

Retail – CANNABIS Operations



Legal Business Name: _____

DBA(s): _____ Website Address: _____

1st Year in Business: _____ Month/Year Final Cannabis License Issued? _____

Total Current Payroll (\$): _____ Total Current Gross Sales (\$): _____

Summary of Operations:

Anticipated Growth/Expansion within the next 1 to 3 years:

Total Number of Employees: ____

Employee Breakdown: Full Time ____ Part Time ____ Seasonal ____ Volunteer ____ Leased/Contracted ____

Employee Turnover Rate: ____ % Average Age of Employees: ____ Average Tenure: ____ Years

LIST AND IDENTIFY ALL ADDRESSES:

Corporate Address: _____

Are operations conducted at this location? Yes No If yes, what type of Licenses:

(Click All that Apply) Recreational Medical Cultivation/Production Extraction Processing/Kitchen Delivery

Loc. 2. _____

Type of Licenses: (Click All that Apply) Recreational Medical Cultivation/Production Extraction Processing/Kitchen Delivery

Loc. 3. _____

Type of Licenses: (Click All that Apply) Recreational Medical Cultivation/Production Extraction Processing/Kitchen Delivery

Loc. 4. _____

Type of Licenses: (Click All that Apply) Recreational Medical Cultivation/Production Extraction Processing/Kitchen Delivery

PLEASE REPLY WITH A **YES** FOR ALL THAT APPLY OR SELECT **N/A** IN THE NOTED CATEGORY.

Retail Sales Yes / N/A

1. Are there panic buttons at the customer service counter? Yes No
2. Are Teller Cash Recyclers used? Yes No If yes, then are they used at all retail locations? Yes No
3. Is an armored truck service used for handling cash outside of the business? Yes No

Cultivation Yes / N/A

1. Total number of grow rooms? ____ Average number of flower pots per room? ____
2. Are the flower pots filled? Hand Machine Is the soil reused? Yes No
3. How are the plants watered? By hand Through a water tubing system Both
4. What type of trimming scissors are being used on the flowers?
5. How are the cannabis buds packaged? Hand Machine Both

CONTINUED

Retail –CANNABIS Operations



Extraction Yes / N/A

1. What chemicals are used in this process?
 2. Is there an emergency eye wash station capable of providing a constant 15-minute flow of water? Yes No
-

Processing / Kitchen Operations Yes / N/A

1. Is a mixing bowl dolly used for moving a full mixing bowl of product around the kitchen? Yes No N/A
 2. What is the maximum amount of weight moved manually by one person? _____
 3. Are cannabis products packaged by hand or machine? Hand Machine Both
-

Delivery Yes / N/A

(If yes, check all that apply) Delivery to: Own Retail Stores Wholesale Customers Residential Other:

1. Number of company owned vehicles? ____ Box Trucks ____ Cargo Vans ____ Sedans Other:
 2. Are the vehicles equipped with GPS and video camera system? Yes No
 3. Are all drivers over 23 years old? Yes No
 4. How often are MVR's for drivers pulled? Annual Semi-annual Quarterly Other:
-

Security Yes / N/A

1. Is security a contracted service? Yes No
2. Are security officers armed? Yes No
3. How many unarmed security guards are on staff? _____
4. Are security cameras present throughout? Yes No
5. Are security badges used for opening doors? Yes No
6. Burglar alarm and central station monitoring? Yes No
7. Name(s) of monitoring company/fire or police station alarm is reported to?

8. Have there been any burglary or robbery attempts in the last 3-5 years? Yes No (If yes, please provide details.)

9. Any unusual job tasks performed by employees that are outside the scope of work for your industry? Yes No

(If yes, please list and give a brief explanation.)

Name (of person completing the form) _____ Title _____

Signature _____