicant acknowledges and accepts that licensure and regulation of Marihuana Establishments and Facilities represents a new and evolving area of law and commerce that presents entrepreneurial risks and uncertainties regarding the state and local regulatory process, a risk that the applicant fully accepts and assumes. Applicant further consents to Village Officials making periodic entry upon and/or inspection of the proposed facility/establishment premises for purposes of processing this application or implementing any provisions of applicable codes and ordinances.

**\*Ten (10) paper copies and one (1) electronic copy of the application and all attachments are required at the time of application submittal in order to be considered for issuance of a license.**

**SECTION A- GENERAL – OFFICE USE ONLY**

1. Type of License(s) Requested (check all boxes that apply):

- Marihuana Grower
- Marihuana Processor
- Marihuana Secure Transporter
- Marihuana Safety Compliance Facility
- Marihuana Retailer

Name of Applicant: \_\_\_\_\_

Location/Address: \_\_\_\_\_

Applicant is in financial default to the Village.

- Yes       No

2. Date and Time of Application:

(a) Submitted: Date: \_\_\_\_\_ Time: \_\_\_\_\_

(b) Reviewed: Date: \_\_\_\_\_

3. Initial Application shall include nonrefundable \$5,000 operating license fee for each license applied for.

- \$5,000.00 Non-Refundable Operating License Application Fee per license paid on: \_\_\_\_\_
- \$5,000.00 Renewal Application Fee per license paid on: \_\_\_\_\_

**SECTION B- APPLICANT**

4. Name of Applicant: \_\_\_\_\_  
 Authorized Signer (if not an individual): \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Sole Proprietor  Partnership  Corporation

Limited Liability Company  Other: \_\_\_\_\_

5. If entity is Sole Proprietor, state Owner/Proprietor's date of birth: \_\_\_\_\_ and provide a copy of photo identification.

6. If other than Sole Proprietor, list name, address, and date of birth of all owners and provide copies of photo identification and percentage of ownership.

	Name	Address	Date of Birth	% of Ownership
1.				
2.				
3.				
4.				

7. Whether the Applicant and/or proposed Village Licensee or any investor in the proposed Marihuana Facility has an interest in any other Marihuana Facility or Establishment and, if so, the type and location of each facility/establishment. Include the corresponding state registry/identification number.

\_\_\_\_\_  
 \_\_\_\_\_

8. Has the applicant been pre-qualified by the State of Michigan? If so, state the date of pre-qualification and attach a copy of the state issued notification of pre-qualification.

\_\_\_\_\_

9. For any corporation or other legal entity who has a financial interest or affiliation with the applicant, please state the following:

Name: \_\_\_\_\_

Name of Authorized Signer: \_\_\_\_\_

Address: \_\_\_\_\_

Interest or Affiliation: \_\_\_\_\_

10. Name of proposed facility/establishment:

\_\_\_\_\_

11. Location of proposed facility/establishment:

\_\_\_\_\_

12. Facility/Establishment type applying for:

- Marihuana Grower
- Marihuana Processor
- Marihuana Secure Transporter
- Marihuana Safety Compliance Facility
- Marihuana Retailer

13. Attach a scaled drawing of the site including depiction of all buildings, structures, parking, outdoor storage or processing facilities including the following:

- i. Detailed description of any proposed or anticipated improvements to the proposed site, facilities or buildings;
  - ii. A description of waste disposal procedures, methods and facilities for marihuana waste products including, but not limited to, usable and non-usable marihuana;
  - iii. A description of any proposed signs including a detailed depiction of sign language or displays, dimensions, locations, quantity, configuration, and illumination.
- Attach as Exhibit "A"

- Document(s) attached

If not attached, why not and when is applicant expected to supplement: \_\_\_\_\_

\_\_\_\_\_

<b>SECTION C- FACILITY LOCATION</b>
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14. With respect to the location of the facility/establishment, please state with specificity the exact location, address, suite number and, if necessary, the location of the facility within a building or parcel of land. This location should include the distance in feet from each property line.

