

**Cannabis Business - Removal of Owners/Reallocation of Existing Ownership**

**Form Instructions**

This form should be used to notify the City of Long Beach when one (1) or more owners listed on the business license application leave a cannabis business by transferring their ownership interest to the other existing owner(s) listed on the business license application and/or when the ownership interest among existing owners is being reallocated. This form should not be used to notify the City that you are selling your business to another person or legal entity or that you are replacing any existing owner(s) with new owner(s).

A single form may be used to remove an owner or owners and/or update the ownership interest among existing owners from multiple applications or licenses at a single address, under a single entity name. For applications or licenses at different addresses and/or under different entity names, please fill out a separate form for each address/entity.

**All owner(s), including any owner(s) leaving the business and all remaining owner(s), must sign this form to be valid. All signatures included in this form must be notarized to be valid.**

**Responsible Party/Main Contact**

NAME:	PHONE:
EMAIL:	

**Business Information**

LEGAL BUSINESS NAME (CORPORATION/LLC/PARTNERSHIP/ASSOCIATION):	DOING BUSINESS AS (DBA):
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**Premises Information**

PREMISES PHYSICAL ADDRESS:	ASSESSOR PARCEL NUMBER (APN):
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**License/Application Information**

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

**Owner(s) Removed from Business - The following individual(s) has/have transferred their interest:**

LAST NAME:	FIRST NAME:
PREVIOUS BUSINESS TITLE:	PREVIOUS PERCENTAGE OWNED:

LAST NAME:	FIRST NAME:
PREVIOUS BUSINESS TITLE:	PREVIOUS PERCENTAGE OWNED:

LAST NAME:	FIRST NAME:
PREVIOUS BUSINESS TITLE:	PREVIOUS PERCENTAGE OWNED:

**Ownership Percentage Transferred** - The ownership interest held by the above individuals have been transferred as follows:

TRANSFERRED FROM:	TRANSFERRED TO:	% OWNERSHIP TRANSFERRED:
TRANSFERRED FROM:	TRANSFERRED TO:	% OWNERSHIP TRANSFERRED:
TRANSFERRED FROM:	TRANSFERRED TO:	% OWNERSHIP TRANSFERRED:
TRANSFERRED FROM:	TRANSFERRED TO:	% OWNERSHIP TRANSFERRED:

**Reallocated Ownership Interest** - The ownership interest held in the above-stated entity by the remaining owner(s) is as follows:

LAST NAME:	FIRST NAME:
BUSINESS TITLE:	REVISED PERCENTAGE OWNED:
LAST NAME:	FIRST NAME:
BUSINESS TITLE:	REVISED PERCENTAGE OWNED:
LAST NAME:	FIRST NAME:
BUSINESS TITLE:	REVISED PERCENTAGE OWNED:
LAST NAME:	FIRST NAME:
BUSINESS TITLE:	REVISED PERCENTAGE OWNED:

**Oath**

I/we certify that the information contained herein is complete, true, and accurate. I/We understand any false, misleading, or fraudulent statement of material fact in this form is 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:
PRINT NAME:	SIGNATURE:	DATE:
PRINT NAME:	SIGNATURE:	DATE:
PRINT NAME:	SIGNATURE:	DATE:

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