CANNABIS REGULATORY AGENCY

Medical Facilities Licensing | Licensing Division
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SUPPLEMENTAL INDIVIDUAL PREQUALIFICATION

Supplemental Individual Prequalification Application

- ☐ Page 1: Supplemental Individual Prequalification Checklist
- ☐ Page 2: Supplemental Individual Demographics
- ☐ Page 3: ATTESTATION A – Acknowledgment, Agreement, & Consent
- ☐ Page 4: ATTESTATION B – Authorization to Release Information
- ☐ Page 5: ATTESTATION C – Verification & Affidavit of Full Disclosure
- ☐ Page 6: ATTESTATION D – Acknowledgment of Federal Law & Release of Liability
- ☐ Page 7: ATTESTATION F – Confirmation of Tax Compliance
- ☐ Page 8: Acknowledgement of Attestations (signed and notarized)
- ☐ Page 9: DISCLOSURE 1 – Individual Information
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Supporting Documents

Identity Documents

- ☐ Copy of Government Issued ID

Debt, Insolvency, or Bankruptcy Documents

- ☐ Copy of Discharge Documentation (if applicable)

Tax Liability and Delinquency Documents

- ☐ W2s, 1099s and/or Schedule K-1s for most recent year (if no W2s,1099s and/or Schedule K-1s exist, submit an explanation)
- ☐ Copy of Initial Notice and Notice of Release (if applicable)
- ☐ Copy of Payment Plan Documentation (if applicable)

Regulation Documents

- ☐ Copy of Marijuana Licenses (if applicable)
- ☐ Copy of Any Other Commercial Licenses or Any Comparable License from Other Jurisdictions (if applicable)
- ☐ Summary of Facts and Circumstances Concerning License Denial, Restriction, Revocation, Suspension, or Nonrenewal (if applicable)

Criminal History Documents

- ☐ Copy of Criminal History Documents (if applicable)

Litigation History

- ☐ Copy of Complaint (if applicable)
- ☐ Copy of Judgment (if applicable)