**Maryland Department of Health Mental Hygiene**

**Maryland Medical Cannabis Commission (“MMCC”)**

**Application for Medical Cannabis Processor License**

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**Publication Release Date:**

**September 28, 2015; Revised, October 7, 2015**

**Application Response Deadline:**

**Accepting Applications Period: September 28, 2015–November 6, 2015**

**Business Days: M–F, 8:00 am–4:00 pm**

**For additional information regarding the Application process, please contact:**

**Natalie M. LaPrade Medical Cannabis Commission**

**Department of Health and Mental Hygiene**

**Dedicated Email Address for Applicant Questions:** [dhmh.medicalcannabisApplications@maryland.gov](mailto:dhmh.medicalcannabisapplications@maryland.gov)

**APPLICATION INFORMATION SHEET**

|  |  |  |
| --- | --- | --- |
| **1** | **COMPANY NAME** | Company Name |

|  |  |  |
| --- | --- | --- |
| **2** | **STREET ADDRESS** | Street Address |

|  |  |  |
| --- | --- | --- |
| **3** | **CITY, STATE, ZIP** | City, State, Zip |

|  |  |  |  |
| --- | --- | --- | --- |
| **4** | **TELEPHONE NUMBER** | | |
| **AREA CODE**  Area Code | **NUMBER:**  Number | **EXTENSION:**  Extension |

|  |  |  |  |
| --- | --- | --- | --- |
| **5** | **FAX NUMBER** | | |
| **AREA CODE**  Area Code | **NUMBER:**  Number | **EXTENSION:**  Extension |

|  |  |  |  |
| --- | --- | --- | --- |
| **6** | **TOLL FREE NUMBER** | | |
| **AREA CODE**  Area Code | **NUMBER:**  Number | **EXTENSION:**  Extension |

|  |  |
| --- | --- |
| **7** | **Contact Person for providing information, signing documents, or ensuring actions are taken per COMAR 10.62.19-.24** |
| **Name:** Name |
| **Title:**  Title |
| **Address:** Address |
| **Email Address:** Email Address |

|  |  |  |  |
| --- | --- | --- | --- |
| **8** | **TELEPHONE NUMBER AND FAX FOR CONTACT PERSON** | | |
|  | **AREA CODE**  Area Code | **TELEPHONE NUMBER:**  Number | **EXTENSION:**  Extension |
|  | **AREA CODE**  Area Code | **FAX NUMBER:**  Number | |

|  |  |  |
| --- | --- | --- |
| **9** | **CONTACT PERSON SIGNATURE** | |
|  | **SIGNATURE:** | **DATE:**  Click here to enter a date. |

**TABLE OF CONTENTS**

|  |  |  |
| --- | --- | --- |
| **SECTION** | **SECTION TITLE** | **PAGE NUMBER** |
| **A** | **Introduction** | **5** |
| **B** | **Number of Processor**  **Licenses** | **5** |
| **C** | **Processor Intention to Operate**  **A Dispensary** | **5** |
| **D** | **Processor Intention to Operate**  **As a Grower** | **5** |
| **E** | **Terms and Definitions** | **6** |
| **F** | **Application Timeline** | **8** |
| **G** | **Application Submission Instructions** | **8** |
| **H** | **Evaluation and Selection Procedures** | **9** |
| **I** | **Important Notices/Disclaimers** | **11** |
| **J** | **Communications with MMCC** | **12** |
| **K** | **Consent for Investigation** | **12** |
| **L** | **Waiver of Any Contractual, Statutory, or**  **Common Law Obligation of Confidentiality** | **12** |
| **M** | **Data Practices** | **13** |
| **N** | **Amending an Application** | **14** |
| **O** | **Criminal History Record Check** | **14** |
| **P** | **How to Apply** | **15** |
| **Q** | **Awarding of License Pre-Approval** | **16** |
| **R** | **Rescission of Dispensary License** | **17** |
| **S** | **Denial or Disqualification of Application or Pre-Approval of a License** | **17** |
| **T** | **Application Ranking and Weighted Criteria** | **17** |
| **U** | **Affirmation Section** | **19** |

**FORMS/Addenda CHECKLIST**

|  |  |  |  |
| --- | --- | --- | --- |
| **FORM/Exhibit #** | **Name/Description of Exhibit** | **Included**  **Yes** | **Not**  **Included** |
| **Form 1** | **Consent for Investigation – Individual/Processor Agent** |  |  |
| **Form 2** | **Consent for Investigation – Business Entity** |  |  |
| **Form 3** | **Trade Secret & Business Data Notification** |  |  |
| **Form 4** | **Business Interest Identification & Authorization Form** |  |  |
| **Form 5** | **Investors, Agents, Owners & Managing Director Certification Statement** |  |  |
| **Addenda** |  |  |  |

**SECTION A: INTRODUCTION**

**Maryland Department of Health and Mental Hygiene**

**Natalie M. LaPrade Maryland Medical Cannabis Commission**

**Medical Cannabis Processor License Application**

The State of Maryland, Department of Health and Mental Hygiene Natalie M. LaPrade Maryland Medical Cannabis Commission (“MMCC” or “Commission”) is seeking Applications from qualified Applicants interested in receiving a Medical Cannabis Processor License.

On October 1, 2013, the Commission became responsible for administering Maryland’s Medical Cannabis program, the effective date of the enactment of Ch. 403, Laws of Maryland (2013); subsequently amended by Ch. 240, 256, Laws of Maryland (2014); and Ch. 251, Laws of Maryland (2015), also referred to as the Maryland Session Laws. The Commission develops policies, procedures, and regulations to implement programs to make medical cannabis available to patients in a safe and effective manner. The Commission will license medical cannabis Growers, Processors, and Dispensaries. This Program allows a qualifying patient or caregiver who is registered with MMCC to purchase medical cannabis from a licensed dispensary. See also Md. Code, Health-Gen §§13-3301-13-3316; COMAR §§10.62.01-10.62-35.

The Commission intends to award licenses to Applicants that most efficiently and effectively ensure public safety and safe access to medical cannabis.

**SECTION B: Number of Processor Licenses**

In accordance with COMAR 10.62.19.05(A), the Commission will pre-approve a number of licenses for licensed processors sufficient to supply the demand for medical cannabis concentrates and medical cannabis-infused products in a range of routes of administration desired by qualifying patients.

**SECTION C: Processor Intention to Operate a Dispensary**

A Processor planning to operate a medical cannabis dispensary **must submit a separate Dispensary Application**.

**SECTION D: Processor Intention to Operate as a Grower**

A Processor planning to operate a medical cannabis grower facility **must submit a separate Grower Application**.

**SECTION E: TERMS AND DEFINITIONS**

Please refer to the COMAR Regulations in Section 10.62.01 “Definitions,” which are applicable to all MMCC license Applications. The Regulations are posted on the Maryland Medical Cannabis Commission’s website at http://mmcc.maryland.gov.

For the purposes of this Application, the following terms and definitions will be used.

| **TERM** | **DEFINITION** |
| --- | --- |
| Annotated Code of Maryland | Maryland’s statutory law created by the State Legislature, the General Assembly. |
| Applicant | A person or entity applying for a license. |
| Audited Financial Statement | An audited financial statement that is: (a) Performed by a certified public accountant licensed or with practice privileges in Maryland pursuant to Business Occupations and Professions Article, Title 2, Annotated Code of Maryland; (b) Prepared in accordance with the Professional Standards of the American Institute of Certified Public Accountants; and (c) In the case of a publicly owned corporation, in conformity with the standards of the Public Company Oversight Board. |
| COMAR | Maryland State Regulations issued by State agencies. |
| Commission | The Natalie M. LaPrade Medical Cannabis Commission. |
| Caregiver | An individual 21 years old or older designated by a patient who has agreed to assist with a qualifying patient’s medical use of medical cannabis, and for a qualifying patient younger than 18 years old, a parent, or legal guardian. |
| Grower Agent | An owner, an employee, a volunteer, an officer, or a director of a licensed grower. |
| Independent Testing Laboratory | A facility, an entity, or a site that offers or performs tests related to the inspection and testing of cannabis and products containing cannabis in the State of Maryland. |
| Licensed Dispensary | An entity licensed by the Commission that acquires, possess, repackages, transfers, transports, sells, distributes, or dispenses, products containing cannabis, related supplies, related products including tinctures, aerosols, oils, or ointments, or educational materials for use by a qualifying patient or caregiver. |
| Licensed Grower | An entity licensed by the Commission that cultivates, manufactures, packages or distributes medical cannabis to licensed processors, licensed dispensaries or registered independent testing laboratories. |
| Licensed Premises | The locations at which a licensed grower, licensed processor, or licensed dispensary operates. |
| Licensed Processor | An entity licensed by the Commission that: (a) transforms the medical cannabis into another product or extract; and (b) packages and labels medical cannabis. |
| Maryland Entity | A business entity registered to do business in the State of Maryland. |
| Maryland Residency | One who lives in Maryland. |
| Medical Cannabis | Any product containing usable cannabis or medical cannabis finished product. |
| Medical Cannabis Concentrate | A product derived from medical cannabis that is kief, hashish, bubble hash, oil, wax, or other product, produced by extracting cannabinoids from the plant through the use of:  (a) Solvents; (b) Carbon dioxide; or (c) Heat, screens, presses or steam distillation. |
| Medical Cannabis Finished Product | Any product containing a medical cannabis concentrate or a medical cannabis infused product packaged and labeled for release to a qualifying patient. |
| Medical Cannabis Infused Products | Any oil, wax, ointment, salve, tincture, capsule, suppository, dermal patch, cartridge or other product containing medical cannabis concentrate or usable cannabis that has been processed so that the dried leaves and flowers are integrated into other material. (b) “Medical cannabis-infused product” does not include a food as that term is defined in Health-General Article, §21-101, Annotated Code of Maryland. |
| Must/Shall | The referenced action is “Mandatory” and not discretionary. |
| Pre-Approval of License | A preliminary approval of a potential authorization (license) to conduct business as a licensed processor. |
| Processing | The manufacture of usable medical cannabis into a medical cannabis concentrate, or manufacture of a medical cannabis-infused product. |
| State | The State of Maryland, Department of Health & Mental Hygiene, or the Natalie M. LaPrade Medical Cannabis Commission. |
| Site Plan | A drawing and brief description of the preliminary plan for the locations of any and all buildings and any and all security measures, including walls and doors within the facility. |
| Third Party Reviewers | An independent reviewer (or entity) hired to assist the Commission in the evaluation of Applications. |
| Transportation Agent | A registered grower agent, registered processor agent or a registered dispensary agent, authorized by the Licensee to transport products containing medical cannabis, who meet the criteria specified in COMAR 10.62.18; or a licensed and bonded courier of a secure transportation company. |

**SECTION F: APPLICATION TIMELINE**

The following represents the timeline for this project.

|  |  |
| --- | --- |
| **TASK** | **DATE/TIME** |
| Applications Posted on Website | Week commencing September 28, 2015 |
| Deadline for Submission of Applications (hard copy, electronic copy and payment) to the Commission | 40 calendar days after the Application is posted |
| Application Evaluation, Scoring and Ranking Period by Third Party Reviewers | Anticipated completion in December 2015 / January 2016 |
| Commission Vote on Stage One Applications at Public Meeting | Anticipated in December 2015 / January 2016 |
| Notice of Stage One Awards via Email | Anticipated in December 2015 / January 2016 |
| Posting of Stage One Awards on website | Anticipated in December 2015 / January 2016 |
| Site Visits/Inspections of Stage One Applicant Premises | Following request of an Applicant for inspection. |
| Granting licenses by the Commission. | Following request of an Applicant for final inspection. |

**Stage 1: Selection**

Once the Stage 1 Applicants have been determined, the Commission will inspect the Applicant’s processing and cultivation (if applicable) operations as evidence of the Applicant’s expertise and compliance.