Attach as Exhibit "B"

- Document(s) attached

If not attached, why not and when is applicant expected to supplement: \_\_\_\_\_

\_\_\_\_\_

15. Please provide evidence of the Applicant's property interest in the proposed facility/establishment premises and a copy of any deed, lease, rental or purchase agreement evidencing the applicant's interest. Provide copies of documentation showing a legal and enforceable property interest. Attach as Exhibit "C".

Document(s) attached

If not attached, why not and when is applicant expected to supplement: \_\_\_\_\_

16. Identification of the License applied for (e.g. grower, processor, etc.) and a detailed description of all services, products, items, uses, operations or merchandise produced, sold, offered, conducted or provided by the proposed Facility/Establishment:

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17. Does the proposed facility/establishment comply with all applicable zoning requirements? State how and/or identify any zoning approvals and/or variances that may be required. Attach documentation confirming current Village site plan zoning approval for the site.

Attach as Exhibit "D".

Documents attached, if not attached, why not and when is applicant expected to supplement:

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18. Please identify the zoning district of the facility/establishment:

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19. List all current State Operating Licenses to operate any Marihuana Facility and/or Establishment at the proposed facility/establishment location including the date of each State approval and the name of each state licensee. Attach copies of all current State Operating Licenses pertaining to the proposed location.

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20. Describe in detail the legal relationship, if any, between the applicant and any current state Marihuana facility/establishment licensee operating at the proposed facility/establishment location including, without limitation, contractual relationships, common ownership, landlord/tenant, etc.

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21. List all current Village Operating Licenses and/or Village site plan zoning approvals to operate any Marihuana Facility and/or Establishment at the proposed facility/establishment location including the date of each Village approval and the name of each Village licensee and/or applicant receiving site plan approval. Attach copies of all current Village Marihuana facility/establishment Operating Licenses and/or Village site plan zoning approvals pertaining to the proposed location.

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22. Describe in detail the legal relationship, if any, between the applicant and any current City Marihuana facility/establishment licensee operating at the proposed facility/establishment location including, without limitation, contractual relationships, common ownership, landlord/tenant, etc.

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**SECTION D- FACILITY REQUIREMENTS**

23. When available, submit to the Village a copy of the Applicant's application for a license submitted to the State of Michigan, Department of Licensing and Regulatory Affairs, for each village operating license requested.  
Attach as Exhibit "E".

Document(s) attached

If not attached, why not and when is applicant expected to supplement: \_\_\_\_\_

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24. Is consumption and/or use of marihuana prohibited at the Facility/Establishment?

Yes                       No

If No, describe in detail any proposed consumption/use of marihuana at the facility/establishment

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25. Will all Marihuana related activity (i.e. sales, display, processing, growing, etc.) be done indoors?

Yes                       No

If No, describe in detail any proposed outdoor Marihuana related activity



30. When available and prior to the issuance of any permit, the Applicant must submit all necessary building, electrical, plumbing, and mechanical permits, as well as documented approval by Village of Holly Building Department and Village of Holly Fire Department showing compliance with the International Fire Code and confirmation that the storage of any chemical, herbicide, pesticide and or fertilizer has also been approved.

Attach as Exhibit "G".

Document(s) attached

If not attached, why not and when is applicant expected to supplement: \_\_\_\_\_

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31. In any portion of the structure where the storage of any chemicals such as herbicides, pesticides, and/or fertilizers, do you agree to be subject to inspection and approval by the Village of Holly Fire Department to ensure compliance with the International Fire Code?

Yes                       No

32. Will you ensure that no other uses, other than accessory uses, will be permitted within the same Facility other than those associated with and permitted by an approved state operating license for the facility/establishment?

Yes                       No

33. Please state and/or provide documentation showing the plan that all litter and waste will be properly and safely removed and will not constitute a source of contamination in areas where marihuana is exposed. Further, please include how the applicant will dispose of rubbish so as to minimize the development of odor and minimize the potential for development of waste odor and waste from becoming an attracted, harborage or breeding place for pests. Please include a detailed description of the ventilation system. Attach as Exhibit "H".

