



Illinois Department of Financial and Professional Regulation
Division of Professional Regulation

**APPLICATION FOR PROPOSED PRINCIPAL OFFICER
OF AN ADULT USE DISPENSING ORGANIZATION**

A proposed principal officer ("Applicant") must complete this application and submit it to the Department of Financial and Professional Regulation, Division of Professional Regulation, Cannabis Control Section ("Division"). Please review the Cannabis Regulation and Tax Act (410 ILCS 705) and the information in this application carefully before submitting it.

The definition of "principal officer" includes: (1) a board member of a cannabis business establishment applicant or licensed cannabis business establishment; (2) an owner with more than a 1% interest in a privately held cannabis business establishment or more than a 5% interest in a publicly traded cannabis company; (3) the president, vice president, secretary, treasurer, partner, officer, member, or manager member of a cannabis business establishment; (4) a person with a profit sharing, financial interest, or revenue sharing arrangement with a cannabis business establishment; (5) a person with authority to control the cannabis business establishment; or (6) a person who assumes responsibility for the debts of the cannabis business establishment.

It is against the law for a person to be a principal officer of or hold a financial interest in a combined total of more than 10 adult use dispensing organization licenses and early approval adult use dispensing organization licenses.

The Division may verify the information contained in this form and any accompanying materials to assess the Applicant's character and fitness. The application may be denied if the Division finds the Applicant is lacking in good character, honesty or integrity. All information requested by the Department is for the proposed principal officer unless otherwise identified.

*****NOTICE FOR CONDITIONAL ADULT USE DISPENSING ORGANIZATION APPLICANTS*****
If you are submitting this application in conjunction with a separate application for a Conditional Adult Use Dispensing Organization License, you do not need to submit Addenda A through C with this application.

Addenda:

Addendum A: A statement disclosing all relevant business transactions and financial information between the Applicant and the dispensing organization.

Addendum B: An updated Table of Organization, Ownership and Control of the dispensing organization reflecting the structure of the organization if the Applicant is approved. The Table of Organization, Ownership and Control must identify all principal officers and business entities that through direct or indirect means, manage, own or control the interests and assets of the license holder.

The Table of Organization, Ownership and Control shall also identify the following:

- a) The management structure including:
 - i) the office or position held by each individual;
 - ii) the percentage ownership interest of each individual or business entity;
 - iii) if the business entity has one or more parent companies, the name of each parent company, the names of the parent company principal officer(s), and their percentage ownership interest in the parent company. Section iii must be completed for each level of ownership of the licensee until all persons that, through direct or indirect means, manage, own, or control the licensee are identified; and
 - iv) if the licensee is partially owned or controlled by another entity, it must disclose to the Division the terms of the relationship and all owners, board members, officers or individuals with control or management of the owning or controlling entities.
- b) If a business entity identified in the Table is a publicly traded company, the following information shall be provided:
 - i) The name and percentage of ownership of each individual or business entity that owns or controls more than 5 percent of the voting shares of the entity;
 - ii) To the extent known, the names and percentage of ownership or control by persons who are related and who together own or exercise control over more than 10 percent of the voting shares of the entity;
- c) If a business entity identified in the Table is a limited liability company, provide a copy of the current Articles of Organization and operating agreements, if changed since last submitted to the Division, and a list of all persons or business entities holding an ownership interest;
- d) If a business entity identified in the Table is a corporation, provide a copy of the current Articles of Incorporation and corporate resolutions, if changed since last submitted to the Division, and a list of all persons or business entities holding an ownership interest.
- e) If a business entity identified in the Table is an unincorporated association, organization or not-for-profit organization, provide documents or agreements reflecting its current ownership, profit sharing and liability structure, if changed since last submitted to the Division.
- f) If a business entity identified in the Table is a partnership, provide a copy of current partnership or joint venture documents, if changed since last submitted to the Division. If there is no written agreement, provide a statement signed by all partners affirming there is no agreement.

Addendum C: Copies of compensation agreements, management agreements, supply agreements, or other financial documents between or among the Applicant and any persons having a financial interest and/or control in the licensee, or a narrative if the agreement is oral.

Addendum D: A copy of the Illinois Department of Financial and Professional Regulation's Fingerprint Consent Form and livescan vendor receipt demonstrating that the Applicant has applied for a fingerprint-based criminal history records check. **NOTE:** Fingerprints must be taken by an Illinois licensed livescan vendor **within 30 days** before the date this application is submitted by the Applicant.

Addendum E: A document or resume' summarizing the Applicant's complete education and work experience and, to the extent available, the Applicant's involvement in the cannabis business or related industry. Addendum E shall not exceed 3 pages.

FIRST NAME	M.I.	LAST NAME	
MAIDEN NAME (If Applicable)		ALIAS (If Applicable)	
MAILING ADDRESS (P.O. Box may not be used)			
PHONE NUMBER		E-MAIL ADDRESS	
DATE OF BIRTH	GENDER	RACE (optional)	
NAME OF PROPOSED OR CURRENT DISPENSING ORGANIZATION			
SOCIAL SECURITY NUMBER	JOB TITLE AT PROPOSED OR CURRENT DISPENSING ORGANIZATION		
PERCENT OWNERSHIP	TYPE OF OWNERSHIP		
<p>Other than the proposed dispensing organization related to this application, provide the name of any other Illinois cannabis business establishment with which the Applicant is associated:</p>			

An Applicant must sign, date, and have this form notarized. Signatures on this form signify compliance with 410 ILCS 705/5-20(a) and 15-25(d).

All Applicants shall certify and attest, under penalty of perjury, that each of the following statements made are true and correct. **Failure to certify and attest, or the making a false statement, will result in denial of the application.**

If you require additional space to explain your answer to any question, please use additional pages and reference which question is being answered on each page.

