



City of Gardiner
Planning Board Review Application

Project Name: Green ReLeaf Adult Use Cultivation Project Cost: \$60,000-\$100,000

Date of submission: _____ Received by: _____ Fees: _____

A complete written description of the proposed project including all other local, state and federal permits required for the project.

Robert Wheelock Jr. is looking to use part of the proposed space of 333 Brunswick Ave for an Adult Use Cultivation Grow that will be in compliance with the Office of Marijuana Policy. He will be looking to upgrade the current electrical situation as well as, build walls for separate rooms for the grow. He will also be blocking off the door that connects the proposed space to his current Medical Marijuana Cultivation so that they will have separate access points. There will also be a kitchen built within the next 3 years.

Anticipated beginning/completion dates of construction: Aug or Sept / 6 to 12 months after start

1. General Information: (6.3.2)

Name of Property Owner: Robert E. Wheelock Jr.

Address: 105 Tiffany Road, Sidney, Maine 04330

Phone/Fax No: 207-215-5782

Applicant/Agent Name: Robert E. Wheelock Jr.

Address: 105 Tiffany Road, Sidney, Maine 04330

Phone/Fax No 207-215-5782

Design Professional(s)/Contractor(s): Surveyor Engineer Architect Contractor

Name: _____

Address: _____

Phone/Fax No _____

Name: _____

Address: _____

Phone/Fax No _____

Name: _____

Address: _____

Phone/Fax No _____

Signature: *Robert E. Wheelock Jr.* Date: 6/15/21

2. Property Information: (6.3.2)

- * Property Location: 333 Brunswick Ave City Tax Map(s) 29 Lot(s) 1
- * Deed Ref: Book _____ Page _____ Zoning District(s): HDR (High Density Residential)
- * Copy of the tax map showing the property and surrounding location.
- * Verification of the applicant's right, title, and interest in the property.

3. Development Information: (6.3.2.7)

One or more site maps drawn to scale showing the following:

- a.) The existing conditions on the property including: (6.3.2.7.1)
1. The property boundaries;
 2. The zoning district and zoning district boundaries if the property is located in more than one zone;
 3. The location of required setbacks, buffers and other restrictions;
 4. The location of any easements or rights-of-way;
 5. The locations of existing structures and other existing improvements on the property including a description of the current use of the property;
 6. The locations of existing utilities on and adjacent to the property including sewers, water mains, stormwater facilities, gas mains, and electric and other telecommunication facilities;
 7. The location of the nearest source of a fire protection water supply (hydrant, fire pond, etc.)
 8. The general topography of the property indicating the general slope of the land and drainage patterns. The CEO and/or Planning Board may require a topographic survey of all or a portion of the property for projects involving the construction of new or expanded structures or site modifications.
 9. The location, type and extent of any natural resources on the property including wetlands, vernal pools, floodplains, waterbodies, significant wildlife habitats, rare or endangered plants or animals, or similar resources; and
 10. The location and type of any identified historic or archeological resource on the property.
- b.) The proposed development activity for which approval is requested including: (6.3.2.7.2)
1. The estimated demand for water supply and sewage disposal together with the proposed location and provisions for water supply and wastewater disposal including evidence of soil suitability if on-site sewage disposal is proposed;
 2. The direction of proposed surface water drainage across the site and from the site together with the proposed location of all stormwater facilities and evidence of their adequacy;
 3. The location, dimensions, and ground floor elevations of all proposed buildings and structures including expansions or modifications to existing buildings that change the footprint of the building;

4. The location, dimensions and materials to be used in the construction of drives, parking areas, sidewalks and similar facilities;
5. The proposed flow of vehicular and pedestrian traffic into and through the property;
6. The location and details for any signs proposed to be install or altered;
7. The location and details for any exterior lighting proposed to be installed or altered;
8. Provisions for landscaping and buffering; and
9. Any other information necessary to demonstrate compliance with the review criteria or other standards of the Land Use Ordinance.

c.) Evidence that the applicant has or can obtain all required permits necessary for the proposal. (6.3.2.8)

Additional Information Required: (6.3.3)

Building and structure drawings showing the footprint, height, front, side and rear profiles and all design features necessary to show compliance with this Ordinance;

An estimate of the peak hour and average daily traffic to be generated by the project and evidence that the additional traffic can be safely accommodated on the adjacent streets;

An erosion and sedimentation control plan; and

A stormwater management plan demonstrating how any increased runoff from the site will be handled if the project requires a stormwater permit from the Maine Department of Environmental Protection or if the Planning Board determines that such information is necessary based on the scale of the project and the existing conditions in the vicinity of the project. (6.3.3.4)

Survey Requirements (6.3.5)

The Code Enforcement Officer or the Planning Board may require the applicant to submit a survey of the perimeter of the tract, giving complete descriptive data by bearing and distances, made and certified by a Registered Land Surveyor. The survey may be required for the construction of new structures or any construction proposed on a undeveloped parcel or tract of land, whenever the Code Enforcement Officer or the Planning Board finds that a survey is necessary to show compliance with the requirements of this Ordinance due to the size of the lot, location of the lot or the placement of existing or proposed structures on the lot or neighboring properties.

Additional Studies (6.3.6)

The Code Enforcement Officer or the Planning Board may require the applicant to perform additional studies or may hire a consultant to review the application or portions thereof. The cost to perform additional studies or hire a consultant shall be borne by the applicant.

4. Review Criteria (6.5.1)

An applicant shall demonstrate that the proposed use or uses meet the review criteria listed below for the type of application. The Code Enforcement Officer and/or the Planning Board shall approve an application unless one or the other of them makes a written finding that one or more of the following criteria have not been met.

6.5.1.1 The application is complete and the review fee has been paid.

Yes.

6.5.1.2 The proposal conforms to all the applicable provisions of this Ordinance.

This proposal conforms to all the applicable provision of this Ordinance, as is being done currently for the medicinal grow..

6.5.1.3 The proposed activity will not result in water pollution, erosion or sedimentation to water bodies.

This proposal will not result in any water pollution, erosion, or sedimentation to water bodies.

6.5.1.4 The proposal will provide for the adequate disposal of all wastewater and solid waste.

This proposal will provide adequate disposal of all wastewater and solid waste as is being done currently for the medicinal grow.

6.5.1.5 The proposal will not have an adverse impact upon wildlife habitat, unique natural areas, shoreline access or visual quality, scenic areas and archeological and historic resources.

This proposal will not impact any habitats as there is no exterior change.

6.5.1.6 The proposal will not have an adverse impact upon waterbodies and wetlands.

This proposal will not have an adverse impact on waterbodies or wetlands as no exterior changes are being made

6.5.1.7 The proposal will provide for adequate storm water management.

This proposal will provide adequate storm water management, as is being done currently for the medicinal grow.

6.5.1.8 The proposal will conform to all applicable Shoreland Zoning requirements.

This proposal will conform to all applicable Shoreland Zoning requirements, as is being done currently for the medicinal grow.

6.5.1.9 The proposal will conform to all applicable Floodplain Management requirements.
The floodplain criteria will meet all applicable floodplain management requirements.

6.5.1.10 The proposal will have sufficient water available to meet the needs of the development.
The proposal will have sufficient water for both the needs of the development and the expanded cultivation needs.

6.5.1.11 The proposal will not adversely affect groundwater quality or quantity.
This proposal will not affect the groundwater quality or quantity.

6.5.1.12 The proposal will provide for safe and adequate vehicle and pedestrian circulation in the development.
The proposal will use the current vehicle and pedestrian circulation for the development which is currently considered safe and adequate.

6.5.1.13 The proposal will not result in a reduction of the quality of any municipal service due to an inability to serve the needs of the development.
This proposal will have no result in a reduction of the quality of any municipal service due to an inability to serve the needs of the development.

6.5.1.14 The applicant has the adequate financial and technical capacity to meet the provisions of this Ordinance.
Yes, Robert Wheelock Jr. has adequate financial and technical capacity to meet the provisions of this Ordinance.

Development Information

A.)

1. See additional documents.
2. See additional documents.
3. This location is currently used for Medicinal Marijuana Cultivation.
4. See additional documents.
5. There is an existing building that is being partially used as a Medicinal Marijuana Cultivation, the new Adult Use Cultivation will be put in the unused portion of the building once interior construction has finished.
6. The electric will be upgraded to compensate for the additional power needed.
7. There is a sprinkler system throughout the building.
8. The building is located on a generally flat piece of property with no anticipated modifications to the exterior.
9. N/A
10. N/A

B.)

1. The estimated demand for water supply and sewage disposal will be average for the development of this proposal, with an overall increase to demand (due to normal cultivation activities) once completed. There is no On-Site sewage disposal planned at this time.
2. There will be minimal modifications to the current exterior drainage situation.
3. There will be no modifications to the exterior.
4. N/A
5. There will be no major modifications to the current flow of traffic (both vehicular and pedestrian).
6. There will be no exterior signage.
7. There are existing exterior lights.
8. N/A
9. There will be no major modifications made to the exterior of the building.

C.)

See additional documents.

