AUTHORIZATION TO USE PROPERTY FOR A MARIJUANA BUSINESS

Date:
Business Name:
Registered Trade Name:
Applicant Name:
Property Owner:
Property Address:

As owner of the property described above, I hereby consent to the use of said property for the purpose of conducting a marijuana business so long as said use is authorized under and in accordance with applicable state and local laws. This consent is valid under the following terms and conditions:

✓*Check all that apply:*
☐Medical Marijuana Center
☐Medical Marijuana Cultivation Facility
☐Retail Marijuana Cultivation Facility

I understand that the lessee must operate the business on the property described above under the provisions of Chapter 6, Article XIII and Article IX of the Rifle Municipal Code and State laws. I further understand cultivation operation must occur indoors and be equipped with a proper ventilation system that filters out the odor of marijuana so that the odor is not capable of being detected by a person with a normal sense of smell at any adjoining business, parcel, or tract of real property. I further understand that in issuing a marijuana business license, the City of Rifle assumes no legal liability or duty of care regarding the licensee-s business operation or possession of the property.

I hereby release the City, its officers, elected officials, employees, attorneys and agents from all liability for claims of damages of any kind whatsoever, present or future, in any way relating to or arising from the conduct of the lessee/licensees business operation on said property.

_____ _____
Signature of Property Owner or Authorized Agent Printed Name of Property Owner/Agent

_____ _____
Date Company Name/Address Telephone

State of _____)
)ss.
County of _____)

Subscribed and sworn to before me this_____day of_____, 20_____.

_____ My Commission Expires: _____
Notary Public Signature