	YES	NO
1. The information provided to the Division on this application is true, correct and complete.		
2. I understand that the Division's approval of this application means the information and plans in this application are a condition of the license. I understand that dispensing organizations, principal officers, and I as an Applicant have a duty to promptly disclose any material changes to the information contained in a Conditional Adult Use Dispensing Organization License application or proposed policies and procedures submitted with such application.		
3. All principal officers of the proposed dispensing organization are listed in this Conditional Adult Use Dispensing Organization License Application or have been previously disclosed to the Division.		
4. I am not and will not be a principal officer of, or hold a direct or indirect financial interest in, more than ten adult use cannabis dispensing organization licenses.		
5. I will not divert cannabis.		
6. I will promptly respond to the Division's requests for information.		
7. If approved as a principal officer, I will apply for an agent identification card through the Division and visibly display it while at the dispensary.		
8. If I no longer serve as a principal officer, I will immediately return my dispensing organization agent identification card to the dispensing organization.		
9. If I lose my dispensing organization agent identification card, I will ensure the loss is reported immediately upon discovery to the Department of State Police and the Department of Financial and Professional Regulation.		

	YES	NO
<p>10. In accordance with 20 ILCS 2105-15(g): "The Department shall deny any license application or renewal authorized under any licensing Act administered by the Department to any person who has failed to file a return, or to pay the tax, penalty, or interest shown in a filed return, or to pay any final assessment of tax, penalty, or interest, as required by any tax Act administered by the Illinois Department of Revenue, until such time as the requirement of any such tax Act is satisfied."</p> <p>Are you delinquent in the filing of state taxes? If yes, provide an explanation below.</p>		
<p>11. In accordance with 5 ILCS 100/10-65(c), applications for renewal of a license or a new license shall include the applicant's social security number, and the licensee shall certify, under penalty of perjury, that he or she is not more than 30 days delinquent in complying with a child support order.</p> <p>Are you more than 30 days delinquent in complying with a child support order? If yes, provide an explanation below.</p>		
<p>12. Are you delinquent in the payment of an alimony order? If yes, provide an explanation below.</p>		
<p>13. Have you ever filed for bankruptcy? If yes, provide an explanation below.</p>		

	YES	NO
<p>14. Have you ever been a principal officer, manager, board member or owner of a business or not-for-profit organization, other than a cannabis business, that had its license or registration fined, censured, suspended or revoked? This does not include non-disciplinary or non-public administrative orders. If yes, provide the name, address, type of business, and an explanation of the discipline below.</p>		
<p>15. Have you ever been a principal officer, manager, board member or owner of a cannabis business that had its registration or license fined, censured, suspended or revoked? This does not include non-disciplinary or non-public administrative orders. If yes, provide the name, address, and an explanation of the discipline below.</p>		
<p>16. If the registration or license of any cannabis business of which I am a principal officer, manager, board member, or owner is fined, censured, suspended, or revoked, I will immediately disclose the fine, censure, suspension, or revocation to the Division.</p>		

	YES	NO
<p>17. I accept the limitations of liability stated below and the requirement to indemnify, hold harmless, and defend the State of Illinois, including:</p> <p>Limitation of Liability: the State of Illinois shall not be liable to the principal officer, principal officer's employees, family members, purchasers, or guest(s) for any damage, injury, accident, loss, compensation or claim, based on, arising out of or resulting from the principal officers participation in the adult use cannabis program, including, but not limited to, the following: arrest, seizure of persons or property, prosecution pursuant to federal laws by federal prosecutors, any fire, robbery, theft, mysterious disappearance or any other casualty, or the actions of any other licensees or persons. This provision shall survive expiration or the early termination of the license if a license is granted.</p> <p>I acknowledge that I have actual notice that notwithstanding any Illinois law:</p> <ul style="list-style-type: none"> • Cannabis is a prohibited Schedule I controlled substance under federal law; • Participation in the cannabis program is permitted only to the extent provided by the strict requirements of the Act and the Division's Administrative Rules; • Any activity not sanctioned by the Act or the Division's administrative rules may be a violation of State or federal law and could result in arrest, prosecution, conviction or incarceration; • Growing, distributing, or possessing cannabis in any capacity, except through a federally-approved research program, is a violation of federal law and could result in arrest, prosecution, conviction, or incarceration; • Use of cannabis may affect an individual's ability to receive federal or State licensure in other areas; • Use of cannabis, in tandem with other conduct, may be a violation of State or federal law and could result in arrest, prosecution, conviction, or incarceration; • Participation in the adult use cannabis program does not authorize any person to violate federal law or State law and, other than as set out in 410 ILCS 705, does not provide immunity from or affirmative defense to arrest or prosecution under federal or State law; and • Participants shall indemnify, hold harmless, and defend the State of Illinois for any and all civil or criminal penalties resulting from their participation in the program. 		

	YES	NO
18. Have you ever been charged with a criminal offense in any domestic or foreign jurisdiction? If yes, explain the charges, the nature of the alleged offense and the resolution in the space below. Include all charges regardless of whether they were dismissed or you were found not guilty. You are not obligated to disclose sealed or expunged records of a conviction or arrest.		
19. Have you ever been convicted of a criminal offense in any domestic or foreign jurisdiction? If yes, list the offense, the class of crime, and the conviction date in the space below. Include all convictions regardless of the class of the crime (felonies, misdemeanors, and all petty offenses). You are not obligated to disclose sealed or expunged records of a conviction or arrest.		

I certify under penalty of perjury that I personally completed this application, that the answers provided are true and correct to the best of my knowledge and belief, and that I am legally authorized to sign this application.

Applicant Printed Name

Signature (in full)

Date

Subscribed and sworn to before me this _____ day of _____ 20____.

(SEAL)

Notary Public _____