Receipt Search Report

Actual Trans Date	Trans Time	Receipt	Type	Teller	Name	Ref/Acct	Amount
06/28/2021	14:25:42	16071	020	KLC	green releaf llc	029001	125.00
Total:							125.00
Cash:							0.00
Check:							125.00
Credit:							0.00

Matthew Dunlop's Photography Studio


LICENSE

1 WHELOCK
2 ROBERT E JR
6 105 TIFFANY RD
SIDNEY, ME 04380


4a ISSUED 01/10/2019 4b EXPIRES 12/21/2021

15 GENDER 16 HEIGHT 17 WEIGHT 18 EYES 19 HAIR
M 5' 10" 210 BLU BRN

9 CLASS C 9a ENDS 12 REGT



Bobby Wheelock

 Maine Medical Use Of Marijuana

Date Issued: 05/13/2020
Expires: 05/12/2021

Individual Caregiver
ROBERT E. WHELOCK JR
DO
No Retail Location Provided

Registration #: CGR25761 Control #: 463644
Authorized for: Plant Canopy-500 square feet

Updated CGR Card
in Mail
Issued

Final-Recipient: rfc822; bweelockjr@gmail.com

Action: failed

Status: 5.1.1

Diagnostic-Code: smtp; 550-5.1.1 The email account that you tried to reach does not exist. Please try

550-5.1.1 double-checking the recipient's email address for typos or

550-5.1.1 unnecessary spaces. Learn more at

550 5.1.1 [https://support.google.com/mail/?p=NoSuchUser:m123sor1577952wme.13 - gsmtp](https://support.google.com/mail/?p=NoSuchUser:m123sor1577952wme.13-gsmtp)

Last-Attempt-Date: Tue, 15 Jun 2021 06:46:24 -0700 (PDT)

----- Forwarded message -----

From: Katrina Duffin <kittums92@gmail.com>

To: "Randall, Christina" <Christina.randall@maine.gov>

Cc: bweelockjr@gmail.com, Edward DuGay <harvestconsultingmaine@gmail.com>

Bcc:

Date: Tue, 15 Jun 2021 09:46:12 -0400

Subject: Status of Pending Adult Use Card IIC1650

Good Morning Christina,

I am writing to check on the status of an individual Adult Use card of Robert E. Wheelock Jr with the pending license number of:

IIC1650

I know that the application was submitted last Fall but the client hadn't gotten fingerprinted. They recently have and I just wanted to double-check that everything else for this application has been taken care of. I hope you have a lovely day!

--

Sincerely,
Katrina C. Duffin
Vice President



Hallowell 4Twenty LLC
Harvest Consulting LLC

Katrina Duffin <kittums92@gmail.com>

To: "Randall, Christina" <Christina.randall@maine.gov>

Cc: Edward DuGay <harvestconsultingmaine@gmail.com>, bwheelockjr@gmail.com

Tue, Jun 15, 2021 at 9:49 AM

Good Morning Christina,

I apologize, I had attached the incorrect email for the client in the previous email but have corrected it. I appreciate your assistance with this matter.

Thanks,
Katrina

[Quoted text hidden]

Randall, Christina <Christina.Randall@maine.gov>

To: Katrina Duffin <kittums92@gmail.com>

Cc: Edward DuGay <harvestconsultingmaine@gmail.com>, "bwheelockjr@gmail.com" <bwheelockjr@gmail.com>

Tue, Jun 15, 2021 at 1:22 PM

IIC1650 was issued on 06/10/2021.

Kind Regards/

Christina Randall

Chief Licensing Investigator | Office of Marijuana Policy

Maine Department of Administrative and Financial Services

#162 State House Station | Augusta, ME 04330-0162

Tel: (207) 624-7520 | Fax: (207) 287-2671 | Cell: (207) 530-2228



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From: Katrina Duffin <kittums92@gmail.com>
Sent: Tuesday, June 15, 2021 9:49 AM
To: Randall, Christina <Christina.Randall@maine.gov>
Cc: Edward DuGay <harvestconsultingmaine@gmail.com>; bwheelockjr@gmail.com
Subject: Re: Status of Pending Adult Use Card IIC1650

EXTERNAL: This email originated from outside of the State of Maine Mail System. Do not click links or open attachments unless you recognize the sender and know the content is safe.

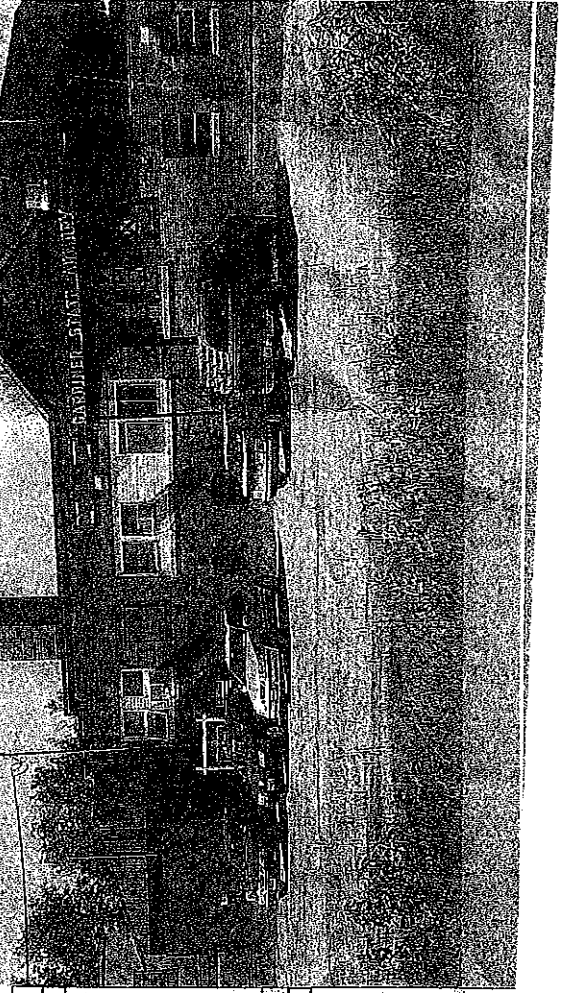
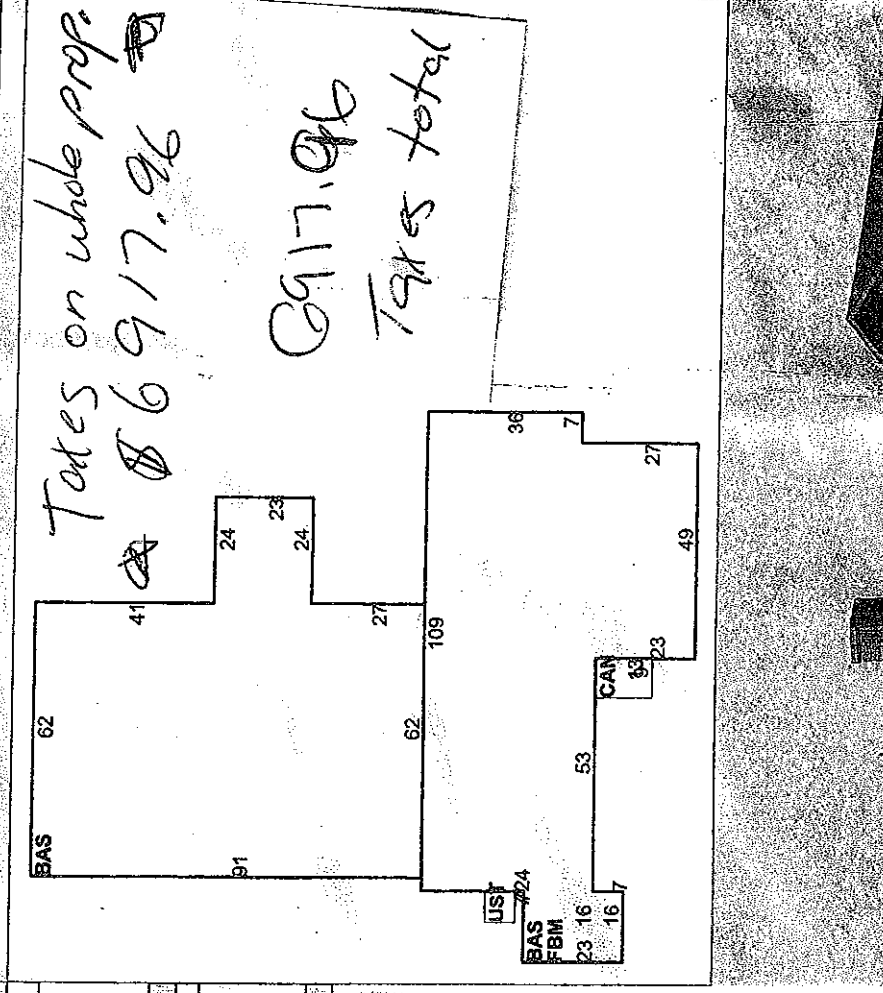
[Quoted text hidden]

Katrina Duffin <kittums92@gmail.com> Tue, Jun 15, 2021 at 1:24 PM
To: "Randall, Christina" <Christina.Randall@maine.gov>
Cc: Edward DuGay <harvestconsultingmaine@gmail.com>, "bwheelockjr@gmail.com" <bwheelockjr@gmail.com>

Thank you so much for the assistance. I hope you have a lovely day.

