

**DIRECT GRANTS PROGRAM APPLICATION**

**Grant Overview**

The Office of Cannabis Oversight is announcing the availability of \$258,083.61 of remaining Bureau of Cannabis Control, now known as the Department of Cannabis Control, grant funding for the Direct Grants program to support existing local equity cannabis businesses with obtaining a business license.

Grant funds may be used to support any of the following eligible expenses: lease or rent payments, utilities, construction costs, or equipment. The amount awarded to the business will be dependent upon the need displayed by the business in the grant application.

**Timeline**

The following chart provides due dates and deadlines for the events related to the grant:

Event	Date
<b>Notice of Funding Availability</b>	October 25, 2021
<b>Application Submission Period Opens</b>	October 26, 2021
<b>Application Closes (11:59 pm)</b>	November 7, 2021
<b>Grant Award Notification</b>	November 15, 2021

**Eligible Costs**

The following fixed costs and one-time costs are eligible for grant funding:

Fixed Costs	One-Time Costs
Rent/Lease/Mortgage Payments	Construction
Utilities	Equipment

**Eligible Applicants and Maximum Funding Amounts**

Businesses eligible to receive these remaining grant funds are those equity businesses that have already completed Milestone #1: Cannabis Business License Application Review in the City’s licensing process.

The amount of grant funds awarded shall **not exceed** more than **\$90,000** per equity business, unless there are additional funds remaining due to a limited number of applicants applying for the grant. Equity businesses that fail to provide required supporting documents will not be awarded grant funds.

Equity applicants may request grant funding to pay for **up to 30%** of fixed costs (lease/rent payments or utilities) for a maximum of twelve (12) months.

Equity applicants may request grant funding to pay for **up to 15%** of one-time costs (construction and/or equipment).

### **Application Instructions**

Applicants must submit the grant application and all applicable attachments by e-mail in a single submission. The grant application and all applicable attachments must be in PDF format. The City will not accept documents submitted in any other format. Grant applications and all accompanying forms must also be prepared legibly in black or dark blue ink or using the PDF form. Please make sure that you and other authorized individuals sign and date the forms, where applicable.

Applications must be submitted by e-mail to [cannabisoversight@longbeach.gov](mailto:cannabisoversight@longbeach.gov) **no later than Sunday, November 7, 2021 at 11:59 p.m.**

### **Public Records - Reminder to All Applicants**

Any document or record that is used, retained, or maintained by the City during the course of business is considered public record. Unless a specific exemption from disclosure applies, the City may be required to disclose application information in response to a California Public Records Act request (Government Code Section 6250 et seq.).

## Section A – Grant Program Eligibility Requirements

To participate in this grant program, you must meet the following eligibility requirements.

Have you completed the following Cannabis Business Licensing Direct Grant Milestone?

Milestone #1: Cannabis Business License Application Review  Yes  No

## Section B – Equity Business Information

LEGAL BUSINESS NAME (CORPORATION/LLC/PARTNERSHIP/ASSOCIATION/SOLE PROPRIETOR):

LAST NAME (SOLE PROPRIETOR ONLY):

FIRST NAME (SOLE PROPRIETOR ONLY):

DOING BUSINESS AS (DBA):

BUSINESS LICENSE/APPLICATION NUMBER:

MJ \_\_\_\_\_

BUSINESS EMAIL ADDRESS: \*

BUSINESS PHONE NUMBER: \*

MAILING ADDRESS: \*

CITY:

STATE:

ZIP CODE:

COUNTY:

CANNABIS BUSINESS LICENSE APPLICATION/LICENSE TYPE SUBMITTED (CHECK ONLY ONE):

- |  |  |
|--|--|
| <input type="checkbox"/> Adult-Use Cannabis Cultivation  | <input type="checkbox"/> Adult-Use Cannabis Manufacturing      |
| <input type="checkbox"/> Adult-Use Cannabis Dispensary   | <input type="checkbox"/> Adult-Use Cannabis Testing Laboratory |
| <input type="checkbox"/> Adult-Use Cannabis Distribution |  |

CANNABIS BUSINESS SITE ADDRESS:

**\*Note: Contact information provided in these fields will be used by the City to communicate with the applicant/business regarding status of equity grant application and eligibility information.**

## Section C – Equity Applicant Information

Complete this section if you qualify as an Equity Applicant or Equity Business. If you qualify as an Equity Business, complete this section for each Equity Applicant that is listed as an owner of the business entity (attach additional pages, if necessary).

FIRST NAME:

LAST NAME:

EMAIL ADDRESS: \*

PHONE NUMBER: \*

MAILING ADDRESS: \*

CITY:

STATE:

ZIP CODE:

**\*Note: Unless provided under Section B, contact information provided in these fields will be used by the City to communicate with the applicant/business regarding status of equity grant application and eligibility information.**

## Section D – Proposed Uses of Equity Grant Funding

The amount of grant funds awarded shall **not exceed** more than **\$90,000** per equity business. Equity businesses that fail to provide required supporting documents will not be awarded grant funds.

Equity applicants may request grant funding to pay for **up to 30%** of fixed costs (lease/rent payments or utilities) for a maximum of twelve (12) months.

Equity applicants may request grant funding to pay for **up to 15%** of one-time costs (construction and/or equipment).

ELIGIBLE EXPENSE	TOTAL COST	GRANT DISTRIBUTION	REQUESTED AMOUNT
LEASE/RENT PAYMENTS		30%	
UTILITIES		30%	
CONSTRUCTION ESTIMATES		15%	
EQUIPMENT		15%	
<b>TOTAL</b>			

### **FIXED COSTS REQUIRED DOCUMENTATION**

For **lease/rent/mortgage payments**, applicants must attach:

- Copy of current lease/rental/mortgage agreement that indicates the equity applicant or equity business as the lessor, the business site address, and details the monthly amount owed.

