



To: City Councilors
CC: City Manager Ken Coleman
From: City Clerk Gail Davidson *GAD*
Date: October 21, 2015
Re: Setting Public Hearings on Retail Marijuana Store License Applications from:
Gunnison Cannabis, LLC dba Rocky Mountain Cannabis; and
East River Management LLC, dba Growhouse Gunnison

Councilors:

On June 23, 2015, City Council passed Ordinance No. 5, Series 2015, establishing the regulations and process for approving medical and retail marijuana establishments in Gunnison. Since marijuana establishment applications became available on July 6, 2015, seven City retail store applications have been received. Two of those applications have been approved by City Council and another two have been preliminarily approved by City staff. The State Marijuana Enforcement Division (MED) has approved Conditional Retail Marijuana Store Licenses for those two applications as well.

Community Development Director Westbay is away from the office on this date and has not signed off on the City Application forms but has indicated verbally he sees no issue with setting the public hearings. Upon his return I will provide Council with the signed form. Therefore, Staff is recommending the City Public Hearings on these two applications be set in accordance with Gunnison Municipal Code Section 8.50.040B(1). The City application form has been included in your packet for preliminary information. The more detailed application will be included for the public hearing meetings.

Thank you, Gail

Action Requested of Council: A motion, second and vote to set the public hearing on the retail marijuana store license application from Gunnison Cannabis, LLC dba Rocky Mountain Cannabis, 901 W, New York Avenue, Gunnison, 7:15 P.M., Tuesday, December 8, 2015; and

Action Requested of Council: A motion, second and vote to set the public hearing on the retail marijuana store license application from East River Management, LLC dba Growhouse Gunnison, 811 N. Main Street, Gunnison, Colorado for 7:30 P.M., on Tuesday, December 8, 2015.

CITY OF GUNNISON, COLORADO
MARIJUANA ESTABLISHMENT LICENSE APPLICATION



CITY CLERK'S DEPARTMENT
201 W. VIRGINIA AVENUE - P.O. BOX 239
GUNNISON, CO 81230
970-641-8140 (phone) 970-641-8051 (FAX)
gail@cityofgunnison-co.gov (email)

Date Application Received by Clerk: 08 / 21 / 15
Application Fee Paid: 08 / 31 / 15 (see attached fee schedule)
License Fee Paid: 08 / 31 / 15
Application Received By: [Signature]

TYPE OF LICENSE: (please choose ONE)

- Medical Marijuana Center
- Retail Marijuana Store
- Cultivation Establishment: Medical _____ Retail _____
- Marijuana Product Manufacturing Establishment: Medical _____ Retail _____
- Marijuana Testing Facility
- License Renewal
- Modification of Premises
- Transfer License Ownership
- Transfer of License Location
- Other (please specify) _____

BUSINESS PREMISES INFORMATION

Legal Business Name: Gunnison Cannabis, LLC
Trade Name of Business (dba): Rocky Mountain Cannabis
FEIN: 47-4773008 City Sales Tax # 99-694
State Sales Tax # 29968958
Physical Address of Business: 901 W. New York Ave, Gunnison, CO, 81230
Mailing Address of Business: 16222 6765 Rd., Montrose, CO, 81401
Business Telephone Number: 719-369-9430
Business Email: Jeremiah@RockyMountainCannabis.com
Property Owner Name: _____
Property Owner Address and Phone Number: _____
Building Owner Name: David Navidi
Building Owner Address and Phone Number: PO Box 81, Gunnison, CO, 81230

If the applicant is not the owner of the land or building where the marijuana establishment is to be located, the applicant shall submit a lease and a notarized "Property Owner Consent Form" granting consent from the property and/or building owner for the City to initiate the review process.

