

**Division of Medical Marijuana and Integrative Therapy
Facility Employment Application**

<p>Type of Registration (Check One)</p> <p>New <input type="checkbox"/></p> <p>Renewal <input type="checkbox"/></p> <p>(annual renewal required)</p>	<p><input type="checkbox"/> Director-\$200 <input type="checkbox"/> Officer-\$200 <input type="checkbox"/> Member-\$200</p> <p><input type="checkbox"/> Incorporator-\$200 <input type="checkbox"/> Manager-\$150 <input type="checkbox"/> Employee-\$75</p> <p><input type="checkbox"/> Agent-\$200 _____ (describe role)</p> <p>PAYABLE BY CASHIER'S CHECK, CERTIFIED CHECK OR MONEY ORDER, MADE PAYABLE TO THE DC TREASURER (5410.2 An individual who has been approved by the Department as a manager shall not also be required to register as an employee)</p>
<p>Applicant's Name & Social Security Number</p>	<p>First Name _____ Middle Initial _____</p> <p>Last Name _____ Suffix (i.e., Jr, Sr, II, III) _____</p> <p>Social Security Number _____</p>
<p>Date of Birth</p>	<p>Month _____ Day _____ Year _____</p>
<p>Home Address (P.O. Box not acceptable)</p> <p>It is your responsibility to notify the department of all address changes.</p>	<p>Street Address _____ Apt/Suite City _____</p> <p>State _____ Zip Code _____</p> <p>Telephone Number _____</p> <p>Email Address _____</p>
<p>Type of Business</p> <p>Check One:</p> <p>Cultivation Center <input type="checkbox"/></p> <p>Dispensary <input type="checkbox"/></p>	<p>Company Name _____ Job Title _____</p> <p>Job Description _____</p> <p>Business Telephone Number _____</p> <p>Business Email Address _____</p>

Medical Marijuana Program
Director, Officer, Member, Incorporator, Agent, Manager, Employee
Acknowledgement and Attestation Form

This form must be signed and notarized as part of the application process.

1. The undersigned applicant has not been convicted of any felony before filing the application.
2. The undersigned applicant has not been convicted of a misdemeanor for a drug-related offense before filing the application.
3. The undersigned applicant is not a person whose authority to participate in the Medical Marijuana Program has been previously revoked by the Department.
4. The undersigned applicant certifies that he/she does not owe more than \$100.00 to the District of Columbia government as a result of:
 - A. Fines, penalties or interest assessed pursuant to the Litter Control Administration Act of 1985, effective March 25, 1986 (D.C. Code § 6-2901 et seq.);
 - B. Fines, penalties or interest assessed pursuant to the Illegal Dumping Enforcement Act of 1994, effective May 20, 1994 (D.C. Law 10-117; D.C. Code § 6-2911 et seq.);
 - C. Fines, penalties or interest assessed pursuant to the Department of Consumer and Regulatory Affairs Civil Infractions Act of 1985, effective October 5, 1986 (D.C. Law 6-42; D.C. Code § 6-2701 et seq.); or
 - D. Past due taxes.

The undersigned applicant understands that if he/she knowingly falsifies this Certification, the Department will move to revoke the license or permit for which he/she is applying, and to fine him/her \$1,000.00. He/she further understands that the Department may conduct an investigation to ascertain the veracity of this certification. The undersigned applicant understands that this Certification is now required as documentation to accompany his/her application for a license or permit, and that by completing this Certification, he/she is not guaranteed that his/her license or permit will be approved. Please read carefully and completely before signing. A false statement on this certification requires that the Department proceed immediately to revoke the license or permit for which the undersigned applicant is now applying and fine him/her \$1000.00. This certificate is required by the "CLEAN HANDS BEFORE RECEIVING A LICENSE OR PERMIT ACT OF 1996". (Effective May 11, 1996, D.C. Law 11-118, D.C. Code §47-2861 et seq.)