Please indicate in the Application the existing operations that would serve as your inspection site location including the address and a contact to arrange for the site visit.

**Stage 2: Final Approval**

Upon selecting the successful Applications, the Commission shall notify all Applicants of their status by email and in writing. The Commission’s decision to award or not award a license to an Applicant shall be final.

If a Licensee cannot commence operations within 365 days of being issued a pre-approval, the Commission may rescind the pre-approval.

**SECTION G: APPLICATION SUBMISSION INSTRUCTIONS**

Applicants must submit a complete Application package by the deadline outlined in Section F. The Application package will consist of the following:

1. A hard copy of the Applicant’s completed Application and all related documents (as outlined in Section H),
2. An electronic copy of the Applicant’s Application and all related documents (as outlined in Section H) in Microsoft Word format on a USB drive, and
3. The Application payment to MMCC in the form of a cashier’s check or money order, only. The Application fee will be retained by the Commission and will not be returned under any circumstances.

The Application is only considered complete if all of these components are submitted. The Applicant is responsible for delivery of all of the Application material to MMCC on or before the deadline indicated in Section F. Any Applications or related documents received after the deadline will not be accepted or considered.

Other than the redacted material, the information provided in the hard copy and electronic copy of the Application should be identical. The hard copy of the Application will be retained by MMCC for its records. Only the information that is submitted in the electronic copy of the Application as well as the electronic related documents will be sent to evaluators for review.

Applicants must use the following file naming structure when submitting electronic documents: “Applicant Name\_Submission Date\_ File Type.” For example, the Word document file name would be “John Doe\_10012015\_Application.” In contrast, the site plan file name would be “John Doe\_10012015\_Site Plan.”

To ensure the integrity of the evaluation process, specific sections of the electronic copy of the Application and related documents will be redacted for the evaluation. It is the responsibility of the Applicant to redact this information in the electronic copy of the Application. Further details on what information should be redacted are outlined in Section H.

**SECTION H: Evaluation and Selection Procedures**

The Regional Economic Studies Institute (RESI) of Towson University has been commissioned by MMCC to conduct an evaluation of the license Applications. This section will review the evaluation process.

MMCC will upload all electronic copies of all completed Applications together with any related documents that it receives within the timeline specified in Section F onto a Secure File Transfer Protocol (SFTP) for RESI to download. RESI will review every Application that is transferred to RESI by MMCC through the SFTP to ensure that it meets the mandatory qualification criteria, including the three following points:

1. All sections of the Application that are marked as mandatory with an asterisk (\*) are completed;
2. The checkboxes in Section U are marked with an affirmation to all questions posed; and
3. The electronic version of the Application (Microsoft Word document) and related documents are submitted as redacted documents.

The Word document must be devoid of any identifying information after Form 5, including the Applicant’s name, the company name of the Applicant (if applicable), and the names of any investors and/or employees. The related documents must be devoid of any identifying information including the Applicant’s name, the company name of the Applicant (if applicable), and the names of any investors and/or employees. Only the redacted Word document and related documents will be sent to evaluators if the Application meets the mandatory qualification criteria. Any Application that does not comply with these mandatory qualification criteria will be removed from the process and will not be evaluated.

RESI will process the Applications that meet the mandatory qualification criteria. RESI will assign unique identifying numbers to each Application and will separate each Application into sections. RESI has contracted a panel of third party evaluators, which will be composed of subject matter experts (SMEs) from across the country. Each SME will review assigned sections of the Application that align with the SME’s field of expertise. The SME will be sent these sections via email. As each SME will not review the entire Application, it is of the utmost importance that the information outlined in each section of the Application is provided in that section. If section-specific information is found outside the section in which it should be, the SME will not consider that information during the evaluation process. In addition, each section has a set word count. If the word count in a section is exceeded, the SME will not review any information beyond the maximum number of words nor will the SME take into account this information during the evaluation.

Each Application section will be scored by the respective SME according to the quality of the responses provided. The scoring of the Application sections will be based on a scale of 1 to 5 as well as yes/no questions. The yes/no questions will focus on specific issues that are clearly set out in the processor regulations and that do not need further explanation from the Applicant. The scoring scale will be used to evaluate the questions that cannot be scored as yes/no and therefore need further explanation from the Applicant. Using this scale, a 3 will be given to Applications that meet the basic requirements set forth in the aforementioned regulations. A score of 1 will be given to Applications that fall significantly below meeting these basic requirements, and a score of 5 will be given to Applications that significantly exceed the basic requirements. An Application will receive a score of 0 in any section where the SME notices an egregious problem or error within that section. Any Application section receiving a 0 will be reviewed separately by the Commission to determine if the Application will continue in the evaluation process.

Using the scores provided by the SMEs in the evaluation panel, RESI will aggregate the scores from each Application, taking into account the weighting outlined in Section T of this document. RESI will rank the Applications based on these scores for the Commission to review. The Commission will make the final decision on issuing any processor licenses.

**SECTION I: IMPORTANT NOTICES/DISCLAIMERS**

* This Application form is an **OFFICIAL DOCUMENT** of the Maryland Medical Cannabis Commission. It **MAY NOT**be altered or changed in any fashion except to fill-in the areas provided with the information that is required. Should any alteration or revision of a question occur, the Commission reserves the right to deny the Application in its entirety, or may determine to attribute no weight to the response.
* The license to operate as a processor is a privilege.
* The burden of proving an Applicant’s qualifications at all times rests on the Applicant. The Applicant accepts any and all risk of adverse public notice, criticism, emotional distress, or financial loss that may result from any action with respect to this Application. The Applicant expressly waives any and all claims for damages as a result thereof.
* The Commission may deny an Application that contains a misstatement, omission, misrepresentation, or untruth.
* An Application shall be complete in every material detail, including all of the mandatory sections that are marked with an asterisk (\*).
* If the electronic version of the Application cannot be read by MMCC, the Application will be suspended and not reviewed, and the Applicant will be contacted via email. The Applicant has 3 business days from the date when the email is sent to deliver another USB drive containing the electronic version of the Application to the Commission. In the event that the Applicant fails to comply, the Application will be withdrawn and the fee may be forfeited to the Commission.
* The Commission will notify Applicants via email when their Applications are successfully received.
* The Commission may request any additional information that it determines is necessary to process and fully investigate an Application. The Applicant shall provide all information, documents, materials, and certifications at the Applicant’s own expense.
* Should the Commission request any additional information that it determines necessary to process and fully investigate an Application, the Applicant shall provide the additional information within 14 business days after the request has been sent to the Applicant. If the Applicant does not provide the requested information within 14 business days, the Commission will remove the Application from the evaluation process.
* The Applicant is not able to contribute additional information after the Application is submitted, unless the Commission requests more information.
* The Applicant is under a continuing duty to promptly disclose any changes to the Commission in investors with an interest of five percent or more. **The duty to make such additional disclosures shall continue throughout any period of any license that may be granted by the Commission.**
* All notices regarding an Application submission will be sent to the email address provided on this form. The Applicant must immediately notify the Commission if the email address changes.
* An Applicant who applies for and obtains a license from the Commission may be required to submit to warrantless searches as stated in the law or regulation.
* After the Application has been submitted, the Applicant may withdraw the submitted Application only after written notice to the Commission.
* All submissions with and for this Application become the property of the Commission and will not be returned.
* **The Commission’s decision to approve or deny an Application is final.**

**SECTION J: Communications with MMCC**

All questions about the Application or Application process must be forwarded to MMCC **by email** **only** at [dhmh.medicalcannabisApplications@maryland.gov](mailto:dhmh.medicalcannabisapplications@maryland.gov) with the subject line “**Medical Cannabis Application Question**.”

* Questions and answers of a substantive nature will be posted on the MMCC website (<http://mmcc.maryland.gov/>) so that all Applicants will have access to the same information.
* For questions received after Friday, October 23, 2015, the Commission may not respond prior to the submission deadline. Applicants are therefore encouraged to identify and raise any questions as soon as possible.
* All questions must be sent to the Commission email address only. Violation of this guideline will result in disqualification.

SECTION K: Consent for Investigation - COMAR Section 10.62.19.03 (A)

An individual who is required to provide personal and background information under this chapter shall provide a statement that irrevocably gives consent to the Commission and persons authorized by the Commission to:

1. Verify all information provided in the Application documents; and
2. Conduct a background investigation of the individual.

**SECTION L: Waiver of Any Contractual, Statutory, or Common Law Obligation of Confidentiality –** **COMAR Section 10.62.19.03 (B), (C)**

An Applicant shall waive any contractual, statutory, or common law obligation of confidentiality and authorize any government agency in any jurisdiction to release to and provide access to the Commission of any and all information that the Applicant has provided to any other jurisdiction while seeking a cannabis-related license in that other jurisdiction, as well as the information obtained by that other jurisdiction during the course of any investigation it may have conducted regarding the Applicant.

An Applicant shall release all financial institutions, fiduciaries, and other parties from any contractual, statutory, or common law obligation of confidentiality to provide financial, personal, and background information to the Commission relevant to the Applicant’s capacity to manage a licensed processor facility and the Applicant’s good moral character.

**SECTION M: Records & Maryland Public Information Act**

All materials submitted in response to this Application will be retained by MMCC. All pages containing confidential information must be marked “Confidential.”

Data submitted during the Application process, including private data on individuals or nonpublic data, may or may not be disclosed pursuant to the Maryland Public Information Act (“MPIA”). Md. Code., Gen’l Prov §§4-101-601. While there are exceptions to production contained in the statute, and certain common law privileges may apply to the data, MMCC cannot guarantee that all data submitted to it will remain confidential at all times. Be advised, however, that the MPIA does contain provisions that relate to data that is a trade secret or that contains financial information. Md. Code, Gen’l Prov §§4-335, 36. MMCC recommends that the Applicant review the applicable law prior to submitting an Application as MMCC is unable to provide legal advice as to the absolute confidentiality of the data received.

Be further advised, that if a license is awarded to an Applicant, MMCC may use or disclose the trade secret or financial data to the extent provided by law. Any decision by the State to disclose information determined to be trade secret information or financial data will be made consistent with the MPIA and other relevant laws and regulations. Maryland Public Information Act (“MPIA”). Md. Code., Gen’l Prov §§4-101-601.

If the Applicant submits information in response to this Application that the Applicant believes to be trade secret information or financial data as defined by Maryland Statutes section Md. Code, Gen’l Prov §4-335-36, and the Applicant does not want such data used or disclosed for any purpose other than the evaluation of this proposal, the Applicant shall:

1. Clearly mark every page of trade secret or financial materials in its proposal at the time the proposal is submitted with the words “**TRADE SECRET OR FINANCIAL DATA INFORMATION**” in capitalized, underlined and bolded type that is at least 20 pt.
2. Acknowledge that the State does not assume liability for the use or disclosure of unmarked or unclearly marked trade secret information;
3. Fill out and submit the attached “Trade Secret & Financial Data Information Notification Form,” specifying the pages of the proposal that are to be restricted and justifying the trade secret designation for each item. If no materials is designated as trade secret information or financial data, a statement of “None” should be listed on the form; and
4. Satisfy the statutory burden to justify any claim of trade secret information.