APPLICANT INFORMATION

APPLICANT is applying as a: (please choose ONE):

- Corporation
- Limited Liability Company (LLC)
- Partnership (includes Husband/Wife Partnerships)
- Individual (Sole Proprietor)
- Other (Specify)

APPLICANT NAME: Jeremy Johnson & James Fitzgerald
Individual or Sole Proprietorship:

Applicant Full Legal Name: James Harold Fitzgerald / Jeremy Johnson Social Security Number: [REDACTED] / 7459-031127 DOB: [REDACTED] / [REDACTED]

Applicant's Physical Address: Jeremy Johnson
16222 6765 Rd Montrose CO 81401
Applicant's Mailing Address: same

Applicant's Home and Cell Phone Numbers: 719- [REDACTED] - [REDACTED]

Applicant's Current Email Address: jeremiah@RockyMountainCannabis.com

What Marijuana License(s) does the Applicant or any member of the LLC, Corporation, Partnership/Association currently hold with the State of Colorado?

- Medical Marijuana Center License #: _____
- Retail Marijuana Establishment License #: 402R-00270
- Marijuana Product Manufacturing License #: _____
- Marijuana Testing License #: _____
- Cultivation Center License #: _____
- Other License #: _____
- None

What Marijuana License(s) does the Applicant hold with the City of Gunnison?

- Type: _____ License #: _____
- Type: _____ License #: _____

Additional Licenses Use Additional Pages
 None

OATH OF APPLICANT

I declare under penalty of perjury in the second degree that this application and any required attachments are true, correct and complete to the best of my knowledge. I also acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the Colorado Marijuana Code that will affect my license.

Authorized Signature: [Signature]
Printed Name and Title: Jeremy Johnson - owner / James Fitzgerald - owner
Date: 7/23/15

(This page BELOW to be completed by City Staff)
CITY OF GUNNISON DEPARTMENTAL APPROVALS

Each Department Must Review, Approve, Sign, Check-Off, and Date for Application Approval to be forwarded to City Council for approval.

CITY CLERK'S DEPARTMENT

- Includes payment of application and licensing fees; submission of complete application forms and any other forms as required.

Date approved: 9/3/15 By: [Signature]

COMMUNITY DEVELOPMENT DEPARTMENT

- Compliance with Mechanical, Fire and Technical Codes of the Gunnison Municipal Code
- Compliance with Land Use Requirements as defined in the Gunnison Land Development Code.

Date approved: _____ By: _____

FINANCE DEPARTMENT

- Compliance with sales tax collection and remittance Code requirements

Date approved: 9/4/15 By: [Signature]

POLICE DEPARTMENT

- Successful completion of local background checks and investigations

Date approved: 9/10/15 By: [Signature]

PUBLIC WORKS DEPARTMENT

- Compliance with City Utilities Codes

Date approved: 9-3-15 By: [Signature]

REQUIRED ATTACHMENTS FOR CITY COUNCIL PUBLIC HEARING

Results of local background check by City of Gunnison Police Department.

Approved Site Development Application and/or Conditional Use Permit.

Completed State of Colorado License Application Forms to Application.

Date Application Accepted by City Council: ___/___/___

Date of Public Hearing: ___/___/___

APPLICATION APPROVED: ___/___/___

APPLICATION DENIED: ___/___/___

STATE OF COLORADO

DEPARTMENT OF REVENUE



Marijuana Enforcement Division



Retail Marijuana Conditional License

GUNNISON CANNABIS, LLC

ROCKY MOUNTAIN CANNABIS

901 West New York Avenue, Gunnison, CO 81230

Retail Marijuana Store - 402R-00509

Effective Date of License: October 08, 2015

License Valid Through: 10/08/2016

This license is conditioned upon Local Authority approval, pursuant to section 12-43.4-304(1) C.R.S.

