

## Adult Use Marijuana Program Social Equity Application Checklist

Pursuant to Arizona Revised Statutes (A.R.S.) Title 36, Chapter 28.2 and Arizona Administrative Code (A.A.C.) Title 9, Chapter 18, the Department will accept applications for 26 adult use establishment licenses from social equity applicants from December 1, 2021 through December 14, 2021. Applications must be submitted through the Department's Facility Licensing Portal by the designated principal officer or board member of the applying entity. For a complete list of the application and eligibility requirements, please refer to A.A.C. R9-18-303.

**To complete the application, you will need the following information and documents available to upload digitally.**

APPLICATION CHECKLIST	
General Application Requirements	
<input type="checkbox"/>	<p>The following information about the applying entity:</p> <ul style="list-style-type: none"> <li>✓ Legal name of applying entity/proposed marijuana establishment</li> <li>✓ Type of business organization</li> <li>✓ Arizona mailing address</li> <li>✓ Telephone number</li> <li>✓ Email address (The principal officer or board member (PO/BM) submitting the application must be the applying entity's designated PO/BM. All email communications will go to the designated PO/BM's email address, and they must respond to any notices and resubmit the application through their Facility Licensing Portal account)</li> </ul>
<input type="checkbox"/>	Documentation that the applying entity is in good standing with the Arizona Corporation Commission
<input type="checkbox"/>	<p>The <b>email address that each Principal Officer and Board Member (PO/BM) uses to login</b> to the Individual and Facility Licensing Portal. (Refer to A.A.C. R9-18-301 to determine who must be listed on the application as PO/BM.) Before your application can be submitted, the system will validate that each PO/BM:</p> <ul style="list-style-type: none"> <li>✓ Has an active Facility Agent Card</li> <li>✓ Created a facility licensing portal account and accessed the required Social Equity Training Course by November 17, 2021, and completed the course by November 24, 2021</li> <li>✓ Has not already been listed as a PO/BM on 2 submitted applications</li> </ul>
<input type="checkbox"/>	For each PO/BM, a completed and signed "Principal Officer and Board Member Attestation for Social Equity Initial Establishment Application"
<input type="checkbox"/>	<p>The following information about any person who is not a principal officer or board member, but is entitled to 10% or more of the profits of the proposed marijuana establishment:</p> <ul style="list-style-type: none"> <li>✓ Name</li> <li>✓ Residence address</li> <li>✓ Date of birth</li> </ul>
<input type="checkbox"/>	\$4,000 payment using a credit card or electronic check
Social Equity Eligibility Requirements (see next page)	

**APPLICATION CHECKLIST (continued)**

**Social Equity Eligibility Requirements**

At least 51% of the applying entity must be owned by principal officer(s) or board member(s) (PO/BM) who each meet at least **3 out of the 4 eligibility** criteria listed below. Each PO/BM that is part of the 51% ownership must provide documentation that they meet 3 out of the 4 eligibility criteria listed below.

\*If any documents provided are not in the current legal name of the PO/BM, legal documentation must be provided to link the previous name to the current name (ex: marriage license, divorce decree, court order, etc.).

<input type="checkbox"/>	<p><b>Had an annual household income, as defined in A.A.C. R9-6-401, in at least three of the years 2016 through 2020 that, for the respective year, was less than 400% of the poverty level, as defined in A.A.C. R9-6-401, as shown by:</b></p> <p><input type="checkbox"/> A <b>copy of the applicable portion of an income tax return</b> submitted to the U.S. Internal Revenue Service by the individual or an adult in the individual's household, as defined for the individual in A.A.C. R9-6-401, for the applicable tax year <b>or a transcript of the income tax return</b> from the U.S. Internal Revenue Service</p> <p><b>OR</b></p> <p><input type="checkbox"/> If neither the individual nor an adult in the individual's household, as defined for the individual in A.A.C. R9-6-401, filed or was required to file an income tax return for an applicable year, <b>documentation showing the amount and source of all monetary payments</b> received by the individual and each adult in the individual's household for the applicable tax year</p>
<input type="checkbox"/>	<p><b>Has been adversely affected by the enforcement of previous marijuana laws because the individual:</b></p> <p><input type="checkbox"/> Has been granted expungement pursuant to A.R.S. § 36-2862, as demonstrated by <b>a copy of the expungement</b> issued by the prosecuting state or jurisdiction</p> <p><b>OR</b></p> <p><input type="checkbox"/> Was convicted in Arizona of a violation of federal or state law related to marijuana or marijuana paraphernalia, as demonstrated by a <b>copy of the court's conviction document</b> issued by the prosecuting state or jurisdiction</p>
<input type="checkbox"/>	<p><b>Has been adversely affected by the enforcement of previous marijuana laws because the individual is or was related during the time-frame specified to another individual who:</b></p> <p><input type="checkbox"/> Was convicted in Arizona of a violation of federal or state laws related to marijuana or marijuana paraphernalia, or is or was eligible for expungement pursuant to A.R.S. § 36-2862, as <b>demonstrated by court documents</b> for the other individual issued by the prosecuting state or jurisdiction</p> <p><b>AND</b></p> <p><input type="checkbox"/> Is one of the following, as <b>demonstrated by applicable documentation</b>, specified by the Department, verifying the individual's relationship to the other individual on the date of application or at the time of conviction or the event making the other individual eligible for expungement pursuant to A.R.S. § 36-2862:</p> <ul style="list-style-type: none"> <li>• <b>Spouse</b> (individual who is currently married to the other individual)</li> <li>• <b>Surviving spouse</b> (individual to whom a deceased other individual was married at the time of the deceased other individual's death)</li> <li>• <b>Parent</b> (biological, an adoptive, or a foster mother or father, including a stepmother or stepfather, whose parental rights are not terminated)</li> <li>• <b>Child</b> (parent's biological, adoptive, or foster child, including stepchild)</li> <li>• <b>Sibling</b> (full- or half-, biological, adoptive, or foster sister or brother, including a stepsister or stepbrother)</li> <li>• <b>Legal guardian</b></li> </ul>
<input type="checkbox"/>	<p><b>Has lived for at least three of the years 2016 through 2020 at one or more physical addresses each in an area that has been identified by the Department as being disproportionately affected by the enforcement of Arizona's previous marijuana laws, as demonstrated by:</b></p> <p><input type="checkbox"/> <b>Applicable documentation</b> specified by the Department</p>