

City Clerk's Office 11701 Community Center Dr. Northglenn, CO 80233 303.450.8755

Vehicle Identification Number (VIN)

Marijuana Business Delivery Permit Application

\$2,500 non-refundable application fee \$1,500 permit fee Social Equity Licensees are eligible for fee reductions

Type of Permit Requested (☐ Medical Marijuana Delive ☐ Medical Marijuana Delive ☐ Social Equity Applicant	ry by Business	: □ Retail Marijuana Delivery by □ Retail Marijuana Delivery by	
Applicant:			
□ Individual □ Corpor	ation □ Partne	rship Limited Liability C	ompany Other
Trade Name (DBA) of Busin	ness:		
Address of Business:	Street	Unit #	Zip Code:
Business Phone:	Name of On	-Site Manager:	Date of Birth:
List of employees or City of	Northglenn licensed	transporters that will be making	deliveries:
Name	Date of Birth	Business/Employer	MED Occupational License Number
Name	Date of Birth	Business/Employer	MED Occupational License Number
Name	Date of Birth	Business/Employer	MED Occupational License Number
Name	Date of Birth	Business/Employer	MED Occupational License Number
Name	Date of Birth	Business/Employer	MED Occupational License Number
Name	Date of Birth	Business/Employer	MED Occupational License Number
Name	Date of Birth	Business/Employer	MED Occupational License Number
Name	Date of Birth	Business/Employer	MED Occupational License Number
	nitted with this applic		with a licensed transporter, as applicable, are
Make Model	Color	License Plate Numb	er Vehicle Identification Number (VIN)
Make Model	Color	License Plate Numb	er Vehicle Identification Number (VIN)

License Plate Number

Make	Model	Color	License Plate Number	Vehicle Identification Number (VIN)
Insurance provid	der and policy numbe	ers:		
/ Note: C		-44:		
			ce cards are required to be su	
Please describe	how the following re	equirements will be me	et (attach additional pages as	necessary):
deliver marijuana	a and marijuana infu	sed products to private		valid marijuana delivery permit may the city, provided that such delivery -502(11), and 1 CCR 212-3.
Sunday; howeve	er, deliveries may no	it be made between tl	ne hours of 10:00 p.m. and 8	ry 24 hours a day, Monday through :00 a.m., Monday through Sunday
Please state the	establishment's hou	ırs of delivery each da	ıy:	
Monday	to		Friday	to
Tuesday	to		Saturday	to
Wednesday	to		Sunday	to
Thursday	to			
Marijuana delive marijuana infuse	ery permittees shall u ed products are bein	se an electronic scani g delivered at the poin	ner to verify the identification of transferring any regulated	of the person to whom marijuana on dimarijuana to the customer.
	uana business with a e City of Northglenn		hall assess a one-dollar (\$1.0	0) surcharge for each delivery orde
Each employee include delivery		orter must successfully	y complete a MED certified re	sponsible vendor training course, to

A detailed transport manifest is required. The following must be included: the product and quantity ordered, date and time of

[✓] Note: Copies of training certificates are required to be submitted with this application.

sale or delivery, name, date of birth, and identification number of the consumer or patient placing order, delivery address, patient or primary caregiver registry number, if applicable, and signature acknowledgement of the individual ordering and accepting delivery. If delivery can't be completed, that reason must also be documented.
Marijuana and marijuana infused products may only be delivered from a licensed retail marijuana store or medical marijuana center holding a delivery permit. No marijuana may be sold from a storage warehouse, a cultivation facility, a non-permanent structure or vehicle. No marijuana products may be placed in a delivery vehicle without a Metrc© verified delivery order.
Delivery may only be made to an individual over the age of twenty-one at a private residence. Delivery for any medical marijuana patient under the age of twenty-one may only be made to a registered caregiver, parent, or guardian over the age of twenty-one. Delivery to a college campus, public place, or business is prohibited.
There may not be more than one sale or delivery to any one consumer or patient per business day subject to the following limits: Retail marijuana: one (1) ounce of retail marijuana, eight (8) grams of retail marijuana concentrate, or retail marijuana products containing more than ten 80 milligram servings of THC. Medical marijuana: Two (2) ounces of medical marijuana, 40 grams of medical marijuana concentrate, or medical marijuana products containing more than 20,000 milligrams of THC.
All orders must be pre-packaged at the licensed premises. Once in the delivery vehicle, the product must be locked in a storage compartment and may not be opened or re-packaged.
Delivery vehicles are subject to the following requirements: Owned or leased by the marijuana business or a badged owner, registered and insured in Colorado,

- equipped with:
 - o remotely accessible and recordable vehicle tracking system (GPS),
 - o security alarm,
 - o lockable opaque storage compartment securely affixed to the vehicle, and
 - o video surveillance system with continuous view and recording of the storage compartment and front of the vehicle (dash cam),
- have no external markings, words, or symbols associated with a marijuana business or to indicate the vehicle is used

for marijuana delivery, marijuana must not be visible from the outside of the vehicle, vehicle shall contain no more than \$10,000.00 (enclosed vehicle) or \$2,000.00 (non-enclosed vehicle) retail value of regulated marijuana products at any one time, and, only badged employees and owners identified on the transport manifest may occupy a delivery vehicle while conducting deliveries. I declare under the penalty of perjury that this application, including any accompanying statements or documents, have been examined by me and to the best of my knowledge and belief are true, correct, and complete. I also declare that I have read Northglenn Municipal Code Chapter 18, Article 14 and/or Article 16, as applicable, pertaining to medical marijuana and retail marijuana businesses.

Signature of Applicant: ______ Date: _____