



For Official City Use ONLY

Date Stamp

Office of the City Manager · 555 Santa Clara Street · Vallejo · CA · 94590 · 707.648.4576

**CITY OF VALLEJO
MEDICAL MARIJUANA DISPENSARY
LIMITED IMMUNITY PROOF OF COMPLIANCE FORM**

The City Council of the City of Vallejo adopted Vallejo Municipal Code Section 7.100 (“Ordinance”) to provide limited immunity to medical marijuana dispensaries that meet certain requirements. The Ordinance was adopted July 28, 2015. This Limited Immunity Proof of Compliance Form (“Compliance Form”) must be submitted to the City Manager of the City of Vallejo, who will determine compliance with the requirements of the Ordinance.

Please refer to the City of Vallejo Medical Marijuana Dispensary Guidelines - Limited Immunity Proof of Compliance Form (“Guidelines”), for information regarding completing this Compliance Form.

Return the completed Compliance Form, supporting attachments and documents by no later than 5 p.m., September 21, 2015, to:

City Manager
City of Vallejo
555 Santa Clara Street
Vallejo, CA 94590

Forms, supporting attachments and documents will NOT be accepted via email. Forms, supporting attachments and documents received by the City of Vallejo after the above stated due date will NOT be accepted, regardless of postmark. A Medical Marijuana Dispensary that submits a Compliance Form after 5 p.m., September 21, 2015, will NOT be eligible to receive a limited immunity letter from the City Attorney.

A “Request for Preliminary Determination of Compliance with Requirements,” as described in the Guidelines, must be submitted to the City Manager at the above address no later than 5 p.m., August 21, 2015. Medical Marijuana Dispensaries are encouraged to submit this request as soon as possible, to allow time for City review. See the Guidelines for a description of a “Request for Preliminary Determination of Compliance with Requirements”.

Medical Marijuana Dispensaries must request a City inspection for compliance with the Building Code, Fire Code and Property Maintenance Ordinance, and pay the applicable City fees by 5 p.m., September 4, 2015. Medical Marijuana Dispensaries are encouraged to submit this request as soon as possible, to allow time for City inspections. Requests for inspections may be made by contacting the City of Vallejo Central Permit Center at 707-648-4326. Once a request for inspection is made by the Medical Marijuana Dispensary, the City will contact the Medical Marijuana Dispensary’s designated representative between August 10 and September 4, 2015 to schedule the inspection. The fee for the inspection is \$349, which must be paid at the time that the MMD requests the inspection. Additional fees may be required for re-inspection or further inspections required in the event of non-compliance with the Building Code, Fire Code or Property Maintenance Ordinance.

CITY OF VALLEJO

MEDICAL MARIJUANA DISPENSARY LIMITED IMMUNITY PROOF OF COMPLIANCE FORM

Refer to Vallejo Municipal Code Section 7.100, also known as City of Vallejo Ordinance No. 1751 N.C. (2d), for information regarding Medical Marijuana Dispensary proof of compliance requirements and operating conditions. If any information in the Guidelines or this Compliance Form conflict with the Ordinance, the Ordinance shall prevail.

The Ordinance can be accessed at www.CityofVallejo.net/MMDCompliance, or, copies may be obtained at the City of Vallejo, City Manager's Office, 555 Santa Clara Street, Vallejo, CA, 94590.

Medical Marijuana Dispensary is referred to as "MMD" in the Compliance Form.

SECTION 1: MMD INFORMATION

MMD Name¹: _____

MMD Property Address: _____

MMD Owner (individual/principal)²: _____

MMD Owner's Address: _____

MMD Owner's Telephone Number(s): _____

MMD Owner's Email Address: _____

MMD Contact Name for City Building Code, Fire Code and Property Maintenance Ordinance Inspections: _____

MMD Contact Phone Number for City Inspections: _____

MMD Contact Email Address for City Inspections: _____

SECTION 2: CITY OF VALLEJO TAX CERTIFICATE DATED PRIOR TO APRIL 23, 2013

Attach a copy of a City of Vallejo Tax Certificate dated prior to April 23, 2013.

Label as Section 2 Attachment.

SECTION 3: EVIDENCE OF OPERATION PRIOR TO APRIL 23, 2013

Attach evidence that the MMD was in operation prior to April 23, 2013. Evidence can include copies of City of Vallejo Marijuana Business License Tax Return forms, State of California Board of Equalization sales tax forms showing tax payments for operations prior to April 23, 2013, or other evidence supporting proof of operations prior to April 23, 2013.

