

## Cannabis Consumption Area Intake Walkthrough

This document will walk you through applying for an Intake Cannabis Consumption Area License.

Step 1: Route to the CCD Portal Page and login via <https://nmrldpi.my.site.com/ccd/s/login/>

### Apply for a New or Renewal License

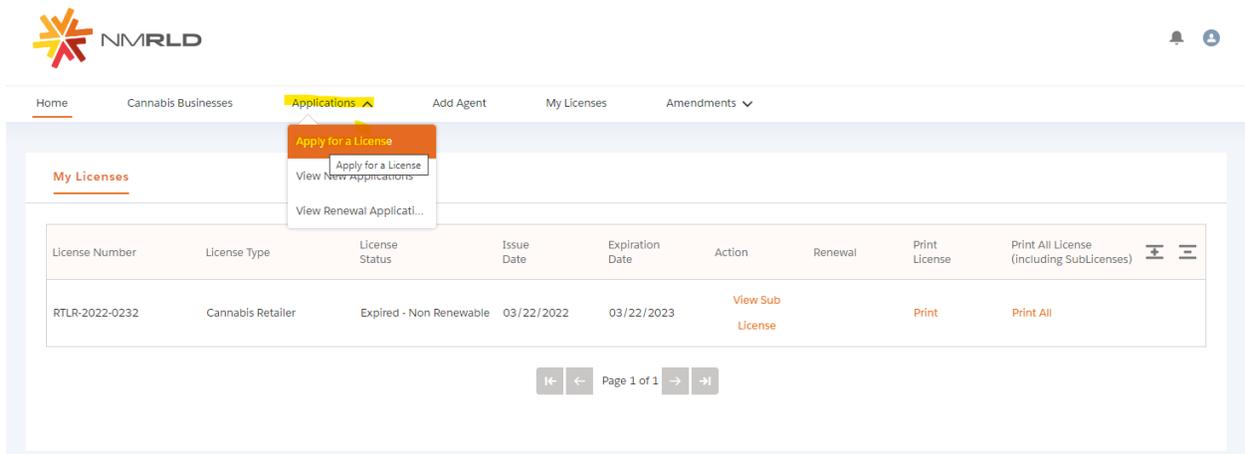
Create your account by clicking on [Self Register](#). If you have already created an account, please log in using your username and password to apply for a new license or renew a license.



[Forgot Password](#) [Forgot Username](#) [Self Register](#)

Step 2: Upon entering your credentials, click Log In to enter the CCD Portal

Step 3: From the Navigation Bar, click on Applications -> Apply for a License, as shown below



The screenshot shows the NMRLD CCD Portal interface. The navigation bar includes 'Home', 'Cannabis Businesses', 'Applications', 'Add Agent', 'My Licenses', and 'Amendments'. The 'Applications' dropdown menu is open, showing options: 'Apply for a License', 'View New Applications', and 'View Renewal Applications'. The 'Apply for a License' option is highlighted. Below the navigation bar, the 'My Licenses' section is visible, containing a table with the following data:

License Number	License Type	License Status	Issue Date	Expiration Date	Action	Renewal	Print License	Print All License (including SubLicenses)
RTL-2022-0232	Cannabis Retailer	Expired - Non Renewable	03/22/2022	03/22/2023	<a href="#">View Sub License</a>		<a href="#">Print</a>	<a href="#">Print All</a>

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Step 4: Make sure to read the Instructions on the top of the page in the below screenshot. Upon going over the instructions, click 'Select' next to Cannabis Consumption Area as shown below

**NMRLD**

Home Cannabis Businesses **Applications** Add Agent My Licenses Amendments

### Select License

[← Back](#)

**Instructions:**  
This online licensing system collects the information necessary to process your cannabis application. Please read each section carefully. If you need additional information while completing the application or if you have any questions, please call the **Cannabis Control Division at 505-476-4995** or email us at [RLD.CannabisControl@rld.nm.gov](mailto:RLD.CannabisControl@rld.nm.gov).

All draft applications older than 90 days will be automatically deleted.  
All incomplete applications older than 1 year will be automatically voided.

