

MARIJUANA BUSINESS LICENSE APPLICATION

CONSENT OF OWNER

As record owner or authorized representative of corporate owner of the property located at

address:	
I do hereby consent to use of the subject property establishment.	for a properly licensed retail or retail/medical marijuana
	OWNER:
	Business name
	Print individual name, title
	Signature
STATE OF COLORADO)) ss. County of)	
	ore me thisday of2022, by nager) of
WITNESS my hand and official seal.	
(SEAL)	Notary Public
My commission expires:	