Local Cannabis Control Application · [redacted]

Expiration Date | Active

Details
Submitted on Feb 22, 2023 at 11:44 am

Attachments
0 files

Activity Feed
Latest activity on Feb 22, 2023

Applicant
0

Location

Timeline
Add New

Local Control Review
In Progress

Feb 22

Organization Information

Corporation/Sole Proprietor name *

D/B/A (Business Name) *
Float On

Business Address *

Business Phone *

Contact person (Owner/CEO/Designated) *

Contact Phone (Owner/CEO/Designated) *

Contact Email Address *

License Type (check all that apply)

Cultivator
☐

Manufacturer
☐

Wholesaler
☐

Testing Laboratory
☐

Retailer
☑

Integrated License Types
☐

Regular Hours of Operation

Sunday Start Time *
10:00 AM

Sunday End Time *
6:00 PM

Monday Start Time *
10:00 AM

Monday End Time *
8:00 PM

Tuesday Start Time *
10:00 AM

Tuesday End Time *
8:00 PM

Wednesday Start Time *
10:00 AM

Wednesday End Time *
8:00 PM

Thursday Start Time *
10:00 AM

Thursday End Time *
8:00 PM

Friday Start Time *
10:00 AM

Friday End Time *
8:00 PM

Saturday Start Time *
10:00 AM

Saturday End Time *
8:00 PM

Business Operations Information

Is your business plan in compliance with all Vermont State laws and regulations, including but not limited to advertising, marketing, and product packaging requirements? *

Yes

What kind of precautions will you take to prevent underage sales? *

All IDs are checked twice and are scanned for authenticity

Is your business registered with the Vermont Secretary of State's Office? *

Yes

Does your occupancy load comply with all necessary FMO approval? *

Yes

Will you be complying with all state security requirements? *

Yes

For Retail Establishments Only: Is the location for the proposed business located within a 500 ft buffer from an education facility, as depicted on the Map of Education Facilities with Buffer Zones (https://www.arcgis.com/home/webmap/viewer.html?url=https://services1.arcgis.com/1bO0c7PxQdsGidPK/ArcGIS/rest/services/Cannabis_Education_E

If so, is the establishment on a property that shares a property line with or is across the street from one of these facilities? *

No

Have you obtained a water/wastewater capacity allocation from the City of Burlington's Department of Public Works, Water Resources Division, and any other water/wastewater approvals necessary from the State of Vermont? *

Not Applicable

Have all fees been paid? *

Yes

Certification

I certify that this application has been examined by me, and is, to the best of my knowledge and belief, true, correct, and complete.

I have agreed to submit this application by electronic means. I understand that an electronic signature has the same legal effect and can be enforced in the same way as a written signature. By checking this box and typing my name, I am electronically signing my application. *

Local Cannabis Control Application · Add to a project

Expiration Date Active

Details
Submitted on Feb 20, 2023 at 11:00 am

Attachments
0 files

Activity Feed
Latest activity on Feb 20, 2023

Applicant
0

Location

Timeline
Add New

Local Control Review
In Progress

Feb 20

Organization Information

Corporation/Sole Proprietor name *

D/B/A (Business Name) *
The Herb Closet

Business Address *

Business Phone *

Contact person (Owner/CEO/Designated) *

Contact Phone (Owner/CEO/Designated) *

Contact Email Address *

License Type (check all that apply)

Cultivator
☐

Manufacturer
☐

Wholesaler
☐

Testing Laboratory
☐

Retailer
☑

Integrated License Types
☐

Regular Hours of Operation

Sunday Start Time *
11:00 AM

Sunday End Time *
8:00 PM

Monday Start Time *
11:00 AM

Monday End Time *
8:00 PM

Tuesday Start Time *
11:00 AM

Tuesday End Time *
8:00 PM

Wednesday Start Time *
11:00 AM

Wednesday End Time *
8:00 PM

Thursday Start Time *
11:00 AM

Thursday End Time *
8:00 PM

Friday Start Time *
11:00 AM

Friday End Time *
8:00 PM

Saturday Start Time *
11:00 AM

Saturday End Time *
8:00 AM

Business Operations Information

Is your business plan in compliance with all Vermont State laws and regulations, including but not limited to advertising, marketing, and product packaging requirements? *

Yes

What kind of precautions will you take to prevent underage sales? *

Age verification: Our company will use advanced age verification systems, such as ID scanning technology, to ensure that all customers are of legal age to purchase marijuana.

Employee training: We will provide our employees with training on responsible sales practices, including the importance of verifying the age of customers and refusing to sell to minors.

