

- New Application
- Annual Renewal

Adult Use Marijuana Business Application

License Fees

One Time New Application Fee

- | | |
|--|-------------|
| <input type="checkbox"/> Adult Use Marijuana Store | \$50,000.00 |
| <input type="checkbox"/> Adult Use Nursery | \$5,000.00 |
| <input type="checkbox"/> Adult use Marijuana Products Manufacturing Facility | \$50,000.00 |
| <input type="checkbox"/> Adult Use Marijuana Testing Facility | \$10,000.00 |
| <input type="checkbox"/> Adult Use Cultivation Facility up to 500SF Plant Canopy | \$10,000.00 |
| <input type="checkbox"/> Adult Use Cultivation Facility 501 to 2,000SF Plant Canopy | \$20,000.00 |
| <input type="checkbox"/> Adult Use Cultivation Facility 2,001 to 7,000SF Plant Canopy | \$40,000.00 |
| <input type="checkbox"/> Adult Use Cultivation Facility 7,000 to 20,000SF Plant Canopy | \$90,000.00 |

Annual Renewal Fee

- | | |
|--|-------------|
| <input type="checkbox"/> Adult Use Marijuana Store | \$20,000.00 |
| <input type="checkbox"/> Adult Use Nursery | \$1,000.00 |
| <input type="checkbox"/> Adult use Marijuana Products Manufacturing Facility | \$25,000.00 |
| <input type="checkbox"/> Adult Use Marijuana Testing Facility | \$5,000.00 |
| <input type="checkbox"/> Adult Use Cultivation Facility up to 500SF Plant Canopy | \$2,500.00 |
| <input type="checkbox"/> Adult Use Cultivation Facility 501 to 2,000SF Plant Canopy | \$5,000.00 |
| <input type="checkbox"/> Adult Use Cultivation Facility 2,001 to 7,000SF Plant Canopy | \$10,000.00 |
| <input type="checkbox"/> Adult Use Cultivation Facility 7,000 to 20,000SF Plant Canopy | \$25,000.00 |

Multiple License Discount

10% Discount on Second most expensive license: 15% Discount on 3rd, 4th and 5th licenses:

Total Fees, with discounts:

Residency: Are you a resident of Lebanon, Maine? Yes No

Address:

Business Information

Business Name (DBA)	<input style="width: 95%;" type="text"/>	Phone:	<input style="width: 95%;" type="text"/>
Business Address	<input style="width: 95%;" type="text"/>		
Mailing Address	<input style="width: 95%;" type="text"/>		
Additional Contact	<input style="width: 95%;" type="text"/>		

Continue on Back

Owner (If entity, complete Corporate Disclosure)

Name		Phone:	
Mailing Address			
Additional Contact			

Emergency Contact

Name		Phone:	
Mailing Address			
Additional Contact			

Local Authorized Agent for Service

Name		Phone:	
Mailing Address			
Additional Contact			

Use this space to provide an additional information you would like to be considered

Applicant, by signing below, agrees to abide by all laws, orders, ordinances, rules and regulations governing the above licensee and further agrees that any misstatement of material fact may result in refusal of license or revocation if one has been granted.

Date:		Signature:	
Title:		Printed Name:	

License Number		For Office Use Only	Lottery Number:	
Date Received			Date Issued	