MMCC may reject a claim that any particular information in a response is trade secret information if it determines that the Applicant has not met the burden of establishing the content to be trade secret information under any circumstance. Use of generic trade secret language encompassing substantial portions of the proposal or simple assertions of trade secret interest without substantive explanation of the basis therefore will not be sufficient to warrant a trade secret designation. If certain information is found to constitute a “trade secret” or “financial” exception to disclosure, then, the remainder of the Proposal will become public in the event a public information request is received. Applicants should understand that only the trade secret or financial data will be redacted prior to disclosure.

The Applicant must defend any action seeking release of the materials that it believes to be trade secret information, and indemnify and hold harmless the State, its agents, and employees, from any judgments against the State in favor of the party requesting the materials, and any and all costs connected with that defense. This indemnification survives the State’s award of a license. In submitting an Application, the Applicant agrees that this indemnification survives as long as the trade secret information is in the possession of MMCC.

MMCC is required to keep all Processor Application documents in accordance with the document retention schedule adopted by the Commission after the conclusion of the license term. Non-selected Processor Applications will be kept by MMCC for a minimum of three years after the award of the licenses.

**SECTION N: AMENDING AN APPLICATION - COMAR 10.62.19.02 (D)**

In the event that an Applicant amends an Application to include either a new individual investor with an interest of five percent or more, or another manager or director of the entity, then the Applicant shall forward to the Commission a copy of the request to the Central Repository.

**SECTION O: Criminal History Record Check – COMAR Section 10.62.19.03**

For each individual identified in the Application, an Applicant shall provide to the Director of the Central Repository:

1. Two sets of legible fingerprints taken in a format approved by the Central Repository and the Director of the FBI together with the fee authorized under Md. Code Ann., Criminal Procedure Article, §10-221(B)(7), for access to State criminal history and records for each medical cannabis processor agent and investor identified in the Application; and
2. A request that the individual’s State and national criminal history record information be forwarded to the Commission.

**SECTION P: How to Apply**

It is recommended all potential Applicants become familiar with Md. Code, Health-Gen §§13-3301-13-3316; COMAR §§10.62.01-10.62.35; Ch. 403, Laws of Maryland (2013); Ch. 240, 256, Laws of Maryland (2014); and Ch. 251, laws of Maryland (2015), governing processor operations for the Medical Cannabis program.

Applicants should use the definitions and descriptive sections of those documents to assist in interpreting this Application. The burden of proving an Applicant’s qualifications rests solely on the Applicant.

**GENERAL APPLICATION INSTRUCTIONS**

Read each question carefully. Answer each question completely. Do not leave blank spaces. If a question does not apply, write “Does Not Apply” or “N/A.” If the correct answer to a particular question is “None,” write “None.” If a question has an asterisk (\*), it is mandatory and must be completed. Answering a mandatory question with “Does Not Apply” or “N/A” is insufficient. Failure to submit an Application with all of the mandatory questions completed will result in the removal of the Application from the evaluation process.

* All entries on the Application should be single spaced and typed in 12-point Times New Roman font. Signatures must be in handwriting, unless otherwise stated by the Commission, by the individual providing the information. Do not misstate or omit any material fact(s).
* All required documentation, such as business formation papers, tax returns and appendices, as well as the Application forms that comprise an Application package for a license, as listed above, **must be submitted at the time of filing this Application**. Further, the Applicant is under **a continuing duty to promptly notify** the Commission if there is a change in the information provided to the Commission.
* An Applicant shall clearly identify those portions of its Application that it deems to be confidential, proprietary commercial information, trade secrets, or financial data, and provide justification of why such materials, upon request, should not be disclosed by the State pursuant to the Public Information Act (“MPIA”), Md. Code, Gen’l Prov §§4-101-601. Confidential information may be contained in the Application. A blanket statement by an Applicant that its entire Application is confidential is unacceptable. Applications shall be open to public inspection only after award of a license has been made, to the extent permitted by the MPIA. The Applicant is advised that, upon request for this information from a third party, the Commission will make an independent determination whether the information may be disclosed. An Applicant or Licensee waives any liability of the State of Maryland, and its employees and agents, the Commission, and the Department of Health and Mental Hygiene for any damages resulting from any disclosure or publication in any manner.

The Commission may request additional financial and other information as needed. COMAR 10.62.19.04(D)-(F).

**APPLICATION CONTENTS**

A complete Application package must include:

1. A USB drive containing a redacted Microsoft Word document as well as related documents outlined in Section H;
2. A hard copy of the Application; and
3. A two thousand dollar ($2,000) Stage 1 non-refundable Application fee in the form of a money order or a cashier’s check.

The submittal of an Application constitutes acceptance of the requirements, administrative stipulations, and all of the terms and conditions of this Application. All costs and expenses incurred in submitting an Application in response to this Application will be borne by the Applicant.

**APPLICATION DELIVERY**

* It is the Applicant’s responsibility to allow sufficient time to address potential delays.
* Sole responsibility rests with the Applicant to ensure that their Application is received by MMCC on or before the submission deadline.
* Applicants are required to use a courier service to deliver the Applicant contents including the contents outlined in the “APPLICATION CONTENTS” section above.
* Late Applications will not be accepted.

MMCC Delivery Address:

Attn: Precious Wells, Administrative Specialist  
Maryland Department of Health and Mental Hygiene   
Maryland Medical Cannabis Commission  
4201 Patterson Avenue  
Baltimore, MD 21215

410-764-2400

**SECTION Q: AWARDING OF LICENSE PRE-APPROVAL – COMAR Section- 10.62.19.05(D)**

The Commission shall notify an Applicant who has been pre-approved for a license within 10 business days of the Commission’s decision.

**SECTION R Rescission of Processor License – COMAR Section-10.62.19.06(E)**

The Commission may rescind the pre-approval of a processor license if the processor is not operational within 1 year of pre-approval.

**SECTION S: Denial or Disqualification of Application**

MMCC may deny any Application under any of the following circumstances:

* The Application contains a misstatement, omission, misrepresentation, or untruth COMAR 10.62.19.04(B).
* The Applicant fails to submit the Application by the submission deadline.
* The Applicant fails to pay the Application fee prior to the submission deadline.
* The criminal history record information or any other evidence demonstrates an absence of good moral character. COMAR 10.62.19.05(C)(1).
* The payment of taxes due in any jurisdiction is in arrears. COMAR 10.62.19.04(B)(6).
* The Application fails to meet the mandatory criteria as outlined in Section G of this document.

MMCC may deny issuing a pre-approval of a license if, for any individual identified in the Application:

* The criminal history record information or any other evidence that demonstrates an absence of good moral character. COMAR 10.62.19.05(C)(1); or
* The payment of taxes due in any jurisdiction is in arrears. COMAR 10.62.19.05(C)(2).

**SECTION T: Application Ranking and Weighted Criteria – COMAR Section 10.62.19.04 (I)**

**SELECTION PROCESS: Pre-Approval of License—Stage One**

The Commission, or a Commission independent contractor, shall review the submitted Applications for a **pre-approval** for a license. The Applications shall be ranked based on the following weighted criteria.

**Operational Factors—20%**

* A detailed operational plan for the production of medical cannabis extracts and medical cannabis-infused products;
* Summaries of policies and procedures for:
  + Laboratory operations;
  + Processing;
  + Packaging.

**Safety and Security Factors—20%**

* A detailed plan or information describing the security features and procedures;
* A detailed plan describing how the processor will prevent diversion;
* A detailed plan describing safety procedures.

**Commercial Laboratory, Pharmaceutical Manufacturing, and Consumer Products Production Factors—15%**

* Experience, knowledge, and training in:
  + Chemical plant management;
  + Pharmaceutical manufacturing;
  + Consumer product production.

**Production Control Factors—15%**

* A detailed quality control plan;
* A detailed inventory control plan;
* A detailed medical cannabis waste disposal plan.

**Business and Economic Factors—15%**

* A business plan:
  + Demonstrating a likelihood of success;
  + Demonstrating a sufficient business ability and experience on the part of the Applicant;
  + Providing for appropriate employee working conditions, benefits, and training;
* Demonstrating of adequate capitalization;
* A detailed plan evidencing how the processor will enforce the alcohol and drug free workplace policy.

**Additional Factors—15%**

* Demonstrated Maryland residency among the owners and investors;
* Evidence that the Applicant is not in arrears regarding any tax obligation in Maryland and other jurisdictions;
* A detailed plan evidencing how the processor will distribute to dispensaries;
* A list of proposed medical cannabis extracts and medical cannabis-infused products to be produced with proposed cannabinoid profiles, including:
  + Varieties with high cannabidiol content;
  + Whether the product has any demonstrated success in alleviating symptoms of specific diseases or conditions.

**SECTION U: Affirmation Section**

**The Applicant understands the following:**

|  | Yes | No |
| --- | --- | --- |
| 1. The burden of proving an Applicant’s qualifications rests on the party applying for the license. |  |  |
| 1. The Commission may deny an Application that contains a misstatement, omission, misrepresentation, or untruth. |  |  |
| 1. An Application shall be complete in every material detail. |  |  |
| 1. The Commission may request any additional information the Commission determines is necessary to process and fully investigate an Application. |  |  |
| 1. The party applying for the license shall provide requested additional information by the close of business of the 14th business day after the request has been received by the Applicant. |  |  |
| 1. If the party applying for the license does not provide the requested information within 14 business days, the Commission may consider the Application to be suspended. |  |  |
| 1. The Commission intends to award the licenses to the best Applications that most efficiently and effectively ensure public safety and safe access to medical cannabis and medical cannabis-infused products. |  |  |
| 1. The Commission, or a Commission independent contractor, shall review for a pre-approval for a license the submitted Applications. The Applications shall be ranked based on weighted criteria. |  |  |
| 1. The party applying for the license will provide an amended Application within 3 business days to include the name and documentation of a request to forward the criminal history record information and audited financial statement to the Commission of a new individual investor of an interest of 5 percent or more, or another manager or director of the entity, even after a license is issued. |  |  |
| 1. For each individual identified in the Application specified in Regulation .02B(1) and (2) of this chapter, an Applicant will provide to the Director of the Central Repository: |  |  |
| 1. Two sets of legible fingerprints taken in a format approved by the Director of CJIS and the Director of the FBI and the fee authorized under Criminal Procedure Article, §10-221(B)(7), Annotated Code of Maryland, for access to State criminal history and records for each processor agent and investor identified in the Application; and |  |  |
| 1. A request that the individual’s state and national criminal history record information be forwarded to the Commission. |  |  |
| 1. The Commission may deny issuing a pre-approval of a license if, for any individual identified in the Application: |  |  |
| * 1. The criminal history record information or background information demonstrate an absence of good moral character; or |  |  |
| * 1. The payment of taxes due in any jurisdiction is in arrears. |  |  |
| 1. The Commission may rescind pre-approval of a processor license if the processor is not operational within 1 year of pre-approval. |  |  |
| 1. The Commission may issue a processor license on a determination that: |  |  |
| * 1. The criminal history background check and background investigation reveal no evidence that demonstrates the absence of good moral character; |  |  |
| * 1. All inspections are passed and all of the Applicant’s operations conform to the specifications of the applicable regulations; |  |  |
| * 1. The proposed premises: |  |  |
| * + 1. Are under the legal control of the Applicant; |  |  |
| * + 1. Comply with all zoning and planning requirements; and |  |  |
| * + 1. Conform to the specifications of the Application as pre-approved pursuant to the applicable regulations; and |  |  |
| * + 1. The first year’s license fee specified in COMAR 10.62.35 has been paid. |  |  |
| 1. The Commission may deny transfer of an interest in a license if, for any proposed transferee: |  |  |
| * 1. The criminal history record information or the background investigation demonstrate an absence of good moral character; or |  |  |
| * 1. The payment of taxes due in any jurisdiction is in arrears. |  |  |
| 1. The Commission, after review of the criminal history record information, may disqualify any prospective registered processor agent from registration for an absence of good moral character or if the payment of taxes in any jurisdiction is in arrears. |  |  |
| 1. An identification card remains the property of the Commission and the Commission may order the return or seizure of an identification card if the registration is revoked or expires. |  |  |

