This checklist shall be completed by the applicant and attached to a use permit, building permit, or business license application for cannabis businesses and cannabis testing laboratories. **Incomplete checklists will delay permit processing.**

### BUSINESS AND OWNER INFORMATION

Name of Business  
Name of Business Owner  
Business Address  
Business Phone  
Business Email  

**IF BUSINESS OWNER IS NOT A NATURAL PERSON,** Name of individual authorized to represent the business who may be contacted by the City:

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Mailing Address

### BUSINESS TYPE

- [ ] Sole Proprietorship  
- [ ] Corporation  
- [ ] LLC  
- [ ] Partnership

### OPERATIONAL AND MANAGERIAL EMPLOYEE INFORMATION

Management employees include general managers, shift managers, or any other employees who make operational or management decisions that directly impact the business. (Use additional pages if necessary.)

1. **Name**  
   - Date of Birth  
   - Address  
   - City/State/Zip  
   - Daytime Phone  
   - Email (Opt)

2. **Name**  
   - Date of Birth  
   - Address  
   - City/State/Zip  
   - Daytime Phone  
   - Email (Opt)

3. **Name**  
   - Date of Birth
Address | City/State/Zip
---|---
Daytime Phone | Email (Opt)

(4) Name | Date of Birth
---|---
Address | City/State/Zip
Daytime Phone | Email (Opt)

**BUSINESS PREMISES- PROPERTY INFORMATION**

Street Address
APN(s)
Property Owner
Owner Address
Owner Email
Owner Phone

Zoning District: Select Zoning District
☐ SP-CRO ☐ SCRO-1 ☐ TC-1

**BUSINESS ACTIVITY TYPE (Check all that apply)**

☐ Laboratory Testing (R&D) ☐ Manufacturing ☐ Warehousing ☐ Retail-Delivery

**ON-SITE CANNABIS INFORMATION**

<table>
<thead>
<tr>
<th>Weight (lbs) to be received on property on a daily basis</th>
<th>Weight (lbs) to be stored on property on a daily basis</th>
<th>Weight (lbs) to be transported from property on a daily basis</th>
</tr>
</thead>
</table>
Raw (unprocessed) cannabis | ☐ | ☐ | ☐ |
Processed cannabis/ cannabis products | ☐ | ☐ | ☐ |
ATTACHMENTS
Attach the following documents to this checklist:

☐ **Documentation of Business Organization**
  - Sole Proprietor – Fictitious Business Name Statement (if different than owner’s name)
  - Corporation – Articles of Incorporation and Corporate Bylaws
  - LLC – Articles of Organization and Operating Agreement
  - Partnership – Partnership Agreement

☐ **Live Scans** (for business employees listed on application). Please note the Brisbane Police Department does not offer Live Scans. To search for Live Scan providers throughout the State, please visit [https://oag.ca.gov/fingerprints/locations](https://oag.ca.gov/fingerprints/locations).

☐ **Copy of State License, if Available (or Statement of Which License will be Obtained)**

☐ **State Certificate of Good Standing** for business owner *(the State in which the entity is organized can provide information about how to obtain one)*

☐ **List of All Individuals or Entities that Own the Business**, including their percentage of ownership. If other entities are part of the ownership, provide the same list of ownership for the entity. The goal is to see the underlying ownership by individuals. *The City may require additional documentation at its discretion.*

☐ **City of Brisbane Business License Application** with verification of fee payment.
  
  *Not applicable to Use Permit applications. Business license will be required as condition of approval for Use Permit applications.*

☐ **Written Description of Operations.** A written statement describing the following:
  - Business activity, product, production, and sources.
  - Hours of operation
  - Odor control
  - Visibility of operation
  - Labeling

☐ **Building, Site and Floor Plans**
  - Five (5) sets of plans.
  - Refer to the Use Permit or Building Permit application checklists for complete requirements.

☐ **Stormwater Control**
  - All applications proposing 10,000 square feet or more of new or replacement impervious surfaces on a site must complete the C.3/C.6 Project Checklist.

☐ **Wastewater Pre-Treatment Control (For Industrial Users)**
  - Provide a completed wastewater discharge permit application from the San Francisco Public Utilities Commission.
• SFPUC approval of the wastewater discharge permit is required prior to building permit issuance.

☐ **Description of Water Infrastructure**
  • Expected source of water
  • Level of water use (gallons per day).

  This information must include the business as well as the entire parcel.

☐ **Security Plan, Security Measures and Security Breach Response**
  • Describe and document a 24/7 Security Plan.
  • Address security measures and responses to security breaches.

☐ **Fees**
  • Use permit, building permit, or business license application fee; refer to the master fee schedule.

**BUSINESS OWNER**

By signing below, I(we) expressly
  • consent to entry and inspection of the premises by the City of Brisbane Building Official, or designee, upon reasonable notice;
  • acknowledge that a building permit does not authorize nor provide immunity or defense to any activity prohibited under federal law, statute, rule or regulation; and
  • hereby release, indemnify and hold harmless the City of Brisbane, and its agents, officers, elected officials, employees and contractors from losses of any kind resulting from this building permit and/or use permit application.

I(we) certify under penalty of perjury that the information submitted in this application, including all supporting documents and materials is, to the best of my(our) knowledge and belief, true, accurate, and complete. I(we) further certify that I(we) am(are) authorized to sign this application and thereby bind the applicant and all of applicant’s owners to compliance with all permit conditions.

__________________________________  _______________________
Business Owner Signature                     Date

____________________________________________________________________
Printed Business Owner Name and Title
PROPERTY OWNER

By signing below, I certify that I have reviewed this application, and approve of the use of the property for the purposes stated in the application. I expressly consent to entry and inspection of the premises by the City of Brisbane Building Official, or designee, upon reasonable notice. I further certify that I am authorized to sign this application.

__________________________________  _______________________
Property Owner Signature  Date

________________________________________
Printed Property Owner Name and Title