Marijuana Delivery License Application Score Sheet

Cannabis License Application presentation date: _____

Applicant Entity Name: _____

Proposed D/B/A:_____

Proposed Licensed premise address: _____

Do you have site control? Yes_____ No_____

Is your proposed location in compliance with Rockland zoning code? Yes____ No_____

Total points possible: 100 EVALUATION CRITERIA

1. State Certified Equity Status: _____/ 25pts

2. Plan to work with Rockland retail dispensaries exclusively: Yes____ No____ / 15pts

3. Diversity and Positive Impact plan: _____/15 Total (examples)

    a. Goals. _____/5

    b. Programs _____/5

    c. Measurements _____/5

4. Employment plan: _____/20 Total

    a. Plan for employment of Rockland residents; _____/5

    b. Plan for employment of minorities and women; _____/5

    c. Plan for offering competitive wages and benefits for local residents; _____/5

    d. Plan for employment of individuals with criminal records. _____/5

5. Safety and Security: _____ /25 Total

    a. Plan for security of delivery personnel; _____/5

    b. Plan for vehicle and product security; _____/5

    c. Plan for protecting youth from accessing the product_____/5

    d. Plan for the delivery of the product _____/5

    e. Plan for the security and collection of monies during delivery _____/5

TOTAL SCORE: _____/100

Select Board Approval: Yes____ No____