**Please review and answer the following:**

|  | Yes | No |
| --- | --- | --- |
| 1. The party applying for the processor license irrevocably gives consent to the Commission and persons authorized by the Commission to: |  |  |
| * 1. Verify all information provided in the Application documents; and |  |  |
| * 1. Conduct a background investigation of the individual(s). |  |  |
| 1. The party applying for the processor license waives any contractual, statutory, or common law obligation of confidentiality and authorizes any government agency in any jurisdiction to release to and provide access to the Commission of any and all information the Applicant has provided to any other jurisdiction while seeking a cannabis-related license in that other jurisdiction, as well as the information obtained by that other jurisdiction during the course of any investigation it may have conducted regarding the Applicant. |  |  |
| 1. The party applying for the processor license releases all financial institutions, fiduciaries, and other parties from any contractual, statutory or common law obligation of confidentiality to provide financial, personal and background information to the Commission relevant to the Applicant’s capacity to manage a licensed processor facility and the Applicant’s good moral character. |  |  |
| 1. All processor agents affiliated with this Application are 21 years old or older at the time of Application. |  |  |
| 1. All of the processor agents affiliated with this Application have never been convicted of a felony drug offense |  |  |

**An Applicant Shall Commit to the Following:**

|  | Yes | No |
| --- | --- | --- |
| 1. All processor agents will be 21 years or older. |  |  |
| 1. The party applying for the license commits to having any and all processor agents registered with the Commission before the agent may volunteer or work for a Licensee. |  |  |
| 1. The party applying for the license commits to registering a processor agent by submitting to the Commission: |  |  |
| * 1. The name, address, date of birth and Social Security Number of a processor agent; |  |  |
| * 1. Documentation of the submission of fingerprints of the processor agent to the Central Registry; and |  |  |
| * 1. The request for the criminal history record information of the processor agent to be forwarded to the Commission. |  |  |
| 1. The Applicant will not register a prospective processor agent if the prospective processor agent has ever been convicted of a felony drug offense. |  |  |
| 1. The party applying for the license will provide an amended Application within 3 business days to include the name and documentation of a request to forward the criminal history record information and audited financial statement to the Commission of a new individual investor of an interest of 5 percent or more, or another manager or director of the entity, even after a license is issued. |  |  |
| 1. For each individual identified in the Application the processor agent commits to requiring any prospective medical cannabis processor agent register with the Commission before the Applicant will employ the agent or permit the agent to volunteer for the Applicant. |  |  |
| 1. If an Applicant is issued a pre-approval for a license the party applying for the license commits to submitting to the Commission, as part of its Application: |  |  |
| * 1. An audited financial statement for the Applicant and for each individual, partnership, corporation, or other entity review that has invested, or is proposed to invest, 5 percent or more of the capital of the Applicant; and |  |  |
| * 1. Payment of the stage 2 Application fee specified in COMAR 10.62.35. |  |  |
| 1. The party applying for the license commits to having no interest of 5 percent or more of a license issued pursuant to this chapter assignable or transferable unless: |  |  |
| * 1. The Commission has received notice in a manner determined by the Commission of the intent of the owner of the interest, or of the estate of the owner of the interest, to transfer or assign an interest in a license to another party; |  |  |
| * 1. The transferee has had forwarded the criminal history record information and audited financial statement to the Commission of the transferee; |  |  |
| * 1. The Commission does not object to the transfer or assignment within 45 days of its receipt of notice; and |  |  |
| * 1. The transferee has paid the required fee specified in COMAR 10.62.35. |  |  |
| 1. The party applying for the license acknowledges that a Licensee is eligible to apply to renew a license every 2 years. |  |  |
| 1. The party applying for the license acknowledges that ninety days before the expiration of a license, the Commission will notify the Licensee of the: |  |  |
| * 1. Date on which the license expires; |  |  |
| * 1. Process and the fee required to renew the license; and |  |  |
| * 1. Consequences of a failure to renew the license. |  |  |
| 1. The party applying for the license acknowledges that at least 30 business days before a license expires a Licensee shall submit: |  |  |
| * 1. The renewal Application as provided by the Commission; |  |  |
| * 1. Proof that fingerprints have been submitted to CJIS and the FBI for every processor agent and investor of an interest of 5 percent or more; |  |  |
| * 1. To full inspection of the operation, unless a full inspection was satisfactorily completed within 3 months before the date of the license expiration; and |  |  |
| * 1. Payment of the fee specified in COMAR 10.62.35. |  |  |
| 1. The party applying for the license acknowledges that the Commission shall renew a license that meets the requirements for renewal as stated in COMAR 10.62.19.08(C). |  |  |
| 1. The party applying for the license acknowledges that the Commission shall issue to each registered processor agent an identification card that shall include a photograph of the face of the registered processor agent taken no more than 6 months before the date of the Application. |  |  |
| 1. At all times at the premises of a Licensee, every processor agent shall visibly wear the identification card issued to the registered processor agent by the Commission. |  |  |
| 1. The party applying for the license commits to renewing the identification card every 2 years. |  |  |
| 1. If a registered processor agent’s identification card is lost, destroyed or stolen, within 24 hours of becoming aware of the loss, destruction or theft, the Licensee commits to: |  |  |
| * 1. Reporting the loss, destruction or theft to a the Commission; |  |  |
| * 1. Applying for a replacement card; and |  |  |
| * 1. Paying a replacement card fee specified in COMAR 10.62.35. |  |  |
| 1. As soon as possible upon termination of a registered processor agent’s association with a Licensee, the Licensee commits to: |  |  |
| * 1. Take custody of the terminated registered processor agent’s identification card; |  |  |
| * 1. Obtain any keys or other entry devices from the terminated registered processor agent; and |  |  |
| * 1. Ensure the terminated registered processor agent can no longer gain access to the premises of the Licensee. |  |  |
| 1. Within 1 business day of the termination of a registered processor agent’s association with a Licensee, the Licensee commits to: |  |  |
| * 1. Notify the Commission: |  |  |
| * + 1. Of the termination and the circumstances of a termination; |  |  |
| * + 1. Whether the terminated registered processor agent has returned the agent’s identification card; and |  |  |
| * + 1. Initiate delivery of the terminated registered processor agent’s identification card to the Commission. |  |  |
| 1. The party applying for the license acknowledges that the Commission will revoke an identification card of a processor agent upon receiving notification that a processor agent is no longer associated with a Licensee. |  |  |
| 1. The party applying for the license acknowledges that if a registered processor agent does not return the agent’s identification card within 30 days, the Commission shall notify the Maryland State Police and place a notice in the register of that fact. |  |  |
| 1. The party applying for the license acknowledges that the Licensee shall require a prospective processor agent to submit to a drug screen before commencement of association. |  |  |
| * 1. The party applying for the license acknowledges that the drug screen shall be carried out following the procedures set forth in COMAR 17.04.09.04—.08. |  |  |
| * 1. In addition to the drugs to be screened in accordance with the procedures set forth in COMAR 17.09.04-.08, the screen shall include any other drugs as required by the Commission. |  |  |
| 1. The party applying for the license acknowledges that unless medically justified, a prospective processor agent who has a positive response to any tested substance on a drug screen that meets the requirements of COMAR 17.04.09.07 may not be registered by the Commission. |  |  |
| 1. The party applying for the license acknowledges that a registered processor agent shall retain training materials and attendance records and make the training materials available for inspection. |  |  |
| 1. The party applying for the license acknowledges that a registered processor agent shall declare in writing that the registered processor agent will adhere to the State alcohol and drug free workplace policy, as identified in COMAR 21.11.08.03. |  |  |
| 1. The party applying for the license acknowledges that the Licensee will retain the declaration in the registered processor agent’s personnel record. |  |  |
| 1. The party applying for the license commits to notifying the Commission that the Licensee has verified that no registered processor agent has been convicted of a felony drug offense, every year, on a date determined by the Commission. |  |  |
| 1. The party applying for the license commits to locating the premises of a Licensee within Maryland. |  |  |
| 1. The party applying for the license commits to conspicuously displaying the processor license at the location where the Licensee is authorized to operate. |  |  |
| 1. The party applying for the license commits conforming the premises and operations to all local zoning and planning requirements. |  |  |
| 1. The party applying for the license commits to notifying the Commission before any major renovation or modification is undertaken. |  |  |
| 1. The party applying for the license acknowledges that if the Commission does not renew a license due to a failed inspection or an inadequate Application for renewal, the Licensee may apply for reinstatement by: |  |  |
| * 1. Submitting a plan to correct the deficiencies noted during an inspection; and |  |  |
| * 1. Amending the Application for renewal. |  |  |
| 1. The party applying for the license acknowledges that the Commission may decline to renew a license if: |  |  |
| * 1. The plan to correct deficiencies identified in an inspection is deficient; |  |  |
| * 1. The amended Application for renewal is deficient; or |  |  |
| * 1. The Licensee has repeatedly failed inspections. |  |  |
| 1. The party applying for the license acknowledges that a Licensee who fails to apply for renewal of a license by the date specified by the Commission, or whose license was not renewed by the Commission: |  |  |
| * 1. Shall cease operations at all premises; and |  |  |
| * 1. May not process medical cannabis. |  |  |
| 1. The party applying for the license acknowledges that a license may be reinstated upon: |  |  |
| * 1. Payment of the reinstatement fee specified in COMAR 10.62.35; and |  |  |
| * 1. Submission of a reinstatement Application approved by the Commission. |  |  |
| 1. The party applying for the license may apply to change the location of the Licensee’s operation. |  |  |
| 1. The party applying for the license, to change the location of the Licensee’s operation, must submit an Application to the Commission along with the fee specified in COMAR 10.62.35. |  |  |
| 1. The party applying for the license, to change the location of the Licensee’s operation, may not begin processing medical cannabis at a new location until all inspections have been passed. |  |  |
| 1. The party applying for the license commits to providing the Commission or law enforcement agency for just cause with any recording of security video surveillance as requested. |  |  |

The undersigned attests that the Applicant organization will adhere to the statutory/regulatory requirements listed above and that they have the authority to bind the Applicant organization to the statutory requirements.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

Printed Name

Printed Name

**FORM 1**

**AUTHORIZATION FOR RELEASE OF INFORMATION-INVESTOR/PROCESSOR AGENT**

Investor/Agent: Investor/Agent

(Investor/Agent’s Name)

I am an investor or an agent applying for a Medical Cannabis Choose an item. (Grower/Processor/Dispensary) License in the State of Maryland.

The Maryland Medical Cannabis Commission (“Commission”) is required by law to conduct an investigation of an Applicant for a Medical Cannabis Dispensary License. That investigation requires the Commission to collect and evaluate information about me. I irrevocably give consent to the Commission, the Maryland State Police, and persons authorized by the Commission to: (1) verify all information provided in the license Application documents; (2) conduct a background investigation of me; and (3) to have access to any and all information that I have provided to any other jurisdiction seeking a similar license in that jurisdiction, as well as information obtained by that other jurisdiction during the course of any investigation that it may have conducted about me.

