

General Information & Instructions

- Use blue ink ONLY
- Must submit as single sided pages
- The City of Pleasant Ridge will not provide substantive advice, legal or otherwise, on any of its ordinances or items required for this application or any other application or information required by this form
- Applications must be submitted to the City Clerk's office
- Annual fees to apply shall be paid to the City treasurer, and made out to the City of Pleasant Ridge:
 - Non-refundable application fee of \$5,000 per license, and annually for each renewal application
 - Applicants who are licensed to operate a marijuana establishment shall pay a non-refundable annual inspection fee of \$4,000 upon approval by the City and annually at the time of each renewal.

Applicant: initial here to indicate your understanding of the general instructions and annual fee requirements:

					Initial:
Propo	sed Entity Informatior	n			
	Individual		Partnership		Corporation
	Limited Liability Company		Trust		Sole Proprietorship
Entity Na	ame (as it appears on official entity do	ocum	nents) D/B/A (as used in co	onducting	business of the entity)
Entity pł	nysical location		FEIN/SSN		
Entity m	ailing address		Entity telephone		

Applicant Information/Contact Person for Application

Full Name	Mailing Address	
City	State	Zip
Cell Phone Number	Telephone Number	Email Address
Affiliation with Applicant	Attorney license number (if applicable)	CPA license number (if applicable)

23925 Woodward Ave, Pleasant Ridge, MI 48069 Phone: 248-541-2901 Fax: 248-541-2504

Proposed Location

Address of Proposed Location	Zoning Classification
Total square footage of building	Square footage to be used for marijuana operation(s)

Describe your proposed work to the building (use as-is, renovate existing building, build new construction)

Distance between the proposed building and the closest residentially used building in the City of Pleasant Ridge? Measure in a straight line between the closest point on the exterior of each building. Garages or accessory buildings do not count as residentially used buildings.

License Information

Check all licenses you are applying for:

	Microbusiness		Retailer		Provisioning Cer	nter
	Processor		Safety Compliance Facility		Secure Transpor	ter
Does the applicant have a pre-qualification from the Marijuana Regulatory Agency for all license types being applied for at the City of Pleasant Ridge?					Yes	🗆 No
Does this application also include the equivalent license type?					Yes	🗆 No
Does this application include stacked Class C licenses?					Yes	🗆 No
Does this application include co-located licenses?					Yes	🗆 No

Proposed hours of operation:

_	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open:							
Close:							

Attachments

Provide all required supplemental material as attachments to this application, as directed on the following pages.

Signature

I affirm that the information on this application form and all attachments are true to the best of my knowledge, information, and belief. I am authorized to execute this application on behalf of the entity listed above.

Signature of Applicant



Applicant Acknowledgements for a Marijuana City Operating License

All applicants identified and disclosed within this application for a city operating license and/or for a renewal application are required to initial and/or sign all acknowledgments and attestations as provided by the City of Pleasant Ridge, unaltered.

I, the applicant, ______, declare that this application and all attachments are true, correct, and complete to the best of my knowledge. I also acknowledge familiarity with the City of Pleasant Ridge's Municipal Ordinances and hereby represent that I have knowledge of the contents in relation to the conduct of said business. Further, I acknowledge and agree to the following:

Applications submitted with altered acknowledgments and/or attestations shall not be reviewed. Should any applicant refuse to sign or initial the document(s) as provided by the City it will result in a denial for a city operating license.	Initial:
An applicant shall not utilize a City of Pleasant Ridge employee for notary services related to this application.	Initial:
I make no reliance on anything stated by City of Pleasant Ridge employees regarding the completeness of this application or any other communications not provided in writing.	Initial:
Amendments or supplementary information shall not be accepted after the applicant has submitted their application for a city operating license unless requested by the City of Pleasant Ridge.	Initial:
Failure to provide a complete application including its attachments, attestations, signatures, notarizations, initials, and/or the required fees may result in a denial of the application and/or renewal application.	Initial:
Compliance with the application requirements and/or zoning approval does not guarantee a city operating license for any proposed establishment.	Initial:
No refund of any sums of money paid to the City of Pleasant Ridge related to this application will be refunded to the applicant.	Initial:
Applicant acknowledges and understands that they will be held to all the property maintenance standards and requirements contained within the City of Pleasant Ridge Municipal Code.	Initial:
Applicant acknowledges that failure to provide the information and documentation required by this application may result in the denial of this application.	Initial:
Applicant understands that a city operating license may be revoked if the application for a marihuana establishment's certificate of compliance is denied or revoked by the Building Official.	Initial:
FOR RENEWALS: All licensees applying for a renewal of their city operating license must supplement this application with updated information, if applicable, and/or upon request, at any time, by the City of Pleasant Ridge.	Initial:

