TOWN OF OLD ORCHARD BEACH ADULT USE MARIJUANA BUSINESS LICENSE APPLICATION (Revised 8.2023)

Applicant: All items identified in Sections 1-6 must be completed. All supporting documentation must be included when submitting this application.

Applications may only be submitted in-person. Applications will not be accepted by Town Staff in any manner (e.g., hand delivered, electronic, mail, fax) before or after the application acceptance period published dates and times.

Application Fee (Nonrefundable): \$500.00 Please make checks payable to Town of Old Orchard Beach

SECTION 1 – PROPOSED LOCATION AND PROPERTY OWNER INFORMATION
Property Address: MBL:
Property Owner Name:
Property Owner Mailing Address:
Property Owner Phone Number: Email:
SECTION 2 – GENERAL PROJECT/BUSINESS AND PROPERTY DESCRIPTION Project/Business Description:
New Construction or Rehabilitation (Describe):
Zoning District: Property Size (Sq. Ft. & Acres): Parking Spaces: Current/Prior Use:
Building Sq. Ft. Total: Building Sq. Ft. Occupied Space:
Is the proposed Adult Use Marijuana store total Land Units, as listed on the parcel's Vision Property Card under Land Line Valuation and maintained by the Town, equal to or less than 21,780 sq. ft.? (Yes or No)
Is the proposed Adult Use marijuana store total Eff. Area, as listed on the parcel's Vision Property Card under Building Sub-Area Summary Section and maintained by the Town, equal to or less than 1,000 sq. ft.? (Yes or

SECTION 3 – APPLICANT INFORMATION	
Business Name:	
DBA:	
Submit the following: DBA registration documents.	
If Individual: Legal Name:	
Mailing Address:	
Phone Number: l	Email:
Submit the following: proof individual named is at least 21 year	rs of age.
If Partnership: Legal Name:	
Names of all Partners:	
Describe Partnership (General or Limited):	
Mailing Address:	
Phone Number: 1	Email:
Submit the following: copy of the partnership agreement and pr	roof all partners are at least 21 years of age.
If Corporation: Legal Name:	
Date of Incorporation:	
Mailing Address:	
	Email:

Submit the following: evidence showing the corporation is in good standing under State law, names and capacity of all officers, directors and principal stockholders, the name of the registered corporate agent, the address of the registered office for service of process, and proof that all officers, directors and principal stockholders are at least twenty-one (21) years of age.

If Limited Liability Company: Legal Name:	
Date of Establishment:	
Mailing Address:	
Phone Number:	Email:
Submit the following: evidence that the LLC is in good stamembers, a copy of its operating agreement, if any, the add proof that all members are at least twenty-one (21) years of	lress of its registered office for service of process, and
SECTION 4 – AFFIRMATION AND SIGNATURES	
Please read carefully and provide hand-written initials.	
I understand and acknowledge that paying the Addoes not authorize me to open that business.	dult Use Marijuana Business License Application Fee
I understand and acknowledge each applicant mu Town, allowing the Town to perform background checks of	· · · · · · · · · · · · · · · · ·
I understand and authorize law enforcement officer's entry onto the premises at reasonable times for the State laws, Old Orchard Beach Code of Ordinances Chapter ordinances and adopted codes.	e purpose of checking compliance with all applicable
I understand and acknowledge that the operation applicable requirements of Old Orchard Beach Code of Article II and XII; Chapter 78, Article VI, Division 8; Ch Maine Statutes.	Ordinances including, but not limited to Chapter 18,
I understand and acknowledge that any license or provided in this application and supporting documentation Section 6, below, will be deemed invalid and subject to rev	identified in Sections $1-3$, above, and Section 5 and
I understand and acknowledge making false st punishable under 17-A MRSA §45.3.	atement in this application is a Class D crime and
Signatures: Applicant and Property Owner must provide si	gnatures and date of signatures.
Applicant Name:	
Applicant Signature:	Date:
Property Owner Name:	
Property Owner Signature:	Date:

SECTION 5 – APPLICATION SUBMITTAL REQUIREMENTS

In addition to documents identified in Section 3 and Section 6 of this license application, the following documents, plans and information shall be included with submission of this license application. All projects require submission of these documents.

- (1) Recent passport-style photograph(s) of the applicant(s).
- (2) The applicant's driver's license.
- (3) A sketch showing the configuration of the subject premises, including building footprint, interior layout with floor space to be occupied by the business, and parking plan. The sketch must be drawn to scale with marked dimensions.
- (4) Copies of all State approvals or conditional approvals required to operate the Adult Use Marijuana Business, including, but not limited to a State License as defined in this article.
- (5) The location of the proposed Adult Use Marijuana Business, including a legal description of the property, street address, and telephone number. The applicant must also demonstrate that the property meets the zoning requirements for the proposed use.
- (6) If the applicant has had a previous license under Ch. 18, Art. XII, or other similar Marijuana Business, as licensed under 28-B M.R.S.A. Chapter 1, in another municipality in Maine, in the Town of Old Orchard Beach, or in another state denied, suspended or revoked, they must list the name and location of the for which the license was denied, suspended or revoked, as well as the date of the denial, suspension or revocation, and they must list whether the applicant has been a partner in a partnership or an officer, director, or principal stockholder of a corporation that is permitted/licensed under this article, whose license has previously been denied, suspended or revoked, listing the name and location of the Marijuana Establishment for which the permit was denied, suspended, or revoked as well as the date of denial, suspension or revocation.
- (7) If the applicant holds any other permits/licenses under this article or other similar Marijuana Business, as licensed under 28-B M.R.S.A. Chapter 1, from another municipality in Maine, the Town of Old Orchard Beach, or State the applicant shall provide the names and locations of such other permitted/licensed businesses, including the current status of the license or permit and whether the license or permit has been revoked.
- (8) Completion of applicable release forms, supplied by the Town, allowing the Town to perform background checks of each applicant.
- (9) The type of Adult Use Marijuana Business for which the applicant is seeking a license and a general description of the business including hours of operation.
- (10) Proof of ownership of the property on which the Adult Use Marijuana Business will be located or, in the event the applicant is not the owner, the license application must be accompanied by a notarized statement and consent from the owner of the property acknowledging that a Adult Use Marijuana Business may be located on the property. If the property is leased or rented, the license application must be accompanied by a copy of the signed lease or rental agreement pertaining to the property or structure in which the Adult Use Marijuana Business may be located. In addition to the above, the applicant shall provide the name and mailing address of the owner of record of the property or structure.