By executing this Authorization, I authorize any of the following entities to release to the Commission any and all information about me that the Commission requests: any local, State or Federal unit; any commercial or business enterprise; any non-profit entity; any individual; or any other public or private entity. The requested information may be released in written, verbal, electronic, or any other form.

With respect to any claims or liability arising from the release of the requested information to the Commission, I expressly waive, release, discharge and forever hold harmless and agree to indemnify, the unit, entity, or individual that releases the information to the Commission under the authority of this Authorization.

A photo, facsimile, or electronic copy of this signed and dated Authorization shall be equally as effective as an original.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Applicant Date

Applicant Name

Printed Name of Applicant

NOTARY

The undersigned, a Notary Public in and for the County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in the State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, certifies that the above named individual appeared in person, and before me, either known to me or satisfactorily proved to be individual whose name subscribed to the within instrument and signed the Authorization and Notification.

This \_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_, and to which witness my hand and seal.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name

Stamp or Seal

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_

**FORM 2**

**AUTHORIZATION FOR RELEASE OF INFORMATION-BUSINESS ENTITY**

Business Entity Name: Business Entity Name

Name of Person Completing Form: Name of Person Completing Form

(Authorized Representative)

[Type text] is an Authorized Representative, empowered by the Business Entity to execute this form on its behalf.

[Type text] is an Applicant for a Medical Cannabis Choose an item. (Grower/Processor/Dispensary) License in the State of Maryland.

The Maryland Medical Cannabis Commission (“Commission”) is required by law to conduct an investigation of an Applicant for a Medical Cannabis Dispensary License. That investigation requires the Commission to collect and evaluate information about the Business Entity. The Business Entity irrevocably gives its consent to the Commission, the Maryland State Police, and persons authorized by the Commission to: (1) verify all information provided in the license Application documents; (2) conduct a background investigation of the Business Entity; and (3) to have access to any and all information that the Business Entity has provided to any other jurisdiction seeking a similar license in that jurisdiction, as well as information obtained by that other jurisdiction during the course of any investigation that it may have conducted about the Business Entity.

By executing this Authorization, the Business Entity authorizes any of the following entities to release to the Commission any and all information about the Business Entity that the Commission requests: any local, State or Federal unit; any commercial or business enterprise; any non-profit entity; any individual; or any other public or private entity. The requested information may be released in written, verbal, electronic, or any other form.

With respect to any claims or liability arising from the release of the requested information to the Commission, the Business Entity expressly waives, releases, discharges and forever holds harmless and agrees to indemnify, the unit, entity, or individual that releases the information to the Commission under the authority of this Authorization.

A photo, facsimile, or electronic copy of this signed and dated Authorization shall be equally as effective as an original.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Authorized Representative Date

Printed Name of Authorized Representative

Printed Name of Authorized Representative

NOTARY

The undersigned, a Notary Public in and for the County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in the State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, certifies that the above named individual, as an Authorized Representative of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, appeared in person, and before me, either known to me or satisfactorily proved to be individual whose name subscribed to the within instrument and signed the Authorization and Notification.

This \_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_, and to which witness my hand and seal.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name

Stamp or Seal

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_

**FORM 3**

**Trade Secret & Financial Data Notification**

[Type text] is an Applicant for a Medical Cannabis Choose an item. License. [Type text] understands that the Commission is an entity of the State of Maryland and any documents or data that is submitted to the State of Maryland may be disclosed by the State pursuant to a Maryland Public Information Act (“MPIA”) Request.

While the MPIA permits certain exclusions from disclosure, [Type text] understands the State makes no guarantees or promises that such data will not be disclosed. [Type text] has reviewed the MPIA, as it is available online at <http://www.lexisnexis.com/hottopics/mdcode>. [Type text] understands that other helpful resources may be found at www.oag.state.md.us/Opengov.

[Type text] understands that the documents or data it provides to the State of Maryland may not be confidential, or if confidential, may or may not be disclosed pursuant to a MPIA request.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Person or Authorized Representative Date

Printed Name

Printed Name

**FORM 4**

**Regulatory Agency Form**

**BUSINESS INTEREST IDENTIFICATION & AUTHORIZATION FORM**

I/We, the undersigned Applicant, hereby state(s) as follows:

I/We have either applied for or are currently or have been previously licensed or authorized to produce or otherwise deal in the distribution of Cannabis in any form, in the following States or jurisdiction and corresponding agency or authority:

|  |  |  |  |
| --- | --- | --- | --- |
| **State & Name of Agency** | **Type of License** | **Name of License** | **License or Registration #** |
| [Type text] | [Type text] | [Type text] | [Type text] |
| [Type text] | [Type text] | [Type text] | [Type text] |
| [Type text] | [Type text] | [Type text] | [Type text] |
| [Type text] | [Type text] | [Type text] | [Type text] |

I/We hereby specifically grant the Maryland Department of Health & Mental Hygiene permission to contact the above listed States or jurisdiction and their licensing agency or authority to confirm the information contained in the Application for a dispensary license. I/We hereby specifically grant permission to the above listed States or jurisdiction and their licensing agency or authority to release to the Maryland Department of Health & Mental Hygiene any and all information relating to the Application, licensure or authorization to produce or otherwise deal in the distribution of Cannabis in any form, including the following:

1. Any denial, suspension, revocation or other sanction of the Application, license or authorization; and
2. A copy of documentation so indicating; or
3. A statement that the Applicant was so licensed or authorized and was never sanctioned.

The undersigned attests that the Applicant organization will adhere to the statutory requirements listed above and that they have the authority to bind the Applicant organization to the statutory requirements.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name- Signature Date

Name- Printed

Name- Printed

**FORM 5**

**Investors, Agents, Owners & Managing Director**

**Certification Statement Form**

|  |  |  |
| --- | --- | --- |
| 1. I certify that any Cannabis business entity or its equivalent in which I hold or have held an interest, has not had the registration or license, suspended, revoked, placed on probationary status or subject to any disciplinary action. If no, provide an explanation.  [Type text] | Yes | No |
| 2. I certify that no business or non-profit entity on whose board of directors I have served has been convicted of a crime, fined, censured or had any registration or authorization to do business revoked or suspended, or been the subject of an administrative or judicial proceedings challenging the entity’s proper operation under law. If no, please explain and refer to case or news reports.  [Type text] | Yes | No |
| 3. Are you a party to any legal proceeding where damages, fines, or civil penalties may reasonably be expected to exceed $500,000 above any insurance coverage available to cover the claim? If yes, provide an explanation.  [Type text] | Yes | No |
| 4. I certify that I am not delinquent on the filing of State or Federal taxes. If delinquent, provide an explanation.  [Type text] | Yes | No |
| 5. If you have held a medical Cannabis or medical marijuana license or registration in another State, have you been disciplined (including, but not limited to restricted, suspended, or terminate) by any State? If yes, provide a brief explanation.  [Type text] | Yes | No |
| 6. I certify that I have not been denied a professional license, privilege of taking an examination, or had a professional license or permit disciplined by a licensing authority in Maryland or other State. If no, provide a brief explanation.  [Type text] | Yes | No |
| 7. Are you employed by the State of Maryland? If no, skip next question. | Yes | No |
| 8. If you are employed by the State, please state the name, agency and position.  [Type text] |  |  |
| 9. I acknowledge that I fully understand that:  Cannabis is a Schedule I controlled substance under the Controlled Substances Act of 1970 (21 U.S.C. 801 et seq.);  Manufacture, distribution, cultivation, processing, possession, or possession with intent to distribute a Schedule I controlled substance, or conspiring or attempting to do so, are offenses subject to harsh penalties under federal law and could result in arrest, prosecution, conviction, incarceration, fine, seizure of property, and loss of licenses or other privileges; and  Any activity regarding cannabis that does not comply with Maryland law or regulations is a violation of State law and could result in arrest, prosecution, conviction, incarceration, fine, seizure of property, and loss of licenses or other privileges. | Yes | No |
| 10. I certify that I have not been charged with or have been convicted of a felony offense which is reflective of an absence of good moral character. | Yes | No |
| 11. I certify my acknowledgement that Application Fees are non-refundable. | Yes | No |
| 12. I acknowledge that in filing an Application for a license and receiving a date and time stamped receipt, the following:   1. The Commission is vested with broad discretion to select the Applicants to be awarded a License; and 2. The Commission’s decisions in selecting the Applicants shall be final. | Yes | No |

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| Dated this \_\_\_\_\_\_\_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Owner/Managing Director  Signature of Owner/ Managing Director Printed Name of Owner/ Managing Director  Sworn to and subscribed before me on this \_\_\_\_\_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_\_\_.  (SEAL) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Notary Public |

# **10.62.19.04**

1. **Please describe how the Applicant will address the following commercial laboratory, pharmaceutical manufacturing, and consumer products production factors:** 
   1. **chemical plant manufacturing, \***

*(a) [Reference 10.62.19.04 of the regulations. Graded 0 to 5 scoring. Weighted 40% of the Commercial Laboratory subsection. Maximum length 2,250 words.]*

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* 1. **pharmaceutical manufacturing, and \***

*(b) [Reference 10.62.19.04 of the regulations. Graded 0 to 5 scoring. Weighted 40% of the Commercial Laboratory subsection. Maximum length 2,250 words.]*

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* 1. **consumer product manufacturing. \***

*(c) [Reference 10.62.19.04 of the regulations. Graded 0 to 5 scoring. Weighted 20% of the Commercial Laboratory subsection. Maximum length 2,250 words(s).]*

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1. **Please describe how the Applicant will address the following business and economic factors:** 
   1. **a business plan that (i) demonstrates a likelihood of success and (ii) demonstrates a sufficient business ability and experience on the part of the Applicant, \***

*(i) [Reference 10.62.19.04 of the regulations. Graded 0 to 5 scoring. Weighted 20% of the Business and Economic subsection. Maximum length 3,150 words.]*

*(ii) [Reference 10.62.19.04 of the regulations. Graded 0 to 5 scoring. Weighted 20% of the Business and Economic subsection. Maximum length 3,150 words.]*

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* 1. **certify adequate capitalization and attach relevant documentation \***

*(b) [Reference 10.62.19.04 of the regulations. Graded 0 to 5 scoring. Weighted 20% of the Business and Economic subsection. Maximum length 6 pages.]*

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* 1. **a detailed plan evidencing how the processor will enforce the alcohol and drug free workplace policy. \***

*(c) [Reference 10.62.19.04 of the regulations. Graded 0 to 5 scoring. Weighted 10% of the Business and Economic subsection. Maximum length 1,575 words.]*

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1. **Please describe how the Applicant will address the additional factors to:**
   1. **certify Maryland residency among the owners and investors and attach relevant documentation, \***

*(a) [Reference 10.62.19.04 of the regulations. Graded Yes or No. Weighted 20% of the Additional Factors subsection. Maximum length 1 pages.]*

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* 1. **certify that the Applicant is not in arrears regarding any tax obligation in Maryland and in any other jurisdictions and attach relevant documentation, \***

*(b) [Reference 10.62.19.04 of the regulations. Graded Yes or No. Weighted 30% of the Additional Factors subsection. Maximum length 1.5 pages.]*

