



City of  
Laguna Woods

## CANNABIS STOREFRONT RETAILER OWNERSHIP FORM

Planning & Environmental Services Department  
24264 El Toro Road, Laguna Woods, CA 92637

P: (949) 639-0500 [planning@cityoflagunawoods.org](mailto:planning@cityoflagunawoods.org)  
[www.cityoflagunawoods.org](http://www.cityoflagunawoods.org)

### I. INTRODUCTION

This Cannabis Storefront Retailer Ownership Form satisfies the City of Laguna Woods' requirements for the disclosure of business ownership information for cannabis storefront retailers as set forth in Laguna Woods Municipal Code Section 13.26.025(c)(1)e.-g. Additional information may be required subsequent to the submittal of this form, if necessary, per Laguna Woods Municipal Code Section 13.26.025(c)(1)n.

For the purpose of this Cannabis Storefront Retailer Ownership Form, "business owner" and "owner of the business" has the same meaning as California Code of Regulations, Title 4, Section 15003. California Code of Regulations, Title 4, Section 15003 is copied below for ease of reference.

*(a) An applicant for a commercial cannabis license or a licensee shall disclose all owners of the commercial cannabis business. An owner of the commercial cannabis business includes all of the following:*

*(1) A person with an aggregate ownership interest of 20 percent or more in the commercial cannabis business, unless the interest is solely a security, lien, or encumbrance. For purposes of this section, "aggregate" means the total ownership interest held by a single person through any combination of individually held ownership interests in a commercial cannabis business and ownership interests in an entity that has an ownership interest in the same commercial cannabis business. For example, a person who owns 10 percent of the stock in a commercial cannabis business as an individual shareholder and 100 percent of the stock in an entity that owns 10 percent of the stock in the same commercial cannabis business has a 20 percent aggregate ownership interest in the commercial cannabis business.*

*(2) An individual who manages, directs, or controls the operations of the commercial cannabis business, including but not limited to:*

*(A) A member of the board of directors of a nonprofit.*

*(B) A general partner of a commercial cannabis business that is organized as a partnership.*

*(C) A non-member manager or managing member of a commercial cannabis business that is organized as a limited liability company.*

*(D) The trustee(s) and all persons who have control of the trust and/or the commercial cannabis business that is held in trust.*

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*(E) The chief executive officer, president or their equivalent, or an officer, director, vice president, general manager or their equivalent.*

*(b) If the commercial cannabis business is owned in whole or in part by an entity and the entity includes individuals who manage, direct, or control the operations of the commercial cannabis business, as described in subsection (a)(2)(E), those individuals shall also be disclosed as owners.*

*(c) If available evidence indicates that an individual qualifies as an owner, the Department may notify the applicant or licensee that they must either disclose the individual as an owner and submit the information required by section 15002 or demonstrate that the individual does not qualify as an owner.*

## **II. BUSINESS INFORMATION (MUST MATCH "SUPPLEMENTAL INFORMATION FORM")**

- 1) Business' Legal Name: \_\_\_\_\_
- 2) Business' Fictitious Business Name(s) (if applicable): \_\_\_\_\_
- 3) Business' Proposed Operating Location: \_\_\_\_\_
- 4) Business' Mailing Address (if different than #3): \_\_\_\_\_

## **III. APPLICANT INFORMATION (MUST MATCH "LAND USE PERMIT APPLICATION")**

- 1) Applicant's Legal Name: \_\_\_\_\_
- 2) Applicant's Firm's Name (if applicable): \_\_\_\_\_
- 3) Submitting on Behalf of:  Self/Employer  Client: \_\_\_\_\_

## **IV. REQUIRED SUBMITTALS**

Please attach a list of all owners of the business with the following information for each:

- Legal name
- Authorized agent (if applicable)
- Authorized agent's telephone number
- Authorized agent's email address
- Federal Employee Identification Number (if applicable)
- Telephone number
- Email address
- Mailing address
- Percent of business owned

1) Is a list of all owners of the business attached? (must attach and answer "yes")  Yes

Please attach a Cannabis Storefront Retailer Ownership Form/Supplement for each owner of the business. *(Note: Ensure that the information on each Cannabis Storefront Retailer Ownership Form/Supplement matches the information on the list submitted for #1.)*

2) Is a Cannabis Storefront Retailer Ownership Form/Supplement for each owner of the business attached? (must attach and answer "yes")  Yes

For each owner of the business that answers "yes" to B(#10) on the Cannabis Storefront Retailer Ownership Form/Supplement, please attach a copy (e.g., screenshot(s)) of applicable "Lists of Owners"

Case # (CITY USE ONLY): \_\_\_\_\_

submitted on the California Department of Cannabis Control’s Online Licensing System for the business identified in B(#10b.-#10d.), or similar proof of ownership information submitted to the California Department of Cannabis Control. Additional information related to proof of ownership may be required subsequent to the submittal of this form, if necessary, per Laguna Woods Municipal Code Section 13.26.025(c)(1)n.

3) Is a copy (e.g., screenshot(s)) of applicable “Lists of Owners” submitted on the California Department of Cannabis Control’s Online Licensing System for the business identified in B(#10b.-#10d.), or similar proof of ownership information submitted to the California Department of Cannabis Control, attached for each owner of the business that answers “yes” to B(#10)? (must attach and answer “yes”)  Yes

**V. AFFIDAVIT, ACKNOWLEDGEMENT, AND SIGNATURE**

Under penalty of perjury, I hereby declare that the information contained within and submitted with this Cannabis Storefront Retailer Ownership Form is complete, true, and accurate. I understand that a misrepresentation of fact is cause for rejection of this Land Use Permit Application, denial of the permit, and/or suspension or revocation of a permit issued, and may also constitute an illegal action resulting in civil and/or criminal action. I acknowledge that all information on and attached to this form may constitute a public record subject to disclosure under the California Government Code Section 6250 and have communicated the same to all involved parties.

Signature of Applicant identified in Line III(#1) above: \_\_\_\_\_

Date Signed by Applicant identified in Line III(#1) above: \_\_\_\_\_

**THE SIGNATURE ON THIS DOCUMENT MUST BE NOTARIZED. ATTACH  
ACKNOWLEDGEMENT FORM.**