- (11) A copy of a map depicting all property boundary lines and land uses on each property within one thousand (1,000) feet of the Adult Use Marijuana Business property boundary lines.
- (12) A business plan which shall include responses to the following:
 - a) Owner qualifications.
 - b) A budget for construction, operations, and maintenance.
 - c) Hours of operation and opening and closing procedures.
 - d) Daily operations, including, but not limited to customer check in procedures; location for receiving deliveries; estimate of number of customers per day; products to be sold; parking availability and location.
- (13) A neighborhood compatibility plan which shall include responses to the following:
 - a) How the Business will proactively address and respond to complaints.
 - b) How the Business will be managed so as to avoid becoming a nuisance or having impacts on its neighbors and the surrounding community.
- (14) A safety plan which shall include responses to the following:
 - a) The safety plan shall consider all possible fire, medical, and hazardous situations.
 - b) Accident and incident reporting procedures.
 - c) Evacuation routes.
 - d) The location of fire extinguishers and other fire suppression equipment.
 - e) Procedures and training for all fire and medical emergencies.
- (15) A community relations plan which shall describe public outreach and education programs such as youth drug addiction and other actions that directly benefit the community.
- (16) Responses and supplemental documentation answering each of the merit criteria identified in the Marijuana Business Licensing Ordinance Sec. 18-610 (1) and in Section 6 of this application.

SECTION 6 – MERIT CRITERIA

All applicants must provide responses and supplemental documentation answering and supporting answers for each of the following merit criteria. The supplemental documentation shall provide the support which demonstrates how the applicant will comply with their response to the merit criteria.

Merit Criteria	Possible	Applicant
	Points	Score
e.1. The applicant or owners of an applicant that own 30% or more of		
a business applying for a business license are also owners of any		
business for 2 or more consecutive years that (select one and provide		
documentation):		
- Requires municipal and state approvals:	1	
- Requires municipal approvals:	1	
Total Points Possible: 1		

 e.2. The applicant or owners that own 30% or more of a business applying for a business license can document their ability to operate an adult use or medical marijuana store, caregiver retail store or its equivalent with no history of license suspensions or revocations (select all that apply). Operated a compliant adult use marijuana store in Maine for 1 or more years: Operated a compliant medical marijuana caregiver retail store in Maine for 2 or more years: Operated a compliant adult use marijuana or medical marijuana store, caregiver retail store or its equivalent in another State for 2 or more years: Total Points Possible: 6 	2 2 2	
e.3. The property where the proposed adult use marijuana business will be located can be defined as "Use, commercial" as defined in Old Orchard Beach Zoning Ordinance, Sec. 78-1, at the time the license application is submitted or any time within the previous 4 years: Total Points Possible: 2	2	
e.4. Retail sales floor area size (select one). - Proposed business sales floor area (area of licensed sales area open to the public) size of 1,500 sq. ft. of less: - Proposed business sales floor area size more than 1,501 sq. ft. but less than 2,500 sq. ft.: Total Points Possible: 2	2	
e.5. Business incorporates energy efficient elements and green infrastructure (select all that apply). - Applicant will utilize energy efficient lighting indoors and outdoors certified by the U.S. Department of Energy: - Applicant will utilize permeable or pervious asphalt or concrete: - Applicant will utilize an on-site renewable energy source such as solar: Total Points Possible: 3	1 1	
e.6. Applicant provides Maine Registered Traffic Engineer analysis and assessment report demonstrating customer vehicle traffic will not negatively contribute to high crash locations identified by Maine Department of Transportation, 2019-2021 data: Total Points Possible: 2	2	
e.7. Proposal has legal access and use to on-site off-street parking that exceeds town parking requirements identified in Ch. 78, Sec. 1279 (5) by 20% or more: Total Points Possible: 1	1	
e.8. The lot where the adult use marijuana business is proposed to be located does not share a real property boundary line with a lot used for one or more dwelling purposes as of the date of the adoption of these merit criteria: Total Points Possible: 2	2	

e.9. Applicant proposes redevelopment of a building or property that has been vacant for at least twelve consecutive months preceding the date of the adoption of these merit criteria: Total Points Possible: 1	1	
Maximum Total Merit Criteria Points Available	20	
Total Merit Criteria Points Awarded		

Contact: Lice	nsing Administrator: Phone: (207)	937-5615; Email: rhaskell@oobmaine.com	
Office Use On	dy	Application Number:	
Date and Time	Received:	By:	
Date Applicati	on Determined Complete:	By:	
Date Applicati	on Determined Incomplete:	By:	
Application No	ot Reviewed:		
Zoning Check	:	By:	
Fee Submitted	:		
Sign Offs (Ini	tial):		
Licensing:	By:	Date:	
Codes:	By:	Date:	
Manager:	By:	Date:	
Police:	By:	Date:	
Fire:	By:	Date:	
PWD:	By:	Date:	
WWTF:	By:	Date:	
Assessing:	By:	Date:	
Tax:	By:	Date:	
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