As you complete the application, you'll be able to save the responses you've entered if you click the 'Save & Next' button at the bottom of each screen. You'll be able to come back to resume or complete your application, and your application will not be submitted to CCD until you click the 'Pay & Submit' button on the final screen.

Search License here...

**Cannabis Consumption Area**  
A licensed premise where cannabis products may be served and consumed. Alcohol cannot be sold or consumed in a cannabis consumption area. Local jurisdictions may deny cannabis consumption area licenses. [Select](#)

**Cannabis Courier**  
A person or business licensed to transport cannabis products to qualified patients, primary caregivers, or reciprocal participants, or directly to consumers. [Select](#)

Step 5: Upon clicking Select, you will be routed to the Pre-screening to kick start the intake Application Process

The screenshot shows the NMRLD CCD Intake Pre-Screening form. The page header includes the NMRLD logo and navigation links: Home, Cannabis Businesses, Applications, Add Agent, My Licenses, and Amendments. The main content area is titled "Cannabis Consumption Area" and features a vertical sidebar with steps: Pre-Screening (highlighted), Introduction, Business Information, Employee Information, Questions, Premise Information, Upload Documents, Attestation, and Payment. The Pre-Screening section contains several questions with radio button options for Yes or No:

- \* Has this business been approved for a business license issued by local jurisdiction?  
 Yes  
 No
- \* Will this business be conducting functions for medical cannabis only?  
 Yes  
 No
- \* Will any of the premises of this business be located on tribal land?  
 Yes  
 No
- \* Has this business ever had an application or license in the cannabis industry denied, suspended, revoked, surrendered, or had any other form of discipline or disciplinary action by a licensing agency in another state, jurisdiction or territory?  
 Yes  
 No
- \* Does this business currently maintain any active cannabis licenses?  
 Yes  
 No
- \* Is this business registered with the New Mexico Secretary of State and in good standing?  
 Yes  
 No
- \* Is this business a delinquent taxpayer with the United States Federal government or in any state, territory, county, municipality, country, or any governmental entity which has authority to collect taxes?  
 Yes  
 No

Below the questions, a note states: "Delinquency includes, but is not limited to, non-payment of owed taxes, the issuance of a tax lien, or an active repayment plan." At the bottom of the form, there are two buttons: "Save for later" and "Start Application".

The screen is user interactive, based on Yes or No responses to certain questions, additional questions will appear on the screen to populate as shown below

\* Has this business been approved for a business license issued by local jurisdiction?

- Yes
- No

\* Does this business's local jurisdiction issue business licenses and/or zoning approval?

- Yes
- No

\* Will this business be conducting functions for medical cannabis only?

- Yes
- No

\* Will any of the premises of this business be located on tribal land?

- Yes
- No

\* Has this business ever had an application or license in the cannabis industry denied, suspended, revoked, surrendered, or had any primary action by a licensing agency in another state, jurisdiction or territory?

- Yes
- No

\* Does this business currently maintain any active cannabis licenses?

- Yes
- No

\* Please indicate which active cannabis license(s) this business maintains.

- Integrated Cannabis Microbusiness
- Cannabis Producer Microbusiness
- Cannabis Producer
- Cannabis Manufacturer
- Cannabis Retailer
- Cannabis Courier
- Cannabis Consumption Area with On-Site Retail
- Testing Laboratory
- Research Laboratory
- Vertically Integrated Cannabis Establishment

Step 6: Next is the Introduction Screen. Upon carefully reviewing the Introduction screen, click 'Next' to proceed

