

Marijuana License Application Score Sheet

Cannabis License Application presentation date: _____

Applicant Entity Name: _____

Proposed D/B/A: _____

Proposed Licensed premise address: _____

Proposed License type:

Retail _____

Manufacturing _____

Cultivation _____

Delivery Operator _____

Marijuana Courier _____

Independent Laboratory _____

Standards Laboratory _____

Co-located _____ (specify type/s)

Other _____

Do you have site control? Yes _____ No _____

Is your proposed location in compliance with [Rockland zoning code](#)? Yes _____ No _____

Total points possible: 85 EVALUATION CRITERIA

1. State Certified Equity Status: _____ / 25pts

2. Diversity and Positive Impact plan: _____ /15 Total ([examples](#))

a. Goals. _____ /5

b. Programs _____ /5

c. Measurements _____ /5

3. Employment plan: _____ /20Total

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

4. Safety and Security: ____/25 Total

a. Plan for on-site security personnel; ____/5

b. Plan for building and product security; ____/5

c. Plan for protecting youth from accessing the product ____/5

d. Plan for the transportation and delivery of the product ____/5

e. Plan for the transportation of monies to and from the site ____/5

TOTAL SCORE: ____/85

Select Board Approval: Yes ____ No ____