



CANNABIS INTEGRATED RENEWAL FORM A
(Retailer Premises)

PRIMARY BUSINESS INFORMATION	
LICENSE NUMBER	
BUSINESS LEGAL NAME	
DETAILS OF RETAILER PREMISE TO BE RENEWED	
PREMISE ADDRESS	PREMISE LICESE NUMBER
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ATTESTATION	
<p>1) I certify I will adhere to retailer requirements pursuant to the Cannabis Regulation Act, the Lynn and Erin Compassionate Use Act, and division rules.</p> <p>2) If applicable, I certify I will adhere to courier requirements pursuant to the Cannabis Regulation Act, the Lynn and Erin Compassionate Use Act, or division rules.</p>	
<p>I attest to the above under penalty of perjury. I hereby declare that the information contained within and submitted with the application is complete, true and accurate. I understand that a misrepresentation of fact or violation of these rules may result in denial of the renewal application or revocation or a license issued.</p> <p>Applicant's Signature _____ Date _____</p>	