Document(s) attached

If not attached, why not and when is applicant expected to supplement: \_\_\_\_\_

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34. Please state how the Applicant intends to avoid excessive noise, dust, vibrations, glare, fumes, or odors detectable to the normal senses beyond the boundaries of the property. Attach as Exhibit "I".

Document(s) attached

If not attached, why not and when is applicant expected to supplement: \_\_\_\_\_

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35. Please provide the plan and supporting documentation showing that all disposal systems for spent water and spent soil have been adequately and safely disposed of and accounted for.

Attach as Exhibit "J".

Document(s) attached

If not attached, why not and when is applicant expected to supplement: \_\_\_\_\_

\_\_\_\_\_

36. Please provide a security and safety plan, and at a minimum showing the facilities surveillance systems and continuous monitoring systems of the entire premise as required by applicable state law and rules.

Attach as Exhibit "K".

Document(s) attached

If not attached, why not and when is applicant expected to supplement: \_\_\_\_\_

\_\_\_\_\_

a) Will the Facility continuously monitor the entire premises with surveillance systems that include security cameras operating 24 hours a day, 7 days a week, every day of the year, and will these recordings be maintained for a period of at least 30 days?

Yes                       No

37. Please state and/or show the exterior signage or advertising identifying the facility.

Attach as Exhibit "L".

Document(s) attached

If not attached, why not and when is applicant expected to supplement: \_\_\_\_\_

\_\_\_\_\_

a) Do you understand and agree that any exterior signage or advertising identifying the Facility as a marijuana facility is regulated by both state and local law and must comply with both state and local requirements?

Yes                       No

38. Is the water service for the proposed facility/establishment existing or new?

\_\_\_\_\_

If proposing new service, have tap fees been paid? (Attach supporting documentation)

Yes                       No

39. Is the sewer service for the proposed facility/establishment existing or new?

\_\_\_\_\_  
 If proposing new service, have tap fees been paid? (Attach supporting documentation)

Yes       No

40. State the total costs of all non-facility specific improvements (examples of non-facility specific improvements include new building/addition, exterior landscaping/lighting, parking lot improvements, etc. Examples of facility specific improvements would include plumbing/electrical improvements for grow/processing/sales, display/storage cabinets, etc.). Attach an itemized copy of contractor estimate for proposed improvements.

\_\_\_\_\_

\_\_\_\_\_

41. Is the proposed facility within 500 feet of either a school or house of worship?

Yes       No

**SECTION E- BUSINESS OPERATIONS AND SECURITY**

42. Active Hours of Operations:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<b>Open</b>							
<b>Close</b>							

43. Will security guards be provided?      If yes, how many? \_\_\_\_\_

Yes       No

44. Days and Hours security guards will be provided:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<b>24 Hrs. *</b>	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
<b>Start</b>							
<b>Finish</b>							

\*If any day is not 24 hrs., please enter Start and Finish times.

**SECTION F- BACKGROUND**

45. Have you previously or currently operated in this Village or any other County, Municipality, or State under a Recreational Marihuana License or Permit?

Yes       No

If yes, attach copies of all previous licenses/permits.

46. Have any of the previously issued licenses or permits mentioned above been revoked or suspended?

- Yes  No

If yes, provide an explanation for the revocation/suspension below.

47. Is the Applicant or Authorized Signer currently licensed by any governmental agency to engage in any business?

- Yes  No

48. If yes to questions 45, 46 or 47, please list each such license or permit held, the municipality or state in which it is held, and expiration date thereof.

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49. Has the Applicant or any stakeholder been convicted or incarcerated for a felony within the past ten (10) years or ever been convicted of an illegal substance related felony or any state law or ordinance regulating marihuana?

- Yes  No

If yes, list the associated criminal case number(s), the statute(s) violated, the date(s) of conviction, the date(s) of imposition of probation and/or parole, and the name and address of the sentencing court.