Signature of Applicant

Printed Name

Date

Required Attachments

Provide the following attachments to your application. **All documents, forms, and information provided must be clearly identified as "Attachment A, Attachment B," etc.** Failure to clearly identify each document provided may constitute grounds for rejection of an application.

Attachment A – Entity Documents

Entity formation documents must be attached. Date of issuance and/or expiration must be clearly identified. Include:

Operating agreement	Bylaws/shareholder agreement	Partnership agreement
□ Shareholder agreement	Articles of Organization/Incorporation	Certificate of good standing
Organizational chart*	Assumed name registration document(s)	

* Organizational chart must include position descriptions and the anticipated number of employees

Attachment B – State Application Status

Has the entity been granted any of the following? If so, attach as Attachment B. Date of issuance and/or expiration must be clearly identified.

Pre-qualification approval under the MMFLA	Licensure under the MMFLA
Pre-qualification approval under the MRTMA	Licensure under MRTMA

* For retail delivery services to consumers, include the entity's authorization from the state to deliver to the consumer, and the number of delivery drivers/vehicles

Attachment C – Distance to Nearest Residentially Zoned or Used Structure

Provide an aerial map indicating the distance from the proposed building in which the entity is to be located and the nearest residentially zoned or used structure in Pleasant Ridge. The proposed building must be separated at least 200 feet from any residentially used or zoned structure. For the purposes of this analysis, the measurement shall be taken in a straight line from the closest point on the exterior wall of the proposed building to the closest point on the exterior wall of the closest residentially zoned or used principal structure. Accessory structures are not included in this analysis.

Attachment D – Property Ownership

Is the proposed location owned or leased by the applicant?

Attach documentation evidencing proof of ownership of the premises wherein the marihuana establishment is to be operated as Attachment D, including (as applicable):

- A copy of any deed, lease, or binding real estate interest reflecting the right of the applicant to possess, or an option reflecting the applicant's right to purchase or lease the proposed premises.
- If the applicant is not the owner of the proposed licensed premises, the applicant must provide a notarized statement of the owner of the property authorizing the use of the property for a marihuana establishment, along with evidence of ownership of the property by the person signing the notarized statement.

Attachment E – Owner/Applicant Information

- All owners/applicants must provide a copy of the front and back of their state-issued driver's license or state identification.
- Include a list of all parties having ownership interest in the entity, including:
 - Full legal name
 - All aliases used in the most recent five years
 - o Address
 - Cell phone
 - o Email
 - o Title
 - Percentage of ownership in the entity
 - All business occupations or employment for the most recent three years preceding the date of this application

Attachment F – Marijuana Operations

List all marijuana operations owned or operated by any of the applicants in Michigan or any other state.

If no other marijuana operations are owned by any member of the entity, provide an attachment attesting to that fact.

For any marijuana businesses owned, provide the following information:

- Name of the business
- Name of the entity owning the business
- Business location address(es)
- Entity location address
- Owner(s) of the entity
- Dates of operation
- License types
- Summary of business profit and loss for the most recent three tax years

Attachment G – Regulatory History

Have any of the owners/applicants ever had a regulatory license suspended or revoked by a federal, state, or local authority?

If yes, provide an explanation and accompanying documents.

Attachment H – Tax Delinquency

Have the owners/applicants ever had filed against or have been served with a complaint or other notice filed with any public body regarding delinquency in the payment of or a dispute over the filings Concerning the payment of any tax required under federal, state, or local law?

If yes, provide an explanation and accompanying documents.

