

CANNABIS SOCIAL EQUITY DIRECT GRANTS PROGRAM APPLICATION

Application Instructions:

Applicants must submit the grant application and all applicable attachments by mail or e-mail, in a single submission. If submitted by e-mail, 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. Forms completed in pencil will be returned to you. Please make sure that you and other authorized individuals sign and date the forms, where applicable.

Applications may be submitted by mail or e-mail to:

City of Long Beach
Office of Cannabis Oversight
411 W. Ocean Blvd., 10th Floor
Long Beach, CA 90802
Email: cannabisoversight@longbeach.gov

Monday through Friday
7:30 a.m. to 4:00 p.m.

For equity grant program assistance, please contact us at:
cannabisoversight@longbeach.gov or (562) 570-5250

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 – Direct Grants Program Eligibility Requirements

To participate in the cannabis social equity grant program, you must meet the following eligibility requirements.

Do you qualify as an Equity Applicant? Yes No

If you marked “No”, please visit www.longbeach.gov/cannabisequity for information on how to qualify.

If you marked “Yes”, please attach the *Cannabis Social Equity Program Verification Letter* issued by the Office of Cannabis Oversight (OCO).

Have you completed the cannabis general information and demographic questionnaire? *

Yes No

If you marked “No”, please complete the questionnaire prior to submittal of your grant application. The City only requires completion of the questionnaire once. To complete the questionnaire, please click the following link: [City of Long Beach Cannabis Equity Applicant / Licensee Questionnaire](#).

Section B – Equity Business Information

To qualify as an Equity Business, you must have submitted an adult-use cannabis business license application to the City and received a *Verification of Equity Business Status Letter* from the Business License Division.

Do you qualify as an Equity Business? Yes No

If you marked "Yes", please complete this section and attach the *Verification of Equity Business Status Letter* issued to your business entity by the Business License Division.

If you marked "No", please leave this section blank and complete the rest of the application, starting with Section C – Equity Applicant Information.

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

LAST NAME (SOLE PROPRIETORSHIP 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 Dispensary | <input type="checkbox"/> Adult-Use Cannabis Manufacturing |
| <input type="checkbox"/> Adult-Use Cannabis Cultivation | <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:

COUNTY:

***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 – Cannabis Business Licensing Direct Grant Milestones *

The purpose of the equity direct grants program is to provide direct grants to verified equity applicants and/or equity businesses to offset non-City costs associated with completing the next phase of the cannabis business license application and permitting process. Direct grants are made available through two separate grant funding sources; the State of California, Bureau of Cannabis Control (BCC) and Governor’s Office of Business and Economic Development (GO-Biz). The requirements to qualify for each grant source and/or grant amount may vary.

Check the boxes for the cannabis business licensing milestone(s) that you have completed and attach all supporting documentation, if required. City staff will verify completion of each milestone in the City’s licensing system. In addition, check the box(es) for the corresponding grant amounts that you are eligible for.

Note: If multiple applications have been submitted under a single equity business, the business entity is only eligible to receive grant funding for completion of each milestone once. **Grant funds will be available until funds are exhausted, or until the State mandated expiration of the equity grant terms.****

<u>Cannabis Business Licensing Direct Grant Milestones & Required Supporting Documentation</u>	<u>GO-Biz Grant Amount Available</u>	<u>BCC Grant Amount Available***</u>
<p>Pre-Application Milestone A: Equity Status Verification Issued Before July 22, 2020</p> <p><input type="checkbox"/> Attach a copy of the <i>Cannabis Social Equity Program Verification Letter</i> issued by the Office of Cannabis Oversight (OCO) before July 22, 2020</p> <p><input type="checkbox"/> Attach a completed Proposed Uses of Equity Grant Funding Form</p>	<p>\$5,000</p> <input type="checkbox"/>	<p>N/A</p>
<p>Pre-Application Milestone B: Equity Workshop Attendance Before July 22, 2020</p> <p><input type="checkbox"/> I attended or scheduled to attend an equity application workshop before July 22, 2020</p> <p><input type="checkbox"/> Attach a completed Proposed Uses of Equity Grant Funding Form</p>	<p>\$5,000</p> <input type="checkbox"/>	<p>N/A</p>
<p>Milestones #1: Cannabis Business License Application Review</p> <p><input type="checkbox"/> Attach a copy of the <i>Verified Equity Business</i> email issued by the Business License Division, evidencing verification of equity business status.</p> <p><input type="checkbox"/> Attach a completed Proposed Uses of Equity Grant Funding Form</p>	<p>\$20,000</p> <input type="checkbox"/>	<p>\$80,000</p> <input type="checkbox"/>
<p>Milestone #2: Completion of Conditional Use Permit (CUP) or Administrative User Permit (AUP) Process</p> <p><input type="checkbox"/> Attach a copy of signed Notice of Action issued by the Department of Development Services</p> <p><input type="checkbox"/> Attach a completed Proposed Uses of Equity Grant Funding Form</p>	<p>\$20,000</p> <input type="checkbox"/>	<p>\$60,000</p> <input type="checkbox"/>
<p>Milestone #3: Submittal of Facility Architectural Plans</p> <p><input type="checkbox"/> Attach copy of email confirmation from Long Beach Development Services Department, evidencing acceptance of project for review</p> <p><input type="checkbox"/> Attach a completed Proposed Uses of Equity Grant Funding Form</p>	<p>\$35,000</p> <input type="checkbox"/>	<p>\$50,000</p> <input type="checkbox"/>
<p>Milestone #4: Issuance of Building Permit</p> <p><input type="checkbox"/> I have been issued a building permit by the Long Beach Development Services Department</p> <p><input type="checkbox"/> Attach a completed Proposed Uses of Equity Grant Funding Form</p>	<p>\$50,000</p> <input type="checkbox"/>	<p>\$30,000</p> <input type="checkbox"/>

