

# TOWN OF SEDGWICK

29 Main Avenue  
PO Box 27  
Sedgwick, CO 80749

## Marijuana Business Application

License for: <input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Change of Ownership <input type="checkbox"/> Modification to Premises		License Fee:		
License Type: <input type="checkbox"/> Medical Marijuana Center <input type="checkbox"/> Medical Marijuana Infused Products <input type="checkbox"/> Medical Marijuana Optional Premises Cultivation <input type="checkbox"/> Retail Marijuana Store <input type="checkbox"/> Retail Cultivation Facility <input type="checkbox"/> Retail Marijuana Products Manufacturing Facility <input type="checkbox"/> Retail Marijuana Testing Facility		<i>You must fill out a new application for each type of license</i>		
<b>Physical Address</b> Applicant's Legal Business Name/Trade Name (DBA):				
Street Address of Business:		Business Phone Number:		
Mailing Address:	Town:	State: Zip:		
<b>Primary Contact Person</b> Primary Contact Person for Business:			Primary Contact Phone Number:	
Primary Contact Email Address:				
Primary Contact Address:		City: State: Zip:		
<b>State Medical / Retail Marijuana License Numbers</b> Marijuana Center Number:			Optional Premises Cultivation Number:	Infused Products Number:
State Sale Tax License Number				
<b>Business Structure</b> <input type="checkbox"/> Corporation <input type="checkbox"/> Individual (Sole Proprietor) <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Association or Other _____ <input type="checkbox"/> Partnership				
<b>Information About the Proposed Premises</b> Does the Applicant have legal possession of the premises by virtue of ownership, lease or other arrangement? Please indicate: Ownership <input type="checkbox"/> Lease (5year) <input type="checkbox"/> Other (Explain in Detail) _____ *Submit proof of legal possession of the premises (deed, lease, lease assignment).				
Is the proposed premises located within 500 feet of any licensed child care facility, school or principal campus of a college, university or seminary? Yes <input type="checkbox"/> No <input type="checkbox"/>		Total area (in square feet) of the licensed premises: _____.		
In the past year has the licensee (including all parent or subsidiary companies, if any) filed for bankruptcy, been sued had a civil judgment rendered against it, had a tax lien filed against it, or become delinquent in the payment or filing of any taxes, interest, penalties or judgments owed to the State of Colorado. If Yes Explain in detail on a separate sheet and attach.			<input type="checkbox"/> Yes	<input type="checkbox"/> No

Has the licensee (including any of the partners, members, or officers, or directors) ever in any state.	
a. Been denied a privileged license (ei: Liquor, Gaming, or Marijuana)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
b. Had a privileged license (ei: Liquor, Gaming, or Marijuana) investigated, suspended or revoked?	Yes <input type="checkbox"/> No <input type="checkbox"/>
c. Had interest in another entity that had a privileged (ei: Liquor, Gaming, or Marijuana) license denied, investigated, suspended or revoked?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If you answered yes to any above questions, explain in detail on a separate sheet and attach.	
Have you had at least three (3) years operating a licensed marijuana business in Colorado? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Have you read, understand and willing to comply with any and all Ordinances, rules and Resolution pertaining to the type of license being requested? <i>(You obtain this from information by contacting the Town Clerk)</i> Yes <input type="checkbox"/> No <input type="checkbox"/>	
Have you attached or completed the Background check? <i>See attachment.</i> Yes <input type="checkbox"/> No <input type="checkbox"/>	
Have you attached a floor plan for the business? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Have you attached a parking plan? Yes <input type="checkbox"/> No <input type="checkbox"/>	

<b>Affirmation and Consent</b>	
I affirm that I have reviewed this application and all associated documents and that the contents and statements made therein are true and correct to the best of my knowledge and belief. I understand that any misrepresentations or failure to disclose the information requested or other pertinent information may be deemed good cause to deny, withhold or revoke a license. Furthermore, I understand that any misrepresentations or omissions may subject me to civil or criminal liability.	
Applicant's Signature	Date