Attachment I – Other Pleasant Ridge Properties

Do any of the owners or applicants currently own or lease any real property in the City of Pleasant Ridge? If yes, provide the following information for each owner or applicant who owns or leases real property in the City:

- Parcel address and tax ID
- Dates of ownership or lease interest
- Nature of ownership or lease interest

Attachment J – Insurance and Security

Provide the following:

- 1. Quote prepared by an insurance provider for liability and casualty damage insurance in an amount of at least one million (\$1,000,000) dollars, covering the marihuana establishment and naming the city as an additional insured party, available for the payment of any damages arising out of an act or omission of the applicant or its stakeholders, agents, employees, or subcontractors.
- 2. A quote from security company(s) for the services provided to the proposed location(s). Must contain specific details for each piece of proposed security equipment.
- 3. A quote for the Knox Box service or similar service for the proposed location(s).

If applicant is awarded a city operating license, the licensee is responsible for providing the city clerk with a proof of execution as provided in Attachment L items 1); 2); and 3) no later than 30 days after the date of licensure.

Attachment K – Bankruptcy

Have any of the owners filed for bankruptcy, personally or for a business they owned/controlled, in the	□ Yes	
most recent seven years?		

If yes, provide an explanation and accompanying documents as attachment K.

Attachment L – Capitalization

Provide an explanation and documentation regarding capitalization and means to operate the proposed establishment including, but not limited to, the source(s) of entity's capitalization to build, operate, and maintain the proposed operation; and a copy of the certified public accountant attested letter, if applicable, for licensure of a marijuana establishment.

Attachment M – Criminal History

Have any of the owners or applicants ever been arrested, criminally charged, criminally convicted, or criminally adjudicated?

If yes, provide an explanation and accompanying documents.

Attachment N – Regulatory Compliance

Do any of the owners or applicants have any history of noncompliance with federal, state, or local regulatory requirements in any jurisdiction?

If yes, provide an explanation and accompanying documents.

Attachment O – Litigation

At the time of this application, are any of the owners or applicants a defendant in any litigation involving a business or business practices? \Box Yes \Box No

If yes, provide an explanation and accompanying documents.

Attachment P – Chemical Storage

Is the applicant applying for a processor license?

🗆 Yes 🛛 No

If yes, specify in detail how the cultivation and/or processing of marihuana will be done (e.g., techniques, utilities, disposal of byproducts, etc.). A security and floor plan for indoor storage of chemicals must be provided for grower and processor applicants.

Attachment Q - Site Plan/Neighborhood Compatibility Plan

Provide documents and plans demonstrating the site layout, operation, and neighborhood compatibility of the use, including but not limited to:

- Description of the anticipated daily patrons to the building including evidence and basis for the projected number of daily patrons.
- Site plans for the proposed location that meet all the requirements of Section 82-198(2)(b) of the Pleasant Ridge zoning ordinance. The site plans shall demonstrate compliance with all applicable site requirements of the Commercial Marijuana Facilities ordinance, including but not limited to parking requirements. The site plan must indicate how proposed traffic will flow into, though, and away from the site.
- Lighting plan demonstrating the location of each exterior light fixture, including cut sheet details of the fixture and a photometric plan for exterior lighting. If no changes are proposed to the existing exterior lighting at the proposed location, indicate such.
- Landscaping or other aesthetic improvements.
- Total capital investment to be invested, e.g. renovations to the property and surrounding area, equipment, fixtures, and other related items.
- Environmentally friendly design elements.
- Any other non-marijuana related businesses you plan to open and operate in the City of Pleasant Ridge.
- If the building is currently vacant, and what length of time the building has been vacant.

Attachment R - Community Involvement

Describe in detail past, present, and/or proposed community involvement including, but notl imited to, charitable contributions, volunteer work, or other benefits to the Pleasant Ridge community.

Attachment S – Establishment Business Plan

Provide the business plan for the proposed marihuana establishment. Pursuant to the city's commercial marihuana ordinance, the following plans shall be included in the requested business plan:

• Waste disposal plan including, but not limited to, chemical and plant disposal.

- Security plan, including the extent of and additions to or extra security measures taken above the minimum required under state law.
- Sanitation plan including, but not limited to, measures taken to protect from marihuana being ingested by any person or animal, indication of how the waste will be stored and disposed of, and how marihuana will be rendered unusable for proper disposal.
- Odor mitigation plan identifying all equipment and methods that will be utilized to prevent the impact to adjacent areas, including assurances that no odor will be detected from outside the permitted premise.
- Succession plan in the event of the death or incapacity of an owner or applicant.



