BOROUGH OF GLASSBORO

CANNABIS LICENSE APPLICATION

Applications will be received by the Borough of Glassboro on a rolling basis.

Applications are to be delivered to the Borough of Glassboro at the offices of the Borough of Glassboro Clerk, located at 1 South Main Street, Glassboro NJ 08028.

Applicants shall submit an original and one paper copy of the application as well as a digital copy on a flash drive. The application shall be in a sealed envelope, clearly marked on the outside with the words "Glassboro Cannabis License Application" and the name and address of the applicant. Applicants shall not use plastic covers or sheets for their applications. Binders are also discouraged.

Applicant shall include a check made payable to the Borough of Glassboro for the appropriate application fee amount listed in Item 16 of the application form.

Applicants shall assume full responsibility for the delivery of their application to the offices of the Borough Clerk.

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A. This license application is subject to the provisions and exceptions set forth in the New Jersey Open Public Records Act, N.J.S.A. 47:1A-1 et seq. and as such the application is considered public information.

B. A license application shall be deemed incomplete, and shall not be processed, until all documents and application fees are submitted. Once the Borough of Glassboro has determined the application is complete, it will notify the Applicant. .

C. The Borough of Glassboro may approve or deny an application for a municipal cannabis license at its sole discretion, consistent with all governing State Law, based on an evaluation of the benefits to the Borough of Glassboro.

1. Date of Application:

2. Applicant Information:

- Legal name of business registered to do business in the State of New Jersey:
- Address:
- Email:
- Phone:
- Website (if any):
- Name of primary contact for the business:
- Title
- Address:
- Email
- Phone:
- Trade name, alternate name or "doing business as" name of cannabis establishment:

3. Applicant must provide:

- New Jersey Business Registration Certificate
- Federal Tax Identification Number
- State Tax Identification Number

4. Does the Applicant operate an Alternative Treatment Center in Glassboro?

___ Yes – If yes, what is the name and address of the Alternative Treatment Center?

___ No –

5. Applicant Business Structure:

Attach proof of business structure such as articles of incorporation, by-laws, partnership agreements, and other documentation that supports the structure.

____ Corporation

____ Partnership

____ Limited Partnership

____ Individual

____ Other (Describe)

6. Business Ownership

Provide a complete list of every person with over 10% interest in the proposed cannabis business including the full name, title within the entity, date owner acquired interest in entity, the percentage of ownership interest, and financial interest in any other cannabis business. If an owner meets the criteria for social equity, minority, woman, disable veteran or micro-business owner (see section M, N and O), indicate with a Yes.

	#1	#2	#3	#4
Name				
Title				
Date Ownership Acquired				
Percentage of Ownership				
Financial Interest in Another Cannabis Establishment				

Social Equity Business Owner				
Minority Business Owner				
Woman Business Owner				
Disable Veteran Business Owner				
Micro-business Owner				

If any person above is listed as having an interest in another cannabis establishment, provide further information:

7. Has any person above had any cannabis license or permit revoked for a violation affecting public safety in New Jersey or a subdivision in the state within the preceding five (5) years?

____ Yes – If yes, provide further information.

____ No

8. Type of Municipal Cannabis License Requested:

____ Class I Cultivator

____ Class II Manufacturer

____ Class III Wholesaler

____ Class IV Distributor

____ Class V Retailer

____ Class VI Delivery

9. Has the Applicant secured a New Jersey cannabis license as of the date of this application?

____ Yes – If yes, provide a copy of the state cannabis license

____ No – If no, what is the status of the Applicant's state cannabis license application?

10. Address of Proposed Glassboro Cannabis Establishment:

Provide proof the Applicant has or will have lawful possession of the proposed premises with a deed, lease, real estate contract contingent on successful licensing, or a binding letter of intent from the owner of the premises contingent on successful licensing.

If property is leased, provide name, address, email address and phone number for property owner or owner's agent.

NOTE: The proposed location shall meet all requirements set forth in Chapter 107, Development Regulations and Zoning, of the Code Book of the Borough of Glassboro.

11. Has the Applicant secured a Zoning Review of the proposed location affirming that the proposed cannabis establishment is a permitted use in the location above?

____ Yes – If yes, provide a copy of the approval.

____ No – If no, what is the status of the Applicant's Zoning Review.

If the Zoning Review determined that the proposed cannabis operation is not a permitted use in the location above, has the Applicant secured approval for the cannabis operation from the Glassboro Planning Board or Glassboro Zoning Board of Adjustment?

____ Yes

____ No

12. Evaluation Criteria:

The following are to be answered in paragraph form in an attached document, using the number that corresponds to each criterion. Responses are to be word limited as indicated below.

