



MARIHUANA FACILITIES PERMIT RENEWAL APPLICATION INSTRUCTIONS

City of Big Rapids
226 N. Michigan Ave, Big Rapids, MI 49307
(231)592-4035 www.cityofbr.org

These instructions are for current Municipal Marihuana Facility Permit holders in the City of Big Rapids who are looking to renew their one-year permit. Applicants are required to have an active license from the State of Michigan Department of Licensing and Regulatory Affairs' Marihuana Regulatory Agency.

To apply to renew a Marihuana Facility Permit in the City of Big Rapids, please return one hard copy and one digital copy (email or flash drive) of the complete Marihuana Facilities Application form with all the required attachments to the Community Development Director (ppriebe@cityofbr.org or City Hall address).

Please submit your Permit Renewal Application between 90 and 60 days before your current permit expires. The Renewal Application process consists of the Permit Renewal Application review and a municipal inspection of the facility.

Permit Renewal Application Instructions

Instructions for the Fill-In Sections

- Permit Renewal Application Information
 - Fill in the requested sections with information from your current Municipal Marihuana Facility Permit.
- Permit Holder Information
 - Please complete all sections for the individual or entity applying for the marihuana facility permit.
- Permit Type
 - Please mark which type of marihuana facility permit the Applicant is applying to renew.
 - Applicants applying for more than one facility type or location must fill out a separate application for each one.
- Facility Site Information
 - Complete all sections for the property on which the Application is applying for the marihuana facility permit.
 - The parcel number can be found on property tax documents.
- Person Completing the Application
 - If the Applicant is one individual and is completing the application for themselves, leave this section blank.
 - Fill this section completely with information of the individual who is writing and signing the Application form on behalf of the entity.
- Application Attachments
 - See the detailed instructions for this section below.
- Certification
 - The Person Completing the Application is required to complete this section to certify to the required statements.

Instructions for Permit Renewal Application Attachments

- A copy of the Applicant's active State License from LARA/MRA.
- Updated Staffing Plan, with current data.
 - A staffing plan shall describe the actual number of employees, including the number and type of jobs that the facility has created, the amount and type of compensation, including benefits, paid for the jobs, and the number of employees who live in the City of Big Rapids and who live in Mecosta County.
- Updated Explanation of Economic Benefits to the City, with current data.
 - An explanation of economic benefits to the City, with supporting factual data, shall detail the economic benefits to the City and the job creation for local residents achieved by the facility, including community outreach and education activities and worker training programs which took place in the previous year what which are planned for the upcoming year.
- Updated Security and Lighting Plan.
 - A security plan shall include details of the video surveillance system, burglary alarm system, safe on the premises, etc. to be employed at the facility and procedures that meet or exceed the state law requirements.
- Proof of Insurance
 - Proof of insurance is required including worker's compensation insurance as required by state law and general liability insurance with minimum limits of \$1,000,000 per occurrence and a \$2,000,000 aggregate limit issued from a company licensed to do business in Michigan and having an AM Best rating of at least B++.
 - Provide a copy of a certificate of insurance evidencing the existence of a valid and effective policy which discloses the limits of each policy, the name of the insurer, the effective date and expiration date of each policy, the policy number and the names of the additional insureds.
 - The policy shall name the City of Big Rapids and its officials and employees as additional insured to the limits required by this Ordinance.
 - Secure transporter Applicants shall also provide proof of no-fault automobile insurance with a company licensed to do business in Michigan with limits of liability not less than \$1,000,000 per occurrence combined single limit for bodily injury and property damage, vehicle registration, and registration as a commercial motor vehicle for all vehicles used to transport marihuana or marihuana-infused product.
- Nonrefundable Application Fee of \$5,000 payable to the City of Big Rapids.