STATE OF MICHIGAN ENTITY/INDIVIDUAL PREQUALIFICATION MATERIALS AND INFORMATION DISCLOSURE

(Use **BLUE** ink ONLY)

I, as the applicant submitting this application, acknowledge that if applicant is selected as a finalist for a city operating license, the applicant may then be required to produce a copy of all Michigan entity/individual prequalification application materials and all information pertaining to the State of Michigan supplemental application prequalification submitted to the State of Michigan.

I, as the applicant submitting this application, hereby certify that the City of Pleasant Ridge is authorized to receive and review all information pertaining to the State of Michigan entity/individual prequalification materials and all information pertaining to the State of Michigan supplemental application prequalification submitted by applicant to the State of Michigan.

I understand that by signing this authorization, a verification of my State of Michigan entity/individual prequalification materials and State of Michigan Supplemental Application Prequalification materials, submitted to the State of Michigan, will be performed. I authorize the State of Michigan to surrender to the City of Pleasant Ridge a complete and accurate record of all entity/individual prequalification and supplemental application prequalification materials, information, investigations, reports, results, or records related to me for the purposes of this application. I authorize the City of Pleasant Ridge to obtain, receive, review, copy, discuss, and use any such information or documents relating to me. I authorize the release of this type of information, even though such information may be designated "exempt from disclosure under the freedom of information act ", "confidential", or "nonpublic" under the provisions of state or federal laws.

Signature of Applicant		Printed Name		Date
Notary:				
Subscribed and sworn to by (ap	pplicant name):		before me on (date):	
Notary Public Signature:				
Notary Public Printed Name:				
Acting in the County of:				
My Commission Expires:				



APPLICANT'S ACKNOWLEDGEMENT, AGREEMENT, and CONSENT

(Use **BLUE** ink ONLY)

I (applicant) hereby acknowledge that the City of Pleasant Ridge (city) may require applicant to submit supplemental materials to carry out its statutory and ordinance duties. The applicant hereby agrees to submit such supplemental materials as may be requested by the City of Pleasant Ridge in a timely manner.

I hereby acknowledge that the operation of a licensed marihuana establishment is a revocable privilege and not a right, in conformance with applicable state law. Nothing in the city's ordinance or the City of Pleasant Ridge application for a marihuana city operating license, its exhibits, attachments, and attestations, are/is to be construed to grant a property right for an individual or business entity/individual to engage in the use, distribution, cultivation, production, possession, transportation, or sale of marihuana as a commercial enterprise. Any business entity or individual which purports to have engaged in such activities either prior to or after the enactment of Pleasant Ridge City Code Chapter 18, Article VIII without obtaining the required authorization is deemed to be an illegally established use and is not entitled to legal nonconforming status. Nothing in the city's ordinance or the City of Pleasant Ridge application for a marihuana city operating license, its exhibits, attachments, and attestations, are/is to be held or construed to grant a vested right, license, permit, or privilege to marihuana operations within the City of Pleasant Ridge.

I acknowledge that, as the applicant, I have the responsibility to prove that I am eligible, suitable, and qualified to be licensed. I must accept any risk of adverse public notice, embarrassment, criticism, or other action, or financial loss, which may result from action with respect to an application or the public disclosure of information requested in this form, and expressly waive any claim for damages as a result thereof. Information not initially requested or additional information may be requested by the city.

I consent to inspections, searches, and seizures as provided in state law, MCL 333.27401 of the Michigan Medical Marihuana Facilities Licensing Act and MCL 333.27957 of the Michigan Regulation and Taxation of Marihuana Act (MCL 333.27951 et seq.); the marihuana administrative rules, and city ordinances to disclose to the city and its agents of otherwise confidential records, including tax records, held by any federal, state, or local agency, credit bureau, or financial institution, while applying for or holding a marihuana city operating license. This consent is authorization to review and inspect tax records administered under the Michigan Revenue Act, 1941 PA 122.

I declare under the penalties of perjury that the information set forth in the application for a marihuana city operating license, its exhibits, attachments, and attestations is/are true and complete to the best of my knowledge. I acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the Michigan Marihuana Laws and the City of Pleasant Ridge Ordinances. I agree to provide any additional information requested by the City of Pleasant Ridge related to my application.