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* 1. **a list of proposed medical cannabis extracts and medical cannabis-infused products proposed to be produced with proposed cannabinoid profiles, including (i) varieties with high cannabidiol content and (ii) whether the product has any demonstrated success in alleviating symptoms of specific diseases or conditions. \***
     1. *[Reference 10.62.19.04 of the regulations. Graded 0 to 5 scoring. Weighted 49.5% of the Additional Factors subsection. Maximum length 1,125 words.]*
     2. *[Reference 10.62.19.04 of the regulations. Graded 0 to 5 scoring. Weighted 0.5% of the Additional Factors subsection. Maximum length 115 words.]*

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# **10.62.19.05**

1. **Please describe how the Applicant will address the stipulation that the Commission may deny issuing a pre-approval of a license if, for any individual identified in the Application specified in COMAR 10.6219.02B(1) and (2) of this chapter, the payment of taxes due in any jurisdiction is in arrears. \***

*[Reference 10.62.19.05 of the regulations. Graded Yes or No. Weighted 5% of the Business and Economic subsection. Maximum length 780 words.]*

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# **10.62.20.07**

1. **Please describe how the Applicant will train all registered processor agents on Federal and State medical cannabis laws and regulations and other laws and regulations pertinent to the processor agent’s responsibilities. \***

*[Reference 10.62.20.07 of the regulations. Graded 0 to 5 scoring. Weighted 5% of the Business and Economic subsection. Maximum length 780 words.]*

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1. **Please describe how the Applicant will train all registered processor agents on standard operating procedures. \***

*[Reference 10.62.20.07 of the regulations. Graded 0 to 5 scoring. Weighted 10% of the Business and Economic subsection. Maximum length 1,575 words.]*

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1. **Please describe how the Applicant will train all registered processor agents on detection and prevention of diversion of medical cannabis. \***

*[Reference 10.62.20.07 of the regulations. Graded 0 to 5 scoring. Weighted 17% of the Safety and Security subsection. Maximum length 1,530 words.]*

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1. **Please describe how the Applicant will train all registered processor agents on security procedures. \***

*[Reference 10.62.20.07 of the regulations. Graded 0 to 5 scoring. Weighted 17% of the Safety and Security subsection. Maximum length 1,530 words.]*

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1. **Please describe how the Applicant will train all registered processor agents on safety procedures, including responding to (1) a medical emergency, (2) a fire, (3) a chemical spill, and (4) a threatening event including an armed robbery, an invasion, a burglary, or any other criminal incident. \***

*(1) [Reference 10.62.20.07 of the regulations. Graded 0 to 5 scoring. Weighted 5% of the Safety and Security. Maximum length 450 words.]*

*(2) [Reference 10.62.20.07 of the regulations. Graded 0 to 5 scoring. Weighted 5% of the Safety and Security subsection. Maximum length 450 words.]*

*(3) [Reference 10.62.20.07 of the regulations. Graded 0 to 5 scoring. Weighted 5% of the Safety and Security subsection. Maximum length 450 words.]*

*(4) [Reference 10.62.20.07 of the regulations. Graded 0 to 5 scoring. Weighted 10% of the Safety and Security subsection. Maximum length 900 words.]*

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1. **Please describe how the Applicant will retain training materials and attendance records and make the training materials available for inspection by the Commission. \***

*[Reference 10.62.20.07 of the regulations. Graded Yes or No. Weighted 5% of the Business and Economic subsection. Maximum length 780 words.]*

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# **10.62.21.03**

1. **Please describe how the Applicant will construct the premises to prevent unauthorized entry. \***

*[Reference 10.62.21.03 of the regulations. Graded 0 to 5 scoring. Weighted 3% of the Safety and Security subsection. Maximum length 270 words.]*

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# **10.62.21.04**

1. **Please describe how the Applicant will design and install lighting fixtures to ensure proper surveillance. \***

*[Reference 10.62.21.04 of the regulations. Graded 0 to 5 scoring. Weighted 1.5% of the Safety and Security subsection. Maximum length 135 words.]*

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# **10.62.21.05**

1. **Please describe how the Applicant will maintain a security alarm system that covers all perimeter entry points and windows at the premises. \***

*[Reference 10.62.21.05 of the regulations. Graded Yes or No. Weighted 3.5% of the Safety and Security subsection. Maximum length 315 words.]*

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1. **Please describe how the Applicant will assure that the security alarm system is continuously monitored. \***

*[Reference 10.62.21.05 of the regulations. Graded Yes or No. Weighted 1.5% of the Safety and Security subsection. Maximum length 135 words.]*

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1. **Please describe how the Applicant will assure that the security alarm system is capable of detecting smoke and fire. \***

*[Reference 10.62.21.05 of the regulations. Graded Yes or No. Weighted 1% of the Safety and Security subsection. Maximum length 90 words.]*

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1. **Please describe how the Applicant will assure that the security alarm system is capable of detecting power loss. \***

*[Reference 10.62.21.05 of the regulations. Graded Yes or No. Weighted 1% of the Safety and Security subsection. Maximum length 90 words.]*

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1. **Please describe how the security alarm system will include panic alarm devices mounted at convenient, readily-accessible locations through the licensed premises. \***

*[Reference 10.62.21.05 of the regulations. Graded 0 to 5 scoring. Weighted 3.5% of the Safety and Security subsection. Maximum length 315 words.]*

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1. **Please describe how a second, independent alarm system will be used to protect the location where records are stored on-site. \***

*[Reference 10.62.21.05 of the regulations. Graded Yes or No. Weighted 1.5% of the Safety and Security subsection. Maximum length 135 words.]*

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1. **Please describe how a second, independent alarm system will be used to protect the location where records are stored off-site. \***

*[Reference 10.62.21.05 of the regulations. Graded Yes or No. Weighted 1.5% of the Safety and Security subsection. Maximum length 135 words.]*

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1. **Please describe how a second, independent alarm system will be used to protect any room that holds medical cannabis. \***

*[Reference 10.62.21.05 of the regulations. Graded Yes or No. Weighted 1.5% of the Safety and Security subsection. Maximum length 135 words.]*

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1. **Please describe how the security alarm system will remain operational until the premises of the Licensee no longer have any medical cannabis on the premises. \***

*[Reference 10.62.21.05 of the regulations. Graded Yes or No. Weighted 1.5% of the Safety and Security subsection. Maximum length 135 words.]*

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1. **Please describe how all security alarm systems will be equipped with auxiliary power sufficient to maintain operation for at least 48 hours. \***

*[Reference 10.62.21.05 of the regulations. Graded Yes or No. Weighted 1.5% of the Safety and Security subsection. Maximum length 135 words.]*

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# **10.62.21.06**

1. **Please describe how the Applicant will maintain a motion activated video surveillance recording system at all premises that records all activity in images of high quality and high resolution capable of clearly revealing facial detail. \***

*[Reference 10.62.21.06 of the regulations. Graded 0 to 5 scoring. Weighted 1.5% of the Safety and Security subsection. Maximum length 135 words.]*

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1. **Please describe how the Applicant will maintain a motion activated video surveillance recording system at all premises that operates 24-hours a day, 365 days a year without interruption. \***

*[Reference 10.62.21.06 of the regulations. Graded Yes or No. Weighted 1% of the Safety and Security subsection. Maximum length 90 words.]*

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1. **Please describe how the Applicant will maintain a motion activated video surveillance recording system at all premises that provides a date and time stamp for every recorded frame. \***

*[Reference 10.62.21.06 of the regulations. Graded Yes or No. Weighted 1% of the Safety and Security subsection. Maximum length 90 words.]*

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1. **Please describe how the Applicant will post appropriate notices advising visitors of the video surveillance. \***

*[Reference 10.62.21.06 of the regulations. Graded Yes or No. Weighted 1% of the Safety and Security subsection. Maximum length 90 words.]*

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1. **Please describe how the Applicant will assure that a surveillance camera shall be located and operated to capture activity at each exit from the premises.\***

*[Reference 10.62.21.06 of the regulations. Graded Yes or No. Weighted 1.5% of the Safety and Security subsection. Maximum length 135 words.]*

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1. **Please describe how the Applicant will assure that a surveillance camera shall capture activity at each entrance to an area where medical cannabis is processed, tested, packaged, and stored. \***

*[Reference 10.62.21.06 of the regulations. Graded Yes or No. Weighted 1.5% of the Safety and Security subsection. Maximum length 135 words.]*

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1. **Please describe how a recording of all images captured by each surveillance camera will be kept at the licensed premises.** \*

*[Reference 10.62.21.06 of the regulations. Graded Yes or No. Weighted 0.5% of the Safety and Security subsection. Maximum length 70 words.]*

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1. **Please describe how a recording of all images captured by each surveillance camera will be kept at an off-site location. \***

*[Reference 10.62.21.06 of the regulations. Graded Yes or No. Weighted 0.5% of the Safety and Security subsection. Maximum length 70 words.]*

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1. **Please describe how recordings of security video surveillance will be accessed-limited.** \*

*[Reference 10.62.21.06 of the regulations. Graded Yes or No. Weighted 1.5% of the Safety and Security subsection. Maximum length 135 words.]*

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1. **Please describe how recordings of security video surveillance will be secured by a security alarm system that is independent of the main premises security alarm system. \***

*[Reference 10.62.21.06 of the regulations. Graded Yes or No. Weighted 1% of the Safety and Security subsection. Maximum length 90 words.]*

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1. **Please describe how recordings of security video surveillance will be in a format that can be easily accessed for investigational purposes. \***

*[Reference 10.62.21.06 of the regulations. Graded 0 to 5 scoring. Weighted 1% of the Safety and Security subsection. Maximum length 90 words.]*

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1. **Please describe how recordings of security video surveillance will be retained for a minimum of 30 calendar days. \***

*[Reference 10.62.21.06 of the regulations. Graded Yes or No. Weighted 0.5% of the Safety and Security subsection. Maximum length 70 words.]*

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# **10.62.21.07**

1. **Please describe how, when a visitor is admitted to a non-public area of the premises of a Licensee, a registered processor agent will log the visitor in and out. \***

*[Reference 10.62.21.07 of the regulations. Graded Yes or No. Weighted 1% of the Safety and Security subsection. Maximum length 90 words.]*

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1. **Please describe how, when a visitor is admitted to a non-public area of the premises of a Licensee, a registered processor agent will retain with the log a photocopy of the visitor’s government issued identification. \***

*[Reference 10.62.21.07 of the regulations. Graded Yes or No. Weighted 1% of the Safety and Security subsection. Maximum length 90 words.]*

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1. **Please describe how, when a visitor is admitted to a non-public area of the premises of a Licensee, a registered processor agent will continuously visually supervise the visitor while on the premises. \***

*[Reference 10.62.21.07 of the regulations. Graded 0 to 5 scoring. Weighted 2% of the Safety and Security subsection. Maximum length 180 words.]*

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1. **Please describe how, when a visitor is admitted to a non-public area of the premises of a Licensee, a registered processor agent will ensure that the visitor does not touch any plant or medical cannabis. \***

*[Reference 10.62.21.07 of the regulations. Graded 0 to 5 scoring. Weighted 1% of the Safety and Security subsection. Maximum length 90 words.]*

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1. **Please describe how the Applicant will maintain a log of all visitors to non-public areas for 2 years. \***

*[Reference 10.62.21.07 of the regulations. Graded Yes or No. Weighted 1% of the Safety and Security subsection. Maximum length 90 words.]*

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# **10.62.22.02**

1. **Please describe how the Applicant will train each registered processor agent in the standard operating procedure and retain attendance records. \***

*[Reference 10.62.22.02 of the regulations. Graded 0 to 5 scoring. Weighted 5% of the Business and Economic subsection. Maximum length 780 words.]*