For **utility costs**, applicants must attach:

- Copies of recent utility bills (up to 12 months) for water, electric, gas, waste management, internet, telephone, and/or security system. The utility bills must include the equity applicant or equity business name and the site address of the business.

### **ONE-TIME COSTS REQUIRED DOCUMENTATION**

For **construction related costs**, applicant must attach:

- Copies of construction invoices/estimates with a detailed work description, itemized costs, and estimated total (including taxes and fees). The documents must include the equity applicant or equity business name and business site address.

For **equipment related costs**, applicants must attach:

- Copies of purchase quotes/receipts/invoices for equipment with the item quantity, description, unit cost, and total cost (including taxes and fees). The documents must include the equity applicant or equity business name.

**Provide a detailed description of how the grant funds will assist you in completing the local and state requirements to open and/or operate a cannabis business.**

**\*Attach additional pages if necessary**

### **Section E – Direct Grant Payment Information**

**Information provided in this section will be used by the City to issue direct payments upon determination of grant milestone eligibility and approval of the equity grant application. The information provided in this should match your W-9 form.**

FULL NAME (INDIVIDUAL OR LEGAL BUSINESS ENTITY): \*

ADDRESS (NUMBER, STREET, AND APT. OR SUITE NO.) \*

CITY, STATE AND ZIP CODE: \*

DO YOU HAVE A W-9 ON FILE WITH THE CITY?

Yes       No

If you marked "No", please attach a completed W-9 Form that can be found at the following link: [W-9 Form](#).

**\*Note: Name and address fields should match the information provided on the W-9 form.**

**Section F - Declarations**

1. I hereby declare that I am authorized to submit this application as an equity applicant and/or on behalf of the equity business entity that has submitted an adult-use cannabis business license application to the City because equity applicant(s) have 51% or more ownership of the business entity.

2. I acknowledge that any change to the entity name, corporate ID, and/or Federal Tax ID Number that is considered a change in ownership and requires prior approval from the City may impact my status as an equity business and may result in my business no longer maintaining equity business status if it is determined that I no longer meet the equity business requirements, pursuant to the Long Beach Municipal Code.

3. I acknowledge and understand that it is in the discretionary powers of the City to make reasonable rules, policies, and procedures to develop and administer the cannabis social equity program, including grant program requirements and/or funding allocations, which may be subject to change as the City deems necessary, so long as it is in compliance with equity grant contract requirements.

4. I acknowledge that it is my responsibility to comply with the provisions of the Long Beach Municipal Code and all laws, rules, and regulations which govern my application to be eligible for the cannabis social equity grants program.

5. I acknowledge that any promise, representation, or any other statement made to me by any agent or employee of the City that is not contained within this application is null, void, and unenforceable and that I am not relying on any such promise, representation, or statement.

6. I acknowledge the City will review this application for compliance with equity grant contract requirements, laws, regulations, and ordinances, and that my application may be denied as allowed by equity grant contract requirements, laws, rule, or policies of the City.

7. I acknowledge that this application does not confer an entitlement or a vested right to receive grant funding and I acknowledge that I must qualify for, and meet the grant eligibility and milestone requirements that I am seeking to receive grant funds, prior to, during, and after the cannabis business licensing process.

8. I hereby declare that I have read this acknowledgement and advisement, that I have had the opportunity to consult with, and be represented by, legal counsel of my own choice prior to the execution and submission of this application, and that I am knowingly and voluntarily submitting my application in compliance with this acknowledgement and advisement and all applicable laws.

9. I acknowledge that equity grant funding will only be made available by the City during the grant term period and that equity grant funds will not be available for disbursement prior to the beginning of the grant term, or after the grant term ends.

10. I hereby declare the information contained within and attached to this application is complete, true, and accurate. I understand any false, misleading or fraudulent statement of material fact is cause for rejection of this application, revocation of equity applicant and/or equity business status, and may result in disciplinary action, or any other limitation imposed by the City and I voluntarily agree to be bound by any such limitation(s) regarding equity status and benefits.

11. I consent for the City Manager, or his or her designee, to contact me to request data or other related information for the purposes of complying with equity grant contract documentation and reporting requirements.

**I declare under penalty of perjury that all of the information provided in this application and provided in all attachments are true and correct. If an Equity Business, all owners must sign.**

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

**\*Attach additional pages if necessary**

\*\*\*\*\***CANNABIS SOCIAL EQUITY GRANT PROGRAM APPLICATION**\*\*\*\*\*  
**STAFF USE ONLY**

LEAVE THIS SECTION BLANK

EQUITY APPLICANT/BUSINESS NAME:

EMAIL ADDRESS: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ COUNTY: \_\_\_\_\_

**Current Milestone in Licensing Process**

- Issuance of a Conditional Use Permit (CUP) or Administrative Use Permit (AUP)
- Obtained Letter of Local Authorization
- Completed Cannabis Facilities Consultation Program
- Submittal of Facility Architectural Plans
- Issuance of Building Permit
- Issuance of a Provisional or Annual State License
- Final Building Sign-Off or Issuance of Certificate of Occupancy
- Issuance of Cannabis Business License

ELIGIBLE EXPENSE	TOTAL COST	GRANT DISTRIBUTION	REQUESTED AMOUNT	AWARDED AMOUNT
LEASE/RENT PAYMENTS		30%		
UTILITIES		30%		
CONSTRUCTION ESTIMATES		15%		
EQUIPMENT		15%		
<b>TOTAL</b>				

Approved By: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_