Thanks,
Katrina

[Quoted text hidden]



CONSTRUCTION DETAIL		CONSTRUCTION DETAIL (CONTINUED)	
Element	Ch.	Element	Description
Warehouse			
Commercial Average			
MIXED USE			
Code	Description	Percentage	
3222	COMM BLDG	100	
COST/MARKET VALUATION			
Adj. Base Rate:		27.41	
Replace Cost		442,343	
AYB		1960	
EYB		1985	
Dep Code			
Remodel Rating			
Year Remodeled			
Dep %		46	
Functional Obslnc		15	
External Obslnc			
Cost Trend Factor			
Condition		UC	
% Complete		39	
Overall % Cond		39	
Apprais Val		172,500	
Dep % Ovr			
Dep Ovr Comment			
Misc Imp Ovr			
Misc Imp Ovr Comment			
Cost to Cure Ovr			
Cost to Cure Ovr Comment			

OB-BUILDING & YARD ITEMS(L) / XF-BUILDING EXTRA FEATURES(B)											
Code	Description	Sub	Sub Description	L/B Units	Unit Price	Yr	Gde	Dp Rr	Cnd	%Cnd	Apr Value
SHD1	SHED FRAME			91	9.00	2008				50	400
FNS3	FENCE-6' CHA			860	16.00	2008				50	6,900
BUILDING SUB-AREA SUMMARY SECTION											
Code	Description	Living Area	Gross Area	Eff. Area	Unit Cost	Undeprac. Value					
BAS	First Floor	12,021	12,021	12,021		329,496					
CAN	Canopy	0	117	23		630					
FBM	Basement, Finished	0	5,827	4,079		111,805					
UST	Utility, Storage, Unfinished	0	49	15		411					

3510 GARDINER, ME

VISION

CURRENT ASSESSMENT

Description	Code	Appraised Value	Assessed Value
COMMERC. COM LAND	3222	253,500	253,500
COMMERC.	3222	58,000	58,000
COMMERC.	3222	7,300	7,300
Total		318,800	318,800

PREVIOUS ASSESSMENTS (HISTORY)

Yr.	Code	Assessed Value	Yr.	Code	Assessed Value
2019	3222	253,500	2017	3222	253,500
2019	3222	58,000	2017	3222	58,000
2019	3222	7,300	2017	3222	7,300
Total		318,800	Total		318,800

LOCATION

1 Paved
2 Suburban

UTILITIES

1 Level
2 Public Water
3 Public Sewer

STREET/ROAD

SALE PRICE

1E 238,000
0 IN

RECORD OF OWNERSHIP

12132/201
1324/369

EXEMPTIONS

0001/A

OTHER ASSESSMENTS

Amount Number

ASSESSING NEIGHBORHOOD

FORMER GARDINER STATE ARMORY IA

NOTES

Tracing

APPRaised VALUE SUMMARY

Appraised Bldg. Value (Card) 172,500
 Appraised XF (B) Value (Bldg) 0
 Appraised OB (L) Value (Bldg) 7,300
 Appraised Land Value (Bldg) 58,000
 Special Land Value 0
 Total Appraised Parcel Value 318,800

Valuation Method: Exemptions
 Adjustment: 0

BUILDING PERMIT RECORD

Permit ID	Issue Date	Type	Description	Amount	Insp. Date	% Comp.	Date Comp.	Comments
	05/03/2017							
	03/30/2016	CL	26 Building Permit Visit					
	01/26/2016	CL	43 Assessor Review					
	05/26/2009	CL	15 Assessor Review					
	09/04/2007	RS	07 Building Permit Inspection Measure/info at Door					

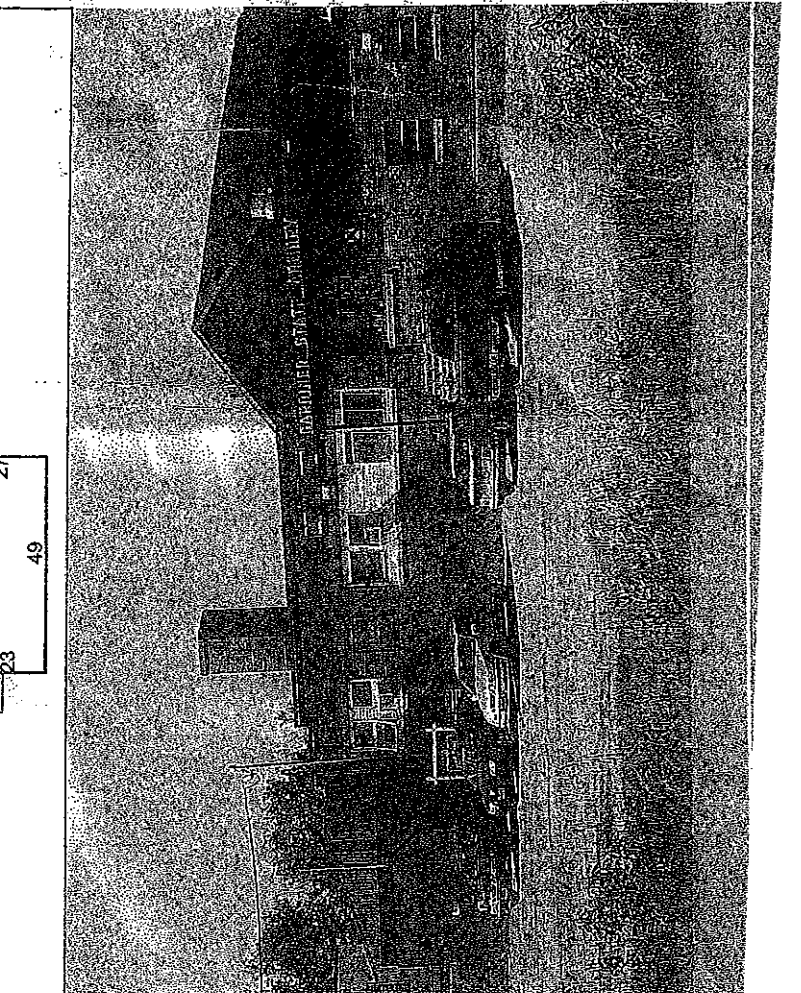
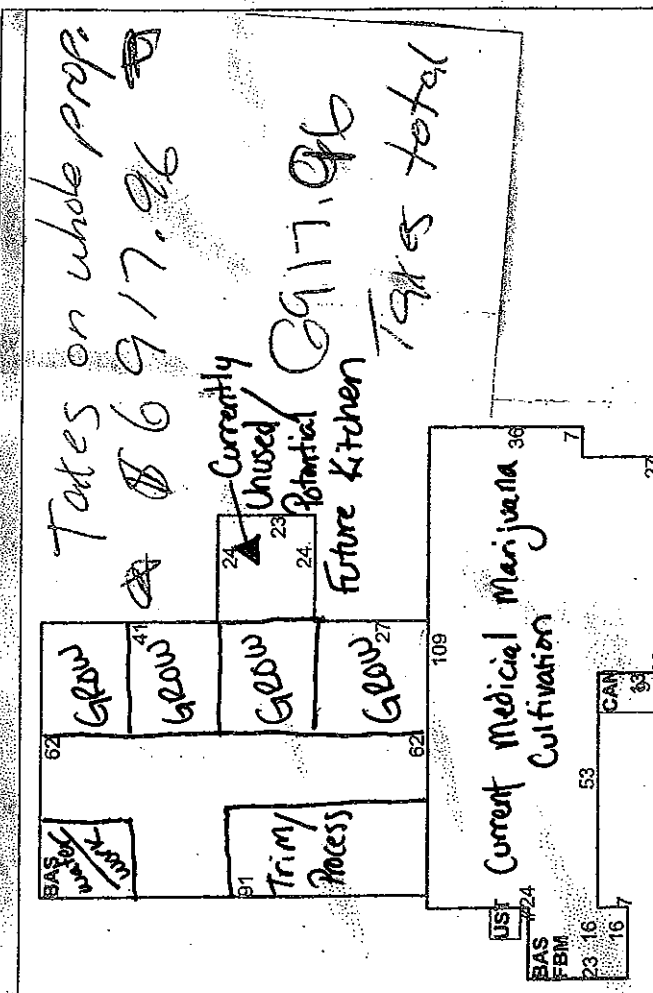
LAND LINE VALUATION SECTION

Use Code	Use Description	Zone	D	Front Depth	Units	Unit Price	I. Factor	S.A. Disc	Acres	C. Factor	ST. Tax	Adj.	Notes-Adj.	Special Pricing	S. Adj. Fac	Adj. Unit Price	Land Value
1	3222 COMM BLDG	18			43,560 SF	1,08	1.1500	F 1.0000	1.0000	1.00	0.00	0.00			1.00	1.24	54,100
1	3222 COMM BLDG				1.40 AC	2,250.00	1.0000	0 1.0000	1.0000	1.00	20	1.25			1.00	2,812.50	3,900
Total Card Land Units: 2.40 AC Parcel Total Land Area: 2.4 AC															Total Land Value: 58,000		

NET Total Appraised Parcel Value 318,800

VISIT/CHANGE HISTORY

Date	Type	IS	ID	CD	Purpose/Result
05/03/2017				26	Building Permit Visit
03/30/2016				43	Assessor Review
01/26/2016				15	Assessor Review
05/26/2009				07	Building Permit Inspection Measure/info at Door