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1. **Please describe how the Applicant will assure that a copy of the standard operating procedure will be readily available on site for inspection by the Commission. \***

*[Reference 10.62.22.02 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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# **10.62.22.03**

1. **Please describe how the Applicant will not acquire medical cannabis from an individual or entity in Maryland other than a Licensee. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will not acquire medical cannabis from outside Maryland unless authorized by the Commission. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will not transport medical cannabis to any place outside of Maryland. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how the receiving Applicant will detail in the standard operating procedure the steps set forth in 10.62.22.03 (C), (D) and(H), and a shipping Licensee shall detail in its standard operating procedure the steps set forth in 10.62.22.03 (C)—(H), to assure the integrity of the shipment of products containing cannabis.** **\***

*[Reference 10.62.22.03 of the regulations. Graded 0 to 5 scoring. Weighted 5% of the Production Control subsection. Maximum length 340 words.]*

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1. **Please describe how the receiving Applicant will detail in the standard operating procedure the steps set forth in 10.62.22.03 (C), (D) and(H), and a shipping Licensee shall detail in its standard operating procedure the steps set forth in 10.62.22.03 (C)—(H), to assure the integrity of the electronic manifest and inventory control system. \***

*[Reference 10.62.22.03 of the regulations. Graded 0 to 5 scoring. Weighted 2% of the Operational subsection. Maximum length 270 words.]*

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1. **Please describe how the receiving Applicant will detail in the standard operating procedure the steps set forth in 10.62.22.03 (C), (D), and (H) and a shipping Licensee shall detail in its standard operating procedure the steps set forth in 10.62.22.03 (C)—(H), to assure the quality of the products in the shipment.** **\****[Reference 10.62.22.03 of the regulations. Graded 0 to 5 scoring. Weighted 5% of the Production Control subsection. Maximum length 340 words.]*

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1. **Please describe how the Applicant will assure that, upon arrival of a medical cannabis transport vehicle, the transportation agent will notify an appropriate registered processor agent to continue the chain of custody of the shipment of products containing cannabis. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 1% of the Operational subsection. Maximum length 135 words.]*

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1. **Please describe how the Applicant will assure that an agent of the receiving Licensee will log into the electronic manifest. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 0.5% of the Production Control subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will assure that an agent of the receiving Licensee will take custody of a shipment of products containing cannabis. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 1% of the Production Control subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will assure that an agent of the receiving Licensee will confirm that (1) the transportation agent is carrying appropriate identification; (2) the package is secure, undamaged, and appropriately labeled; (3) each package in the shipment is labeled as described in the electronic manifest; (4) the contents of the shipment are as described in the electronic manifest. \***

*(1) [Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 0.5% of the Production Control subsection. Maximum length 70 words.]*

*(2) [Reference 10.62.22.03 of the regulations. Graded 0 to 5 scoring. Weighted 0.5% of the Production Control subsection. Maximum length 70 words.]*

*(3) [Reference 10.62.22.03 of the regulations. Graded 0 to 5 scoring. Weighted 0.5% of the Production Control subsection. Maximum length 70 words.]*

*(4) [Reference 10.62.22.03 of the regulations. Graded 0 to 5 scoring. Weighted 0.5% of the Production Control subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will assure that an agent of the receiving Licensee will record the confirmations of the electronic manifest. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 0.5% of the Production Control subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will assure that an agent of the receiving Licensee will obtain in the electronic manifest the signature or identification number of the transportation agent who delivers the shipment. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 1% of the Production Control subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will assure that an agent of the receiving Licensee will record in the electronic manifest the date and time the receiving agent takes custody of the shipment. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 0.5% of the Production Control subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will assure that an agent of the receiving Licensee will enter the products containing cannabis into the inventory control system. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 1% of the Production Control subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will assure that an agent of the receiving Licensee will segregate the items in the shipment from the inventory until the item can be inspected. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 1% of the Production Control subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will assure that an agent of the receiving Licensee will inspect each item to ensure that the packaging of each item is undamaged, accurate, and complete. \***

*[Reference 10.62.22.03 of the regulations. Graded 0 to 5 scoring. Weighted 5% of the Production Control subsection. Maximum length 340 words.]*

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1. **Please describe how the Applicant will assure that an agent of the receiving Licensee will, upon determining that the item passes inspection, release the item into the stock. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 0.5% of the Production Control subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will assure that the transportation agent will provide a copy of the electronic manifest for the shipment to the receiving Licensee. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 1% of the Production Control subsection. Maximum length 70 words.]*

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1. **Please describe the Applicant will assure that the transportation agent will provide the completed electronic manifest to the shipping Licensee. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 1% of the Production Control subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will assure that the shipping Licensee will retain the electronic manifest for the shipment for 5 years. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 1% of the Production Control subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will assure that a discrepancy between the electronic manifest and the shipment, identified by either a transportation agent or a receiving agent, will be reported by each agent to each agent’s supervisor. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 5% of the Production Control subsection. Maximum length 340 words.]*

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1. **Please describe how the Applicant will assure that, if a discrepancy can be immediately rectified, the accepting processor supervisor will record the rectification in the electronic manifest. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 5% of the Production Control subsection. Maximum length 340 words.]*

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1. **Please describe how the Applicant will assure that a discrepancy that cannot be immediately rectified will be reported to the Commission by the receiving Licensee within 24 hours of the observation of the discrepancy and an investigation of the discrepancy shall be initiated by the shipping Licensee. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 5% of the Production Control subsection. Maximum length 340 words.]*

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1. **Please describe how the Applicant will assure that the shipping Licensee will submit to the Commission a preliminary report of an investigation of a discrepancy within 7 business days of the observation of the discrepancy. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 5% of the Production Control subsection. Maximum length 340 words.]*

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1. **Please describe how the Applicant will assure that the shipping Licensee will submit to the Commission a final report of the investigation within 30 business days. \***

*[Reference 10.62.22.03 of the regulations. Graded Yes or No. Weighted 5% of the Production Control subsection. Maximum length 340 words.]*

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# **10.62.22.04**

1. **Please describe how an Applicant’s standard operating procedure will provide for maintaining the cleanliness of any building or equipment used to store or display medical cannabis. \***

*[Reference 10.62.22.04 of the regulations. Graded 0 to 5 scoring. Weighted 4% of the Operational subsection. Maximum length 540 words.]*

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1. **Please describe how an Applicant will have a standard operating procedure to maintain the medical cannabis free from contamination. \***

*[Reference 10.62.22.04 of the regulations. Graded 0 to 5 scoring. Weighted 5% of the Production Control subsection. Maximum length 340 words.]*

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1. **Please describe how an Applicant will have a standard operating procedure to require a processor agent to report any personal health condition that might compromise the cleanliness or quality of the medical cannabis the processor agent might handle. \***

*[Reference 10.62.22.04 of the regulations. Graded Yes or No. Weighted 2% of the Production Control subsection. Maximum length 135 words.]*

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1. **Please describe how an Applicant’s standard operating procedure will provide for disposal and segregated storage of any medical cannabis that is outdated, damaged, deteriorated, misbranded, or adulterated. \***

*[Reference 10.62.22.04 of the regulations. Graded 0 to 5 scoring. Weighted 2% of the Production Control subsection. Maximum length 135 words.]*

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1. **Please describe how an Applicant’s standard operating procedure will provide for disposal and segregated storage of any medical cannabis whose containers or packages have been improperly or accidentally opened. \***

*[Reference 10.62.22.04 of the regulations. Graded 0 to 5 scoring. Weighted 2% of the Production Control subsection. Maximum length 135 words.]*

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# **10.62.22.05**

1. **Please describe how an Applicant’s standard operating procedure will provide for maintaining the sanitation of equipment that comes into contact with medical cannabis. \***

*[Reference 10.62.22.05 of the regulations. Graded 0 to 5 scoring. Weighted 4% of the Operational subsection. Maximum length 540 words.]*

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1. **Please describe how the Applicant will ensure that automatic, mechanical, or electronic equipment is routinely calibrated and periodically check to ensure proper performance. \***

*[Reference 10.62.22.05 of the regulations. Graded Yes or No. Weighted 2% of the Operational subsection. Maximum length 270 words.]*

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1. **Please describe how the Applicant will ensure that any scale, balance, or other measurement device is routinely calibrated and periodically check to ensure accuracy. \***

*[Reference 10.62.22.05 of the regulations. Graded Yes or No. Weighted 2% of the Operational subsection. Maximum length 270 words.]*

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1. **Please describe how the Applicant will maintain an accurate log recording the cleaning of equipment. \***

*[Reference 10.62.22.05 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will maintain an accurate log recording the maintenance of equipment. \***

*[Reference 10.62.22.05 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will maintain an accurate log recording the calibration of equipment. \***

*[Reference 10.62.22.05 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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# **10.62.22.06**

1. **Please describe how an Applicant will submit to the Commission at the end of the month following each calendar quarter a list of the products and the products’ specifications that the Licensee offered for distribution in the previous calendar quarter. \***

*[Reference 10.62.22.06 of the regulations. Graded Yes or No. Weighted 1% of the Operational subsection. Maximum length 70 words.]*

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# **10.62.23.02**

1. **Please describe how the Applicant will require that any person involved in processing medical cannabis concentrates and medical cannabis-infused products is (1) appropriately trained in accordance to their job description to safely operate and maintain the system used for processing and attendance records are retained, (2) has direct access to applicable material safety sheets and labels, and (3) follows OSHA protocols for handling and storage of all chemicals. \***

*(1) [Reference 10.62.23.02 of the regulations. Graded 0 to 5 scoring. Weighted 10% of the Operational subsection. Maximum length 1,350 words.]*

*(2) [Reference 10.62.23.02 of the regulations. Graded Yes or No. Weighted 2% of the Operational subsection. Maximum length 270 words.]*

*(3) [Reference 10.62.23.02 of the regulations. Graded 0 to 5 scoring. Weighted 5% of the Operational subsection. Maximum length 675 words.]*

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1. **Please describe how the Applicant will assign a unique lot number to each lot of medical cannabis concentrate of medical cannabis-infused product. \***

*[Reference 10.62.23.02 of the regulations. Graded Yes or No. Weighted 2% of the Operational subsection. Maximum length 270 words.]*

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1. **Please describe how the Applicant will carry out a validation process on the first 10 lots of any new medical cannabis concentrate, medical cannabis-infused product, or process, to establish the validity of the production process. \***

*[Reference 10.62.23.02 of the regulations. Graded Yes or No. Weighted 9% of the Operational subsection. Maximum length 1,215 words.]*

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1. **Please describe how the Applicant will establish a standard operating procedure for the methods, equipment, solvents, and gases when processing medical cannabis concentrates and medical cannabis-infused products. \***

*[Reference 10.62.23.02 of the regulations. Graded 0 to 5 scoring. Weighted 14.5% of the Operational subsection. Maximum length 1,960 words.]*

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1. **Please describe how, if the Applicant uses a solvent-based extraction method, the solvents will be at least 99 percent pure. \***

*[Reference 10.62.23.02 of the regulations. Graded Yes or No. Weighted 2% of the Operational subsection. Maximum length 270 words.]*

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1. **If the Applicant uses solvent extraction, please describe how the standard operating procedure of an Applicant will require the use of solvents in a professional grade, closed-loop extraction system designed to recover the solvents. \***

*[Reference 10.62.23.02 of the regulations. Graded Yes or No. Weighted 2% of the Operational subsection. Maximum length 270 words.]*

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1. **Please describe how, if the Applicant uses solvent extraction, the standard operating procedure of an Applicant will require work in a spark-free environment with proper ventilation. \***

