106 West Sylvania Avenue
Neptune City, New Jersey 07753
732-776-7224

Municipal Cannabis Business License Application

Thank you for expressing interest in seeking to open a cannabis establishment in the Borough of Neptune City.

APPLICATION REQUIREMENTS:

This application must be completed in order to apply for a Municipal Cannabis Business license in the Borough of Neptune City.

Applications must be completed in their entirety and must include all required documents. Do not use address ranges on the application or required documents. Legal documents included as part of this application must be properly signed and executed. All materials must be legible. You must fill in "n/a" in fields that are NOT applicable. Please do not leave any fields blank. **Incomplete applications will be rejected**.

APPLICATION PROCESS:

Completed Applications, including the application fee, are required to be delivered to the Borough Clerk's Office at 106 West Sylvania Avenue, Neptune City, New Jersey 07753 by September 16th, 2022 at 4:00 pm. After submission to the Borough Clerk, completed applications will be forwarded to the Neptune City Police Department for background check processing. Following review and approval by the Neptune City Police Department, the application will be reviewed by the Cannabis Advisory Committee (CAC) established in accordance with Section 139-53 D for review and recommendation to the Borough's Governing Body. The Cannabis Subcommittee's review may also include an interview with the applicant. The Borough's CAC will review all applications in the order received. Any license conditionally issued by the Borough is contingent upon the locally licensed entity's or individual's subsequent receipt of a State permit or license of the same class or type of regulated cannabis activity. Persons wishing to obtain a Class 5 Cannabis License shall file a license application with the CAC, on the standardized form as follows. A notification of award and conditional Municipal License shall entitle the recipient applicant to pursue a State permit or license in the appropriate classification for up to twelve (12) months. No license to operate shall be issued by the Borough of Neptune City until the applicant has received a State permit and satisfied other prerequisites of municipal licensure. If the recipient of a notice of award and conditional license has not received a State permit or license within twelve (12) months from issuance, the Borough Administrator shall issue a new request for applications and evaluate all applicants for licensure per the criteria outlined below. In addition to complying with any State requirement related to good character and criminal background, any person proposed to have an ownership interest in the license shall not have had any cannabis license or permit revoked for a violation affecting public safety in the State of New Jersey or a subdivision thereof within the preceding three (3) years. Nothing in this Section shall prohibit the Borough from conducting a background check at the time of receipt of the application. Submission of an application shall constitute consent on behalf of the applicant and any persons proposed to have an ownership interest to such background check.

APPLICATION CRITERIA:

- Applicant's owners' or principals' qualifications and experience operating in highly regulated industries, including cannabis, healthcare, pharmaceutical manufacturing, and retail pharmacies, with preference

to experience operating such businesses within the State of New Jersey and where the value of owners' experience shall outweigh the experience of nonowner principals

- Applicant's qualifications and experience related to public safety and security, including any of the applicant's owners' or principals' experience in law enforcement and drug enforcement and a summary of the applicant's plans for storage of products and currency, physical security, video surveillance, security personnel, and visitor management
- Applicant's or its owners' experience conducting or supporting or plans to conduct institutional review board-approved research involving human subjects that is related to medical cannabis or substance abuse, where the value of past or ongoing clinical research with IRB approval shall outweigh plans to conduct such research, whether the applicant has had any assurance accepted by the U.S. Department of Health & Human Services indicating the applicant's commitment to complying with 45 CFR Part 46, and whether the applicant has a research collaboration or partnership agreement in effect with an accredited U.S. school of medicine or osteopathic medicine with experience conducting cannabis-related research
- Applicant's brand and proposal for the physical presence of the business, including but not limited to: the site's ability to meet all land use regulations (parking, landscaping, signage, etc.), architectural treatments, customer experience
- Applicant's or its owners' demonstrated commitment to the community and social responsibility; or sufficient evidence related to N.J.A.C. 17:30-30-7.10 (a)(13)
- Summary of the applicant's environmental impact and sustainability plan; whether the applicant entity or its parent company has any recognitions from or registrations with federal or New Jersey state environmental regulators for innovation in sustainability; and whether the applicant entity or its parent company holds any certification under international standards demonstrating the applicant has an effective environmental management system or has a designated sustainability officer to conduct internal audits to assess the effective implementation of an environmental management system
- Applicant's demonstrated commitment or sufficient experience as responsible employers, defined as the applicant entity being committed to a local program in collaboration with organizations committed to the well-being of residents, including but not limited to the Borough and surrounding service area. This may be evidenced by letters in support and agreements, a local workforce hiring and development plan, community service, and/or collaborations with a university or specialized training facility
- Applicant's demonstrated commitment to diversity in its ownership composition and hiring practices.