The screenshot shows the 'CCD Intake' portal interface. At the top, there is a navigation bar with 'Home', 'Cannabis Businesses', 'Applications' (with a dropdown arrow), 'Add Agent', 'My Licenses', and 'Amendments' (with a dropdown arrow). The main content area is titled 'Cannabis Consumption Area:'. On the left, a vertical progress bar lists steps: Pre-Screening (checked), Introduction (highlighted with an orange circle), Business Information, Employee Information, Questions, Premise Information, Upload Documents, Attestation, and Payment. The 'Introduction' section contains the following text: 'Thank you for starting your application for a license with the New Mexico Regulation and Licensing Department, Cannabis Control Division. This licensing portal will guide you through the licensing requirements and allow you to save your work and return to your application if you do not complete it all at one time.' It continues: 'This application will confirm that each person or business applying meets all requirements for licensure set by either state statute or regulations governing the cannabis industry. These licensing requirements, along with renewals and compliance monitoring assist to safeguard the cannabis industry and certify that licensees meet minimum health and safety standards to ensure the safety of New Mexicans and the lawful operation of all our New Mexico cannabis businesses.' A note follows: 'If you have further questions regarding licensure or the Regulation and Licensing Department, Cannabis Control Division, please visit the website at [www.rld.nm.gov/cannabis/](http://www.rld.nm.gov/cannabis/). The Division's webpage documents specific requirements for licensure, renewals, public meeting information, and a direct phone number and email to their respective support staff who can be reached for help.' A red warning line states: 'I acknowledge that all application fees are non-refundable.' An 'IMPORTANT NOTE' follows: 'An application for Initial licensure must be completed and submitted by a Controlling Person and will be required to identify as a Controlling Person. If you are not a Controlling Person, you will not be authorized to submit this application for Initial licensure. Also, all draft applications older than 1 year will be automatically deleted.' At the bottom, it says: 'If you are ready to apply, click the Next button to begin your application.' There are three buttons at the bottom: 'Save for later' (text), 'Previous' (white button), and 'Next' (orange button).

Step 7: Next is the Business Information Screen. **Please keep in mind that you will not be able to make any modifications to this screen directly, to make any changes to Business Information, you will have to fill out an Amendment Form, which can be done directly within the Portal.**

[CCD Intake](#)**Cannabis Consumption Area:**

- Pre-Screening
- Introduction
- Business Information**
- Employee Information
- Questions
- Premise Information
- Upload Documents
- Attestation
- Payment

**Business Information**

Carefully verify that all contact information is current and correct.

Communication regarding licensing and renewals may be sent through email, and any official legal communication regarding complaints and discipline will be sent to the mailing address on file. It is required that every applicant and licensee maintain a current email and mailing address with the division where mail is checked regularly.

Name changes or other updates to your personal information cannot be processed on this page. Any such changes must be submitted through an Amendment.

**Note: If you change any profile information, you will need to restart your application, so that your application reflects your updates.**

\* Name of Business Doing Business As (DBA)  
Pear Tree Dispensary LLC

Type of Business State Tax ID (Sample format: XX-XXXXXX-XX-X)  
Limited Liability Company (LLC)

Type Of Identifier  
FEIN

\* FEIN (Sample format: XX-XXXXXXX)  
87-2827450

Business Phone Number \* Business E-mail Address

Business Website

Controlling Person Names  
ALBERT AROCHA

**Business Physical Address**

**Note: Business Physical Address is the location where a company's executive management and key managerial and support staff are located.**

\* Physical Address Street

Step 8: Upon clicking Next, you are routed to the Employee Information Screen



CCD Intake

Cannabis Consumption Area:

- ✓ Pre-Screening
- ✓ Introduction
- ✓ Business Information
- **Employee Information**
- Questions
- Premise Information
- Upload Documents
- Attestation
- Payment

**Employee Information**

\* How many employees does this business plan to have within the first 90 days of issuance of license?

\* How many employees does this business expect to have by the end of your Initial licensure period (1 year after the date of license issuance)?

\* Does this business currently have employees?

- Yes
- No

\* Has this business entered into a labor peace agreement with a bona fide labor organization that is actively engaged in representing or attempting to represent your employees?

- Yes
- No

[Save for later](#)

[Previous](#)

[Next](#)

If Yes is selected for the radio button questions, additional fields will appear to capture more information

\* Does this business currently have employees?

- Yes  
 No

\* How many employees does this business have?

\* Does this business capture demographic information for its employees?

- Yes  
 No

Please approximate the number of current employees who each meet the following criteria:

\* Black persons having origins in any of the Black African racial groups;

\* Hispanic persons of Mexican, Puerto Rican, Dominican, Cuban, Central or South American of either Indian or Hispanic origin, regardless of race;

\* Native American or Alaskan native persons having origins in any of the original peoples of North America;

\* Asian and Pacific Islander persons having origins in any of the far east countries, Southeast Asia, the Indian subcontinent or the Pacific Islands.

