All items in the checklist below (except the Letter of Intent) must be completed before an application will be accepted by Utah Department of Agriculture and Food (UDAF). We will attempt to complete reviews of completed applications within 30 days for Cannabis Production Establishment Board. However, a review may take up to two months to complete. You may be asked to submit additional documentation as needed for the review. Accordingly, UDAF encourages you to apply early to allow adequate time for application evaluation and processing.

The information provided by the applicant for an Medical Cannabis Processing Establishment must fit with in the following Guidelines:

A. No more than 100 pages, information provided must be clear and concise;
B. Organized to ensure that each question answered conforms to the same order as asked;
C. Everything in the Application is contained in a single PDF document.

1. The applicant understands that as an applicant and potential licensee you are required to know the current statutory law, administrative rules and Departmental policies and comply in full? Yes ☐ No ☐
2. A non-refundable application fee: $1250.00
3. Criminal History Background Documents:
   A. Electronic Fingerprints (instate applicants) or Fingerprint card (out of state applicant). Signed” Informed consent waiver” form.
   B. FBI Background fees: $51.50 for all officers, directors, and owners who have a financial or voting interest of 2% or greater in the proposed cannabis production establishment; or the power to direct or cause the management or control of a proposed cannabis production establishment
   C. Background Receipt (See background instructions)
4. Ownership / Management information, Utah Code 4-41a-204(b)
   A. Descriptions of the credentials and experience of each officer, director, and owner and prospective employee who have a financial or voting interest of 2% or greater in the proposed cannabis production establishment; or the power to direct or cause the management or control of a proposed cannabis production establishment
   B. A description of any investigation or adverse action taken by any licensing jurisdiction, government agency, law enforcement agency, or court in any state for any violation or detrimental conduct in relation to any of the applicant’s cannabis-related operations or businesses.
5. Processing Information
   A. Tier 1 Processor ☐ B. Tier 2 Processor ☐ C. Products ☐ D. Methods and equipment ☐ E. Sanitation ☐ F. Sanitation ☐ G. Emergency Procedures
6. Operating plan, Utah Code 4-41a-204
   A. blueprint of the facility containing square footage and locations of:
      the areas where cannabis is to be extracted; the areas where cannabis or cannabis products are to be packaged and labeled; the areas where cannabis products are manufactured; store rooms for cannabis awaiting extraction; store rooms for cannabis awaiting further manufacturing; the area where finished cannabis and cannabis products are stored; the toilet facilities and hand washing facilities; a break room and location of personal lockers; the areas to be used for loading and unloading of cannabis and cannabis products; and the total square footage of the overall cannabis processing facility.
   B. Employee training standards
   C. Security plan
   D. Inventory control system
   E. Storage protocols
   F. Sample transport and transfer plan
   G. Waste disposal plan
7. Obtain a performance bond of at least $50,000 with a surety authorized to transact surety business in the State
8. Proof of Registration as a Manufactured Food Establishment with the UDAF’s Food’s Regulatory Services.
9. Copy of current local business license or letter of intent from the county/municipality.
Medical Cannabis Processor Facility is multi-tiered:
(a) A tier 1 processor license allows the licensee to receive cannabis from a licensed cannabis cultivation facility or to accept THC or THC byproducts from a Utah licensed cannabis processing facility or industrial hemp processor and process, manufacture, dry, cure, package, and label cannabis and cannabis products for sale or transfer to another cannabis processing facility, a medical cannabis pharmacy.
(b) A tier 2 processor license allows the licensee to receive cannabis from a licensed cannabis cultivation facility or a cannabis processing facility to package and label cannabis and cannabis products for sale or transfer to another cannabis processing facility, a medical cannabis pharmacy.

### Ownership Information

1. Ownership Entity:

| Entity Type: | Individual ☐ | Partnership ☐ | Corporation ☐ | Limited Liability Company ☐ |

2. DBA: (assumed name of business)

3. BusinessAddress:

   STREET

   CITY

   STATE

   ZIP

4. Mailing Address:

   (IF DIFFERENT)

   STREET

   CITY

   STATE

   ZIP

5. Business Phone: ______________ Fax: ______________ Other/office: ______________

6. Contact Person: ______________ Phone number: ______________ Email: ______________

7. Manager: ______________ Phone number: ______________ Email: ______________

8. Other industrial hemp and/or medical cannabis licenses currently or previously held by applicant/entity/principals: ______________

### Ownership/Management and Employee Information

List the name and address of the owners, officers, & directors of the Medical Cannabis Processing establishment. Include, on a separate sheet, a description of the credentials and experience of each officer, director, and owner who has a financial or voting interest of 2% or greater in the proposed cannabis production establishment, as well as any prospective employees; or the power to direct or cause the management or control of a proposed cannabis production establishment, as well including check. All individuals listed as owner/directors must be 21 years or older.

<table>
<thead>
<tr>
<th>NAME</th>
<th>COMPLETE HOME ADDRESS</th>
<th>POSITION HELD</th>
<th>DATE OF BIRTH</th>
<th>FINGERPRINTS SUBMITTED</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>CITY,STATE, ZIP</td>
<td></td>
<td>mm/dd/yy</td>
<td>Y/N</td>
</tr>
</tbody>
</table>
10. Application for: Tier 1 [ ] Tier 2 [ ]

11. Provide the procedures for each of the processes that the proposed processing facility plans to encompass:
   (Select all that apply)
   - [ ] Drying
   - [ ] Trimming
   - [ ] Curing
   - [ ] Extraction
   - [ ] Refinement
   - [ ] Formulation
   - [ ] Packaging
   - [ ] Labeling
   - [ ] Other: __________________

12. Provide the standard operating procedures for the cannabis processing facility extraction process. Detail the intended cannabis processing practices, including the cannabis processing facility’s intended:
   A. Variety of cannabis products produced;
   B. Cannabinoid extraction method(s) and cannabinoid extraction equipment;
   C. Processing equipment and processing techniques;

13. Provide the sanitation and manufacturing safety procedures for items for human consumption. Explain how the Standard Operating Procedures will meet the requirements of R68-28-5 Cannabis Extraction Requirements.

