

Adult-Use Licensing | Licensing Division Cannabis Regulatory Agency P.O. Box 30205 Lansing, MI 48909 Telephone: (517) 284-8599

CRA-AdultUseLicensing@Michigan.gov

ATTESTATION 6-A

ACKNOWLEDGMENT & CONSENT TO INVESTIGATIONS, STATUTE & RULE COMPLIANCE

(To be completed and submitted by the applicant)

On behalf of _		, I	
	Name of Applicant		Name & Title of Individual Authorized to Sign on Behalf of Applicant
acknowledge that I am the person responsible for submitting this application and supporting documents.			

I hereby acknowledge that the Cannabis Regulatory Agency (Agency) may require supplemental materials to carry out its statutory duties. I agree to submit such supplemental materials as requested in a timely manner. I understand that if the Agency identifies a deficiency in an application, the agency shall notify the applicant and the applicant shall submit the missing information or proof that the deficiency has been corrected to the agency within 5 days of the date the applicant received the deficiency notice. I acknowledge that failure to provide requested disclosures and documentation or to correct any notice of deficiency within 5 days of its receipt may result in the <u>denial</u> of an application.

I attest that the application information related to the governing municipality for the marijuana establishment which is the subject of this application is complete and accurate. Further, I attest that the use of the premises described therein complies with all covenants, easements, restrictions, and other matters of record including the use provisions of any applicable zoning ordinance and all other governmental requirements.

I hereby consent to investigations of compliance, regular inspections, examinations, searches, seizures, and auditing of books and records as provided in MRTMA Section 7 and the MRTMA Administrative Rules.

I understand that in failing to cooperate with an investigation process, the Agency may impound, seize, assume physical control of, or remove from the premises all books, ledgers, documents, writings, photocopies, correspondence, records, and videotapes, including electronically stored records, money receptacles, or equipment in which the records are stored. Failure to assist in an investigation may also result in denial, suspension, revocation, or restriction of a license. I understand that sanctions may be imposed for violations on a licensee while licensed or after the marijuana license has expired.

I acknowledge that I shall have a physical structure ready for inspection so that I may receive a passing inspection by the 60th day after my complete application is submitted. In the event I do not have a passing inspection by the 60th day, I acknowledge that my application may be denied.

I attest that I shall apply for and obtain the necessary registration from the United States Drug Enforcement Administration (DEA) after the issuance of a license and will provide proof of registration to the Agency before engaging in any licensed activity.

I understand that I am required to notify and report to the Agency in writing within 24 hours of becoming aware of loss of institutional affiliation, loss of institutional accreditation, loss or restriction of DEA registration, or theft, loss, diversion, or criminal activity at the licensed location.

I attest that I shall prohibit marijuana or marijuana products grown, produced, or obtained under the license to be consumed or sampled on the licensed premises unless I am approved to engage in a research study under the Administrative Rules or I obtain express written permission from the Agency.

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