\* Two (2) or more races

\* Other

Please populate all the fields and click Next to proceed

## Step 9: Question Screen is next.

CCD Intake

### Cannabis Consumption Area:

- ✓ Pre-Screening
- ✓ Introduction
- ✓ Business Information
- ✓ Employee Information
- **Questions**
- Premise Information
- Upload Documents
- Attestation
- Payment

#### Questions

\* Does the business certify it will adhere to cannabis transport requirements pursuant to the Cannabis Regulation Act, the Lynn and Erin Compassionate Use Act, and division rules, including the transport of unprocessed cannabis or cannabis products to other cannabis establishments?

Yes

\* Does the business certify it will adhere to security requirements pursuant to the Cannabis Regulation Act, the Lynn and Erin Compassionate Use Act, and division rules, including requirements relating to safety and security procedures, security devices to be used, placement of security devices, personal safety, and crime prevention techniques?

Yes

\* Does the business certify it will adhere to quality assurance requirements pursuant to the Cannabis Regulation Act, the Lynn and Erin Compassionate Use Act, and division rules, including requirements relating to routine testing by a licensed testing laboratory, division inspection of licensed premises during normal business hours, and testing of cannabis?

Yes

\* Does the business certify it will adhere to applicable federal, state and local laws governing the protection of public health and the environment, including occupational health and safety, food safety, environmental impacts, natural resource protections, air quality, solid and hazardous waste management, and wastewater discharge?

Yes

\* Is the Business licensed under the New Mexico Liquor Control Act?

Yes

No

\* Does the business certify that a premises diagram shall be kept at each licensed premises at all times and made available for in person inspection by the Cannabis Control Division or its representatives upon request. This premises diagram will conform to the requirements set forth in 16.8.2 NMAC?

Yes

\* Does the business certify that it will notify the division in writing within seven days of any change of fact that would potentially result in any controlling person, being disqualified from holding a license pursuant to the Cannabis Regulation Act or division rules, including a felony conviction involving fraud, deceit, or embezzlement; a felony conviction for hiring, employing, or otherwise using a person younger than 18 years of age to prepare for sale, transport or carry a controlled substance or sell, give away or offer to sell a controlled substance to any person; or a felony conviction for the possession, use, manufacture, distribution, or dispensing or possession with the intent to manufacture, distribute or dispense a controlled substance, which no longer includes cannabis?

Yes

\* Does the business certify it will adhere to retail requirements pursuant to the Cannabis Regulation Act, the Lynn and Erin Compassionate Use Act, and division rules?

Yes

\* Does the business certify it will adhere to the Dee Johnson Clean Indoor Air Act 16.8.55 NMAC?

Yes

If you or any other controlling person is convicted of one of these disqualifying convictions, you must immediately alert the division of any change:

1. A felony conviction involving fraud, deceit, or embezzlement.
2. A felony conviction for hiring, employing, or otherwise using a person younger than eighteen years of age to:
  - Prepare for sale, transport, or carry a substance; or,
  - Sell, give away or offer to sell a controlled substance to any person.

3. A felony offense for the possession, use, manufacture, distribution or dispensing or possession with the intent to manufacture, distribute or dispense a controlled substance, which no longer includes cannabis.

Failure to do so may result in disciplinary action, which may include fines, suspension of the license, or revocation of the license.

Save for Later

Previous

Next

Step 10: Next is the Premise information Screen  
You MUST add at least 1 premise to continue with this Application.

The screenshot shows the NMRLD CCD Intake application interface. At the top, there is a navigation bar with links for Home, Cannabis Businesses, Applications, Add Agent, My Licenses, and Amendments. The main content area is titled "Cannabis Consumption Area:" and features a progress indicator on the left with steps: Pre-Screening, Introduction, Business Information, Employee Information, Questions, Premise Information (highlighted), Upload Documents, Attestation, and Payment. The "Premise Information" section contains a text box with instructions: "Add only one premise for the location the business intends to operate a cannabis consumption area. Click the upload icon to view the required premises documents for the cannabis consumption area and to upload the documents." Below this is a "Save for later" link and a "No premises to display." message. A red arrow points to an "Add New Premise" button. At the bottom right, there are "Previous" and "Next" buttons.