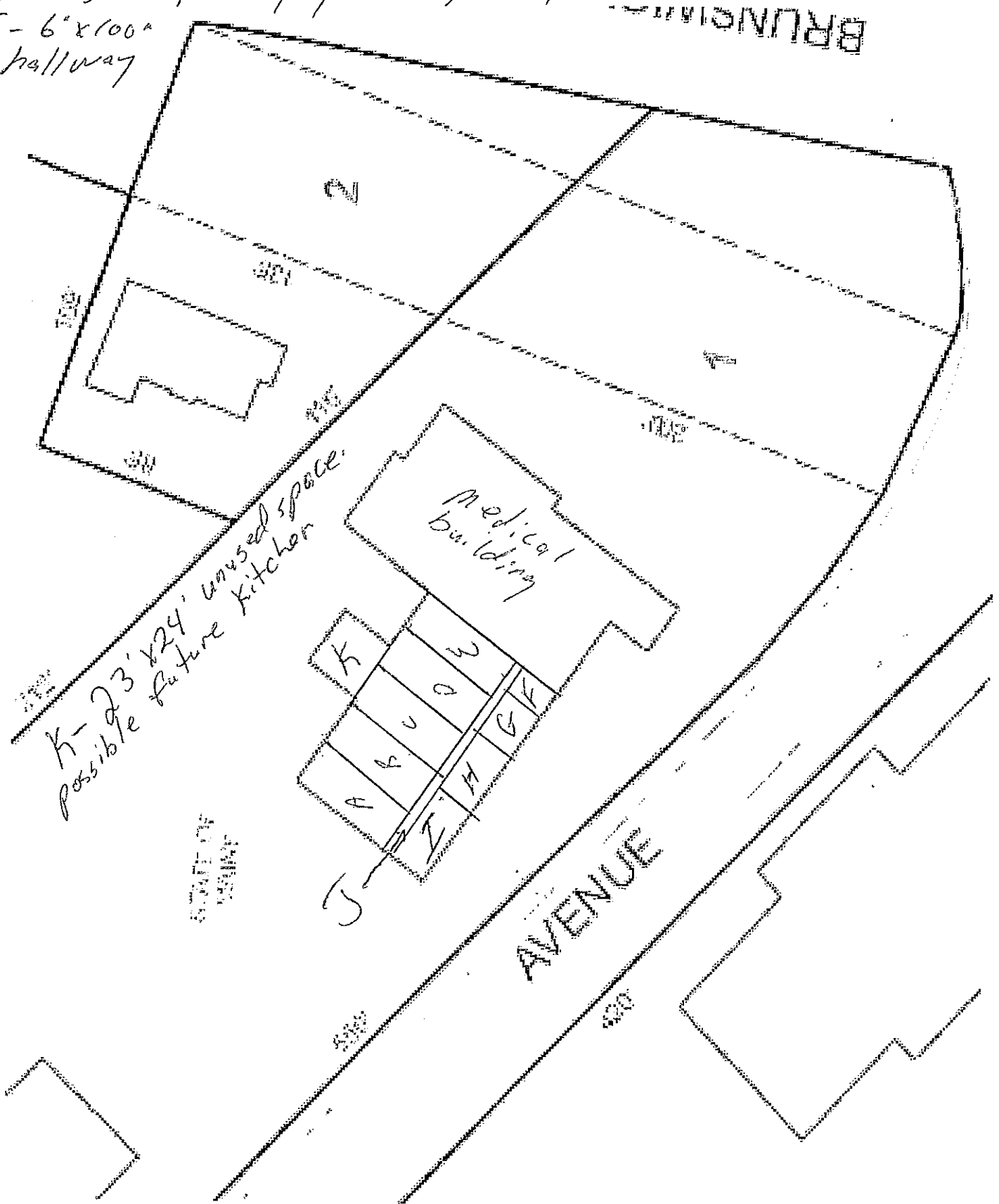
Element	Cd.	Ch.	Description	Element	Cd.	Ch.	Description
Warehouse Commercial Average	48	94					
Brick/Masonry	03	03					
Gable/Hip	03	03					
Asph/F Gls/Cmp	03	03					
Drywall	05	05					
Tile Vyn Cmp	05	05					
Oil	02	02					
Hot Water	05	05					
None	01	01					
COMM BLDG	3222	3222					
None	00	00					
Masonry	03	03					
Average	02	02					
Susp Ceil & WL	05	05					
Average	02	02					
Wall Height	14	14					
% Conn Wall							

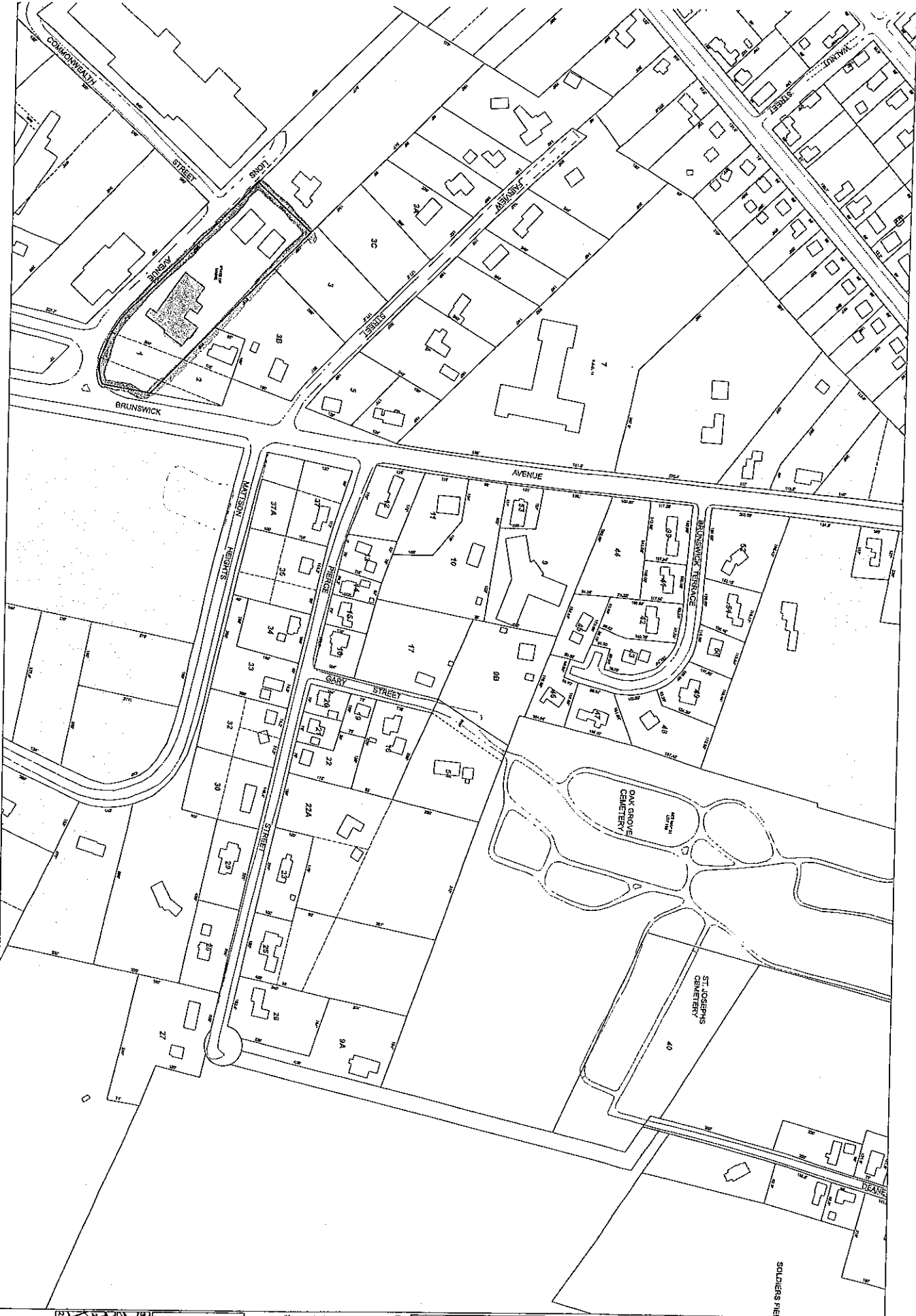
OB-OUTBUILDING & YARD ITEMS (E) / XF-BUILDING EXTRA FEATURES (E)														
Code	Description	Sub	Sub Description	L/B	Units	Unit Price	Yr	Gale	Dp	Ri	Chd	% Chd	Apr	Value
SHD1	SHED FRAME			L	91	9.00	2008	0	0	0	0	50	400	
FN3	FENCE-6' CHA			L	860	16.00	2008	0	0	0	0	50	5,900	

BUILDING SUB-AREA SUMMARY SECTION					
Code	Description	Living Area	Gross Area	Unit Cost	Undeprc. Value
BAS	First Floor	12,021	12,021	12,021	329,496
CAN	Canopy	0	117	23	630
FEM	Basement, Finished	0	5,827	4,079	111,805
UST	Utility, Storage, Unfinished	0	49	15	411

Adj. Base Rate: 27.41
 Replace Cost: 442,343
 AYB: 1960
 EYB: 1985
 Dep Code: R
 Remodl Rating: R
 Year Remodiced: R
 Dep %: 46
 Functional Obslnc: 15
 External Obslnc: 15
 Cost Trend Factor: 1
 Condition: UC
 % Complete: 39
 Overall % Cond: 39
 Apprais Val: 172,500
 Dep % Ovr: 0
 Dep Ovr Comment: 0
 Misc Imp Ovr: 0
 Misc Imp Ovr Comment: 0
 Cost to Cure Ovr: 0
 Cost to Cure Ovr Comment: 0

- A, B, C, D, E - are @ 20' x 40' grow rooms
- F - is 14' x 20' water room, nutrient storage
- G - 20' x 14' break room, fridge, lunch breaks ect.
- H - 30' x 14' trimming room, harvest room
- I - 30' x 14' Drying room/curing room
- J - 6' x 100' hallway





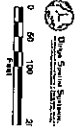
CITY OF GARDINER
KENNEBEC CO.
MAINE



LEGEND

- Lot/Block
- Private right of Way
- Street Line
- Transition Line R/O
- River, Stream or Pond
- Railroad
- Road
- Town Line
- Building
- Parcel

For Assessment Purposes, it is to be used for correspondence



Map 29
Parcel: 24009
Edition: 04/2018



Robert Wheelock Jr.
333 Brunswick Avenue
Gardiner Maine, 04345

June 16, 2021

Dear Robert,

Based on the request and information provided by Katrina Duffin, and on behalf of Green ReLeaf for the expansion of medical marijuana cultivation to include "Adult Use" cultivation located at 333 Brunswick Avenue, the Public Works Department does not anticipate any safety concerns or negative impacts. If any information you provided were to change, I would ask that you inform us of those changes.

Thank You,

Jerry Douglass
Public Works Director
Phone: 582-4408

Department of Public Works
6 Church Street | Gardiner, ME 04345
207-582-4800 | 207-582-6895 (fax) | jdouglass@gardinermaine.com
www.GardinerMaine.com



GARDINER WATER DISTRICT

P.O. Box 536 • Gardiner, Maine 04345 • (207) 582-5500 • Fax (207) 582-3093

June 15, 2021

Robert Wheelock
Hallowell 4Twenty
333 Brunswick Ave
Gardiner Me. 04345

Dear Mr. Wheelock,

Concerning your proposed expansion of your medical marijuana cultivation facility that will include recreational cultivation, this expansion will have no negative impact on operations of the Gardiner Water District. Please contact me if I can be of further assistance.

Sincerely,


Paul Gray Supt. GWD



June 15, 2021

Town of Gardiner Maine

RE: Green Releaf LLC
Loan: 125383397

To Whom It May Concern:

This member had an account at cPort Credit Union and it is in good standing. The account was opened on 9/14/2020 and there have been no overdrafts.

