

Cannabis Business – Notification of Successor

Form Instructions

This form should be used to notify the City of Long Beach in the event of the death of an owner listed on the business license application. Upon an owner’s death, a successor in interest shall be named. When submitting this form, please provide:

- Documentation demonstrating that the owner has deceased, such as a certified copy of the death certificate;
- Copy of one valid government-issued identification for the successor in interest;
- Copy of the Live Scan receipt/completion for the successor in interest.

Forms should be dropped off or mailed to the Business License Division, 411 W. Ocean Blvd. 2nd Floor, Long Beach, CA 90802. Please do not provide any additional documentation other than what is requested on this form. The City will not review any additional documentation submitted. The successor in interest must sign and notarize this form to be valid.

Previous (Deceased) Owner Information

FIRST NAME:	LAST NAME:
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License/Application Information

CITY LICENSE ACCOUNT NUMBER	STATE LICENSE NUMBER (IF APPLICABLE)	LICENSE TYPE (Adult-Use, Medical, or Both)	TYPE OF COMMERCIAL CANNABIS ACTIVITY

Successor in Interest Information

FIRST NAME:	LAST NAME:
EMAIL:	PHONE:
DRIVERS LICENSE NUMBER:	DOB:

Oath

I/we certify that the information contained herein is complete, true, and accurate. I/We are the legal successor in interest for the deceased owner of the above-named cannabis business and are authorized to submit this form on its behalf. I/We understand that any false, misleading, or fraudulent statement of material fact in this form may be grounds for rejection of a business license application, denial of the license, or revocation of an issued license. I/We declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

PRINT NAME:	SIGNATURE:	DATE:
PRINT NAME:	SIGNATURE:	DATE:
PRINT NAME:	SIGNATURE:	DATE:

* All signatures included in this form must be notarized to be valid.