*[Reference 10.62.23.02 of the regulations. Graded Yes or No. Weighted 5% of the Operational subsection. Maximum length 675 words.]*

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1. **Please describe how, if the Applicant uses solvent extraction, the standard operating procedure of an Applicant will require following all applicable OSHA regulations, and local fire, safety, and building codes in the processing and storages of the solvents. \***

*[Reference 10.62.23.02 of the regulations. Graded Yes or No. Weighted 2% of the Operational subsection. Maximum length 270 words.]*

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1. **Please describe how, if the Applicant uses carbon dioxide gas extraction, the standard operating procedure will require every vessel be rated to a minimum of 900 pounds per square inch. If using propane, the vessel should be rated to a minimum of 600 pounds per square inch. If using butane, the vessel should be rated to a minimum of 200 pounds per square inch. \***

*[Reference 10.62.23.02 of the regulations. Graded Yes or No. Weighted 4% of the Operational subsection. Maximum length 540 words.]*

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1. **Please describe how, if the Applicant uses carbon dioxide gas extraction, the standard operating procedure will follow all applicable OSHA regulations, and local fire, safety, and building codes. \***

*[Reference 10.62.23.02 of the regulations. Graded Yes or No. Weighted 2% of the Operational subsection. Maximum length 270 words.]*

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1. **Please describe how, if the Applicant uses carbon dioxide gas extraction, the standard operating procedure will use carbon dioxide that is at least 99 percent pure. \***

*[Reference 10.62.23.02 of the regulations. Graded Yes or No. Weighted 2% of the Operational subsection. Maximum length 270 words.]*

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# **10.62.23.03**

1. **Please describe how, upon successful completion of a validation process, the Applicant will use an independent testing laboratory that has adopted a standard operating procedure to test medical cannabis and medical cannabis concentrate that is approved by an accreditation body that is a signatory to the International Laboratory Accreditation Cooperation (ILAC) Mutual Recognition Arrangement. \***

*[Reference 10.62.23.03 of the regulations. Graded Yes or No. Weighted 5% of the Production Control subsection. Maximum length 340 words.]*

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1. **Please describe how, upon successful completion of a validation process, the Applicant will use an independent testing laboratory to have an agent of the independent testing laboratory obtain samples according to a statistically valid sampling method for each lot. \***

*[Reference 10.62.23.03 of the regulations. Graded Yes or No. Weighted 2.5% of the Production Control subsection. Maximum length 170 words.]*

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1. **Please describe how, upon successful completion of a validation process, the Applicant will use an independent testing laboratory to analyze the samples according to (1) the most current version of the cannabis Inflorescence monograph published by the American Herbal Pharmacopeia (AHP) or (2) a scientifically valid methodology that is equal or superior to that of the AHP monograph. \***

*(1) [Reference 10.62.23.03 of the regulations. Graded Yes or No. Weighted 1% of the Production Control subsection. Maximum length 70 words.]*

*(2) [Reference 10.62.23.03 of the regulations. Graded Yes or No. Weighted 1% of the Production Control subsection. Maximum length 70 words.]*

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1. **Please describe how, upon successful completion of a validation process, the Applicant will use an independent testing laboratory that, in the event of a test result which falls out of specification, will follow their standard operating procedure to confirm or refute the original result. \***

*[Reference 10.62.23.03 of the regulations. Graded Yes or No. Weighted 1% of the Production Control subsection. Maximum length 70 words.]*

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1. **Please describe how, upon successful completion of a validation process, the Applicant will use an independent testing laboratory to destroy the remains of the sample of medical cannabis after analysis is completed. \***

*[Reference 10.62.23.03 of the regulations. Graded Yes or No. Weighted 1% of the Production Control subsection. Maximum length 70 words.]*

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# **10.62.23.04**

1. **Please describe how the Applicant will assure that an independent testing laboratory will issue a certificate of analysis for each lot, with supporting data, to report whether or not the lot conforms to the specifications for the lot of the following compounds: ∆9-Tetrahydrocannabinol (THC), Tetrahydrocannabinolic Acid (THCA), Cannabidiol (CBD), Cannabidiolic Acid (CBDA), the terpenes described in the most recent version of the cannabis Inflorescence monograph published by the American Herbal Pharmacopeia (AHP), Cannabigerol (CBG), and Cannabinol (CBN). \***

*[Reference 10.62.23.04 of the regulations. Graded Yes or No. Weighted 10% of the Production Control subsection. Maximum length 675 words.]*

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1. **Please describe how the Applicant will assure that an independent testing laboratory will issue a certificate of analysis for each lot, with supporting data, to report that the presence of the following contaminants do not exceed levels as required by the AHP monograph: any residual solvent or processing chemicals; foreign material such as hair, insects, or any similar or related adulterant; any microbiological impurity, including total aerobic microbial count (TAMC), total yeast mold count (TYMC), *P. aeruginosa*, *Aspergillus spp.*, *S. aureus*, *Aflatoxin B1, B2, G1,* and *G2*, and *Ochratoxin A*.; and whether the batch is within specification for odor and appearance. Please also describe how residual levels of volatile organic compounds (VOCs) will be below the specifications as set by the United States Pharmacopeia (USP Chapter 467). \***

*[Reference 10.62.23.04 of the regulations. Graded Yes or No. Weighted 10% of the Production Control subsection. Maximum length 675 words.]*

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# **10.62.23.05**

1. **Please describe how, if an Applicant/Licensee, upon review of the certificate of analysis, determines that a lot meets the specification for the product, the Applicant/Licensee could assign an expiration date to the lot. \***

*[Reference 10.62.23.05 of the regulations. Graded 0 to 5 scoring. Weighted 2% of the Operational subsection. Maximum length 270 words.]*

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1. **Please describe how, if an Applicant/Licensee, upon review of the certificate of analysis, determines that a lot meets the specification for the product, the Applicant/Licensee could release the lot for distribution. \***

*[Reference 10.62.23.05 of the regulations. Graded Yes or No. Weighted 2% of the Operational subsection. Maximum length 270 words.]*

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1. **Please describe how, if an Applicant/Licensee, upon review of the certificate of analysis, determines that a lot meets the specification for the product, the Applicant/Licensee could revise the status of the lot in the inventory control. \***

*[Reference 10.62.23.05 of the regulations. Graded Yes or No. Weighted 2% of the Operational subsection. Maximum length 270 words.]*

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1. **Please describe how, if an Applicant/Licensee receives test results that the lot does not meet specifications, the Applicant/Licensee could rework or reprocess the lot according to their standard operating procedure. \***

*[Reference 10.62.23.05 of the regulations. Graded 0 to 5 scoring. Weighted 2% of the Operational subsection. Maximum length 270 words.]*

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1. **Please describe how the reworked or reprocessed lot will be resampled and retested by the independent testing laboratory to meet all required specifications. \***

*[Reference 10.62.23.05 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will retain every certificate of analysis. \***

*[Reference 10.62.23.05 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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# **10.62.23.06**

1. **Please describe how the Applicant will provide a sample from each released lot to an independent testing laboratory sufficient to perform stability testing at 6-month intervals to (1) ensure product potency and purity and (2) provide support for expiration dating. \***

*(1) [Reference 10.62.23.06 of the regulations. Graded Yes or No. Weighted 2.5% of the Production Control subsection. Maximum length 170 words.]*

*(2) [Reference 10.62.23.06 of the regulations. Graded Yes or No. Weighted 2.5% of the Production Control subsection. Maximum length 170 words.]*

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1. **Please describe how the Applicant will retain a sample from each released lot (1) sufficient to provide for follow-up testing if necessary, and will (2) properly store the sample for 1 year past the date of expiration of the lot. \***

*(1) [Reference 10.62.23.06 of the regulations. Graded Yes or No. Weighted 1% of the Production Control subsection. Maximum length 70 words.]*

*(2) [Reference 10.62.23.06 of the regulations. Graded Yes or No. Weighted 0.5% of the Production Control subsection. Maximum length 70 words.]*

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# **10.62.23.07**

1. **Please describe how the Applicant will submit to the Commission within 30 days following the end of a quarter a list of the products and the products’ specifications that the Applicant offered for distribution in the quarter. \***

*[Reference 10.62.23.07 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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# **10.62.24.01**

1. **Please describe how all items will be individually processed at the original point of processing. \***

*[Reference 10.62.24.01 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how a package of medical cannabis finished product will be plain. \***

*[Reference 10.62.24.01 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how a package of medical cannabis finished product will be opaque. \***

*[Reference 10.62.24.01 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how a package of medical cannabis finished product will be tamper-evident, and if applicable or appropriate, child-resistant. \***

*[Reference 10.62.24.01 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how a package of medical cannabis finished product will bear a finished-product lot number and expiration date. \***

*[Reference 10.62.24.01 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how a package of medical cannabis finished product will bear a clear warning that (1) the contents may be lawfully consumed only by a qualifying patient named on an attached label; (2) it is illegal for any person to possess or consume the contents of the package other than the qualifying patient; and (3) it is illegal to transfer the package or contents to any person other than a transfer by a caregiver to a qualifying patient. \***

*(1) [Reference 10.62.24.01 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

*(2) [Reference 10.62.24.01 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

*(3) [Reference 10.62.24.01 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how a package of medical cannabis finished product will bear a clear warning to keep the package and its contents away from children other than a qualifying patient. \***

*[Reference 10.62.24.01 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how a package of medical cannabis finished product will bear the Maryland Poison Control Center emergency telephone number. \***

*[Reference 10.62.24.01 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how a package of medical cannabis finished product will bear the name of the Licensee that packaged the medical cannabis finished product and the telephone number of the Licensee for reporting an adverse patient event. \***

*[Reference 10.62.24.01 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how a package of medical cannabis finished product will bear any allergen warning required by law. \***

*[Reference 10.62.24.01 of the regulations. Graded 0 to 5 scoring. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how a package of medical cannabis finished product will bear a listing of the non-medical cannabis ingredients. \***

*[Reference 10.62.24.01 of the regulations. Graded 0 to 5 scoring. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how a package of medical cannabis finished product will bear an itemization, including weight, of all cannabinoid and terpene ingredients specified for the product, and the concentrates of any cannabinoid of less than one percent will be printed with a leading zero before the decimal point. \***

*[Reference 10.62.24.01 of the regulations. Graded 0 to 5 scoring. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how a package of medical cannabis finished product will leave space for a licensed dispensary to attach a personalized label for the qualifying patient. \***

*[Reference 10.62.24.01 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will assure that a package of medical cannabis finished product does not bear any resemblance to the trademarked, characteristic, or product-specialized packaging of any commercially available candy, snack, baked good, or beverage. \***

*[Reference 10.62.24.01 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will assure that a package of medical cannabis finished product does not bear any statement, artwork, or design that could be reasonably mislead any person to believe that the package contains anything other than a medical cannabis finished product. \***

*[Reference 10.62.24.01 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will assure that a package of medical cannabis finished product does not bear any seal, flag, crest, coat of arms, or other insignia that could reasonably mislead any person to believe that the product has been endorsed, manufactured, or used by any State, county, or municipality or any agency thereof. \***

*[Reference 10.62.24.01 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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1. **Please describe how the Applicant will assure that a package of medical cannabis finished product does not bear any cartoon, color scheme, image, graphic, or feature that might make the package attractive to children. \***

*[Reference 10.62.24.01 of the regulations. Graded Yes or No. Weighted 0.5% of the Operational subsection. Maximum length 70 words.]*

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