Signature of Applicant		Printed Name		Date
Notary:				
Subscribed and sworn to by (ap	plicant name):		before me on (date):	
Notary Public Signature:				
Notary Public Printed Name:				
Acting in the County of:				
My Commission Expires:				



APPLICANT'S AUTHORIZATION TO RELEASE INFORMATION

(Use **BLUE** ink ONLY)

To all courts, probation departments, selective service boards, employers, educational institutions, banks, financial, and other such institutions, governmental agencies federal, state, and local, without exception, both foreign and domestic:

On behalf of:

name of entity

name and title of person authorized to execute this release

I authorize the City of Pleasant Ridge (city) and its agents to conduct a full investigation into the background and activities of the applicant for purposes of determining the applicant's eligibility for a marihuana city operating license.

I understand that by signing this authorization a financial record check may be performed. I authorize any financial institution to surrender to the City of Pleasant Ridge a complete and accurate record of such transactions that may have occurred with that institution including, but not limited to, internal banking memoranda, past and present loan applications, financial statements, and any other documents relating to my personal or entity financial records in whatever form and wherever located. I authorize my employers to release any employment information required to validate my financial history. I understand that the financial record check will include a credit history examination and that my credit report, credit history, and credit capacity information will be obtained.

I understand that by signing this authorization, a financial record check of my tax filing and tax obligation status may be performed. I authorize my representative state taxing agency to surrender to the City of Pleasant Ridge a complete and accurate record of all tax information or records relating to me for the purposes of this application. I authorize the City of Pleasant Ridge to obtain, receive, review, copy, discuss, and use any such tax information or documents relating to me. I authorize the release of this type of information, even though such information may be designated as "exempt from disclosure under the freedom of information act ", "confidential", or "nonpublic" under the provisions of federal, state, or local laws.

I understand that by signing this authorization, a criminal history check may be performed. I authorize the City of Pleasant Ridge to obtain and use from any source, any information concerning me contained in any type of criminal history record files, wherever located for purposes of completing this application. I understand that the criminal history record files may contain records of arrests which may have resulted in a disposition other than a finding of guilt (i.e., dismissed charges, or charges that resulted in a not guilty finding). I understand that the information may contain listings of charges that resulted in suspended imposition of sentence, even though I successfully completed the conditions of said sentence and the sentence was discharged pursuant to law. I authorize the release of this type of information even though this record may be designated as "exempt from disclosure under the freedom of information act ", "confidential", or "nonpublic" under the provisions of federal, state, or local laws.

APPLICANT'S AUTHORIZATION TO RELEASE INFORMATION (continued)

Therefore, you are hereby authorized to release any and all information pertaining to this applicant, documentary or otherwise, as requested by any employee or agent of the City of Pleasant Ridge, provided that he or she certifies to you that said entity has an application pending before the City of Pleasant Ridge or that said entity is a licensee or other person required to be qualified under the provisions of the Michigan Medical Marihuana Act, MCL 333.26421 et seq., the Michigan Marihuana Facilities Licensing Act, MCL 333.27101 et seq., the Michigan Regulation and Taxation of Marihuana Act, MCL 333.27951 et seq., and City Ordinance.

This authorization shall supersede and revoke any prior request or authorization to the contrary and shall be in effect during the pendency of this application. A photocopy of this authorization will be considered as effective and valid as the original. A facsimile copy shall be considered as effective and valid as the original.

Signature of Applicant		Printed Name		Date
Notary:				
Subscribed and sworn to by (app	licant name):		before me on (date):	
Notary Public Signature:				
Notary Public Printed Name: _				
Acting in the County of:				
My Commission Expires:				



APPLICANT'S VERIFICATION & AFFADAVIT OF FULL DISCLOSURE

(Use BLUE ink ONLY)