1. Describe qualifications and experience of the Applicants/owners in operating in highly regulated industries in New Jersey or another state, including cannabis, healthcare, pharmaceutical manufacturing, and retail pharmacies. (Response not to exceed 2,500 words).

2. Describe plans qualifications and experience related to public safety and security, including any of the applicant's owners' or principals' experience in law enforcement and drug enforcement (Response not to exceed 1,000 words), and a summary of plans for storage of products and currency, physical security, video surveillance, security personnel, and visitor management (Response not to exceed 2,500 words).

3. Describe experience conducting or supporting or plans to conduct institutional review board-approved research involving human subjects that is related to medical cannabis or substance abuse, where the value of past or ongoing clinical research with IRB approval shall outweigh plans to conduct such research, whether the applicant has had any assurance accepted by the U.S. Department of Health & Human Services indicating the applicant's commitment to complying with 45 CFR Part 46 (five percent), and whether the applicant has a research collaboration or partnership agreement in effect with an accredited U.S. school of medicine or osteopathic medicine with experience conducting cannabis-related research (Response not to exceed 2,500 words).

4. Describe experience as a responsible employer or a commitment to being a responsible employer. Examples are providing employee health care insurance, providing paid family leave and/or paying a $15 minimum wage. If the Applicant is a party to a collective bargaining agreement for at lease one year prior to the Glassboro application, the Applicant will receive evaluation points and no further response is needed. (Response not to exceed 1,500 words).

5. Describe environmental impact and sustainability plan; whether the applicant entity or its parent company has any recognitions from or registrations with federal or New Jersey state environmental regulators for innovation in sustainability (three percent); and whether the applicant entity or its parent company holds any certification under international standards demonstrating the applicant has an effective environmental management system or has a designated sustainability officer to conduct internal audits to assess the effective implementation of an environmental management system (Response not to exceed 500 words);

6. Describe ties to the host community, demonstrated by at least one owner's proof of residency in Glassboro for five or more years or at least one owner's continuous ownership of a business based in Glassboro for five or more years in the past ten years. If applicable, provide deed and/or lease of home or business location with indication of how many years in Glassboro (Response not to exceed 500 words).

7. Describe a demonstrated commitment to diversity in its ownership composition and hiring practices. If applicable, provide evidence of ownership composition or hiring practices that have increased or will increase diversity with regarding to race, culture, gender and sexual identity (Response not to exceed 1,500 words)..

13. Proposed Hours of Operation.

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday

- Saturday
- Sunday

14. Affirmative Action, Anti-Discrimination and Fair Employment.

1. Provide an affidavit and documentary proof of compliance with all state and local laws regarding affirmative action, anti-discrimination and fair employment practices.

2. Provide a certified statement under oath there will be no discrimination based on race, color, religion (creed), gender, gender expression, gender identity, age, national origin (ancestry), disability, marital status, sexual orientation or military status in any of the Applicant's activities or operations.

15. Financial Information.

1. Describe the financial capability of the Applicant to open and operate a cannabis establishment and the sources of funds to do so.

2. Provide name, address, email address, phone number and age of each person/entity with a non-ownership financial interest in the cannabis establishment, which shall include an investment, loan or any other type of equity.

3. Provide proof of financial capability can be in the form of a five (5) year business pro-forma, business financial statements and/or something equivalent.

16. Initial Application Fee.

Applicant has attached an application fee as described below:

__	Class I Cultivator	$10,000
__	Class 2 Manufacturer	$10,000
__	Class 3 Wholesaler	$10,000
__	Class 4 Distributor	$10,000
__	Class 5 Retailer	$10,000
__	Class 6 Delivery	$ 5,000

17. Acknowledgment of Provisions of Glassboro Ordinance No. 22-05 to Regulate Cannabis Businesses in the Borough of Glassboro.

The undersigned, on behalf of the cannabis license applicant, _____, declares under penalty of perjury that I have read and understand the provisions of Glassboro Ordinance No. 22-05, and that the operation of this cannabis establishment must adhere to all the requirements of Glassboro's Municipal Code and all other applicable state and local laws and all regulations promulgated thereunder.

I understand that I am the responsible party for any violation(s) of the cannabis establishment that may arise.

I understand and acknowledge that a license issued based on false or misleading statements provided in this application will be deemed invalid and subject to revocation.

I understand that the Borough of Glassboro Mayor and Council may approve or deny an application for a municipal cannabis license at its sole discretion, consistent with all governing State Law, based on an evaluation of the benefits to the Borough of Glassboro.

I declare under penalty of perjury under the laws of the State of New Jersey that the foregoing statements are true and correct.

_____	_____
Signature	Date
_____	_____
Print Name	Date
_____	_____
Title	Date