Please let me know if you have any questions.

Sincerely,

A handwritten signature in black ink that reads 'Theresa L. Bliss'.

Theresa L. Bliss
Senior Member Service Representative



June 15, 2021

Planning Board
City of Gardiner
6 Church Street
Gardiner, ME 04345

Dear Planning Board,

RE: Robert Wheelock, Jr
Aka: Green ReLeaf

Based on the information provided for Green ReLeaf in regards to the expansion of medical marijuana cultivation to include "Adult Use" cultivation located at 333 Brunswick Avenue, the Wastewater Treatment Plant does not have any concerns at this time. If any information provided were to change, I would ask that we be informed of those changes.

Best regards,

Douglas E. Clark
Wastewater Director
City of Gardiner, Maine



GARDINER POLICE DEPARTMENT



Chief James M. Toman

June 16, 2021

CEO Kris McNeill
Gardiner Planning Board
Office of Economic and Community Development

Mr. Robert E. Wheelock Jr.
Harvest Consulting LLC
333 Brunswick Avenue
Gardiner, Maine 04345

Per review criteria 6.5.1.13- Based upon information provided, this business appears to have appropriate operational and safety and security measures in place to operate in the City of Gardiner. Accordingly, it is my belief that the Gardiner Police Department will have the ability to respond safely and effectively to any emergency or criminal activity that may occur at the business location. This business may result in some calls for police services, however, it is not anticipated that these calls will have an impact on the overall services that the Gardiner Police Department delivers.

Sincerely,

Chief James M. Toman
Gardiner Police Department
City of Gardiner



MAINE

Department of the Secretary of State
Bureau of Corporations, Elections and Commissions

Corporate Name Search

Information Summary

Subscriber activity report

This record contains information from the CEC database and is accurate as of: Tue Jun 15 2021 10:18:30. Please print or save for your records.

Legal Name	Charter Number	Filing Type	Status
GREEN RELEAF, LLC	20174765DC	LIMITED LIABILITY COMPANY (DOMESTIC)	GOOD STANDING

Filing Date	Expiration Date	Jurisdiction
03/30/2017	N/A	MAINE

Other Names (A=Assumed ; F=Former)

CAPITAL CITY CANNABIS A

Clerk/Registered Agent

MARY A. DENISON
PO BOX 67
WINTHROP, ME 04364

[Back to previous screen](#)

[New Search](#)

Click on a link to obtain additional information.

List of Filings

[View list of filings](#)

Obtain additional information:

Additional Addresses

[Plain Copy](#)

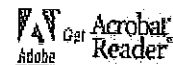
[Certified copy](#)

Certificate of Existence [\(more info\)](#)

[Short Form without
amendments
\(\\$30.00\)](#)

[Long Form with
amendments
\(\\$30.00\)](#)

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If you encounter technical difficulties while using these services, please contact the [Webmaster](#). If you are unable to find the information you need through the resources provided on this web site, please contact the Bureau's Reporting and Information Section at 207-624-7752 or [e-mail](#) or visit our [Feedback](#) page.

BK13541 PGS 177 - 180 05/01/2020 09:38:00 AM
INSTR# 2020008891 ATTEST: BEVERLY BUSTIN-HATHEWAY
RECEIVED KENNEBEC SS REGISTER OF DEEDS
eRecorded Document

MORTGAGE DEED

That, **333 ENTERPRISES, LLC**, a Maine limited liability company of Sidney, Maine in consideration of **170,000.00** Dollars

paid by **ROBERT E. WHEELOCK, SR.** of Augusta, Maine whose mailing address is 899 West River Road, Augusta, ME 04330, the receipt whereof we do hereby acknowledge, do hereby give, grant, bargain, sell and convey, unto the said **ROBERT E. WHEELOCK, SR.**, his heirs and assigns, forever

A certain lot or parcel of land situated on the westerly side of Brunswick Avenue so called, in the City of Gardiner, County of Kennebec, State of Maine and being bounded and described as follows.

Beginning at a point on the westerly side of Brunswick Avenue at the southerly corner of the land Families Matter, Inc. received by deed dated April 14, 2016 as recorded at the Kennebec County Registry of Deeds in Book 12266, Page 286.

Thence S22°-14'-58"W along said Brunswick Avenue running parallel to and maintaining 85.00 feet from the baseline of said road, a distance of 137 feet more or less to a point opposite of and right angles to baseline station 1151+75.

Thence N67°-45'-02"W, a distance of 67 feet more or less to the centerline of the former location of said Brunswick Avenue.

Thence N67°-45'-02"W, a distance of 33 feet more or less to the westerly line of the former location of said Brunswick Avenue.

Thence S24°-52'-01"W along said Old Brunswick Avenue, a distance of 16 feet more or less to a point located at the intersection of Lions Avenue

Thence N31°-35'-49"W along said Lions Avenue, a distance of 275.00 feet to a point. Said point being located S31°-35'-49"E, a distance of 275.00 feet from the most southerly corner of land the Gardiner/Augusta Lions Club received by deed dated April 23, 2015 as recorded at said Registry of Deeds in Book 11962, Page 245.

Thence N57°-06'-47"E along the remaining land of the grantor, a distance of 179 feet to a point located at the southwesterly line of land Bruce H. and Mary Jane E. Thomas received by deed dated October 16, 2012 as recorded at said Registry of Deeds in Book 11200, Page 344.

Thence S32°-36'-34"E along the land of said Thomas, the land of said Family Matters, Inc, a distance of 180.00 feet to a point on the westerly line of the former location of said Brunswick Avenue.

Thence S32°-36'-34"E along the land of said Family Matters, Inc, a distance of 36 feet more or less to point at the centerline of the former location of said Brunswick Avenue.

Thence S32°-36'-34"E along the land of said Family Matters, Inc, a distance of 54 feet more or less to the point of beginning.

The above-described parcel contains 1.27 acres more or less.

The above-described bearings are based on the survey referenced below.

This description is based solely on the survey reference below.

Being a portion of the land Capital Area Properties LLC received by deed dated October 14, 2015 as recorded at the Kennebec County Registry of Deeds in Book 12132, Page 201.

Reference is made to a Boundary Survey Sketch for the State of Maine by Robert J. Bills, PLS #1248, Dated July 21, 2008.

The obligation secured by this mortgage is due and payable on any assumption of this obligation or upon sale, transfer or conveyance of all or a portion of the above described premises, whether accomplished by deed, installment sales contract or bond for deed, without written approval of Mortgagee(s).

To have and to hold the aforesaid and bargained premises, with all the privileges and appurtenances thereof, to the said **ROBERT E. WHEELOCK, SR.**, his heirs and assigns, to him and his use forever.

PROMISSORY NOTE

\$296,329.61

April 29, 2020
Gardiner, Maine

FOR VALUE RECEIVED, the undersigned, 333 Enterprises, LLC. (hereinafter referred to as "Maker") promise to pay to Robert F. Wheelock, Sr. of Augusta, Maine or order, (hereinafter referred to as "Holder") the sum of \$296,329.61, payable in 120 equal consecutive monthly installments with the first payment due on June 1, 2020, and subsequent payments due on the 1st day of each month, said payments to be applied first to interest and then to principal, and all of said sum to be paid in a balloon payment 3 years from this date, with interest thereon, or on such part thereof, as shall from time to time remain unpaid, at the rate of six percent (6%) per annum, payable monthly.

A late charge of 5% shall be payable upon failure to make any required payment within fifteen (15) days of the due date. Any payment not made within thirty (30) days of the due date shall constitute a default at the option of Holder.

It shall also be a default if Maker fail to perform any of its obligations contained in the mortgage instrument securing this Promissory Note; upon any assignment by Maker for the benefit of creditors; or upon filing of a voluntary petition by Maker or involuntary petition against Maker under any provisions of the Federal Bankruptcy Code, on any assumption of this obligation or upon sale, transfer or conveyance, whether accomplished by deed, installment sales contract or bond for deed, concerning all or a portion of premises mortgaged without written approval of said Holder.

Upon default, Holder shall be entitled to accelerate all payments due under this Note, and shall be entitled to payment of any costs of collection, including reasonable attorneys' fees incurred in connection therewith.

Maker shall have the privilege of prepaying part or all of the amounts due under this Promissory Note without penalty. Any partial prepayment shall not reduce the monthly payment set forth above.

Maker and all other parties liable hereon, whether principal, guarantor, endorser or otherwise, hereby severally waive presentment, demand, notice and protest, and waive all recourse to suretyship and guarantorship defenses generally, including, but not limited to, any extensions of time for payment or performance which may be granted to Maker or to any other party, any modifications or amendments to this Promissory Note, any act or omission to act by or on behalf of the Holder hereof, any acceptance of a late payment or a series of late payments by Holder, any release, disposition or substitution of security, and all other indulgences of any type which may be granted by the Holder hereof to Maker or any other party liable herefor.

Maker and all other parties liable hereon also agree to pay all costs and expenses of any nature, whether incurred in or out of court, and whether incurred before or after this Promissory Note

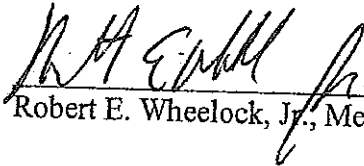
shall become due at its maturity date, whether before or after declaration of default, including, but not limited to, reasonable attorneys' fees and costs, which the Holder hereof may deem necessary or proper in connection with the collection or satisfaction of the indebtedness evidenced hereby, or realization upon any collateral security herefor.

If any obligation or portion of this Promissory Note is determined to be invalid or unenforceable under law, it shall not affect the validity or enforceability of the remaining obligations or portions hereof. This Promissory Note shall be construed in all respects in accordance with, and shall be governed by, the laws of the State of Maine.

This Note is secured by a first mortgage on property at 333 Brunswick Avenue, Maine.

Signed as an instrument under seal.


