



**City of McFarland
Commercial Cannabis Permit
Application
CCP # _____**

Address: _____ APN _____

401 W Kern Ave
McFarland CA 93250
661-792-3091
www.mcfarlandcity.org

Criminal History Record Check Application

CITY OF MCFARLAND PROCESS FOR BACKGROUND CHECK:

Upon receipt of this application and payment of the required fee, Staff will transmit the application to a selected company for further processing and investigation. The information required by the selected company is listed on pages 3-5 of this application. Once the investigator receives the application from the City, you will be contacted and coordination between you and the investigator will occur. You will provide the required information directly to the investigator. Criminal History Record Check and Annual Renewal is required by Section 19.04.230 (k) General Operation Requirement for Commercial Cannabis Business.

APPLICANT INFORMATION - LOCATION OF COMMERCIAL CANNABIS ACTIVITY -NAME OF BUSINESS

Last Name:	First Name:	Middle Name:	Business Name on Application & Address:
Address:	City/State/Zip:	Telephone:	E-mail:

OWNERS DEFINED

Section **19.04.020** Definitions, Subsection aa: "Owner" means any person who has an ownership interest in a commercial cannabis business.

APPLICATION FEES - INITIAL AND ANNUAL REVIEW

\$500.00 Per Owner/Principal

Fee Payment Amount: \$	Date:	Receipt No.:

LIST ALL CANNABIS BUSINESSES OWNED (Including partial ownership) OR OPERATED BY YOU (Use additional sheet as needed)

Business Name:	City/State:	Telephone:	Start Date:	End Date:

STATEMENT UNDER PENALTY OF PERJURY

I declare under the penalty of perjury, under the laws of the state of California and the city of McFarland, that the information included in this application is true and correct to the best of my knowledge.

Applicant Signature	Job Title (Position on the Application)	Date



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CRIMINAL BACKGROUND & CREDIT HISTORY INVESTIGATION RELEASE

I, the undersigned, hereby authorize any and all law enforcement agencies to release, to the City of McFarland, including but not limited to, the City Manager, Chief of Police and any reasonably necessary agents, designees and/or third party consultants (" Authorized Officials"), of any criminal history records or information, which may exist, for the purpose of conducting a background check to determine whether I meet the qualifications required to obtain an commercial cannabis permit as required by Chapter 19.04, of the McFarland Municipal Code. Further, I understand that the release of records or information authorized above may disclose arrests which have not resulted in a criminal conviction and that these records and/or information may be considered by the City of McFarland in determining my eligibility to receive an commercial cannabis permit.

I also hereby authorize the disclosure to and use by the Authorized Officials of my photographs, fingerprints, and the information contained in this application, for the purpose of completing the background check.

In addition, I hereby authorize the Authorized Officials to obtain and review my consumer credit report and/or any other credit- related information for the purposes of conducting the background check. I understand that these records and/or information may be considered by the City of McFarland in determining my eligibility to receive an commercial cannabis permit.

The Authorized Officials may investigate any of the above-referenced records or information as they deem necessary. I agree to cooperate fully and to provide further information as may reasonably be deemed necessary by the Authorized Officials to complete the background check.

I hereby knowingly and voluntarily agree to hold harmless and release from liability the City of McFarland, its officers, employees, agents and representatives from any claims, action(s) or damages whatsoever arising from the use by or disclosure to the Authorized Officials of the above-referenced information for the purposes of completing the background check and determining my eligibility to obtain an commercial cannabis permit as required pursuant to McFarland Municipal Code Chapter 19.04.

I agree to submit any additional and further information as deemed necessary by the City Manager, or designee, in order to process this application.

I hereby affirm and certify that I have reviewed the contents of Chapter Commercial Cannabis Activity of the McFarland Municipal Code, and I acknowledge, understand, and agree to be bound by its terms and conditions.