APPLICATION FILED:

DATE _____ Time _____ Received By: _____

REQUIRED FEES:

☐ **Initial Application Fee - $10,000.00**

The above fees shall be submitted to the Borough at the time of initial application. If the cannabis business's application is denied, the Borough shall refund eighty percent (80%) of the Initial Application if the applicant is not approved for a cannabis license by the State of New Jersey and/or is not selected by the Borough for issuance of a Class 5 license.

☐ **Annual Renewal Fee - $10,000.00**

The above fees shall be submitted to the Borough at the time of application renewal. If the cannabis business's application is denied, the Borough shall refund eighty percent (80%) of the Renewal Fee if the applicant is not approved for a cannabis license by the State of New Jersey and/or is not selected by the Borough for issuance of a Class 5 license.

LICENSE TYPE:

☐ **Class 5 - Cannabis Retailer**

Cannabis Retailer license for locations at which cannabis items and related supplies are sold to consumers.

BUSINESS INFORMATION:

- **Business/Entity Name: _____**
- **Trading As *(d/b/a)*: _____**
- **Address of Business: _____** Neptune City, New Jersey 07753

Mailing Address of Business: _____

Street City State Zip

STATE APPLICATION STATUS:

- Application submitted to the State: _____ **YES** ____ **NO**
- Seeking Condition Application with State CRC: _____ **YES** ____ **NO**
- CRC application denied: _____ **YES** ____ **NO**
- State License Number (if applicable): _____
- The Applicant will commence operations immediately upon receiving all local and/or State approvals:
  _____ YES ____ NO
  If "NO" provide anticipated date of commencement of operation of the facility _____

LOCAL APPLICATION STATUS:

- Applicant has site control: _____ **YES** ____ **NO**
  If "yes" provide proof of site control
- Submitted Approval to Borough Zoning Board: _____ **YES** ____ **NO**
- CRC application denied: _____ **YES** ____ **NO**
- State License Number (if applicable): _____

CONTACT INFORMATION:

You must provide information for:

- **MAIN CONTACT**. The main contact is someone who can address questions or issues related to the license application or business license. The main contact will receive application status updates, license notifications and copies of your business license at the email provided on the application.
- **ONSITE MANAGER**. The onsite manager must have the authority to make decisions regarding the licensed premises and must have access to and control over the licensed premises at all times. The onsite manager may also be the person who has authority over the licensed premises and may receive official correspondences, including enforcement correspondences from the Borough.
- **PROPERTY OWNER**. The person who owns the property where the business will be located.
- **OTHER INVOLVED PERSONS**. All other owners, controlling persons, close associates, key employees and/or investors. Please use additional pages if required.

Main Contact

Name and Role: _____

Home Address: _____

Phone: _____ Email: _____

Onsite Manager

Name and Role: _____

Home Address: _____

Phone: _____ Email: _____

Property Owner

Name and Role: _____

Home Address: _____

Phone: _____ Email: _____

Other Involved Persons

Name and Role: _____

Home Address: _____

Phone: _____ Email: _____

Other Involved Persons

Name and Role: _____

Home Address: _____

Phone: _____ Email: _____

Other Involved Persons

Name and Role: _____

Home Address: _____

Phone: _____ Email: _____

ADDITIONAL INFORMATION:

- Would any person or corporation named in this application fail to qualify for ownership of the cannabis license if applying as an individual because of criminal conviction [as delineated in N.J.A.C. 17:30(d)] or due to the holding of a prohibited interest in other licenses [as delineated in N.J.S.A. 52:13D-17.2]: _____ **YES** ____ **NO**
  If "yes" provide the following information for the individual or corporation:
  Name: _____

  Social Security Number or EIN: _____

  NJ Sale Tax Certificate Authority No.: _____

  Date of Birth: _____/_____/_____ or Date Incorporated: _____/_____/_____

- Does any person who has an ownership interest in the municipal license being applied for via this application, have a license in any other municipality in the State of New Jersey and/or is in the process of applying for a license in another municipality in the State of New Jersey: _____ **YES** ____ **NO**
  If "yes" please identify the municipality, class of license being south and status of such application:
  Municipality: _____ County: _____

  Class of License Sought: _____

  Application Status: _____

- Does any person proposed to have an ownership interest in the license that is being applied for via this application hold a cannabis license or permit in any other state: _____ **YES** ____ **NO**
  If "yes" please identify the licensed entity, State, class of license, date of licensure and status:
  Name of Licensed Entity: _____ d/b/a: _____