Labeling and packaging: The Herb Closet will ensure that all its products are labeled and packaged in a manner that makes it clear that they are intended for adults only and that the sale to minors is prohibited.

Monitoring compliance: We will monitor our employees to ensure that they are following all regulations and company policies related to the sale of marijuana, including those related to the prevention of sales to minors.

Cooperation with law enforcement: The Herb Closet will cooperate with law enforcement agencies in preventing the sale of marijuana to minors and other illegal activities.

Is your business registered with the Vermont Secretary of State's Office? *

Yes

Does your occupancy load comply with all necessary FMO approval? *

Yes

Will you be complying with all state security requirements? *

Yes

For Retail Establishments Only: Is the location for the proposed business located within a 500 ft buffer from an education facility, as depicted on the Map of Education Facilities with Buffer Zones (https://www.arcgis.com/home/webmap/viewer.html?url=https://services1.arcgis.com/1bO0c7PxQdsGidPK/ArcGIS/rest/services/Cannabis_Education_E

If so, is the establishment on a property that shares a property line with or is across the street from one of these facilities? *

No

Have you obtained a water/wastewater capacity allocation from the City of Burlington's Department of Public Works, Water Resources Division, and any other water/wastewater approvals necessary from the State of Vermont? *

No

Have all fees been paid? *

Yes

Certification

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Local Cannabis Control Application · [redacted]

Expiration Date Active

Details
Submitted on Feb 28, 2023 at 12:19 pm

Attachments
3 files

Activity Feed
Latest activity on Feb 28, 2023

Applicant 0

Location

Timeline Add New

Local Control Review
In Progress Feb 28

Organization Information

Corporation/Sole Proprietor name *

D/B/A (Business Name) *
True 802 Cannabis

Business Address *

Business Phone *

Contact person (Owner/CEO/Designated) *

Contact Phone (Owner/CEO/Designated) *

Contact Email Address *

License Type (check all that apply)

Cultivator
☐

Manufacturer
☐

Wholesaler
☐

Testing Laboratory
☐

Retailer
☑

Integrated License Types
☐

Regular Hours of Operation

Sunday Start Time *
12:00 Noon

Business Operations Information

Is your business plan in compliance with all Vermont State laws and regulations, including but not limited to advertising, marketing, and product packaging requirements? *

Yes

What kind of precautions will you take to prevent underage sales? *

We will display signage about all customers needing to be at least 21-years-old. We will check ID's for all customers at our security checkpoints as well as scan the ID at the top of the stairs prior to opening the door to the retail space and again when we began a sales transaction. We will train our employees on the importance of following the minimum age law and only selling cannabis products to those of age.

intends to open its retail cannabis shc ıas significant experience in ensuring that patrons are at least 21-years-old and in training employees to do the same.

Is your business registered with the Vermont Secretary of State's Office? *

Yes

Does your occupancy load comply with all necessary FMO approval? *

Yes

Will you be complying with all state security requirements? *

Yes

For Retail Establishments Only: Is the location for the proposed business located within a 500 ft buffer from an education facility, as depicted on the Map of Education Facilities with Buffer Zones (https://www.arcgis.com/home/webmap/viewer.html?url=https://services1.arcgis.com/1bOOc7PxQdsGidPK/ArcGIS/rest/services/Cannabis_Education_E

If so, is the establishment on a property that shares a property line with or is across the street from one of these facilities? *

No

Have you obtained a water/wastewater capacity allocation from the City of Burlington's Department of Public Works, Water Resources Division, and any other water/wastewater approvals necessary from the State of Vermont? *

Not Applicable

Have all fees been paid? *

Yes

Sunday End Time *
8:00 PM

Monday Start Time *
12:00 Noon

Monday End Time *
8:00 PM

Tuesday Start Time *
12:00 Noon

Tuesday End Time *
8:00 PM

Wednesday Start Time *
12:00 Noon

Wednesday End Time *
8:00 PM

Thursday Start Time *
12:00 Noon

Thursday End Time *
8:00 PM

Friday Start Time *
12:00 Noon

Friday End Time *
8:00 PM

Saturday Start Time *
12:00 Noon

Saturday End Time *
8:00 PM

Certification

I certify that this application has been examined by me, and is, to the best of my knowledge and belief, true, correct, and complete.

I have agreed to submit this application by electronic means. I understand that an electronic signature has the same legal effect and can be enforced in the same way as a written signature. By checking this box and typing my name, I am electronically signing my application. *