

APPEAL OF DENIAL OF CANNABIS BUSINESS LICENSE APPLICATION

Complete the information in the spaces below referencing and attaching a copy of the Retail Cannabis License Application letter (Denial Letter) sent to the Applicant by the City. To be valid the form must be signed, dated, and received by the City Clerk within 10 days of the date of the Denial Letter.

The appeal request shall include any legal and factual support for the appeal. If the Application was denied for more than one reason the appeal request must include legal and factual support for each reason the Application was denied.

Applicant (include the name and relationship to the Application of the person completing the form if other than the Applicant)
Mailing Address 322 N 6th St # 2
city Grand Junction
State
zip <u>&\50\</u>
E-mail <u>alaameen, a</u> <u>@ gmail.com</u>
Reason for denial (from Denial Letter):
property lease, proof of finger prints, financial contributions floor plan, page two Natural Persons, Marijana Finango of Suitability Application.
Legal and factual support for the appeal of denial:
These items were all included in the clerk application and zoing approval package
(Additional pages are allowed.)

Alaameen Abdool	
Applicant Name	
Applicant Signature	July -5-2022
Applicant Signature	Date
Signature of Authorized Representative of Applicant and Capacit	ty Date

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