



City of Marina

City Manager's Office – City Hall
211 Hillcrest Avenue
Marina, CA 93933
P: 831.884.1278
www.cityofmarina.org

REQUEST TO AMEND AND COMBINE (PER MMC 19.08.010 C.1) COMMERCIAL CANNABIS APPLICATION

ORIGINAL BUSINESS INFORMATION

Provide information on the businesses that **originally** applied for a Commercial Cannabis Permit in the City of Marina.

ORIGINAL BUSINESS #1 LEGAL NAME: _____

DBA: _____

Proposed Address/Location: _____

ORIGINAL BUSINESS #2 LEGAL NAME: _____

DBA: _____

Proposed Address/Location: _____

NEW (COMBINED) BUSINESS INFORMATION

Provide information on the proposed new **combined** business.

NEW BUSINESS LEGAL NAME: _____

DBA: _____

Proposed Address/Location: _____

Phone: _____ Email: _____

24-Hour Contact Information: _____

BUSINESS STRUCTURE

Identify which sections from the original applications the applicants intend to be applicable to the new, combined business.
Select only **ONE** column per line item.

Application section	Original Business #1	Original Business #2
Business Plan	<input type="checkbox"/>	<input type="checkbox"/>
Local Enterprise & Community Benefits	<input type="checkbox"/>	<input type="checkbox"/>
Neighborhood Compatibility	<input type="checkbox"/>	<input type="checkbox"/>
Safety & Security Plan	<input type="checkbox"/>	<input type="checkbox"/>

ADDITIONAL INFORMATION REGARDING THE NEW COMBINED BUSINESS THAT YOU WOULD LIKE TO PROVIDE TO THE CITY REGARDING THE NEW (COMBINED) BUSINESS TO CONSIDER:

OWNERSHIP STRUCTURE

Describe the new business's ownership structure.

OWNER INFORMATION

Provide information on all owners, principals, and/or officers of the new business.

Name _____ Ownership Percentage _____

Title _____ Signature _____

Name _____ Ownership Percentage _____

Title _____ Signature _____

Name _____ Ownership Percentage _____

Title _____ Signature _____

Name _____ Ownership Percentage _____

Title _____ Signature _____

Name _____ Ownership Percentage _____

Title _____ Signature _____

Name _____ Ownership Percentage _____

Title _____ Signature _____

Name _____ Ownership Percentage _____

Title _____ Signature _____

Add more pages as necessary to accommodate all Commercial Cannabis Business Owners.