



**OFFICE OF
MARIJUANA POLICY**
DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES

**OPERATING PLAN TEMPLATE
MARIJUANA STORE**

Pursuant to Section 3.5.2 of the Adult Use Marijuana Program Rule, the Department shall keep on file a copy of all facility plans, security plans, operating plans and cultivation plans, as well as copies of certifications of testing facilities. The most recent plan, whether submitted with the issuance of the marijuana establishment license, or by the subsequent approval of an application to change, shall be the Plan of Record with which the licensee must comply.

The Operating Plan is an official Plan of Record. This document and use of this template are required. The Office of Marijuana Policy (OMP) understands that an applicant or licensee may have prepared other operating documents. Although the applicant or licensee may submit additional operating documents for reference, this Operating Plan is designed to be a succinct, standalone document.

OMP recognizes that during the conditional license application process, site-specific information may not be available. An updated, site-specific Operating Plan will be required prior to active licensure.

SECTION 1: Days and Hours of Operation

In the table below, indicate the operating hours of the facility. Place an "x" in the closed column if the facility will be closed on a particular day.

	Closed	Facility Opening Hour	Facility Closing Hour
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			

SECTION 2: Marijuana Store Site Information

OMP recognizes that a specific location is not required during the conditional license application process. If the applicant does not have a site-specific location, provide a diagram and layout of the proposed Marijuana Store.

1. Provide a diagram of the property on which the Marijuana Store is located, including all point(s) of ingress/egress from the closest maintained public way, employee entrance(s), point(s) of delivery, parking area(s), and public right(s) of way.

2. Provide a diagram of the layout of the Marijuana Store, including limited access area(s) and location of displays, indicating how customer access to marijuana and marijuana product is controlled and where signage is placed. If the Marijuana Store is co-located with an Adult Use Products Manufacturing Facility and/or Adult Use Cultivation Facility, the diagram must clearly delineate the Marijuana Store from the other establishment(s). A Marijuana Store that connects to another Adult Use establishment, requires at least a single, lockable door to be reflected in the diagram.

3. If the property is also used as a residence, describe the location of that residence within the property and plans for complete separation of the residence from the facility, including:
(a) Entirely separate entrances from the public right of way, and
(b) That no solvent extraction using potentially hazardous extraction methods or inherently hazardous extraction methods in the same building or structure as the residence.

SECTION 3: Co-Location of Adult Use Facilities

Is this Marijuana Store co-located with an Adult Use Products Manufacturing Facility and/or an Adult Use Cultivation Facility?

Yes No

If yes, complete Section 3(a) and (b)

SECTION 3(a): Type of Adult Use Facility Co-Location

Check all that apply.

Adult Use Products Manufacturing

Adult Use Cultivation Facility

SECTION 3(b): Co-Location of Adult Use Marijuana Establishments

1. Describe how all applicable requirements of Section 2.4.9 of the Adult Use Marijuana Program Rule will be met.

SECTION 4: Equipment and Approval Listing

Provide approval listing(s) for all equipment listed below.

1. List and describe all electrical equipment and all other equipment to be used.

SECTION 5: Plans for Compliance with the Marijuana Legalization Act and the Adult Use Program Rules

OMP recognizes that a specific location is not required during the conditional license application process. If the applicant does not have a site-specific location, provide plans for how the following are intended to be done.

1. Describe plans for refrigerating any marijuana products requiring refrigeration.
2. Describe plans to dispose of or destroy used, unused and waste marijuana and marijuana products.
3. Describe plans for shipping and receiving of marijuana and marijuana products.
4. Describe how the facility plans to verify identification of all customers and prevent unauthorized sales to, or access to the premises by, persons under age 21.
5. Describe how the facility plans to conduct a background screening process for employees and vendors.

SECTION 6: Proof of Compliance with State and Federal Code(s)

OMP recognizes that a specific location is not required during the conditional license application process. If the applicant does not have a site-specific location, provide plans for obtaining proof of compliance with the following.

1. Provide proof of compliance with building code(s).
2. Provide proof of compliance with applicable electrical code(s).
3. Provide proof of compliance with any other applicable federal and state environmental requirements.

SECTION 8: Notice

The Department shall keep on file a copy of all facility plans, security plans, operating plans and cultivation plans, as well as copies of certifications of testing facilities. The most recent plan, whether submitted with the issuance of the marijuana establishment license, or by the subsequent approval of an application to change, shall be the Plan of Record with which the licensee must comply. Field Investigators will have access to all plans and will review all plans prior to an on-site assessment. Failure to comply with the Plan of Record may lead to enforcement action. Any significant changes to the Plan of Record must be approved by the Department.

Signature – This Plan of Record cannot be accepted without a signature

Any information contained within this Plan of Record or otherwise found, obtained, or maintained by the Department, shall be accessible to law enforcement agents of this or any other state, the government of the United States, or any foreign country.

Authorizing Business Representative's Signature

Date

Printed Name:

Email Address:

Phone Number: