

REGULATED CANNABIS BUSINESS LICENSE OATH OF APPLICANT

Each Owner with 10% or greater financial interest must complete and sign.		
Check Cannabis Application Type:		
□ New Business License □ Renew a Business License		
□ Transfer of Ownership	er of Ownership	
License Type:		
Retail Store	□ Retail Testing Facilit	hy
□ Co-Located Medical and Retail \$	0	•
□ Co-Located Medical and Retail Testing Facility		
I declare that this entire application packet, including the state application on which the City will rely, statements, and attachments are true, correct, and complete to the best of my knowledge. I am voluntarily submitting this application to the City of Grand Junction under oath and with full knowledge that I may be charged with offering a false instrument for recording, pursuant to C.R.S. 18-5-114, perjury, pursuant to C.R.S. 18-8-501, <i>et seq.</i> or other crimes of deception for intentional omissions and misrepresentations. I understand that any error or omission may constitute grounds for the denial of a license, or if later discovered, the revocation or nonrenewal, of any license issued and the loss of any placeholder issued during the random selection process.		
Authorized Signature:	Title (owner, manager, director, etc.)	% Ownership:
Printed Name:	Business (dba):	Date:
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STATE OF ______)
COUNTY OF ______)

Subscribed and sworn to before me this _____ day of _____, 20__.

My Commission Expires: _____

Notary Public Signature

Office of the City Clerk, 250 North 5th Street, Grand Junction, CO 81501, 970-244-1509 GJCBL Form #0003 Effective 05/08/2022