Witness


Robert E. Wheelock, Jr., Member

State of Maine
County of Kennebec

April 29, 2020

Personally appeared the above named Robert E. Wheelock, Jr. and acknowledged the foregoing to be his free act and deed and his free act and deed in his said capacity.


Notary Public

MARY A. DENISON
NOTARY PUBLIC
AS ATTORNEY AT LAW
4 M.R.S.A. § 1056
MY COMMISSION DOES NOT EXPIRE

**MAINE ADULT USE MARIJUANA PROGRAM****162 STATE HOUSE STATION, 19 UNION STREET, AUGUSTA, ME 04333-0162, FIRST FLOOR**Transaction Type: **Apply for a Cultivation Facility, Tier 3 License** | License: **ADULT USE MARIJUANA CULTIVATION FACILITY, TIER 3****Transaction Receipt****Attachments/Documentation Needed**

Attachments/Documentation Needed: Your application cannot be processed until you have provided the required documentation described in the Supporting Information section(s) for the following items:

- Operating Agreement(s)
- Business Structure Documents

Transaction Details

- Date of Transaction: **06/16/2021 03:34 PM**
- Transaction Number: **2612532-2619654**
- Applicant: **ROBERT WHEELOCK JR**
- Transaction Type: **Apply for a Cultivation Facility, Tier 3 License**
- License Type: **ADULT USE MARIJUANA CULTIVATION FACILITY, TIER 3**
- License: **ACC**
- Regulator:

MAINE ADULT USE MARIJUANA PROGRAM**162 STATE HOUSE STATION, 19 UNION STREET, AUGUSTA, ME 04333-0162, FIRST FLOOR**

- Fee Paid:
Fees are nonrefundable.

Total: \$0**Application Instructions**

This application must be submitted by an **AUTHORIZED BUSINESS REPRESENTATIVE**.

All persons to be listed as principals of the organization must have an Individual Identification Card number issued by the Office of Marijuana Policy **prior** to submitting this establishment license application.

In addition, OMP recommends reading and reviewing the **application instructions document** found on [OMP's Adult Use Applications and Forms page](#) which contains further instruction and definitions relevant to this application.

Documents That May be Uploaded with This Application

As the Authorized Business Representative completing this application, you will be asked for the following documentation in addition to the basic application information. The online application allows for uploading these required documents.

For your protection, this application will time out after 20 minutes of idle time. If more than 20 minutes passes between page refreshes, your session will be disconnected and you will have to start again from the beginning. Please be aware that if you do not have all documents ready, you will be able to upload them at a later time with login credentials provided after this initial submission.

Please have documents ready if you wish to upload them with your online application; otherwise, you will be required to provide them to the Office through the "Upload Outstanding Application Documents" option online, by email to Licensing.OMP@maine.gov, or by mail to MAINE ADULT USE MARIJUANA PROGRAM, 162 STATE HOUSE STATION, 19 UNION STREET, FIRST FLOOR, AUGUSTA, ME 04333-0162. This application is not complete and will not be processed until all documentation is provided, including the final notarization to be completed by the Authorized Business Representative. Forms referenced below may be found on [OMP's Adult Use Applications and Forms page](#).

- Principal(s) Attestation(s)
- Operating Agreement(s)
- Financial Instrument(s) if applicable
- Preliminary Operating Plan
- Preliminary Cultivation Plan
- Business organizing documents (articles of incorporation, articles of organization, operating agreement, or partnership agreement as applicable)
- Additional Supporting Documentation (optional)

Prior License Number

Has this entity ever been licensed (either conditional or full license) by the Maine Adult Use Marijuana Program in the past?: **Yes**

If yes, please provide the previous license number: **IC1650**

Applicant Information

Please provide the following information about the organization applying for this license.

Type of Organization: **Sole Proprietorship**

Applicant Organization's Legal Name

If the applicant is an organized business, all information provided in the applicant section should match the information on file with the Maine Secretary of State, Bureau of Corporations. If the applicant is a sole proprietor, provide full legal name.

Status: **New**

Legal Name: **ROBERT WHELOCK JR**

Doing Business As Name(s)

If applicable, indicate primary trade name or "Doing Business As" name here.

Not on file

Applicant Organization Details

Please provide the applicant organization's PHYSICAL address, phone, and email address. Please note that the name you enter here should match the legal name provided above.

Status: **New**

Name: **ROBERT WHELOCK JR**

Physical Address: **333 BRUNSWICK AVE, GARDINER, ME 04345-2835 US**

Phone: **+1 (207) 215-5782**

Email Address: **bwheelockjr@gmail.com**

Primary Contact Person for Application Purposes

This person will be the Office of Marijuana Policy's main point of contact for all correspondence, including required information missing in this application or supplemental information required later in the application process.

Status: **New**

Name: **ROBERT WHELOCK JR**

Address: **105 TIFFANY RD, SIDNEY, ME 04330-2035 US**

Phone: **+1 (207) 215-5782**

Email Address: **bwheelockjr@gmail.com**

Principals

A principal is natural person who has controlling authority or is in a leading position in the business organization. It also includes any person who operates an adult use marijuana establishment as a sole proprietorship. Other examples include without limitation, officers, directors, managers, and general partners, except that "manager" for the purposes of this definition does not include an employee of a licensee whose managerial responsibilities are limited to staff supervision related to the day-to-day operation of a marijuana establishment.

Note on OMP not enforcing residency requirement: Title 28-B requires that every sole proprietor, officer, director, manager and general partner of a business entity be a natural person who is Maine resident, however OMP is currently not enforcing the residency requirement provision of the statute.

Status: **New**
Individual ID Card #: **HC1650**
Name: **WHELOCK, ROBERT E., JR.**
Role in Establishment: **Sole Proprietor**

Tax Compliance

Each principal must download, print, and sign the **Maine Revenue Services Authorization to Review and Disclose Status of Tax and Filing Obligations to the Maine Office of Marijuana Policy - Principals Form**. Each principal must submit the completed form to Maine Revenue Services. This form may be found on [OMP's Adult Use Applications and Forms page](#).

Principal Attestation

All persons listed as principals of the organization must complete and attest to the accuracy of the information provided on the **Principal Attestation Form** found on [OMP's Adult Use Applications and Forms page](#). It is the responsibility of each individual principal to supply the completed form to you, the Authorized Business Representative.
Signed_Principal_Attestation_BWheelcok.pdf

Ownership

List all natural persons and/or business entities that hold any ownership interest in the organization applying for this license.

Note on OMP not enforcing residency requirement: Title 28-B requires that a majority of the shares, membership interests, partnership interests or other equity ownership interests as applicable to the business entity must be held or owned by natural persons who are Maine residents or business entities whose owners are all natural persons who are Maine residents, however OMP is currently not enforcing the residency requirement provision of the statute.

Status: **New**
Legal Name: **ROBERT WHELOCK JR.**
Address: **105 TIFFANY RD, SIDNEY, ME 04330-2035**
Phone: **+1 (207) 215-5782**
% Ownership in the organization applying for licensure: **100,000**
Birthdate: **12/21/1974**
Place of Domicile/Residency: **MAINE**

Not on file

Operating Agreement(s)

You must provide copies of all ownership/shareholder agreements for each owner that holds any ownership interest in the organization applying for this license.

You have agreed to provide this information as requested.

Financial Interest Holders in the Applicant Organization

List all natural persons and/or business entities having any direct or indirect financial interest in the organization applying for this license, and the nature and extent of the financial interest held by each natural person and/or business entity. Owners previously listed do not need to be duplicated here.

A list of common financial interest holders is provided below. Refer to the definition of Direct or Indirect Financial Interest in the Adult Use Program Rule for further explanation.

- Royalty License Partners
- Employee, Contractor and Other Profit Sharing Arrangements
- Capital Investors and Lenders (i.e., banks, credit unions, and other state- and federally-chartered financial institutions, and private lenders)
- Management Contractors and Consultants

Not on file

Co-Location of Adult Use and Medical Marijuana Operations

Note: Maine law prohibits a marijuana store licensee that is also a registered caregiver or a registered dispensary from selling or offering to sell to consumers adult use marijuana and adult use marijuana products within the same facility or building in which the licensee also sells or offers to sell marijuana and marijuana products to qualifying patients for medical use.

Does the applicant intend to co-locate adult use and medical marijuana operations on the same premises? If yes, you must clearly explain in your preliminary operating plan.: **Yes**

Establishment Information

Please provide information about the proposed establishment.

Will you be cultivating indoors and/or outdoors?: **Indoor Only**

Please provide the proposed physical location of your facility and your website (if known)

Status: **New**

Proposed Physical Location: **Gardiner**

Applicant's Website: **<http://www.gardinermaine.com>**

Track & Trace Administrator Information

Please identify the individual that will serve as your Track & Trace Administrator. An email detailing next steps with respect to training and credentialing with the State's track and trace vendor will be sent to the applicant's Track and Trace Administrator's email address..

Status: **New**

Individual ID Card #: **HC1650**

Name: **WHEELLOCK, ROBERT E., JR.**

Email Address: **bwheelockjr@gmail.com (New)**

Email Type: **Track and Trace**

Preliminary Operating Plan

The Operating Plan is an official Plan of Record. Use of the template is required. The template can be found on [OMP's Adult Use website](#) under the Applications and Forms tab. The Office of Marijuana Policy (OMP) understands that applicants may have prepared other operating documents. OMP will accept additional operating documents. However, this Operating Plan must be used and information must be summarized as requested. (Referring to another plan will not be sufficient.)

Signed_Operating_Plan.pdf

Preliminary Cultivating Plan

The Cultivation Plan is an official Plan of Record. Use of the template is required. The template can be found on [OMP's Adult Use website](#) under the Applications and Forms tab. The Office of Marijuana Policy (OMP) understands that applicants may have prepared other cultivation documents. OMP will accept additional cultivation documents. However, this Cultivation Plan must be used and information must be summarized as requested. (Referring to another plan will not be sufficient.)

