

CITY OF MARLETTE, MICHIGAN

**MARIHUANA BUSINESS ESTABLISHMENT
APPLICATION**

Please type or print clearly:

I. APPLICANT INFORMATION*			
Applicant Name:	Doing Business As:		
Applicant Date of Birth:	Applicant Social Security Number or EIN:		
Applicant Residential Address:	City:	State:	Zip:
Applicant Business Address:	City:	State:	Zip:
Telephone Number:	E-mail Address:		
Emergency Contact Telephone Number:			

**If the applicant is not an individual, the above information must be provided for each partner, member, shareholder, and all other individuals with financial interest in the applicant entity on an attached sheet.*

II. PROPOSED MARIHUANA ESTABLISHMENT TYPE	
☐ Grower – Class C (up to 2,000 Plants per License)	☐ Marihuana Retailer (21+ adult use only)
____ Number of Stacked Class C Grower Licenses Requested	☐ Marihuana Provisioning Center (medical use only)

III. PROPOSED MARIHUANA ESTABLISHMENT LOCATION			
<i>A separate application and application fee of \$1,000.00 is required for each license type and for each license if not proposed to be stacked at a single location. Only one application and fee is required for proposed stacked licenses at a single location.</i>			
Property Address:	Zoning District:	Tax ID Number:	
Legal Description (available from deed, City Assessor's Office, or City website – can be provided on separate sheet):			
Property Status:			
☐ Owned	☐ Leasing	☐ Option	☐ Land Contract
Owner Name (if different than applicant):			
Owner Mailing Address:	City:	State:	Zip:
Owner Telephone Number:	Owner E-mail Address:		

IV. PERSON COMPLETING APPLICATION (if different than applicant)			
Name:	Affiliation with Applicant:		
Mailing Address:	City:	State:	Zip:
Telephone Number:	E-mail Address:		

V. APPLICATION MATERIALS
The following is a checklist of items that must be submitted with applications for Marihuana Establishments. Incomplete applications will not be processed. ☐ Completed application form ☐ Non-refundable application administrative fee (\$1,000) ☐ Advance of the full annual administrative/license fee (\$5,000 per license requested regardless of whether they are stacked or not.) ☐ A photocopy of a valid, unexpired driver's license or state issued identification card for all owners, shareholders, members, directors, officers and others with a financial interest in the proposed establishment ☐ A photocopy of articles of incorporation or organization along with any amendments thereto ☐ A certificate of good standing issued by the State of Michigan, if applicable ☐ A photocopy of assumed name registration with the State of Michigan ☐ A photocopy of Internal Revenue Service EIN confirmation letter ☐ A photocopy of the operating agreement of the applicant, if a limited liability company; the partnership agreement, if a partnership; the names and addresses of the beneficiaries and a complete copy of the Trust, if a Trust; or the bylaws or shareholder agreement, if a corporation ☐ A complete list of all marihuana permits and licenses held by the applicant ☐ A location area map of the marihuana establishment and surrounding area that identifies the relative locations and the distances (closest property line to the subject marihuana establishment's building) to the closest real property comprising a public park, private or private elementary, vocational or secondary school ☐ A photocopy or digital copy of all documents submitted by the applicant to the Cannabis Regulatory Agency in connection with the application for a state operating license under the MRTMA and the MMMFLA, if applicable (including documents submitted for prequalification) ☐ A photocopy or digital copy of all documents submitted by the applicant to the Cannabis Regulatory Agency in connection with the application for a state operating license under the MMFLA, if applicable ☐ A photocopy or digital copy of the deed for the proposed establishment showing the current owner and, if the applicant is not the owner, a copy of the lease, land contract, option agreement or other document which grants the applicant an interest in or permission to use the property ☐ A photocopy or digital copy of all documents issued by the Cannabis Regulatory Agency indicating the applicant has been prequalified for a state operating license to operate the proposed Marihuana Establishment for which applicant seeks a permit from the City of Marlette. ☐ Proposed investment budget with water/sewer use projected calculations ☐ Business plan, including the number of local jobs created and salary range ☐ Traffic Control plan and/or traffic study

VI. CERTIFICATION AND WAIVER

I, the undersigned, have the authority to sign this application on behalf of myself and the above-named entity. I have read all of the above answers, and they are true and correct. Applicant agrees to comply with all terms and conditions of a license/authorization as it may be issued. I consent to the City of Marlette having the ability to inspect the establishment at any time during normal business hours to ensure compliance with applicable laws and regulations. Applicant understands that Marihuana Establishments may not be legal under Federal Law and may not be permitted in the future under the City of Marlette Code of Ordinances. Applicant understands that authorizations/licenses available to operate Marihuana Establishments may be limited in number or type. I acknowledge that in the event more applications are received for the establishment type(s) than permitted by ordinance, pursuant to City Ordinance, and Michigan law, a competitive review process will occur to select among competing applications. I understand that participation in that competitive review process may or may not result in Applicant receiving authorization(s) as requested. Applicant certifies that it has reviewed the City of Marlette Code of Ordinances and Zoning Ordinance applicable to Marihuana Establishments and that if the City of Marlette authorizes applicant to operate a Marihuana Establishment within the City, Applicant agrees to comply with all Ordinances, regulations and laws applicable to Marihuana Establishments, as are amended from time to time.

By submitting this application, Applicant agrees to be bound by the conditions and processes detailed in City of Marlette Code of Ordinances and Zoning Ordinances as amended from time to time. Applicant further acknowledges that the City of Marlette is not obligated to renew authorizations and that Applicant has no vested right to renewal.

The City of Marlette has not made any representations or promises to Applicant concerning this application or the proposed Marihuana Establishment.

Signature: _____

Date: _____

VII. PROPERTY OWNER AUTHORIZATION

If the applicant is anyone other than the property owner, the property owner hereby grants permission for the applicant to act on his/her behalf. (Authorization may be submitted via a separate signed letter)

Signature: _____

Date: _____

OFFICE USE ONLY

Application

Application received by City Clerk's Office Date and Time: _____ Staff Signature: _____

Conditional Authorization Issued by City Clerk's Office Date and Time: _____ Staff Signature: _____

Final Authorization Issued by City Clerk's Office Date and Time: _____ Staff Signature: _____

Return this completed application and all required materials to:

City of Marlette Clerk

6436 Morris Street, Marlette, Michigan 48453

Completed applications must be submitted to the Clerk by appointment only Monday-Thursday 8:00 am – 3:00 pm during the open application window of 9/28/26 to 10/8/26 to be considered.

Application Form Approved by City Council: 8/17/26