By signing this form, I acknowledge and agree to comply with all the conditions and terms of this application, the McFarland Municipal Code and State of California rule, regulation or requirement governing recreational or medicinal cannabis. I also acknowledge and understand that providing false or misleading information and/or omitting any information on this application may be grounds for the denial of this application for an commercial cannabis permit and/or the revocation of an already issued commercial cannabis permit.

Applicant Full Name	Signature	Date



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INVESTIGATOR TO PERFORM THE OWNER BACKGROUND CHECK

The City will contract with a investigator that will contact you and will request additional information directly from you. In general, the additional information is listed below. Please provide this information **directly** to investigator.

The following is a list of documents and information required to complete your qualifying background investigation. If one or more of the items listed do not apply to you, please disregard. Please have the following documents at time of interview:

- Driver's License - copy and original
- Social Security Card - copy and original
- Birth Certificate - copy and original
- Marriage Certificate (If your name changed) - copy and original Naturalization Certificate - copy and original
- State of CA Business Entity document and amendments - copy and original IRS EIN document - copy and original
- DD-214 if served in the U.S. Military - copy and original Any Bankruptcy Discharge documents - copy and original
- DMV driver's history from California for 7 years (this must be picked up at a DMV office, not online) DMV driver's history from any state you have lived in for the last 10 years.
- Informed Consent Release & Hold Harmless Form Notarized

All applicants are further required to provide the following business information when applying for a City of McFarland Commercial Cannabis Permit:

1. A description of the statutory entity or business form that will serve as the legal structure for the business and a copy of its formation and organizing documents, including, but not limited to, articles of incorporation, certificate of amendment, statement of information, articles of association, bylaws, partnership agreement operating agreement, and fictitious business name statement.
2. A list of the license or permit types (including license or permit numbers) held by the applicant that involve the operation of a commercial cannabis business, including the date the license or permit was issued and the jurisdiction or State license authority that issued the license or permit. Please include a copy of licenses held.
3. Whether the applicant has been denied a license or permit by the City, any other jurisdiction, and/or the State that involves the operation of a commercial cannabis business. The applicant shall provide a description of the license or permit applied for, the name of the jurisdiction or State license authority that reviewed the license or permit application, and the date of denial.
4. The proposed commercial cannabis business's physical address, telephone number, website and e-mail address.



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5. Financial information including the following:
 - a. A list of funds belonging to the commercial cannabis business held in savings, checking, or other accounts maintained by a financial institution. The applicant shall provide for each account, the financial institution's name, the financial institution's address, account type, account number, and the amount of money in the account. Please provide copies of most current bank statements.
 - b. A list of loans made to the commercial cannabis business. For each loan, the applicant shall provide the amount of the loan, the date of the loan, term(s) of the loan, security provided for the loan, and the name, address, and phone number of the lender. Please provide copies of loan documents.
 - c. A list of investments made into the commercial cannabis business. For each investment, the applicant shall provide the amount of the investment, the date of the investment, term(s) of the investment, and the name, address, and phone number of the investor. Please provide copies of investment documents.
 - d. A list of all gifts of any kind given to the applicant for its use in conducting commercial cannabis business. For each gift the applicant shall provide the value of the gift or description of the gift, and the name, address, and
 - e. phone number of the provider of the gift. Please provide copies of gift documents if available.
6. Ten (10) years of residential history to include the full address including zip code and dates you lived there. Example: 0 1/2000 to 05/2016-123 Main St, Palm Springs, CA 92200 08/1996 to 01/2000-4321 I St, Riverside, CA 90004
7. A list of misdemeanor and felony convictions, if any. For each conviction, the list must set forth the date of arrest, the offense charged, the offense convicted, the jurisdiction of the court, and whether the conviction was by verdict, plea of guilty, or plea of nolo contendere.
8. A list of all contacts you have had with law enforcement as an adult regardless of outcome. Traffic tickets, detentions, code enforcement citations, arrests and convictions. Please include date, location, agency involved and court case number, include outcome of case. If you have documents relating to a case, please provide a copy. Exclude contacts if you were a victim or just a reporting party.

Please verify all information before you submit. If we receive incorrect information, it will be noted in the background investigation report.