This conditional license is issued subject to the laws of the State of Colorado and especially under the provisions of Title 12, Article 43.4, as amended. A licensee shall not exercise any of the rights or privileges of this license until such time as all such Medical Marijuana and Medical Marijuana-Infused Product are fully transferred and declared in the MITS system as Retail Marijuana and Retail Marijuana Product, pursuant to Rule R211 & R309. This conditional license is nontransferable and shall be conspicuously posted in the place above described. This conditional license is only valid through the expiration date shown above. Any questions concerning this conditional license should be addressed to: Colorado Marijuana Enforcement Division, 455 Sherman Street, Suite 390, Denver, CO 80203. In testimony whereof, I have hereunto set my hand.

W. Lewis Koski

W. Lewis Koski
Division Director

Barbara J. Broni

Barbara J. Broni, Executive Director

APPLICANT INFORMATION

APPLICANT is applying as a: (please choose ONE):

- Corporation
- Limited Liability Company (LLC)
- Partnership (includes Husband/Wife Partnerships)
- Individual (Sole Proprietor)
- Other (Specify)

APPLICANT NAME: East River Management LLC

Individual or Sole Proprietorship: NA - Applicant in An LLC

Applicant Full Legal Name: Craig W Clark

Social Security Number: [REDACTED]

DOB: [REDACTED] *

* Craig Clark is the sole member of East River Management LLC

Applicant's Physical Address: 2200 S. Valcaba St., Denver, CO 80231

Applicant's Mailing Address: SAME

Applicant's Home and Cell Phone Numbers: Cell Only - 720 [REDACTED]

Applicant's Current Email Address: Craig@pillows.com

What Marijuana License(s) does the Applicant or any member of the LLC, Corporation, Partnership/Association currently hold with the State of Colorado?

- Medical Marijuana Center License #: _____
- Retail Marijuana Establishment License #: _____
- Marijuana Product Manufacturing License #: _____
- Marijuana Testing License #: _____
- Cultivation Center License #: _____
- Other License #: _____
- None

Please see attached.

What Marijuana License(s) does the Applicant hold with the City of Gunnison?

- Type: _____ License #: _____
- Type: _____ License #: _____

Additional Licenses Use Additional Pages

- None

OATH OF APPLICANT

I declare under penalty of perjury in the second degree that this application and any required attachments are true, correct and complete to the best of my knowledge. I also acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the Colorado Marijuana Code that will affect my license.

Authorized Signature: [Signature]

Printed Name and Title: Craig Clark - Owner

Date: 8/20/15

East River Management, LLC DBA Growhouse Gunnison Supplemental Materials

Craig Clark has 100% ownership of the following entities which have marijuana licenses:

Growhouse Fraser, LLC - 402R-00366 (Recreational Retail Store, License Issued, Store Open)

Growhouse Pueblo, LLC - 404R-00133 (Recreational Cultivation, License Issued, Cultivation Not Open)

Growhouse Pueblo, LLC - 403R-00511 (Recreational MIP, License Issued, MIP Not Open)

Middle Boulder Management, LLC - 402R-00461 (Recreational Retail Store, License Issued, Expected to Open 8/18/15)

Middle Boulder Management, LLC - 404R-00142 (Recreational MIP, License Issued, Not Open)

Grand Lake Management, LLC - 402R-00490 (Recreational Retail Store, License Issued, Store Not Open)

Growhouse Central City, LLC - 402R-00489 (Recreational Retail Store, License Issued, Store Not Open)

Raton Pass Management, LLC - 402R-00506 (Recreational Retail Store, License Not Yet Issued, Store Not Open)

FAT 303-674-1814

CITY OF GUNNISON, COLORADO
MARIJUANA ESTABLISHMENT LICENSE - PROPERTY OWNER CONSENT

CITY CLERKS DEPARTMENT
301 W VIRGINIA AVENUE
P O BOX 739
GUNNISON, CO 81230
970-641 8140 (phone) 970-641-8051 (FAX)
www.gunnisonco.gov (E-mail)