  Municipality: _____ State: _____

  Class of License: _____

  Date of Licensure: _____ Status: _____

- Has any person who has an ownership interest in the municipal license that is being applied for via this application had any cannabis license or permit suspended or revoked in the State of New Jersey and/or any New Jersey municipality and/or in any other state within the past five (5) years: _____ **YES** ____ **NO**
  If "yes" provide a detailed explanation regarding the circumstances surrounding such suspension or revocation and the outcome regarding the same:
  _____

  _____

  _____

- Check any/all that apply:

  ☐ **Veteran Owned Business**
  ☐ **Minority Owned Business**
  ☐ **Woman Owned Business**
  ☐ **Social Equity**
  ☐ **Neptune City Resident**
  ☐ **None of the Above**

If you claim any of the above statuses, please provide a copy of the certificate issued by the State of New Jersey evidencing the status claimed

APPLICATION DETAILS:

For the following questions, please provide copies of all related and/or supporting document(s). Attach additional pages as needed.

1. Applicant **owns** the proposed business premise: _____ **YES** ____ **NO**
- Applicant holds a mortgage for the proposed business premise: _____ **YES** ____ **NO**
- If there is a mortgage, provide the name of the mortgage provide and contact number: _____

_____

2. Applicant **leases** the proposed business premise: _____ **YES** ____ **NO**

- Property Owner name: _____
- Property Owner Address: _____
- Property Owner Phone: _____ Property Owner Email: _____

3. Will on-site parking be offered at the business facility: _____ **YES** ____ **NO**
If "yes", describe the extent to which parking will be offered **OR** If "no", explain how parking will be handled:

_____

_____

4. Describe the Applicant's plans to hire local residents as employees and further describe the proposed plan regarding employee health care insurance, paid leave and meeting minimum wage requirements:

_____

_____

5. Described the Applicant's commitment to diversity at the proposed facility:

_____

_____

6. Described Provide all information that relates to the Applicant's qualifications to operate a cannabis related business, including but not limited to experience in the cannabis industry and/or other highly regulated industry. The Applicant may (but is not required to) provide copies of resumes of any person that will be involved in the operation of the cannabis related business:

_____

_____

7. Described the Applicant's commitment to diversity at the proposed facility:

_____

_____

8. Describe the steps the Applicant will take to provide security at and around its location:

_____

_____

9. Describe the steps the Applicant will take to prevent minors from purchasing cannabis and cannabis products at its location:

_____

_____

10. Provide a description of the Applicant's environmental impact and sustainability plan, including but not limited to any recognitions or certificates the Applicant has received from Government Regulators regarding sustainability and/or whether the Applicant has a company officer responsible for conducting period internal reviews evaluating the company's implementation of an environmental sustainability plan and of the controls in place to ensure that the plan is adhered to:

_____

_____

11. Provide a description of the Applicant's nuisance mitigation plan. Please specifically address –
    (a) Noise:
    (b) Odor:
    (c) Waste Disposal:
    (d) Vehicular Congestion Mitigation:

_____

_____

12. Provide a description of the Applicant's Community Impact Plan which summarizes –
    (a) How the applicant intends to leave a positive impact on the community where the facility is located:
    (b) Ties to the proposed host community including but not limited to whether any owners are residents of or operated other business in the Borough of Neptune City and/or municipalities that border Neptune City:
    (c) Economic Impact plan:
    (d) Description of community outreach activities planned:

_____

_____

13. Provide an additional information the Applicant would like considered in connection with its application:

_____

_____

Required Documents:

1. The Applicant's Business Registration Certification authorizing it to do business in the State of New Jersey
2. A copy of a valid government-issued identification of each individual listed under the "Contact Information" section of this Application
3. A copy of organizational or corporate governance documents, including all bylaws, operating or partnership agreements
4. A copy of the organizational chart, including the identity and ownership interest of all owners
5. Documentation of the Borough's Zoning Officer indicated that the proposed site for the cannabis facility is in accordance with Chapter 139 of the Borough Code as per Borough Ordinances 2021-04 and 2022-10 and any other municipal zoning laws and location restrictions
6. Proof that the Applicant will have lawful possession of the premises for the proposed for the cannabis business
7. Documents showing the safety and security system that will be installed at the cannabis business facility as per N.J.A.C. 17:30-9.10
7. Proof of financial capability to open and operate the cannabis establishment for which the Applicant is seeking a permit, including a detailed description of the proposed financial plan for the development, operation and maintenance of the facility
8. Documents evidencing community and/or local support for the Applicant's intended business
9. A complete copy of the Applicant's nuisance mitigation plan
10. A complete copy of the Applicant's community impact plan
11. A complete copy of the Applicant's environmental impact plan
12. Floor plans and/or architectural renderings showing the designs for both the interior and exterior of the premises, including on-site parking plans if applicable
13. Documents sufficient to prove that the Applicant entity, or its parent company, is a party to a labor peace agreement and/or collective bargaining agreement in the cannabis industry
14. All other documents the Applicant believes will be helpful in determining whether or not to grant the Applicant a license