Label as Section 3 Attachments.

¹ MMD Name must be the same as the name on California Secretary of State business search, Federal and State income tax documents and City of Vallejo Business License application.

² Must be a person's name. Include aliases, if any, on a separate sheet of paper, and attach to this Form. Label as Section 1 Attachment.

SECTION 4: EVIDENCE OF MARIJUANA BUSINESS LICENSE TAX PAYMENTS

Attach evidence that the MMD paid City of Vallejo marijuana business license tax due continuously from the first date the MMD was in operation or March 1, 2012 (the effective date of the tax), whichever was later, continuously through December 31, 2014 (the marijuana tax was due the 20th of every month for the full prior month. The City of Vallejo did not accept the marijuana tax payments on February 20, 2015, for the month of January and has not accepted tax since). Evidence can include a copy of all City of Vallejo Marijuana Business License Tax Return forms filed for the tax paid, or cancelled checks along with the same information required on the City of Vallejo Marijuana Business License Tax Return forms for each period that tax that was paid.

In addition, submit as an attachment the following information for each period for which marijuana business license tax payment was paid:

Example:

Name of MMD: _____

<u>Period</u>	<u>Date of Payment</u>	<u>Gross Receipts</u>	<u>Amount Paid</u>
March 2012	April 10, 2012	\$ 5,000	\$ 500
April 2012	May 9, 2012	\$10,000	\$1,000

Label as Section 4 Attachments.

SECTION 5: REQUEST FOR PRELIMINARY DETERMINATION OF COMPLIANCE WITH REQUIREMENTS

Is the MMD submitting a “Request for Preliminary Determination of Compliance with Requirements,” as described in the Guidelines?

- Yes
- No

If Yes, complete Sections 1-5 only, sign Section 15, and submit to the City of Vallejo by August 21, 2015. MMDs must complete and submit the remainder of this Compliance Form by September 21, 2015.

If No, complete this Compliance Form and submit by September 21, 2015.

The Ordinance allows the City Manager to determine compliance if the MMD demonstrates that there were circumstances beyond its control that prevented compliance. If a MMD requests City Manager consideration of such circumstances, submit a detailed explanation with any supporting documents.

Label as Section 5 Attachment.

SECTION 6: MMD MANAGERS' INFORMATION

SUBMIT A SEPARATE PAGE AND ATTACHMENTS FOR EACH MANAGER

MMD Manager Name: _____

MMD Manager Title: _____

MMD Manager Function: _____

MMD Manager Address: _____

MMD Manager's Telephone Number(s): _____

MMD Manager's Email Address: _____

Attach for each Manager:

A. A fully legible copy of a valid government issued form of photo identification, such as a driver's license.

Label as Section 6A Attachment.

B. Proof that the summary criminal history (Live-Scan), dated not more than two weeks prior to the date of this Form, has been processed through an authorized operator. The City will receive results of the Live-Scan directly.

Label as Section 6B Attachment.

SECTION 7: MMD AGENT FOR SERVICE

Name of MMD Agent for Service of Process: _____

Address of MMD Agent for Service of Process: _____

Attach printout of California Secretary of State's Business Search 'Agent for Service of Process' with correct entity name.

Label as Section 7 Attachment.

SECTION 8: LOCATION

Provide evidence that the MMD is located a minimum of one thousand (1,000) feet from any public or private school, kindergarten through high school. The distance shall be the horizontal distance measured in a straight line from the property line of the school to the closest property line of the lot on which the MMD is located without regard to intervening structures. Evidence must be in the form of a map identifying the location of the MMD and the locations of all public and private schools, kindergarten through high school, located within one thousand (1,000) feet of the MMD.

Label this map as Section 8A Attachment.

A MMD that is otherwise compliant with the provisions of the Ordinance but is not currently more than one thousand (1,000) feet from any public or private school, kindergarten through high school, must relocate to a location that is more than one thousand (1,000) feet from all public and private schools, kindergarten through high school, and more than two thousand (2,000) feet from all other MMDs, no more than 90 days after the effective date of the Ordinance, or within an additional 90 days if the City Manager determines the MMD has shown good cause.

If the MMD is currently located less than one thousand (1,000) feet from any public or private school, kindergarten through high school, provide the address to which the MMD intends to relocate, date of move, and a map showing the proposed address and location of the MMD and the location of all public and private schools, kindergarten through high school, within one thousand (1,000) feet, and the location of all other MMDs within two thousand (2,000) feet of the proposed MMD site.