Upon clicking Add New Premise, you will see the below Prompt, where the Consumption Area is pre-selected due to the type of Application you are applying for. However, you can select Retailer as well

## Premise Information

\* Please indicate all the functions this business will perform at this Premise:

- Retailer
- Consumption Area

Step 11: You will then be routed to the Premise Information Screen where you specify a variety of different information. You can specify the DBA name, Address, Hours of Operation, and type of energy resource business plans on using

### Premise Information

Doing Business As

#### Physical Address Information

\* Street

\* City

Select an Option



\* State

New Mexico

\* Zip

\* Country

United States

\* County

Select an Option



\* Phone Number

#### Business Working Hours

\* Days this premise will be open for business:

Monday

\* Start of Day

\* End of Day

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

\* Describe the type of energy resource the business plans on using?

- Drip Irrigation
- Water collection
- Natural or energy efficient lighting
- Renewable energy generation
- Use of hybrid or electric vehicles
- Use of recycled materials
- Use of Green Buildings
- Other

Previous

Submit

Step 12: Upon clicking Submit, you will be routed back to your application. You MUST upload the mandatory documentation to proceed. Upon clicking the Upload Button, a prompt will appear identifying which documents are required to be uploaded

Upload Premise Documents

Upload Documents

Document Name	Document Description	Uploaded Files
* Business License / Zoning approval	Copy of Current Business License Issued by Local Jurisdiction to Include Zoning Approval and Fire Inspection Report OR Copy of a Confirmation Letter from the Jurisdiction that the Jurisdiction Does Not Issue Business Licenses and/or Zoning Approval.	
* Documentation Of the Applicant's Ownership or Legal Authority to Use the Property	Fully executed and dated documentation of the applicant's ownership or legal authority to use the property, buildings, or other facilities, establishing the applicant is, or will be, entitled to possession of the premises for which the application is made.	

Submit

You have the ability to upload multiple documents if necessary per requirement.

## Upload Files

Please attach a copy of the required document.

**Note:**

1. File size should not exceed 10 MB.
2. File extensions will be accepted only of type doc, docx, pdf, png, tiff, jpg, jpeg, txt, csv.
3. Documents may be uploaded as Individual files or as a single merged file on the next page.

\* Attachment

 **Upload Files** Or drop files

Complete this field.

Cancel

Submit

Step 13: Upon proceeding further, next is the Application's Document Upload Screen



Home Cannabls Businesses Applications ▾ Add Agent My Licenses Amendments ▾

CCD Intake

### Cannabis Consumption Area:

- ✓ Pre-Screening
- ✓ Introduction
- ✓ Business Information
- ✓ Employee Information
- ✓ Questions
- ✓ Premise Information
- **Upload Documents**
- Attestation
- Payment

#### Upload Documents

Document Name	Document Description	Uploaded Files
* Certification of Good Standing	A Certification of Good Standing from the New Mexico Secretary of State.	
* Delinquent Tax Status	Please upload any documentation detailing the nature of the tax delinquency including formal charges, tax liens, or any other documentation describing the nature of the tax delinquency.	
* Verification of Limited Liability Company (LLC)	A copy of the Certificate of Organization; OR A filed copy of the Articles of Organization and any amendments thereto; OR A complete and fully executed Operating Agreement listing all members and managers including percentages of interest owned by each and any amendments thereto; OR A copy of the Certificate of Registration for all Foreign Profit Companies (out-of-state).	
* Certification of Registration from the New Mexico Taxation and Revenue Department	A Certificate of Registration Issued by the New Mexico Taxation and Revenue Department (TRD) confirming the applicant is registered with the TRD for gross receipts tax.	

