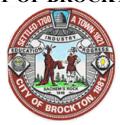
CITY OF BROCKTON



LICENSING COMMISSION APPLICATION FOR CHANGE

Pursuant to Brockton Code of Ordinances Sec. 11-428(a), prior to changing location, ownership or control, structure, or name, a marijuana establishment shall submit the following request for change to the license commission. No change shall be permitted until approved by the Brockton City Council. (If additional space is needed, please submit a clearly labeled addendum)

Note: The marijuana establishment shall also complete the appropriate applications through the Cannabis Control Commission pursuant to 935 CMR 500.104(1) and/or 935 CMR 501.104(1) prior to submitting this form to the licensing commission. Failure to obtain approval of such changes may result in a license being suspended, revoked, or deemed void.

Please check off the change (as defined by the CCC) for which the licensee is applying:		
Change of Location		
Change of Ownership		
Change of Control		
Structural Change		
Name Change		
Licensee Representative(s) – Name/Contact Information:		
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d.	Please provide a detailed description of the reason for the request:			
0	If anniving for a shange of name please provide the proposed new hydross name.			
e.	If applying for a change of name, please provide the proposed new business name:			
f.	If applying for a change of location, please provide the proposed new address:			
g.	If applying for a change of location, please provide the name and contact informatio of the owner of new location:			
h.	If applying for a change of ownership or control, please identify each individual/entity proposed to acquire ownership and/or control over the license(s) and include the following:			
	a. Physical Address;			
	b. Phone Number;			
	c. Email Address;			
	d. Role in the Establishment;			
	e. Individual Interests in Other In-State Marijuana-Related licenses;			
	f. Interest in out-of-state Marijuana-Related Businesses; and			
	g. Proposed percentage of Ownership and/or Control.			

h.	If applying for change of ownership Individuals/Entities that will no long license(s) based on the proposed cha	ger have ownership or control over the
	Please include in your disclosure the ownership or control and an attestat	e reason why they will no longer have tion signed by them or their representative efined as a Person or Entity Having Direct (
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i.	If applying for a structural change, personal change, per	please submit plans for modification, remo
_	ning this document, I, the ME/MTC's repis accurate and true.	presentative, affirm that all information provid
int N	Name	Date
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