CITY OF WAYE, WAYNE COUNTY, MICHIGAN

APPLICATION DATE	
PERMIT NO	

APPLICATION FOR PERMIT COMMERCIAL MEDICAL MARIHUANA FACILITY

	MENTE MEDICAL MANITORNAL PROJECT I
Submit three (3) physical copies to Wayne City Hall an required materials to the City at cityclerk@cityofwayne Application for (check one): New permit for Commercial Medical Marihua Renewal permit for CMMF	
owners, directors, officers, and managers of the propapplication) Name	mes, home addresses, and personal phone numbers for all nosed CMMF are required and must be attached to this
AddressEmail	
Legal Interest in Subject Property	
Subject Property Owner Name	Phone
Proposed CMMF will operate within (check one): ☐ A structure or structures pre-existing on the second of the sec	ng issuance of a Permit
Before the City will consider the Application for a CMM application form, pay all fees and attach ALL of the foll	IF Permit, the Applicant(s) must complete this owing documentation:
☐ If the proposed Permit Holder is a corporation any other entity other than a natural person, a 1. Documentation indicating its legal sta	

- 2. Copy of all company formation documents (including amendments)
- 3. Proof of registration with the State of Michigan
- 4. Certificate of Good Standing

 All documentation showing the proposed Permit Holder's valid tenancy, ownership or other legal interest in the proposed Permitted Property and Permitted Premises. If the Applicant is not the owner of the proposed Permitted Property and Permitted Premises, a notarized statement from the owner of such property authorizing the use of the property for a CMMF.										
Copies of a valid, unexpired driver's license or state issued ID for all owners, directors, officers an managers of the proposed Facility.							rs, officers and			
Evidence of a valid sales tax license for the business if such a license is required by state law or local regulations.										
\$5,000 non-refundable Application fee, which will not be refunded under any circumstances.							ances.			
Business and Operations Plan, showing in detail the CMMF's proposed plan of operation, includin without limitation, the following:							tion, including			
1. A security plan meeting the requirements of Wayne City Ordinance Authorizing and Permitting CMMFs.								zing and		
2.	A descrip	otion of these.	he typ	e of Faci	lity prop	osed and the	anticipa	ted or	actual nu	ımber of
3.						to be sold, if a				
4.	A list of l	Material I for use i	Safety in the (Data Sh CMMF.	eets for	all nutrients,	pesticid	es, and	other ch	nemicals
5.	A descrip	tion and	lplan	of all eq	uipment	and method:	s that w	ill be e	mployed	to stop
	any impa detectabl	ct to adj e from oi	acent utside	uses, inc of the Pe	luding a	plan to ensu	re that r	o odor	or noise	will be
6.						l related byp	roducts	that wi	ill be use	d at the
An identesting,	ntification transporti	of any b	usines e of M	s that is arihuana	directly for the F	or indirectly acility.	involve	d in th	e growir	ng, processing,
that has	rcial licens s been deni nd circums ewal, inclu	e or cert ied, restr tances c	ificate icted, : onceri	issued b suspend ning the	y a licen: ed, revok applicat	sing authority ed, or not rer ion, denial, r	in Mich newed a estrictio	nigan on nd a st n, susp	r any oth atement pension,	granted any er jurisdiction describing the revocation, or he reason for
A site p	lan and int by a Michig	erior floo an regist	or plai ered a	n of the l rchitect,	Permitte surveyo	d Premises ar or professio	nd the Po	ermitte neer.	d Proper	ty signed and
operate	nent provious or has interesting interesting the mean transferesting transfere	nterest i	n any	other	jurisdicti	other CMMF on within th	that the	Applic , or an	ant(s) is nother S	authorized to tate, and the
A zonin with the	g map pre applicable	pared by zoning	a reg regula	istered s tions and	surveyor d the app	demonstratir licable distan	ng that t ce requi	he pro rement	perty is i	n compliance led therein.
A co	mpleted	сору	of	their	final	submission	of	the	state	application.

Applicant(s) and Owner(s) Certification:

Applicant(s) and Owner(s) certify that the information submitted in and attached to this application is true and correct to the best of their knowledge. Applicant(s) and Owner(s) acknowledge and agree that: (1) it is their sole responsibility to comply with the requirements of any applicable City of Wayne Ordinance, notwithstanding the signature or approval of any City employee(s) or official(s); (2) The City of Wayne is not bound to recognize the approval or other action of any employees(s) or official(s) that is not in strict compliance with the applicable City of Wayne Ordinance; and (3) the resulting permit does not give the Applicant(s) or Owner(s) any vested rights to any permit or to any renewal.

Any incomplete applications will be rejected and no refunds will be given.

Signature (Applicant) Print name:	
Signature (Applicant) Print name:	Date
Signature (Owner) Print name:	Date
Signature (Owner) Print name:	Date
THIS SECTION TO BE COMPLETED BY THE C	ITY OF WAYNE
On, 20, the Wayne City Clerk: [] Approved the application subject to the following conditions:	
[] Denied the application for the following reason(s):	
City Manager	Date
City Clerk	Date