- 1. I am the individual responsible for submitting this application and have full authority to execute this affidavit of full disclosure.
- 2. I authorize to be the contact person to the City of Pleasant Ridge for the purposes of this licensure application.
- 3. I swear (or affirm) that the information contained in this application packet is true, complete, and accurate to the best of my knowledge and belief.
- 4. Except as reported in this application packet, I have no agreements or understandings with any person or entity and no present intent to hold as agent, nominee, or otherwise any interest in this application.
- 5. Except as reported in this application packet, I have no agreements or understanding with any person or entity and no present intent to pay any sums of money or give anything of value as including, but without limitation, a finder's fee or commission to any person or entity related to the interest of this application.
- 6. I understand that failure to provide true, complete, and accurate answers and information in this application packet will result in a denial of the application and no refunds of any sums paid to the City of Pleasant Ridge because of this application packet will be refunded.
- 7. I understand that failure to fully complete the application packet, or if applicant makes any changes to the application packet documents, will result in a denial of the application and no refunds of any sums paid to the City of Pleasant Ridge because of this application packet will be refunded.

Signature of Applicant	Р	rinted Name	Date
Notary:			
Subscribed and sworn to by (ap	plicant name):	before me	on (date):
Notary Public Signature:			
Notary Public Printed Name:			
Acting in the County of:			
My Commission Expires:			



ACKNOWLEDGEMENT OF FEDERAL LAW AND RELEASE OF LIABILITY

(Use BLUE ink ONLY)

_, (applicant) being first duly sworn upon oath or affirmation and does hereby

acknowledge and agree that:

The Federal Controlled Substances Act, Title II of the Comprehensive Drug Abuse Prevention and Control Act of 1970, 21 U.S.C. § 801 et seq. regulates marihuana as a Schedule I controlled substance for which there is "no currently accepted medical use in treatment in the United States." 21 U.S.C. § 812(b)(1)(B). Although the State of Michigan has recognized and authorized the licensing of marihuana establishments and use of marihuana for certain persons pursuant to the Michigan Medical Marihuana Facilities Licensing Act, MCL 333.26421 et seq., and the Michigan Regulation and Taxation of Marihuana Act, MCL 333.27951 et seq. Further, the state has provided for a statewide monitoring system pursuant to the Marihuana Tracking Act, MCL 333.27901 et seq., these state authorized activities remain prohibited by federal law.

I understand that a Michigan or city operating license does not insulate or shield me or my business from federal seizure and/or forfeiture as allowed by federal law and does not insulate me from federal criminal arrest and/or prosecution.

I understand that choosing to file an application for a marihuana city operating license and, if issued, choosing to establish and operate a marihuana establishment pursuant to that license, is done so at my own risk.

By my signature and attestation to this form, I hereby completely release and forever discharge the City of Pleasant Ridge, and its respective employees, agents, attorneys, facilities, insurers, indemnors, successors, heirs and/or assigns from any and all past, present, or future claims, demands, obligations, actions, causes of action, wrongful death claims, rights, damages, costs, losses of services, expenses and compensation of any nature whatsoever, whether based on a tort, contract, or other theory of recovery which I may now have, or which may hereafter accrue or otherwise be acquired, on account of or any way arise out of my application for a marihuana city operating license and, if issued, a city operating license, my operation of a marihuana establishment.

Signature of Applicant		Printed Name		Date
Notary:				
Subscribed and sworn to by (ap	plicant name):		before me on (date):	
Notary Public Signature:				
Notary Public Printed Name:				
Acting in the County of:				
My Commission Expires:				



COVENANT NOT TO SUE

(Use **BLUE** ink ONLY)

I, ______, (applicant) being first duly sworn upon oath or affirmation and does

hereby acknowledge and agree that:

I understand that granting of a city operating license to operate a marihuana establishment is a privilege and not a right and does not confer upon the applicant any business expectation or any other possible cause of action if I am denied a city operating license by the City of Pleasant Ridge.

I understand and agree that the City of Pleasant Ridge will be reviewing and granting city operating license(s) to applicant(s) based on a competitive process and I understand and agree that by choosing to submit an application to the City of Pleasant Ridge fora city operating license to operate a marijuana establishment that it is done so at my own cost, risk, and peril and that the City of Pleasant Ridge shall have no liability whatsoever if I am not granted a city operating license for any reason.

The applicant, myself, and any subsidiaries, affiliates, officers, directors, shareholders, managers, members, successors, and assigns forever covenant and agree not to sue or bring any action in law, or in equity, including, but not limited to, an action in any court, forum, tribunal or arbitration proceeding whether by original process or demand, counterclaim, cross-claim, third-party process, impleader, claim for indemnity or contribution or otherwise against the City of Pleasant Ridge, its respective employees, agents, attorneys, facilities, insurers, indemnors, successors, heirs and/or assigns, arising from, referring to, relating to, or in connection with this application or the City of Pleasant Ridge Municipal Code regarding marihuana facilities.

