



REGULATED CANNABIS BUSINESS LICENSE
PROPERTY AUTHORIZATION FOR CANNABIS BUSINESS

Business Name (dba)
Physical Address of Business:

As owner of the real property described above, I hereby consent to the use of my property for the purpose of conducting a regulated cannabis business so long as said use is authorized under and in accordance with applicable state and local laws.

- Retail Marijuana Store, Medical Marijuana Store, Co-Located Medical and Retail Marijuana Store, Retail Marijuana Testing Facility, Medical Marijuana Testing Facility, Co-Located Medical and Retail Marijuana Testing Facility

I understand the lessee must operate the business on the property (addressed above) under the provisions of the Grand Junction Municipal Code/Cannabis Licensing Code. I further understand sufficient measures and means of preventing the escape or emission of any gas, vapors, odors, smoke, dust, heat, or glare from exiting the business must always be provided.

If the store or facility type is changed, for example a Retail store applies for a Co-located medical store, then the City will presume that my consent has been revoked and a new application together with my consent for the changed store or facility type will be required.

In exchange for good and valuable consideration, the receipt and adequacy of which is hereby acknowledged, I hereby release the City its officers, elected officials, employees, attorneys, and agents from all liability for all claims and demands, or causes of action of any kind whatsoever, present or future, in any way relating to or arising from the conduct of the lessee/licensee's business operation on said property.

Signature of Property Owner

Date

Printed Name of Property Owner

Property Owner Company Name (if applicable)

STATE OF )
)ss.
COUNTY OF )

The foregoing instrument was acknowledged before me this \_\_\_ day of \_\_\_, 20\_\_\_, by

My commission expires: Notary Public: