

Alaska Marijuana Control Board

Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

marijuana.licensing@alaska.gov https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

Form MJ-20: Renewal Application Certifications

What is this form?

This renewal application certifications form is required for all marijuana establishment license renewal applications. Each person signing an application for a marijuana establishment license must declare that he/she has read and is familiar with AS 17.38 and 3 AAC 306. A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

This form must be completed and submitted to AMCO's main office <u>by each licensee</u> (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

	Section 1 – Establish	ment Informat	ion			
Enter information for the	licensed establishment, as identified on the l	icense application.				
Licensee:	Herbal Outfitters, LLC		License Number: 10173		3	
License Type:	Retail Marijuana Store					
Doing Business As:	Herbal Outfitters, LLC					
Premises Address:	165 Fairbanks Drive (Lower Floor)					
City:	Valdez	State:	AK	ZIP:	99686	
	Section 2 – Individu	ual Information	1			
Enter information for the i	ndividual licensee who is completing this for	m.				
Name:	Richard C. Ballow					
Title:	Owner Operator					
Sec	tion 3 – Changes to License	d Marijuana Fo	stablich	mont		
	then sign your initials in the box to the righ				I	
I certify that <u>no changes ha</u> prescribed by the Board, to	ave been made, except for those that have be this licensed establishment's business name arijuana product manufacturers) that I do not	een previously reporte	d or request	ed on a fo	Initials orm	
lunderstand that an additi license can be considered o	been or will be made to one or more of the ironal form(s) and fee(s) must be submitted to complete. Sond certification, please list any and all of the	AMCO before any ren	ewal applica	tion for th	nis	
	and the state of t	e jive types oj changes	unat need to	pe report	ed/requested:	



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Section 4 – Certifications	
Read each line below, and then sign your initials in the box to the right of any applicable statements:	Initials
I certify that I have not been convicted of any criminal charge in the previous two calendar years.	m
I certify that I have not committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.	pu
Sign your initials to the following statement only if you are unable to certify one or both of the above statements:	Initials
I have attached a written explanation for why I cannot certify one or both of the above statements, which includes the type of offense, as required under 3 AAC 306.035(b)(4).	
Read each line below, and then sign your initials in the box to the right of each statement:	Initials
I certify that no person other than a licensee listed on my marijuana establishment license renewal application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which the marijuana establishment license has been issued.	m
I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state.	n
I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board.	m
I certify that I understand that providing a false statement on this form, the online application, or any other form provided by or to AMCO is grounds for rejection or denial of this application or revocation of any license issued.	m
As an applicant for a marijuana establishment license renewal, I declare under penalty of unsworn falsification that I have read familiar with AS 17.38 and 3 AAC 306, and that this application, including all accompanying schedules and statements, is true, can demonstrate to provide all information required by the Marijuana Control Board in support of this application and under that failure to do so by any deadline given to me by AMCO staff may result in additional fees or expiration of this license.	
while the	
NOTARY PUBLIC SHARON BLAKE Notary Public in and for the State of Alask	ka
KICHARD C. BALLOW STATE OF ALASKA	2017
	~ 0 1 1
Subscribed and sworn to before me this O_{2}^{0} day of S_{2}^{0} , 20 17.	