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**I HEREBY CERTIFY UNDER OATH AND PENALTY OF PERJURY THAT ALL THE INFORMATION CONTAINED IN THIS APPLICATION IS COMPLETE, TRUE AND ACCURATE. I UNDERSTAND THAT ANY OMISSIONS OR INACCURATE INFORMATION OF THE APPLICANT, MY AGENTS OR EMPLOYEES WILL DISQUALIFY MY APPLICATION FROM CONSIDERATION. I FURTHER CERTIFY I HAVE LEGAL AUTHORITY TO MAKE APPLICATION FOR THE PROPOSED MARIHUANA FACILITY LICENSE(S) AT THE PROPOSED LOCATION.**

Applicant's Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

An application shall also be signed and dated by the property owner, or his/her duly authorized agent, of the premises where the proposed Marihuana Facility/Establishment will be located certifying that the property owner has reviewed and been provided with a complete copy of the application and consents to use and occupancy of the premises as a Marihuana Facility as described and referenced in the application. Execution of an application by a property owner merely confirms consent to the proposed use and neither creates nor conveys any property right, expectancy or interest to use or occupy the premises by the Applicant.

If needed additional signatures:

\_\_\_\_\_  
Print Name: \_\_\_\_\_  
Title: \_\_\_\_\_

\_\_\_\_\_  
Print Name: \_\_\_\_\_  
Title: \_\_\_\_\_

## **LIST OF DOCUMENTS TO PROVIDE WITH APPLICATION**

(Where applicable, an attached document(s) may satisfy more than one requested document. If so, please identify the appropriate responsive Exhibit or document in the space provided.)

### **Application Documents**

**Exhibit A & B:** Floor plan or drawings to scale and elevations as required by the Village of Holly location plan showing surrounding area as required.

**Exhibit C:** Copy of Proof of Ownership, Purchase Agreement, Lease, or options for the site where the Marihuana Facility will be operated. (If leased, signed document by owner consenting of the lease to the site for a Marihuana Facility).

**Exhibit D:** Copy of map and/or other documents in response to question 15.

**Exhibit E:** Copy of the Applicant's application for license submitted to the State of Michigan, Department of Licensing and Regulatory Affairs.

**Exhibit F:** Copy of operations statement, plan and or outline showing facility activities shall occur indoors and in locked building.

**Exhibit G:** Copy of all necessary building, electrical, plumbing and mechanical permits if available.

**Exhibit H:** Copy of plan for litter and waste removal and detailed description of ventilation system.

**Exhibit I:** Copy of plan to avoid excessive noise, dust, vibrations, glare, fumes or odors.

**Exhibit J:** Copy of plan and supporting documents showing disposal of spent water and soil safety plan.

**Exhibit K:** Description of a security and safety plan.

**Exhibit L:** Any proposed text or graphical materials to be shown on the exterior of the proposed facility.

### **Additional Documents**

1. Copy of Articles of Incorporation or Limited Liability company or Partnership Agreement or assumed name certificate.
2. Copy of Internal Revenue Service SS-4 EIN confirmation letter.
3. Copy of Operating Agreement for LLC or Bylaws of Corporation or Partnership.
4. Executed Affirmation of Stakeholder

**AFFIRMATION OF STAKEHOLDERS, AGENTS OR EMPLOYEES**  
**FOR MARIHUANA FACILITY**

1. I \_\_\_\_\_ make this affirmation in support of the  
Application for a permit with the Village of Holly for a Marihuana facility located at \_\_\_\_\_  
\_\_\_\_\_.
  
2. I affirm that I
  - a. That I am at least 21 years of age.
  - b. Have never been indicted or charged with or arrested for, convicted of, plead guilty, or nolo contendere to a felony or to a controlled substance related misdemeanor.
  
3. I hereby authorize the Village of Holly to perform a criminal background check and have attached a copy of my driver's license.
  
4. I have not previously had a business license permit or registration denied or revoked or suspended by the Village of Holly.

Dated: \_\_\_\_\_

Print name: \_\_\_\_\_