Milestone #5: Final Building Sign-Off or Issuance of Certificate of Occupancy <input type="checkbox"/> Attach a copy of the signed orange card and/or Certificate of Occupancy issued by the Long Beach Development Services Department <input type="checkbox"/> Attach a completed Proposed Uses of Equity Grant Funding Form	\$20,000 <input type="checkbox"/>	N/A
Milestone #6: Issuance of Cannabis Business License <input type="checkbox"/> Attach a copy of the adult-use cannabis business license issued by the Business License Division <input type="checkbox"/> Attach a completed Proposed Uses of Equity Grant Funding Form	\$80,000 <input type="checkbox"/>	N/A
Total Grant Amount	\$_____	\$_____

*Cannabis business licensing milestones and grant amounts are subject to change at any time.

**BCC grant funds are available through December 5, 2021. GO Biz grant funds are available through February 22, 2022.

***BCC grant funds are available at Milestone #1, #2, #3, and #4 for new and pending equity businesses currently going through the process to obtain an adult-use cannabis business license. Licensed equity businesses are not eligible for the additional \$220,000 in BCC grant funding.

*******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:

Cannabis Business Licensing Milestone Eligibility Verification Checklist	GO-Biz Grant	BCC Grant
<input type="checkbox"/> Pre-Application Milestone A: Equity Status Verification Before July 22, 2020	<input type="checkbox"/> \$5,000	N/A
<input type="checkbox"/> Pre-Application Milestone B: Equity Workshop Attendance Before July 22, 2020	<input type="checkbox"/> \$5,000	N/A
<input type="checkbox"/> Milestones #1: Cannabis Business License Application Review	<input type="checkbox"/> \$20,000	<input type="checkbox"/> \$80,000
<input type="checkbox"/> Milestone #2: Completion of CUP or AUP Process	<input type="checkbox"/> \$20,000	<input type="checkbox"/> \$60,000
<input type="checkbox"/> Milestone #3: Submittal of Facility Architectural Plans	<input type="checkbox"/> \$35,000	<input type="checkbox"/> \$50,000
<input type="checkbox"/> Milestone #4: Issuance of Building Permit	<input type="checkbox"/> \$50,000	<input type="checkbox"/> \$30,000
<input type="checkbox"/> Milestone #5: Final Building Sign-Off or Issuance of Certificate of Occupancy	<input type="checkbox"/> \$20,000	N/A
<input type="checkbox"/> Milestone #6: Issuance of Cannabis Business License	<input type="checkbox"/> \$80,000	N/A

Total Amount in Approved Grant Funds \$ _____

Approved By: _____ Signature: _____ Date: _____

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**

Proposed Uses of Equity Grant Funding Form

This form should only be used in accordance with the application attachments required under Section D – Cannabis Business Licensing Direct Grant Milestones. **A separate form must be completed for each milestone selected.**

1. Select the cannabis business license application milestone that you completed and are applying to receive equity grant funds. (Check Only One)

- Pre-Application Milestone A: Equity Status Verification Before July 22, 2020
- Pre-Application Milestone B: Equity Workshop Attendance Before July 22, 2020
- Milestone #1: Cannabis Business License Application Review
- Milestone #2: Completion of Conditional Use Permit (CUP) or Administrative Use Permit (AUP) Process
- Milestone #3: Submittal of Facility Architectural Plans
- Milestone #4: Issuance of Building Permit
- Milestone #5: Final Building Sign-Off or Issuance of Certificate of Occupancy
- Milestone #6: Issuance of Cannabis Business License

2. If approved to receive the grant amount allocated at this milestone, please select the type of expense(s) you will incur and provide the grant amount that will be allocated to each type of expense. (Select all that apply)

<u>Type of Expense</u>	<u>GO-Biz Grant Amount</u>	<u>BCC Grant Amount</u>
<input type="checkbox"/> Rent Payments.....	\$ _____	\$ _____
<input type="checkbox"/> Lease Payments.....	\$ _____	\$ _____
<input type="checkbox"/> Local and state application, licensing and regulatory fees.....	\$ _____	\$ _____
<input type="checkbox"/> Legal assistance.....	\$ _____	\$ _____
<input type="checkbox"/> Regulatory compliance.....	\$ _____	\$ _____
<input type="checkbox"/> Testing of cannabis.....	\$ _____	\$ _____
<input type="checkbox"/> Furniture.....	\$ _____	\$ _____
<input type="checkbox"/> Fixtures and equipment.....	\$ _____	\$ _____
<input type="checkbox"/> Capital improvements.....	\$ _____	\$ _____
<input type="checkbox"/> Other _____	\$ _____	\$ _____
Total Grant Amount*	\$ _____	\$ _____

*Note: Total grant amount allocated to types of expenses selected in this section should equal the grant amount selected at the corresponding milestone, as outlined in Section D of the grant application.

3. Provide a detailed description of how the types of expenses you are proposing to use 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**