CERTIFICATION:

I hereby certify:

1. I am duly authorized to submit this application on behalf of the above-named entity.
2. That all information and documents submitted in connection with this application are true and accurate to the best of my knowledge and belief.
3. I have reviewed all applicable State and local laws related to the operation of cannabis related businesses and the proposed location is in compliance with all applicable zoning requirements.
4. I have not knowingly omitted, concealed or otherwise failed to disclose any documents and/or information which would impact the decision to grant or deny this application.

Signed By:_____ Date:_____

_____ _____

Printed Name Title

AFFIDAVIT OF COMPLIANCE:

State of _____

County of _____

I _____ of _____

Print Name *Print Business/Entity Name*

on behalf of myself and _____ _____

name of person with interest in Business Entity *Signature*

_____ _____

name of person with interest in Business Entity *Signature*

_____ _____

name of person with interest in Business Entity *Signature*

_____ _____

name of person with interest in Business Entity *Signature*

do hereby declare and affirm that _____

Print Business/Entity Name *doing business as (if applicable)*

is in compliance with all State and Local laws regarding affirmative action, antidiscrimination and fair employment practices. I further declare and affirm that the aforementioned persons and Entity shall not discriminate based on race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of its activities or operations. Under penalty of perjury, I hereby declare and affirm the aforementioned statements to be true and correct.

Dated _____ day of _____, 20_____ Signature _____

Signed and sworn before me on this _____ day of _____, 20_____

_____ **My Commission expires On: _____**

Notary Public

EVALUATION CRITERIA:

	5	4	3	2	1
EXPERIENCE: Qualifications and experience operating in highly regulated industries, including cannabis, healthcare, pharmaceutical manufacturing, and retail pharmacies. The value of owners' experience shall outweigh the experience of nonowner principals					
STATE EXPERIENCE: preference given to experience operating such businesses within the State of New Jersey					
PUBLIC SAFETY AND SECURITY: Qualifications and experience related to public safety and security, including any of the applicant's owners' or principals' experience in law enforcement and drug enforcement and a summary of the applicant's plans for storage of products and currency, physical security, video surveillance, security personnel, and visitor management					
SECURITY PLAN: Comprehensive summary of the applicant's plans for storage of products and currency, physical security, video surveillance, security personnel, and visitor management					
RESEARCH: Partaking in plans to conduct institutional review board-approved research that is related to medical cannabis or substance abuse, **RESEARCH PAST INVOLEMENT:** Having Conducted or supported clinical research with IRB approval shall outweigh plans to conduct such research					
LOCAL LAND USE: brand and proposal for the physical presence of the business, including but not limited to: the site's ability to meet all land use regulations (parking, landscaping, signage, etc.), architectural treatments, customer experience; and					
COMMUNITY AND SOCIAL RESPONSIBILITY: Demonstrated commitment to the community and social responsibility; or sufficient evidence related to N.J.A.C. 17:30-30-7.10 (a)(13)					
ENVIRONMENTAL IMPACT: Summary environmental impact and sustainability plan; whether the applicant entity or its parent company has any recognitions from or registrations with federal or New Jersey state environmental regulators for innovation in sustainability					
ENVIRONMENTAL CERTIFICTION: Proof of any certification under international standards demonstrating the applicant has an effective environmental management system or has a designated sustainability officer to conduct internal audits to assess the effective implementation of an environmental management system					
EMPLOYMENT PRACTICES: Demonstrated commitment or shows sufficient experience as responsible employers. Evidence may include letters in support and agreements, a local workforce hiring and development plan, community service, and/or collaborations with a university or specialized training facility					
GOOD NEIGHBOR POLICY: Demonstrated being committed to a local program in collaboration with organizations committed to the well-being of residents. Evidence may include letters in support and agreements, a local workforce hiring and development plan, community service, and/or collaborations with a university or specialized training facility					
DIVERSITY: Demonstrated commitment to diversity in its ownership composition and hiring practices.					