



## TOWN OF WEST BOYLSTON

Office of the Board of Selectmen

140 Worcester Street

West Boylston MA 01583

Tel: (774) 261-4012

Dear Adult Use Marijuana Applicant,

Thank you for submitting your application for consideration for an adult use marijuana establishment in West Boylston. We look forward to reviewing your application and hope that we are able to develop a successful Host Community Agreement with you, which will allow for your continued pursuit of a licensed facility in West Boylston.

Since this application process places the role of negotiating a host community agreement on the Board of Selectmen, we ask you to please wait until your application has received preliminary application review and approval by the Board before scheduling a community outreach meeting.

Please note the deadline of December 7, 2018 for submittal of applications for adult use marijuana dispensary facilities. Applications for any other adult use marijuana facility allowed under the Town's zoning may be submitted on an ongoing basis.

Please feel free to contact our office if you have any questions relative to this application process.

The West Boylston Board of Selectmen



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## Adult Use Marijuana Facility Application

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY and STATE: \_\_\_\_\_

TELEPHONE NO.: ( ) \_\_\_\_\_

INDICATE WHICH TYPE OF ORGANIZATION BELOW:

INDIVIDUAL \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_ CORPORATION \_\_\_\_\_ OTHER \_\_\_\_\_

Name, DBA or Business Name: \_\_\_\_\_

(Please provide documentation of MA business registration, and a required certificate of good standing.)

Information for Primary Contact for Business:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**I, the undersigned individual, attest that I have the authority to submit an application to negotiate a Host Community Agreement with Town of West Boylston for an Adult Use Marijuana Facility.**

\_\_\_\_\_  
Name of Person Authorized to sign application

\_\_\_\_\_  
Title of Person Authorized to sign application

\_\_\_\_\_  
Signature of Above Person



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## **Application Submittal:**

Applications must be submitted to: The Office of the Board of Selectmen, 140 Worcester Street, West Boylston MA 01583.

**Application Submittal Deadlines:** Applications for the two available adult use dispensary/retails sales facilities must be submitted on or before December 7, 2018.

Application for other adult use marijuana facilities will be accepted on an ongoing basis.

**The application form must be accompanied by a written proposal which includes the following information:**

### **I. Proposed Marijuana Facility:**

- Type of marijuana facility.
- Proposed location of the facility.
- Do you have a secured site evidenced by an ownership title, lease or binding letter of intent? If so, please provide copy of the related documents.
- Do you have evidence that the site conforms to the Town zoning and demonstrates the proper setbacks? (This can be demonstrated by providing a copy of a letter from the Town's Zoning Enforcement Officer/Building Inspector.)
- Size of proposed facility.
- Please provide a proposed plan/conceptual design for facility.
- Proposed development plan (building re-use, new build) and timeline to start of operations.
- If applicable, please provide confirmation that you will be able to have or obtain an adequate supply of cannabis material to sell in the store. If you own your own cultivation site, please provide evidence of its being open or projected date of it being open.
- Proposed hours of operation.
- Are you planning future expansion? What is your criteria to expand?
- Please provide a list of other sites you have approval for and when you plan to open them. Do you plan to open other facilities in West Boylston?
- Please provide a letter explaining your company's business principals, why you want to be in West Boylston, and how the Town will benefit from your being here.



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- Names of all executives, managers, persons or entities having direct or indirect authority over management, policies, or security operations, and description of prior marijuana growing or sales experience for each – if applicable.
- Proposed employee staffing/jobs creation, potential benefit to the Town.
- Please explain your plan for public awareness and education for responsible use, or any other plans you have for public awareness, education and outreach.
- What quality controls have you implemented/plan to implement in your grow facilities, product development and/or retail stores?
- List quality standards you follow (if applicable).
- If proposing a cultivation facility, please describe your renewable energy plan, water management plan and odor control plan.
- Notarized CORI Acknowledgement form for all executives, managers, persons or entities having direct or indirect authority over management, policies, or security operations.
- Any other details you want to provide for your proposed West Boylston business.

## **II. Previous Business Experience**

- Describe your current Marijuana business related experience.
- List your executive team and their experience.
- List other team members you feel differentiates you from other applicants.
- When was your company officially launched/incorporated?
- Is your company incorporated or a non-profit?
- Do you currently have a marijuana facility in another community besides West Boylston?
- If yes, please provide details as to location, size, and type of facility.
- Future plans to add retail sales or cultivation facilities including proposed square feet?
- How many medical dispensaries do you currently operate and what year were they opened?
- List current or future plans for medical dispensaries.
- What marijuana approvals do you currently have from the State of Massachusetts? If you are currently in a process for approval, please explain.
- Any other business experience you want to highlight.

## **III. Financial Details**

- Names of persons contributing more than 10% of capital to operate, and description of prior marijuana growing or sales experience for each – if applicable.
- Explain in detail how you did or plan to finance your current Marijuana business?
- Provide evidence in the form of a bank account, bank loan or brokerage account that you have sufficient funds to finance the setup and first year operations of the proposed facility.



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- If you are planning future Marijuana businesses, how will you finance them?
- Do you agree to pay property taxes, even if you are a non-profit?
- Detail any other financial information you feel differentiates you from other businesses.

## **IV. Proposed Aspects of Host Community Agreement (HCA)**

- Percentage of sales to West Boylston
- Yearly guaranteed money to West Boylston
- Explain the guaranteed money vs percentage of sales in detail, if applicable
- Do you have the ability to pay all or a portion of the first-year local impact fee up-front?
- In years 2-5, are you able to make payments at least quarterly?
- Will you pay for the Town's cost to conduct an independent audit of annual sales figures to ensure the Town's impact fee accurately meets the requirements of the HCA? If not, please explain your plan for ensuring the accuracy of your payments to the Town.
- Are you planning to donate to a local charity? If yes, please provide details.
- Please explain any other potential financial benefits in your proposal.
- Describe if there are specific requirements that West Boylston needs to provide to fulfill as part of your proposed host community agreement contract.

## **V. Security and Public Safety**

- Define security plan for your facility, including the parking area or grounds, in detail.
- Are you willing to work directly with the West Boylston Police Department to develop and implement the security plan?
- Do you agree to have periodic reviews with the West Boylston Police Department to discuss issues and concerns?
- Will you agree to a traffic study, if requested?
- Any security details you want to provide that you feel differentiates you?

**VI. Deposit:** Applicants will be required to submit a deposit in the form of a Cashier's Check or Bank Check, made payable to "Town of West Boylston" in the amount of \$5,000, or \$7,500 if proposing both cultivation and retail, to cover the Town's legal or technical costs associated with review of documents, including but not limited to the applicant's proposed Host Community Agreement. Applicants not selected by the Board of Selectmen will have their bid deposit returned. If legal costs exceed the deposit, additional funds will be requested before further consideration will be made on an application. Upon full execution of a Host Community Agreement, and all other local approvals which may require the Town's legal review, any excess deposit for legal or technical costs will be returned to the applicant.



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**VII. Reservations for the Town:** The Town reserves the right to reject any and all proposals for any reason. The Board of Selectmen is the awarding authority for Host Community Agreements. The Town reserves the right to conduct follow-up research on any responses provided by applicants. The Town, through the Board of Selectmen or designees, may in its sole discretion conduct in-person interviews with any applicants. The Town reserves the right to request additional information and negotiate all aspects of the draft HCAs submitted, and all other aspects of an applicant's response.