Save for Later

Previous

Next

You have the ability to upload multiple documents per requirement if necessary as well

Step 14: Click next to proceed to the Attestation Screen where a Signature and acknowledgement checkbox is required to proceed. The Date will be auto-populated to today's date

The screenshot displays the NMRLD application interface. At the top left is the NMRLD logo. A navigation bar includes links for Home, Cannabis Businesses, Applications (with a dropdown arrow), Add Agent, My Licenses, and Amendments (with a dropdown arrow). In the top right corner, there are notification and user profile icons.

The main content area is titled "CCD Intake" and "Cannabis Consumption Area:". On the left, a vertical progress bar lists the following steps: Pre-Screening, Introduction, Business Information, Employee Information, Questions, Premise Information, Upload Documents, **Attestation** (highlighted with an orange circle), and Payment.

The "Attestation" section is titled "Attestation" and contains a sub-section "Application Attestation". Below this, there is a declaration: "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 license application or revocation of a license issued." This is followed by a red warning: "I acknowledge that all application fees are non-refundable." Below the warning is an unchecked checkbox.

There are two input fields: "\*Applicant Name" (a text box) and "Date" (a date picker showing "04/29/2024"). At the bottom left of the form is a "Save for Later" link. At the bottom right are two buttons: "Previous" and "Next".

Step 15: Last is the Payment Screen which provides a breakdown of the total amount due

CCD Intake

Home Cannabis Businesses Applications Add Agent My Licenses Amendments

Cannabis Consumption Area:

Pre-Screening Introduction Business Information Employee Information Questions Premise Information Upload Documents Attestation **Payment** Confirmation Message

**Payment**

Select your mode of payment and click "Pay and Submit" to Input your payment Information.  
Payments made with a Visa or Mastercard will be charged a 2.5% transaction fee. This is a fee imposed directly by the bank, and no portion of the fee is paid to or collected by the RLD. Payments made by e-check will not result in any transaction fee.

Fee Name	Additional Info	Amount
Application Fee	Cannabis Consumption Area	\$2500
Total Due		\$2500
Medical Discount		\$1250

\* Mode of Payment

The amount to be paid is **\$1250**. You may not begin to grow cannabis until your application has been approved.  
Please click the Pay & Submit button to proceed with the payment.

Save for later Previous **Pay and Submit**

Click Pay and Submit upon reviewing the Amount Due and selecting a Mode of Payment:

- Credit Card
- E-Check
- Cashiers Check

CyberSource is then triggered where you will be required to populate your Billing information

Billing      Payment      Review      Receipt

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### Billing Information

\* Required field

First Name \*

Last Name \*

Company Name

Address Line 1

City

Country/Region

State/Province

Zip/Postal Code

Phone Number \*

Email \*

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[Cancel Order](#)

### Your Order

Total amount	\$1,250.00
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You MUST populate all required fields to proceed. Click next to go to the next step.

### Payment Details

\* Required field

Card Type \*

 Visa   Mastercard

Card Number \*

Expiration Month \*  Expiration Year \*

CVN \*  
This code is a three or four digit number printed on the back or front of credit cards.



[Cancel Order](#)

### Your Order

Total amount	\$1,250.00
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### Review your Order

Payment Details	Your Order
Card Type: Visa	Subtotal: \$1,250.00
Card Number: xxxxxxxxxxxxxx1111	<b>Service fee</b> : \$31.25
Expiration Date: 04-2027	<b>Total amount</b> : \$1,281.25

By clicking Pay, I agree to the [Service Fee Terms & Conditions](#)

[Cancel Order](#)

Once you click Pay, a new tab will open for 5 seconds displaying the below message

## **Congratulations!**

Your payment has been processed successfully.  
This window will be closed automatically in 5 seconds.

Once the 5 seconds are up, the tab will close and you will be routed back to the portal with a link to route back to the home page.

**Thank you! Your application has been submitted successfully.**

You may check the status of your application by logging into your Portal at any time. Department staff will contact you if additional information or documentation is needed to complete the review of your application. Once your application is approved, you will receive an email notifying you of the update and how you can access your records and a digital copy of your license on the Portal. If you paid by credit card or E-Check then you will receive a receipt from the payment processor, CyberSource, via email.

[Back to Home](#)

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