



CITY OF GEM LAKE
 Heritage Hall
 4200 Otter Lake Road | Gem Lake, MN 55110
 651-747-2790/92 | 651-747-2795 (fax)
 E-mail city@gemlakemn.org



Edible Cannabinoid Products License Application

Pursuant to City Ordinance No. 145, as it relates to the retail sale of edible cannabinoid products, no person may directly or indirectly or by means of any device keep for retail sale, sell at retail, offer to sell or otherwise dispose of any edible cannabinoid products at any place in Gem Lake without first having obtained a license from the City, issued in accordance with the City Code.

Instructions: Return completed application in person, by mail, or email, sent to the contact information listed at the top of this application, with the required documentation and applicable fees.

Required:

- Completed Background Check Authorization Form (page 2)
- Attach a cop of your driver's license
- Attach proof of workers' compensation insurance, pursuant to MN Statute, Section 176.182. Unless one of the following applies:
 - I have no employees
 - I am self-insured (include permit to self-insure)
 - I have no employees who are covered by workers' compensation law
- Attach applicable application fee as provided in the Fee Schedule, including the application, background fee, and license fee. Check made payable to the City of Gem Lake
- Attach a scaled site plan

Business Information

Name of Business: _____

Business Address: _____

Contact Person: _____ Business Phone: _____

MN Tax ID No.: _____ Federal Tax ID No.: _____

Owner(s) Information

Business Owner: _____

Residential Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____ Email: _____

Business Owner: _____

Residential Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____ Email: _____

Business Eligibility (check all that apply): The City shall only issue a license to sell edible cannabinoid products to an eligible business that qualifies to receive a license under the requirements of Ordinance No. 145. An eligible business has an active tobacco license to sell tobacco or tobacco products at retail or has an active on-sale or off-sale liquor license to sell intoxicating liquor. Which active license(s) does the business hold?

- Tobacco License Off-Sale Liquor License On-Sale Liquor License

City Ordinance Review (required)

I have reviewed and understand Ordinance No. 145 and will follow it in its entirety. I also understand that failure to comply with the ordinance may result in administrative penalties, suspension or revocation of the license.

Signature of Business Owner: _____ Date: _____



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Background Check Authorization

Unless otherwise indicated, the data in this application may be used to approve your license or permit. Upon approval of the license or permit, the information contained in this application shall be deemed public unless classified as private by state law. Private data is available to you and the City or State who need this information to perform their duties, but is not available to the public. You are not legally required to provide this data, but the City may not be able to approve your license or permit if you do not provide it. By signing below, you are acknowledging having reviewed Gem Lake Ordinance No. 145, as it relates to the retail sale of edible cannabinoid products, and have familiarized yourself with its provisions.

Minnesota Statute, section 270C, Subd. 4 requires all licensing authorities to require applicants to provide their social security number or individual taxpayer identification number and Minnesota business identification number, as applicable, and to provide that information to the Minnesota Department of Revenue upon request. Under the Minnesota Government Data Practices Act and the Federal Privacy Act of 1974, the City is required to advise you of the following regarding the use the information requested herein:

1. This information may be used to deny the issuance or renewal of your license in the event you owe Minnesota sales tax, employer’s withholding or motor vehicle excise taxes;
2. Upon receiving this information, the licensing authority will supply it only to the Minnesota Department of Revenue. However, under the Federal Exchange of Information Agreement, the Department of Revenue may supply this information to the Internal Revenue Service; and
3. Failure to supply this information may jeopardize or delay processing of your license or renewal.

I declare that the information I have provided on this application is truthful and I understand that falsification of answers or failure to provide the required data may result in denial of the application. I authorize the City of Gem Lake to investigate and make whatever inquiries necessary to verify accuracy of the information provided.

By signing below, I agree to this background check authorization and authorizes the White Bear Lake Police Department to request a copy of your consumer credit report for purpose of conducting a license background investigation.

Attach additional license verification forms for each owner.

Applicant Signature: _____

Social Security #: _____ Date of Birth: _____

Attach copy of driver’s license

Driver’s License Number: _____ State: _____

If applicant has no driver’s license, attach copy of government issued identification.

Please note: Background checks may take up to 30 days to complete. Once completed, the license determination is scheduled for consideration by the City Council, which can take an additional two weeks based on the City Council meeting schedule. City Council meetings are scheduled at 7 p.m. on the third Tuesday of every month.