14. Provide all written emergency procedures to be followed in case of fire, chemical spill and other emergencies.

15. Date open for business (projected): _______________ Days / hours of operation: ________________________

16. Is the location of the processing facility in a municipality’s industrial, agriculture zone or not zoned? ______

17. Proposed location physical address: ______________________ GPS coordinates: ______________________

18. Submit, on a separate sheet, physical characteristics of the proposed facility, including a floor plan and an architectural elevation. Explain in detail the proposed medical cannabis processing facility’s:
   A. square footage of the areas where cannabis is to be extracted;
   B. square footage of the areas where cannabis or cannabis products are to be packaged and labeled;
   C. square footage of the areas where cannabis products are manufactured;
   D. square footage and location of store rooms for cannabis awaiting extraction;
   E. square footage and location of store rooms for cannabis awaiting further manufacturing;
   F. area where finished cannabis and cannabis products are stored;
   G. location of toilet facilities and hand washing facilities;
   H. location of a break room and location of personal lockers;
   I. location of the areas to be used for loading and unloading of cannabis and cannabis products; and
   J. total square footage of the overall cannabis processing facility

19. Proximity: List any public or private school, a licensed child-care facility or preschool, a church, a public library, a public playground, or a public park located within 1000 feet by pedestrian travel to the proposed establishment; or any district zoned as primarily residential within 600 feet by pedestrian travel to the establishment:
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

20. Provide the proposed medical cannabis processing facility’s employee training standards.

21. Submit the proposed medical cannabis processing facility’s security plan. Explain how the processing facility will operate in a facility that meets all security requirements in Utah Administrative Rule R68-28-6.

22. Describe the medical cannabis processing facility’s inventory control system; include a description of how the inventory control system is compatible with the state electronic verification system. Detail the procedures the cannabis processing facility will employ to meet the Inventory Control System requirements of Utah Code 4-41a-103 Inventory Control System and Utah Administrative Rule R68-28-7 Inventory Control.

23. Provide the proposed medical cannabis processing facility’s storage protocols, both short and long-term, to ensure all cannabis is stored in a manner that is sanitary and preserves the integrity of the cannabis.

24. Provide the proposed medical cannabis processing facility’s written plan and procedures to handle potential recalls and destruction of cannabis because of contamination;
25. Submit the procedures documenting how the cannabis processing facility will dispose of excess and medical cannabis waste in compliance with federal and state laws.

26. Provide the facility’s plan and procedures to have a representative sample of cannabis and cannabis tested by an independent cannabis testing laboratory to determine if the product is safe for human consumption.

Compliance

27. Detail the procedures the medical cannabis processing facility will employ to meet the transport and transfer requirements of Utah Code 4-41a-404 “Cannabis, cannabis product, or medical cannabis device transportation” and Utah Administrative Rule R68-28-13. Transportation.

28. Provide proof of a $50,000 performance bond that a surety business in the state issues.

29. Registration as a Manufactured Food Establishment with the UDAF’s Regulatory Services

Applicant understands the requirements for licensure are based on current statute and rule and are subject to change. Applicant agrees as a condition of licensing that he has read and will abide by the provisions of Utah Code 4-41a and all rules promulgated thereunder and all directives of the Utah Department of Agriculture and Food. The applicant also understands that failure to adhere to or maintain the qualifications of their license, may result in suspension or revocation of the license and/or forfeiture of the performance bond or any other remedies allowed by law.

Applicant agrees to immediately notify the department of any change in ownership or financial interest of the facility; the facility’s name, change in location, change in testing methods, equipment, remodeling, expansion, reduction or physical, non-cosmetic alteration of the facility, change in written operating procedures, or change in any information submitted in this application.

The undersigned acknowledges that representatives of the Utah Department of Agriculture and Food may inspect the records and facility of a cannabis production establishment at any time during business hours to determine and ensure the cannabis production establishment is in compliance with the law. Failure to provide the department or the department’s authorized agents immediate access to records and facilities during business hours in accordance with this section may result in a civil monetary penalty; license or registration suspension or revocation; or an immediate cessation of operations under a cease and desist order issued by the department.

Disclaimer

Applicant acknowledges and understands that cultivating, possessing, using, distributing and/or selling marijuana is prohibited by federal law, notwithstanding Utah law or any authorizations in the Agent or this Registration to the contrary. Nothing in this Application is intended to provide any guidance or assistance in violating or complying with existing federal laws regulating marijuana cultivation, distribution, or use. Similarly, compliance with state law or the terms of this Registration, or possession of the registration card does not confer immunity from enforcement of federal law or federal enforcement practices. Further, nothing in this Application or the Registration Card shall be construed as advice with regard to compliance with applicable federal, state, or local tax laws or any regulatory consequences of engaging in any business in this industry.

The undersigned acknowledges that he/she has read and understands the statements herein and the execution thereof is done voluntarily and by the authorization of the applicant entity.

The undersigned hereby makes application to the Utah Department of Agriculture and Food and certifies that the information contained herein and attached here is true and correct.

If selected for a license, applicant agrees to pay the required license fee ($100,000 tier 1 or $35,000 Tier 2) within 30 days of being notified of licensure decision.

________________________________________           __________________________
Applicant/Owner of business                     Title/Position

__________________________________________
Applicant Signature                            Date