BUSINESS NAME: Greenhouse Gunnison (DBA)
APPLICANT NAME: East River Management LLC
STREET ADDRESS OF PROPOSED LICENSED PREMISES:
811 N Main Street Gunnison CO 81230
LEGAL DESCRIPTION: Lot D, Blk 2, Mountain View Addn 1 #624779

**OWNER'S CONSENT TO SUBMISSION OF APPLICATION
FOR MARIJUANA ESTABLISHMENT ON OWNED PREMISES**

As owner of the real property listed above, I hereby authorize the submission of this application for my property to be used as a (check all that apply):

- Medical Marijuana Center
- Retail Marijuana Store
- Cultivation Establishment Medical _____ Retail _____ (check one)
- Marijuana Product Manufacturing Establishment Medical _____ Retail _____
- Marijuana Testing Facility

Debbie Hoffman and Bruce Hoffman Property Owner (Printed Name)

[Signature] 8-19-15 Property Owner (Signature)

[Signature] 8-19-15 Date

(Attach copy of deed or lease in name of the license applicant)

STATE OF COLORADO)
) ss.
COUNTY OF _____)

JENNIFER DIDERICKSEN
NOTARY PUBLIC
STATE OF COLORADO
NOTARY ID #20094024896
My Commission Expires August 8, 2017

The foregoing instrument was acknowledged before me on this 19th day of August, 2015 by [Signatures]

WITNESS my hand and office seal.
My commission expires 8-2017

[Signature]
Notary Public

STATE OF COLORADO

DEPARTMENT OF REVENUE



Marijuana Enforcement Division



Retail Marijuana Conditional License

EAST RIVER MANAGEMENT, LLC

GROWHOUSE GUNNISON

811 North Main Street, Gunnison, CO 81230

Retail Marijuana Store - 402R-00507

Effective Date of License: October 01, 2015

License Valid Through: 10/01/2016

This license is conditioned upon Local Authority approval, pursuant to section 12-43.4-304(1) C.R.S.

This conditional license is issued subject to the laws of the State of Colorado and especially under the provisions of Title 12, Article 43.4, as amended. A licensee shall not exercise any of the rights or privileges of this license until such time as all such Medical Marijuana and Medical Marijuana-Infused Product are fully transferred and declared in the MITS system as Retail Marijuana and Retail Marijuana Product, pursuant to Rule R211 & R309. This conditional license is nontransferable and shall be conspicuously posted in the place above described. This conditional license is only valid through the expiration date shown above. Any questions concerning this conditional license should be addressed to: Colorado Marijuana Enforcement Division, 455 Sherman Street, Suite 390, Denver, CO 80203. In testimony whereof, I have hereunto set my hand.

W. Lewis Koski

W. Lewis Koski
Division Director

Barbara J. Brohl
Barbara J. Brohl, Executive Director

STATE OF COLORADO

DEPARTMENT OF REVENUE
Marijuana Enforcement Division
455 Sherman Street Suite 390
Denver CO 80203



City of Gunnison Licensing Authority
P.O. Box 239
Gunnison, CO 81230

John J. Hickenlooper
Governor

Barbara J. Brohl
Executive Director

Ron Kammerzell
Senior Enforcement
Director

October 1, 2015

Re: Issuance of Colorado Retail Marijuana Conditional License

Attached is a copy of the Colorado Retail Marijuana Conditional License/s. This copy is for your records and the original was sent to the license applicant.

This license is "Conditioned" upon Local Licensing Authority approval and the license applicant is prohibited from operating without both State and Local approval pursuant to Title 12, Article 43.3, Section 305.

Please notify the Marijuana Enforcement Division upon the issuance of the local license by providing a copy of the local license to:

michelle.bauman@state.co.us (the preferred method) or you may mail it to:

Marijuana Enforcement Division
455 Sherman Street, Suite 390
Denver, CO 80203
Attention: Licensing

Respectfully,

A handwritten signature in black ink that reads "W. Lewis Koski".

W. Lewis Koski
Director