Signature of Applicant		Printed Name		Date
Notary:				
Subscribed and sworn to by (ap	olicant name):		before me on (date):	
Notary Public Signature:				
Notary Public Printed Name:				
Acting in the County of:				
My Commission Expires:				



INDEMNIFICATION, DEFEND, AND HOLD HARMLESS

(Use **BLUE** ink ONLY)

I, _____, (applicant) being first duly sworn upon oath or affirmation and does

hereby acknowledge and agree that:

The applicant, myself, and any subsidiaries, affiliates, officers, directors, shareholders, managers, members, successors, and assigns agree, at our own expense, that we shall protect, defend, indemnify and hold harmless the City of Pleasant Ridge, its council, officers, administrators, employees, attorneys, agents, affiliates, successors and assigns, from all claims, damages (including, but not limited to, direct, indirect, incidental, consequential, special and punitive damages), costs, lawsuits, and expenses including, but not limited to, all costs from administrative proceedings, court costs, and attorney fees, that they may incur as a result of any acts, omissions or negligence of applicant, myself, and any subsidiaries, affiliates, officers, directors, shareholders, managers, members, successors, and assigns which may arise out of the operation of a marihuana establishment in the City of Pleasant Ridge.

In the event any suit, proceeding, claim, loss, damage, charge, or expense shall be brought against the City of Pleasant Ridge, its council, officers, administrators, employees, attorneys, agents, affiliates, successors and assigns by virtue of the above-referenced activity, the applicant, myself, and any subsidiaries, affiliates, officers, directors, shareholders, managers, members, successors, and assigns hereby covenants and agrees to assume the defense therefore and defend the same at its own expense and pay all costs, charges, attorney fees, and any other expenses thereto.

Signature of Applicant	Printed Na	me	Date
Notary:			
Subscribed and sworn to by (ap	plicant name):	before me on (date): _	
Notary Public Signature:			
Notary Public Printed Name:		_	
Acting in the County of:			
My Commission Expires:			



APPLICANT'S AGREEMENT AND COVENANT TO FULFILL

(Use **BLUE** ink ONLY)

I, ______, (applicant) hereby acknowledge that I have made representations in this application pertaining to my proposed use and activities at the location and in the City of Pleasant Ridge (City).

I swear (or affirm) that the representations and information contained in this application pertaining to my proposed use and activities at the location and in the City of Pleasant Ridge, are true, complete, and accurate to the best of my knowledge and belief and that I have full authority to make these representations.

The applicant agrees, at its own expense, that if it is granted a city operating license to operate a marihuana establishment in the City of Pleasant Ridge, that it shall fulfill and satisfy all representations and information contained in this application regarding the proposed use and activities at the location and in the City of Pleasant Ridge. The applicant agrees that these representations constitute: (1) a clear and definite promise; (2) that these promises are expected to induce reliance by the City of Pleasant Ridge and that the City of Pleasant Ridge is relying on the promises in awarding a city operating license; and (3) that injustice can be avoided only by enforcing the promises. Any approval for a city operating license to operate a marihuana establishment by the City of Pleasant Ridge shall be conditioned upon fulfillment of these representations and information contained in the application packet.

The applicant agrees that if it refuses, neglects, or otherwise fails to fulfill or satisfy any of the representations or information contained in this application regarding the proposed use and activities at the location and in the City of Pleasant Ridge, that the City of Pleasant Ridge shall have the right to suspend or revoke the city operating license.

Further, I swear (or affirm) that any or all future or presently Pleasant Ridge owned properties are not and will not be in default to the city for tax obligations or any other kind of debt owed to the City of Pleasant Ridge, on the proposed location or any other Pleasant Ridge property(ies) owned by the applicant.

Signature of Applicant	Р	rinted Name	Date
Notary:			
Subscribed and sworn to by (ap	plicant name):	before me	on (date):
Notary Public Signature:			
Notary Public Printed Name:			
Acting in the County of:			
My Commission Expires:			