Signed_Cultivation_Plan.pdf

Business Organization Structure Documents

You must provide the following documentation:

- Description of the structure of the business organization;
- If the business entity is a corporation, a copy of its articles of incorporation or articles of organization;
- If the business entity is a limited liability company, a copy of its articles of organization and its operating agreement;
- If the business entity is a general partnership, limited partnership, limited liability partnership or limited liability limited partnership, a copy of the partnership agreement.

You have agreed to provide this information as requested.

Other Supporting Documentation

Would you like to provide any other documentation that would be helpful to the Office in reviewing your application?: **No, not at this time**

Authorization to Release Information

The Office of Marijuana Policy will confirm all responses in the Character and Fitness portion of the application. If the applicant is a business entity, the Office of Marijuana Policy will confirm all responses in the Character and Fitness portion for every officer, director, manager and general partner of the business entity. The applicant must provide a signed and dated **Authorization to Release Information** in order to allow the exchange of information related to Character and Fitness responses. You may find this form on [QMP's Adult Use Applications and Forms page](#).

Signed_Release_Form.pdf

Affirmation and Consent

a. I affirm that the entire Maine Adult Use Marijuana Establishment Application, statements, attachments, and supporting documents are true and correct to the best of my knowledge and belief, and that this statement is executed with the knowledge that misrepresentation or failure to reveal information requested may be deemed good cause for denial to issue a Maine Adult Use Marijuana Establishment by the Department.: **Agree**

b. Further, I am aware that later discovery of an omission or misrepresentation made in the above statements may be grounds for denial or revocation of the Maine Adult Use Marijuana Establishment license. I affirm that I am voluntarily submitting this application to the Department of Administrative and Financial Services, Office of Marijuana Policy, and hereby authorize the Department to conduct a complete investigation into the truthfulness of the responses, using whatever legal means they deem appropriate.: **Agree**

c. I understand I am responsible for knowing and complying with all state laws and regulations governing Adult Use Marijuana pursuant to the Maine Revised Statutes, as well as the rules promulgated thereunder. I understand I am being made aware of the laws and regulations governing the Adult Use Marijuana Program and agree to comply with them, and all other applicable laws and regulations.: **Agree**

d. I understand that I must pay a fee to obtain a Maine Adult Use Marijuana Establishment license, as well as at the time of an annual renewal.: **Agree**

e. I understand the Department does not mail out a renewal application; and therefore, I am responsible for obtaining and submitting an application to renew my Adult Use Marijuana Establishment license prior to its expiration. I understand that in order to avoid unnecessary delays in issuance of a renewal license, the renewal application should be submitted no later than 30 days prior to the expiration date.: **Agree**

f. I understand that Maine Adult Use Marijuana Establishment licenses are valid for one year from the date of issuance. The Maine Adult Use Marijuana Establishment license shall be renewed on forms provided by the Department in accordance with the fee schedule. I understand that if I allow the Maine Adult Use Marijuana Establishment license to expire for even one day and then reapply, I must submit a new application along with the original application fee.: **Agree**

g. I understand I am responsible for notifying the Office of Marijuana Policy, in writing, upon any change in name, residence address, mailing address, or phone number, since all correspondence will be sent to my last known address. Failure to notify the Office of Marijuana Policy could result in not receiving my physical license, legal notices, and other correspondence.: **Agree**

h. I understand that I shall not by any means interfere with, obstruct, or impede, the Office of Marijuana Policy or its employees or investigators in exercising their official duties pursuant to the authority in Title 28-B and rules promulgated thereunder.: **Agree**

i. I understand that a Maine Adult Use Marijuana Establishment license issued by the Office of Marijuana Policy is a revocable privilege, and that the burden of proving an Applicant's qualifications for a Maine Adult Use Marijuana Establishment license rests at all times with the Applicant.: **Agree**

j. I understand in order to access or input data into the State's inventory tracking system, I must possess a valid Individual Identification Card and agree to follow all the rules and guidelines set forth for the use of this system.: **Agree**

k. I understand that this application is not complete and will not be processed until all required parties submit to have fingerprints taken and to a criminal history record check.: **Agree**

l. I understand that I may appeal an application denial pursuant to the Maine Administrative Procedure Act, 5 MRS, chapter 375.: **Agree**

Signature

Any information contained within this application, contained within any financial or personnel record, or otherwise found, obtained, or maintained by the Department, shall be accessible to law enforcement agents of this or any other state, the government of the United States, or any foreign country.

If I have given incorrect information, this application may be denied, and I may be charged with giving false information. I understand the questions on this application and the penalty for hiding or giving false information or breaking any of the rules in the penalty warning. I certify under penalty of perjury that my answers, including those related to drug offenses correct and complete.

Authorizing Business Representative's Signature: **Robert E. Wheelock Jr.**

Review of Application Materials

For your convenience, you may submit this online transaction and initiate the application process while you are still gathering all required documentation. However, **your application will not be reviewed until the Office of Marijuana Policy has received ALL pertinent documents.**

For each application requirement listed below, please confirm whether you plan to submit further documentation either via mail/email or by uploading at a later time using the "Upload Outstanding Application Documents" option on the Main Menu:

Attestation forms from ALL Principals: **I have provided all principal attestations**

Operating Agreement(s) from ALL Owners: **I have provided all operating agreement(s)**

Financial Instrument(s): **N/A (there are no interested financial parties)**

Operating Plan: **I have provided all preliminary operating plan documentation**

Cultivating Plan: **I will provide more cultivating plan information later**

Business organizing documents (articles of incorporation, articles of organization, operating agreement, or partnership agreement as applicable): **I have provided all business organizing documentation**

Other Supporting Documentation (optional): **N/A (I do not wish to provide optional documentation)**

Fee Notice

The Office of Marijuana Policy will send you an email with a Notice of Application Fee attached. In order for your application to be considered, the Office of Marijuana must receive your application fee. The Office of Marijuana Policy will accept application fees by cashier's check or money order made payable to the Treasurer, State of Maine in person or at our mailing address: Office of Marijuana Policy, 162 State House Station, Augusta, Maine 04333-0162.

Attest & Agree

Any information contained within my application, contained within any financial or personnel record, or otherwise found, obtained, or maintained by the Department, shall be accessible to law enforcement agents of this or any other state, the government of the United States, or any foreign country.

If I have given incorrect information, my application may be denied, and I may be charged with giving false information. I understand the questions on this application and the penalty for hiding or giving false information or breaking any of the rules in the penalty warning. I certify under penalty of perjury that my answers, including those related to drug offenses correct and complete.

I hereby certify that the information provided on this application is true and accurate to the best of my knowledge and belief.

Questions about this service? Contact MAINE ADULT USE MARIJUANA PROGRAM at: (207) 287-3282 or email: Licensing.OMP@maine.gov

Credits



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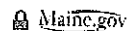
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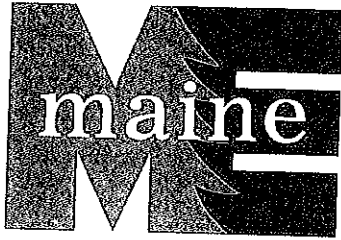
[Maine.gov](#)

[Site Policies](#)

[Contact technical support](#)

Transaction Security





OFFICE OF MARIJUANA POLICY

DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES

CULTIVATION PLAN TEMPLATE

Pursuant to Section 3.5.2 of the Adult Use Marijuana Program Rule, the Department shall keep on file a copy of all facility plans, security plans, operating plans and cultivation plans, as well as copies of certifications of testing facilities. The most recent plan, whether submitted with the issuance of the marijuana establishment license, or by the subsequent approval of an application to change, shall be the Plan of Record with which the licensee must comply.

The Cultivation Plan is an official Plan of Record. This document and use of this template are required. The Office of Marijuana Policy (OMP) understands that an applicant or licensee may have prepared other cultivation documents. Although the applicant or licensee may submit additional cultivation documents for reference, this Cultivation Plan is designed to be a succinct, standalone document.

OMP recognizes that during the conditional license application process, site-specific information may not be available. An updated, site-specific Cultivation Plan will be required prior to active licensure.

SECTION 1: License Type

Please choose only one. A separate operating plan is required for each licensed establishment.

- Cultivation Facility, Tier 1 (Plants) – No more than 30 mature marijuana plants.
- Cultivation Facility, Tier 1 (Canopy) – No more than 500 square feet of mature marijuana plants.
- Cultivation Facility, Tier 2 – No more than 2,000 square feet of mature marijuana plants.
- Cultivation Facility, Tier 3 – No more than 7,000 square feet of mature marijuana plants.
- Cultivation Facility, Tier 4 – No more than 20,000 square feet of mature marijuana plants.
- Cultivation Facility, Nursery – No more than 1,000 square feet of mature marijuana plants.

SECTION 2: Cultivation Facility Floor Plan

OMP recognizes that a specific location is not required during the conditional license application process. If the applicant does not have a site-specific location, provide the diagram and layout of the proposed Cultivation Facility.

1. Provide a diagram of the floor plan. The diagram shall be drawn in straight lines, clearly stating the square footage of each area and whether this square footage is within or outside the plant canopy. The diagram shall include without limitation:
 - The size and layout of the cultivation areas where the licensee cultivates mature marijuana plants, including the dimensions of the perimeter of each cultivation area.
 - The size and layout of the cultivation areas where the licensee cultivates mature marijuana plants solely for propagating seedlings, immature marijuana plants or collecting seeds, seedlings and immature marijuana plants.
 - Provide a clear delineation of where mature marijuana plants are grown, from where marijuana plants solely used for propagation, immature plants and seedlings will be grown.
 - If the cultivation facility shares premises with a registered medical marijuana dispensary or registered marijuana caregiver, the diagram must indicate:
 - Areas used for cultivation marijuana for medical use, including which areas used to cultivate plants solely used for propagation, seedlings, immature plans and mature plants.
 - Areas that support cultivation of both marijuana for medical use and adult use marijuana, including storage areas, office space, walkways, entryways, restrooms and utility rooms.

