CITY OF LONGVILLE
CANNABIS RETAILER REGISTRATION

Business Information	
Applicant Name:	Property Owner Name:
Applicant Address:	Applicant Email:
Applicant Phone:	Parcel ID:
Business Name:	License or Pre-Approved Application Number:
Business Address:	Mailing Address (if different):
Business Phone Number:	Business Email:

Type of Registration (Select one)

NEW		RENEWAL	
	Microbusiness - $0.00		Microbusiness - $1,000
	Mezzobusiness - $500		Mezzobusiness - $1,000
	Cannabis Retailer - $500		Cannabis Retailer - $1,000
	Medical Cannabis Combination - $500		Medical Cannabis Combination - $1,000
	Low-Potency Hemp Edible Retailer - $125		Low-Potency Hemp Edible Retailer - $125

Required Attachments:

- Registration fee (if applicable)
- A copy of a valid state license OR written notice of OCM license pre-approval

I certify that as the applicant, the property listed above is current on all property tax and assessments, and that the business is compliant with all local ordinances.

_____

Applicant Signature Date

_____

Signature of Property owner if different than applicant Date

- OFFICE USE ONLY - - - - - - - - - - - - - - - - -

The applicant named above has paid the appropriate fees, is current on all applicable tax obligations, and is approved and authorized to engage in retail cannabis sales in the jurisdiction named above, contingent upon final state licensing approval.

_____	_____	_____	_____
Signature	Title	Date Approved	Registration #

CITY OF LONGVILLE CONTACT INFORMATION

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