

Boulder County Community Planning & Permitting 2045 13<sup>th</sup> Street · Boulder, CO 80302 P.O. Box 471 · Boulder, CO 80306

Phone: 303-441-3930

 ${\bf Email: marijuanalicensing@boulder county.gov}$ 

Website: www.bouldercounty.gov

Received Date:	(For Office Use)		
Staff Initials:			
Staff fillidas.			

## **Boulder County Marijuana License Renewal Application**

Please review the Boulder County Marijuana Licensing Regulations for more information regarding renewal requirements. The information provided in this application is public record.

1. License Information				
License Number(s)				
Expiration Date				
2. Business Information				
Business Name	Trade Name		Estimated Number of Staff	
Physical Address of Business				
City	State		Zip Code	
3. Business Contact Information				
Business Contact Person				
Business Mailing Address				
City	State		Zip Code	
Business Email Address		Business Phone Number		
4. Property Owner(s) Information				
Name			Phone Numbe	er
Mailing Address			Email Address	
City	State		L	Zip
Additional owners' names (if applicable)	ı			

## 5. Changes to Contact Information (if applicable)

	e of Mailing Address			-
Currer	t Mailing Address			
City		State	Zip Code	
New N	Tailing Address			
City		State	Zip Code	
Chang	e of Email Address	,		1
	t Email Address			
New E	mail Address			
Chang	anges of business/trade name, ches Application.	nange of location, and modificat	ions of premise, please use the <b>Rep</b>	ort of
<b>Fees</b> Make	checks payable to <b>Boulder Count</b>	y Treasurer.		
•	Renewal fee – paid for each lic Operating fee – paid for first li		\$800 \$4,000	
•	Accessory License Fee – paid for		\$500	
Chec	dist of Required Document	s		
	Completed Boulder County Re Completed Yearly Sustainabilit Copy of State Marijuana License Copy of State Sales Tax License Current Floor Plan Renewal Fees	y Report se		
A sepa Mariju		gent upon the appropriate State	cense issued by the Boulder County elicensure. The purpose of this appli	
I certif in this and co	application. I certify that the info rrect to the best of my knowledg f entry to inspect the parcel and	ormation and exhibits I have sub ge. I certify and understand that	the Licensed Marijuana Business in mitted as part of this application are this application gives Boulder Count d to the Licensed Marijuana Busine	e true ty the
Signat	ure of Licensed Marijuana Business Owner	Print Name	Date	
Signat	ure of Licensed Marijuana Business Owner	Print Name	Date	