

**ATTESTATION R-A**  
**CONFIRMATION OF MRTMA AND RULE COMPLIANCE**

**(To be completed and submitted by the applicant)**

Do not sign until notary is present

Adult-Use Establishment Name: \_\_\_\_\_

Adult-Use Establishment Address: \_\_\_\_\_

Adult-Use Establishment Type: \_\_\_\_\_

Adult-Use Establishment License Number: \_\_\_\_\_

On behalf of \_\_\_\_\_, I \_\_\_\_\_,  
Legal Name of Renewal Applicant Name & Title of Individual Authorized to Sign on Behalf of Renewal Applicant

am requesting renewal of the above adult-use marihuana establishment license. I acknowledge that I am the person responsible for submitting this renewal application and supporting documents.

I hereby certify that the information provided in this renewal application is current, complete, true, and accurate, and that the licensee has fulfilled its obligation under the MRTMA and associated rules to notify the agency of any change in information provided in its original marihuana license application and subsequent renewal applications or forms previously filed, if applicable.

I attest that this renewal application provides all information and documentation required by the agency to establish that the licensee is eligible, qualified, and suitable to have its marihuana license renewed and is ready and able to continue conducting its marihuana business in compliance with the MRTMA and associated rules throughout the new 1-year time period for which the license is to be renewed.

Further, I affirm, under the penalties of perjury, that the information set forth in this renewal application and all supporting documents is true, complete, and correct, and that no material information has been omitted.

\_\_\_\_\_  
Signature of Individual Authorized to Sign on Behalf of Renewal Applicant

\_\_\_\_\_  
Date

Subscribed and sworn to by \_\_\_\_\_ before me on \_\_\_\_\_.  
(Authorized Individual Name) (Date)

\_\_\_\_\_  
(Notary Public Signature)

\_\_\_\_\_  
(Notary Public Printed Name)

State of \_\_\_\_\_, County of \_\_\_\_\_, Acting in the county of \_\_\_\_\_, \_\_\_\_\_.  
(county) (state)

My commission expires: \_\_\_\_\_.