5. The undersigned applicant attests that he/she has read the Legalization of Marijuana for Medical Treatment Initiative of 1999 (Act), effective July 27, 2010, the Final Regulations published December 2, 2011, in the D.C. Register, and has knowledge of District and federal laws and regulations relating to marijuana and medical marijuana.
6. The undersigned applicant assumes any and all risk or liability that may result under District of Columbia and federal laws and regulations from participating in the Medical Marijuana Program.
7. The undersigned applicant acknowledges that he/she understands that the medical marijuana laws and enforcement thereof of the District of Columbia and the Federal government are subject to change at any time and that the District of Columbia shall not be liable as a result of these changes;

8. The undersigned applicant attests to the fact that the applicant is the true and actual participant of the business for which the registration is sought; the applicant intends to carry on the business for the entity identified in the application and not as the agent of any other individual, partnership, association, or corporation not identified in the application; and the registered establishment will be managed by the applicant in person or by a registered manager approved by the Director;
9. The undersigned attests that the applicant understands and is aware that a Director, Officer, Manager, Incorporator, Agent, Manager and Employee registration may be revoked at any time for the convenience of the District pursuant to the regulations.
10. The undersigned specifically acknowledges receipt and advisement of the notices below. The undersigned agrees to and accepts the limitation of liability against the District, and the requirement to indemnify, hold harmless, and defend the District.

(a) **Limitation of Liability** – The District of Columbia shall not be liable to registrant, its employees, agents, business invitees, licensees, customers, clients, family members or guests for any damage, injury, accident, loss, compensation or claim, based on, arising out of or resulting from registrant's participation in the District of Columbia's medical marijuana program, including but not limited to the following: arrest and seizure of persons and/or property, prosecution pursuant to federal laws by federal prosecutors, interruption in registrant's ability to conduct its business; any fire, robbery, theft, mysterious disappearance or any other casualty; the actions of any other registrants or persons. This Limitation of Liability provision shall survive expiration or the earlier termination of this registration if such registration is granted.

(b) **Indemnification, Hold Harmless and Defense Obligations** – Registrant hereby indemnifies and holds the District of Columbia, its officers, directors, employees, affiliates and agents ("**Indemnified Parties**") harmless and shall defend the Indemnified Parties (with counsel satisfactory to District of Columbia) from and against any and all losses, costs, damages, liabilities, expenses, claims and judgments (including, without limitation, attorney's fees and court costs) suffered by or claimed against the Indemnified Parties, directly or indirectly, based on, arising out of or resulting from the negligence or willful misconduct of registrant or its employees, contractors, agents, licensees, guests or invitees, any breach or default by registrant in the performance or observance of its covenants or obligations under this registration, or any violations of law by of registrant or its employees, contractors, agents, licensees, guests or invitees.

(c) **Federal Prosecution** - The United States Congress has determined that marijuana is a controlled substance and has placed marijuana in Schedule I of the Controlled Substance Act. The District of Columbia's law authorizing the District's medical marijuana program will not excuse any registrant from any violation of the federal laws governing marijuana or authorize any registrant to violate federal laws.

11. The undersigned applicant certifies that the application is complete and accurate.

Any person who knowingly makes a false statement on an application, or in any accompanying statement under oath that the Department may require, shall be guilty of the offense of making false statements. The making of a false statement, whether made with or without the knowledge or consent of the applicant, shall, in the discretion of the Director, constitute sufficient cause for denial of the application or revocation of the registration. The making of false statements shall also constitute the basis for a criminal offense under D.C. Official Code § 22-2514.

12. The undersigned chooses to sign this attestation willingly and without reservation and is fully aware of its meaning and effect.

Signature of Applicant: _____

Print Name: _____

Company Name: _____

Title: _____

Date: _____

Subscribed and sworn to before me this _____ day of _____, 20____.

My commission expires _____

Notary Signature and Seal: _____