Label this map as Section 8B Attachment.

SECTION 9: MMD OPERATING CONDITIONS

Provide evidence that the MMD currently and will continually operate in accordance with all of the following conditions of operation:

- A. The Property satisfies all location requirements as set forth in the Ordinance. Complete Section 8 of this Compliance Form.
- B. All taxes and fees owed to the City have been paid and are current. Complete Section 4 of this Compliance Form.
- C. The Property complies with all applicable Building and Fire Code provisions, the Property Maintenance Ordinance, and the Property is maintained free of debris, litter and trash.

MMDs must request a City inspection for compliance with Building Code, Fire Code and the Property Maintenance Ordinance.

- D. The Property provides a sufficient odor-absorbing ventilation and exhaust system so that odor generated inside the Property is not detected outside the Property, anywhere on adjacent Property or public rights-of-way, or within any other unit located within the same building as the Medical Marijuana Dispensary. Attach proof of satisfactory result from inspection.

Label as Section 9D Attachments.

- E. No Medical Marijuana Dispensary shall operate for profit. All transactions, including but not limited to cash or in-kind contributions, reimbursement or compensation, shall be fully documented.

Is the MMD incorporated?

Yes

No

If Yes, attach:

- Certified copy of the Secretary of State Articles of Incorporation
- Certificate(s) of Amendment
- Statement(s) of Information
- Copy of MMD's bylaws demonstrating non-profit status

If No, attach:

- Notarized copy of document creating MMD demonstrating organization as non-profit (articles of association, bylaws, constitution or other creating documents.)

Label as Section 9E Attachments.

- F. The Medical Marijuana Dispensary must have a security plan including procedures for verifying identification of Qualified Patients and Primary Caregivers both before entering the collective and again before receiving medical marijuana; a description of the physical presence of licensed and uniformed security guards required to be present including their number, location and specific hours on site; and a theft prevention plan which includes locked exterior doors and windows during the times the business is closed.

Attach a written security plan that is in compliance with Ordinance Section 7.100.090 F.

Label as Section 9F Attachment.

- G. The Medical Marijuana Dispensary must use point of sale software acceptable to the City of Vallejo Finance Director.

Identify the brand name and provide a description of the point of sale software currently in use by the MMD. Identify how the software tracks validity of identification cards, tracks and provides inventory reports, provides daily, monthly and annual sales reports, provides user security and tracks and provides reports to regulatory agencies.

Label as Section 9G Attachment.

SECTION 10: PROHIBITED ACTIVITIES STATEMENT

Attach a copy of the MMD Prohibited Activities Checklist, available from the City of Vallejo.

The MMD Prohibited Activities Checklist must be accompanied by a Statement dated and signed by each MMD Manager listed in Section 6 of this Form, and include the following statement:

"I declare under penalty of perjury under the laws of the State of California that I have read, understand, and shall ensure compliance with the City of Vallejo Prohibited Activities Checklist."

Label as Section 10 Attachments.

SECTION 11: SELLER'S PERMIT

Submit the MMD's current seller's permit issued by the California Board of Equalization.

Label as Section 11 Attachment.

SECTION 12: EDIBLE MARIJUANA

If the MMD prepares medical marijuana at the MMD property, attach a copy of the approval from the Solano County Department of Resource Management.

Label as Section 12 Attachment.

SECTION 13: MMD OWNERSHIP

Provide a statement confirming that the MMD Owner does not own or operate more than one MMD in the City of Vallejo.

Label as Section 13 Attachment.

SECTION 14: FEES

The fees for a City inspection in compliance with Building Code, Fire Code and Property Maintenance Ordinance must be paid at the time that the MMD requests the inspection. The fee is \$349. Additional fees may be required for re-inspection or further inspections required in the event of non-compliance with the Building Code, Fire Code or Property Maintenance Ordinance. Requests for inspections may be made by contacting the City of Vallejo Central Permit Center at 707-648-4326.

SECTION 15: OWNERS' SIGNATURE

This Form must be signed and dated by the Owner identified in Section 1 of this Form.

I declare under penalty of perjury under the laws of the State of California that I have personal knowledge of the information in this form and attachments, that the information is true and correct, that the form has been completed under my supervision, I have authority to sign for the MMD, and that neither I nor this MMD have previously materially misrepresented the nature of MMD operations on a Vallejo business license application or permit.

Owner's Signature: _____

Print Owner's Name: _____

Date: _____