### Town of Sedgwick Marijuana Business License Application Checklist

- ✓ Applicants must submit the Colorado Business Marijuana License Application and Associated Person & Associated Key Marijuana License Applications to the Colorado Marijuana Enforcement Division for review. The State will forward approved applications to the Town for local approval. The following supplemental information must be provided to the Town (unless already included in the State application):
- ✓ Proof of possession of the premises (lease, lease assignment, deed). If the premises will be leased rather than owned, the written consent of the property owner must be submitted. A fully-executed lease may satisfy this requirement if it clearly indicates that the owner knows the leased premises will be used as a marijuana business.
- ✓ Floor plan showing all interior dimensions of the proposed premises and the layout of the retail marijuana establishment. The floor plan also shall show the principal uses of the floor area including a depiction of where any services other than the dispensing of marijuana are proposed to occur on the licensed premises.
- ✓ A security plan indicating how the applicant intends to comply with, and any information regarding security required for licensed premises under State law and regulations.
- ✓ For cultivation facilities or MIP's or other Processing, a description of the: (a) lighting plan; (b) ventilation system for the premises; (c) the estimated number of plants that will be grown; and (d) an estimate of the number of plants within a given stage of growth within any given time.
- ✓ Description of products and/or services to be provided by the marijuana business.
- ✓ Application and License Fees
- ✓ Criminal background check through the Colorado Bureau of Investigation, the fees for which shall be paid by the applicant.
- ✓ List of 3 Business References, contact person of past or current local licensing authority.

# Marijuana License background & finger print for the Town of Sedgwick

State fees vary by service. Each vendor charges a \$10.00 surcharge for fingerprint services. There may be additional fees per agency.

CABS Service Providers	
<b>IdentoGo</b> <a href="https://www.identogo.com/">https://www.identogo.com/</a> Appointment Scheduling: <a href="https://uenroll.identogo.com/">https://uenroll.identogo.com/</a> Toll Free: (844) 539-5539	<b>Colorado Fingerprinting</b> <a href="http://www.coloradofingerprinting.com">http://www.coloradofingerprinting.com</a> Toll Free: (833) 224-2227 Local: (720) 292-2722

IdentoGO-Sterling  
120 Main St  
Sterling, CO 80751-4342  
**Location Hours**  
 Tuesday: 9:30 AM - 12:30 PM  
 & 1:00 PM - 4:30 PM

IdentoGO-Holyoke  
127 E Denver St  
Holyoke, CO 80734-1553  
**Location Hours**  
 Friday: 9:00 AM - 12:00 PM  
 & 12:30 PM - 3:30 PM

To Set online appointment go to:

**25YQ72** - Colorado Local (City/County)-Retail Marijuana Licensure

<https://uenroll.identogo.com/workflows/25YQ72/appointment/bio>

**25YQ8H** - Colorado Medical Marijuana Licensure-Local (City/County)

<https://uenroll.identogo.com/workflows/25YQ8H/appointment/bio>

Home Account ORI/RAF: CONCJ6583

**RESOLUTION NO. 11-2019**

**A RESOLUTION SETTING LICENSE FEES FOR RETAIL AND MEDICAL MARIJUANA BUSINESSES**

**WHEREAS**, pursuant to Town of Sedgwick Ordinance No. 02-2016, the Board of Trustees is required to establish license and application fees for retail marijuana cultivation facilities, retail marijuana products manufacturing facilities, retail marijuana testing facilities, and retail marijuana stores (collectively, “retail marijuana establishments”) operating within the Town; and

**WHEREAS**, pursuant to Town of Sedgwick Ordinance No. 03-2014, the Board of Trustees is required to establish license and application fees for medical marijuana centers, optional premises cultivation operations, and medical marijuana-infused products manufacturers (collectively, “medical marijuana operations”) operating within the Town; and

**WHEREAS**, the Board of Trustees desires to adopt a fee schedule for such applications and licenses by this resolution.

**NOW THEREFORE, BE IT RESOLVED BY THE BOARD OF TRUSTEES OF THE TOWN OF SEDGWICK, COLORADO:**

**Section 1.** The following Town fees are hereby established:


<b>Medical Marijuana Operations</b>	<b>Town Fee</b>
New Application Fee - Non-Refundable	\$1,500
License Fee - Refundable if License is Denied	
- Medical Marijuana Center License	\$1,000
- Medical Marijuana-Infused Products Manufacturing License	\$1,000
- Optional Premises Cultivation License Fee	\$1,000
Renewal Fee	\$700
Change of Manager Fee	\$1,500
Modification of Premises Fee	\$1,500
Change of Location Fee	\$1,500

<b>Retail Marijuana Establishments</b>	<b>Town Fee</b>
New Application Fee - Non-Refundable	\$500
License Fee - Refundable if License is Denied	
- Retail Marijuana Cultivation Facility License	\$1,000
- Retail Marijuana Store License	\$1,000
- Retail Marijuana Products Manufacturing License	\$1,000
- Retail Marijuana Testing Facility License	\$1,000
Renewal Fee	\$500
Change of Manager Fee	\$500
Modification of Premises Fee	\$500
Change of Location Fee	\$500

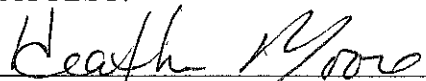
\* The Town fees are in addition to any State license and application fees due to the State of Colorado.

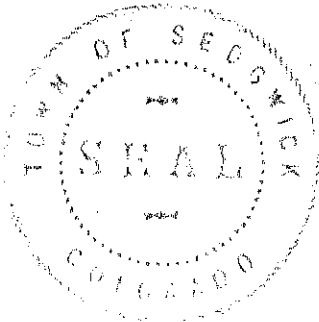
**INTRODUCED, ADOPTED AND RESOLVED THIS 9<sup>th</sup> DAY OF DECEMBER, 2019.**

TOWN OF SEDGWICK, COLORADO

  
\_\_\_\_\_  
Wayne Price, Mayor

ATTEST:

  
\_\_\_\_\_  
Heather Moore, Town Clerk



**Town of Sedgwick**  
**Business License Application**  
**Yearly Application & \$35.00 fee Due January 1<sup>st</sup>**

*It is unlawful for any person, whether as a principle, agent, clerk or employee, either for himself, herself, or any other person, corporation or otherwise, to commence, carry on or establish a business without first having received from the Town a business license to do so or without complying with any and all regulations of such business contained.*

**Business Information**

Business Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Business Address: \_\_\_\_\_

Street: \_\_\_\_\_

Mailing: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Manager(s): \_\_\_\_\_

Manager Phone Number(s): \_\_\_\_\_

Sale Tax ID#: \_\_\_\_\_

EIN#: \_\_\_\_\_

Description of Business: \_\_\_\_\_

<p><u>Please Check One</u></p> <p><input type="radio"/> New Application</p> <p><input type="radio"/> Change of Owner</p> <p><input type="radio"/> Change of Business Name</p> <p><input type="radio"/> Home Occupation</p> <p><input type="radio"/> Other _____</p>
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<p><u>Business Type</u></p> <p><input type="radio"/> Retail</p> <p><input type="radio"/> Service</p> <p><input type="radio"/> Professional</p> <p><input type="radio"/> Wholesale/manufacturing</p> <p><input type="radio"/> Home Operation</p> <p><input type="radio"/> Other _____</p>
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**\*\*In Case of Emergency (If Manager or Owner cannot be reached) \*\***

**\*\*Name: \_\_\_\_\_ Phone: \_\_\_\_\_ \*\***

Owner Name: \_\_\_\_\_ Title: \_\_\_\_\_

Owner Mailing Address: \_\_\_\_\_

City, State, & Zip \_\_\_\_\_

Owner Phone Number: \_\_\_\_\_

Owner E-mail: \_\_\_\_\_

***Town of Sedgwick***  
**Business License Application**

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Partner/Officer Name \_\_\_\_\_ Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, & Zip \_\_\_\_\_

Phone Number:  
\_\_\_\_\_

E-mail: \_\_\_\_\_

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Owner Signature: \_\_\_\_\_

Print Name: - \_\_\_\_\_

Date: \_\_\_\_\_

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***Town of Sedgwick***  
29 Main Avenue, P.O. Box 27, Sedgwick, CO 80749-0027  
***Phone:*** (970) 463-8814 ***Fax:*** (970) 463-8814  
***E-mail:*** sedgwickco@pctelcom.coop or sedgwickinfo@pctelcom.coop  
***Web Address:*** www.sedgwickcolorado.com

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# PUBLIC NOTICE

## TOWN OF SEDGWICK

### Regarding Retail Marijuana Licensing and Ordinance NO. 10-2019

THE VOTE OF THE PEOPLE ON NOVEMBER 26<sup>TH</sup> 2019, DECIDED THAT ADDITIONAL RETAIL MARIJUANA LICENSES SHALL BE ALLOWED WITHIN THE TOWN OF SEDGWICK.

APPLICATIONS WILL BE ACCEPTED FOR 20 DAYS - UNTIL JANUARY 22<sup>ND</sup> OF 2020. SUBMIT APPLICATIONS TO THE TOWN HALL AT 29 MAIN AVE, SEDGWICK CO 80749 (IN PERSON) MONDAY THROUGH THURSDAY BETWEEN THE HOURS OF 8AM TO 3PM. THERE ARE CURRENTLY TWO (2) LICENSES AVAILABLE.

PLEASE READ AND FOLLOW IN FULL DETAIL ALL OF ORDINANCE NO. 02-2016 AND ORDINANCE NO. 10-2019

The ordinances and application packet are available on the Town Website ([www.sedgwickcolorado.com](http://www.sedgwickcolorado.com))

Completed applications will be presented to the Board of Trustees at the February 10<sup>th</sup> 2020 regular Town meeting.

POSTED, AND SIGNED ON THIS 2nd DAY OF JANUARY 2020,

  
Heather Moore, Town Clerk