2. Provide the sum total of the combined area within the premises in which cultivation of mature marijuana plants will take place.

See attached plan.

3. Provide the total amount of plant canopy, or the total number of mature marijuana plants, to be cultivated on the premise.

About 2,000-3,000 sq. ft. canopy

SECTION 3: Co-Location of Adult Use Cultivation Facilities and Medical Marijuana Facilities

Is this Adult Use Cultivation Facility co-located with any medical marijuana facility?

Yes No

If yes, complete Section 3(a) and (b)

SECTION 3(a): Type of Medical Marijuana Facility Co-Location

Check all that apply

- Registered dispensary cultivation operation
 Registered caregiver's cultivation operation

SECTION 3(b): Co-Location of Cultivation with a Medical Marijuana Facility

1. Describe plans for visually and physically separating cultivation of marijuana for medical use from cultivation of adult use marijuana.

There will be no common areas between Medicinal and Adult-Use Marijuana, with separate entrances for each cultivation.

2. Describe plans for visually and physically separating the storage of harvested marijuana flower and trim for medical use from harvested adult use marijuana flower and trim.

There will be no common areas between Medicinal and Adult-Use Marijuana, with separate entrances for each cultivation. Each stored container of Marijuana will have a tag on it denoting if it is Medicinal vs. Adult-Use.

3. Describe how the licensee will separately track, including input to the tracking system, marijuana, marijuana concentrate and marijuana products for medical use separately from adult use marijuana, marijuana concentrate and marijuana products and will otherwise keep them from becoming intermixed.

There will be no common areas between Medicinal and Adult-Use Marijuana, with separate entrances for each cultivation. Each stored container of Marijuana will have a tag on it denoting if it is Medicinal vs. Adult-Use. With only Adult-Use being in the building it allow ease with input into the Tracking and Trace system.

SECTION 4: Plans for Compliance with the Marijuana Legalization Act and the Adult Use Program Rules

OMP recognizes that a specific location is not required during the conditional license application process. If the applicant does not have a site-specific location, provide plans for obtaining proof of compliance with the following.

1. Describe plans for physically separating areas where mature marijuana plants will be grown, from where marijuana plants solely used for propagation, seedlings and immature marijuana plants will be grown.

There will be separate rooms for growing so each room can accommodate a difference stage of growth. See attached plan.

2. If this Plan of Record is for a Cultivation Nursery Facility, indicate whether the facility intends to sell marijuana seeds, seedlings or immature plants to adults, 21 years of age or older, who are not licensees, indicate so by selecting this box.

Yes No

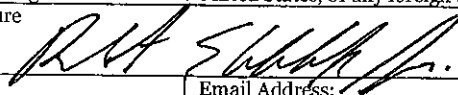
SECTION 5: Notice

The Department shall keep on file a copy of all facility plans, security plans, operating plans and cultivation plans, as well as copies of certifications of testing facilities. The most recent plan, whether submitted with the issuance of the marijuana establishment license, or by the subsequent approval of an application to change, shall be the Plan of Record with which the licensee must comply. Field Investigators will have access to all plans and will review all plans prior to an on-site assessment. Failure to comply with the Plan of Record may lead to enforcement action. Any significant changes to the Plan of Record must be approved by the Department.

Signature – This Plan of Record cannot be accepted without a signature

Any information contained within this Plan of Record or otherwise found, obtained, or maintained by the Department, shall be accessible to law enforcement agents of this or any other state, the government of the United States, or any foreign country.

Authorizing Business Representative's Signature



Date

6/15/21

Printed Name:

Robert E. Wheelock Jr.

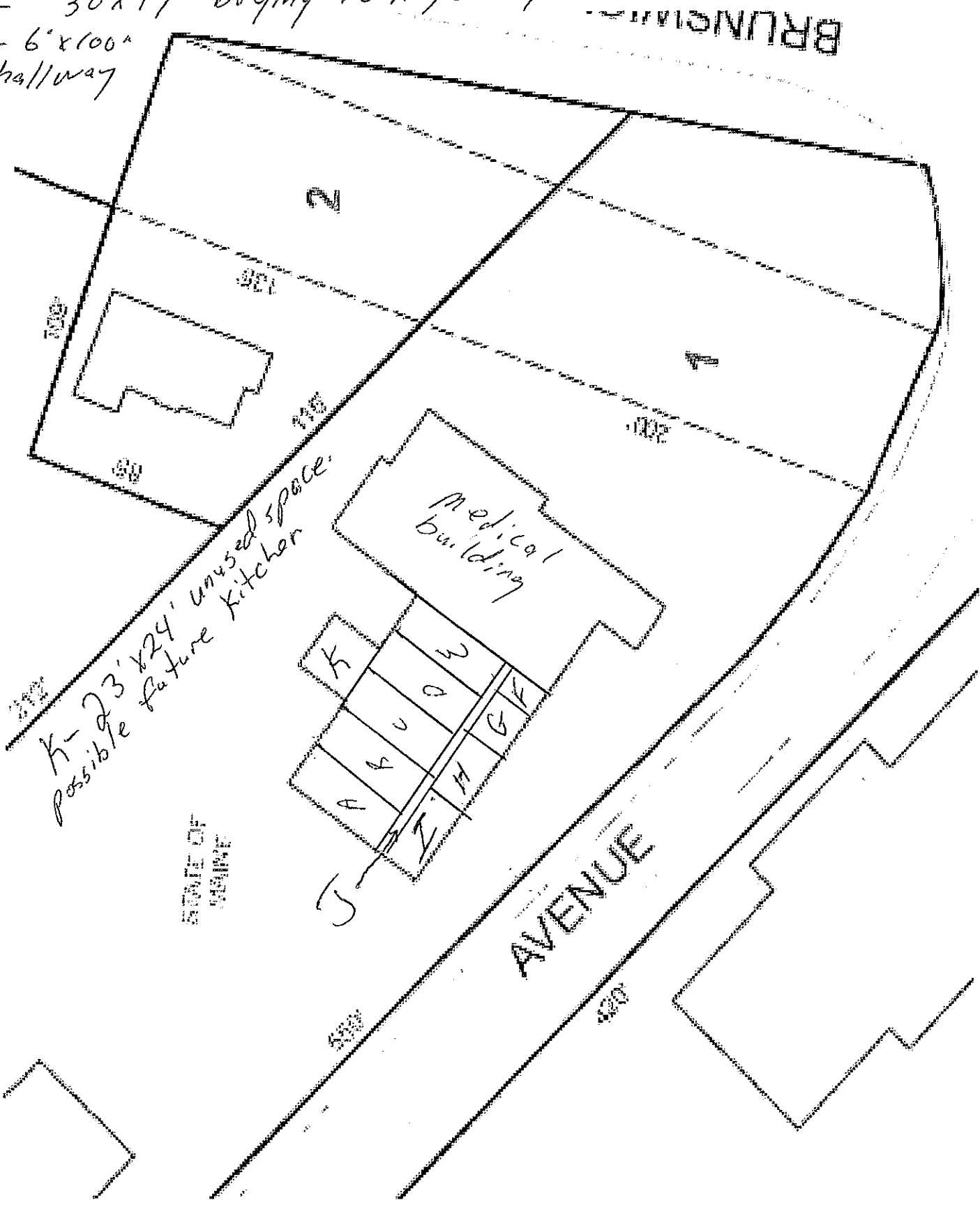
Email Address:

bwheelockjr@gmail.com

Phone Number:

207-215-5782

- A, B, C, D, E - are @ 20' x 40' grow rooms
- F - is 14' x 20' water room, nutrient storage
- G - 20' x 14' break room, fridge, lunch break section
- H - 30' x 14' trimming room, harvest room
- I - 30' x 14' Drying room/curing room
- J - 6' x 100' hallway

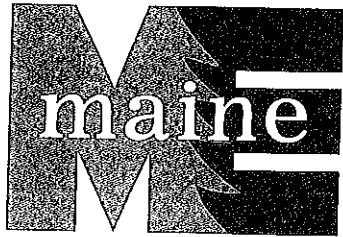


K - 23' x 24' unused space.
 possible future kitchen

SCALE OF MEASURE

AVENUE

BRUNSWICK



**OFFICE OF
MARIJUANA POLICY**
DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES

**OPERATING PLAN TEMPLATE
CULTIVATION FACILITY**

Pursuant to Section 3.5.2 of the Adult Use Marijuana Program Rule, the Department shall keep on file a copy of all facility plans, security plans, operating plans and cultivation plans, as well as copies of certifications of testing facilities. The most recent plan, whether submitted with the issuance of the marijuana establishment license, or by the subsequent approval of an application to change, shall be the Plan of Record with which the licensee must comply.

The Operating Plan is an official Plan of Record. This document and use of this template are required. The Office of Marijuana Policy (OMP) understands that an applicant or licensee may have prepared other operating documents. Although the applicant or licensee may submit additional operating documents for reference, this Operating Plan is designed to be a succinct, standalone document.

OMP recognizes that during the conditional license application process, site-specific information may not be available. An updated, site-specific Operating Plan will be required prior to active licensure.

Note: Nursery Cultivation Facilities require use of the Nursery Cultivation Facility Operating Plan, not this template.

SECTION 1: License Type

Please choose only one. A separate Operating Plan is required for each licensed establishment.

- Cultivation Facility, Tier 1 (Plants) – No more than 30 mature marijuana plants.
- Cultivation Facility, Tier 1 (Canopy) – No more than 500 square feet of mature marijuana plants.
- Cultivation Facility, Tier 2 – No more than 2,000 square feet of mature marijuana plants.
- Cultivation Facility, Tier 3 – No more than 7,000 square feet of mature marijuana plants.
- Cultivation Facility, Tier 4 – No more than 20,000 square feet of mature marijuana plants.

SECTION 2: Days and Hours of Operation

In the table below, indicate the operating hours of the facility. Place an "x" in the closed column if the facility will be closed on a particular day.

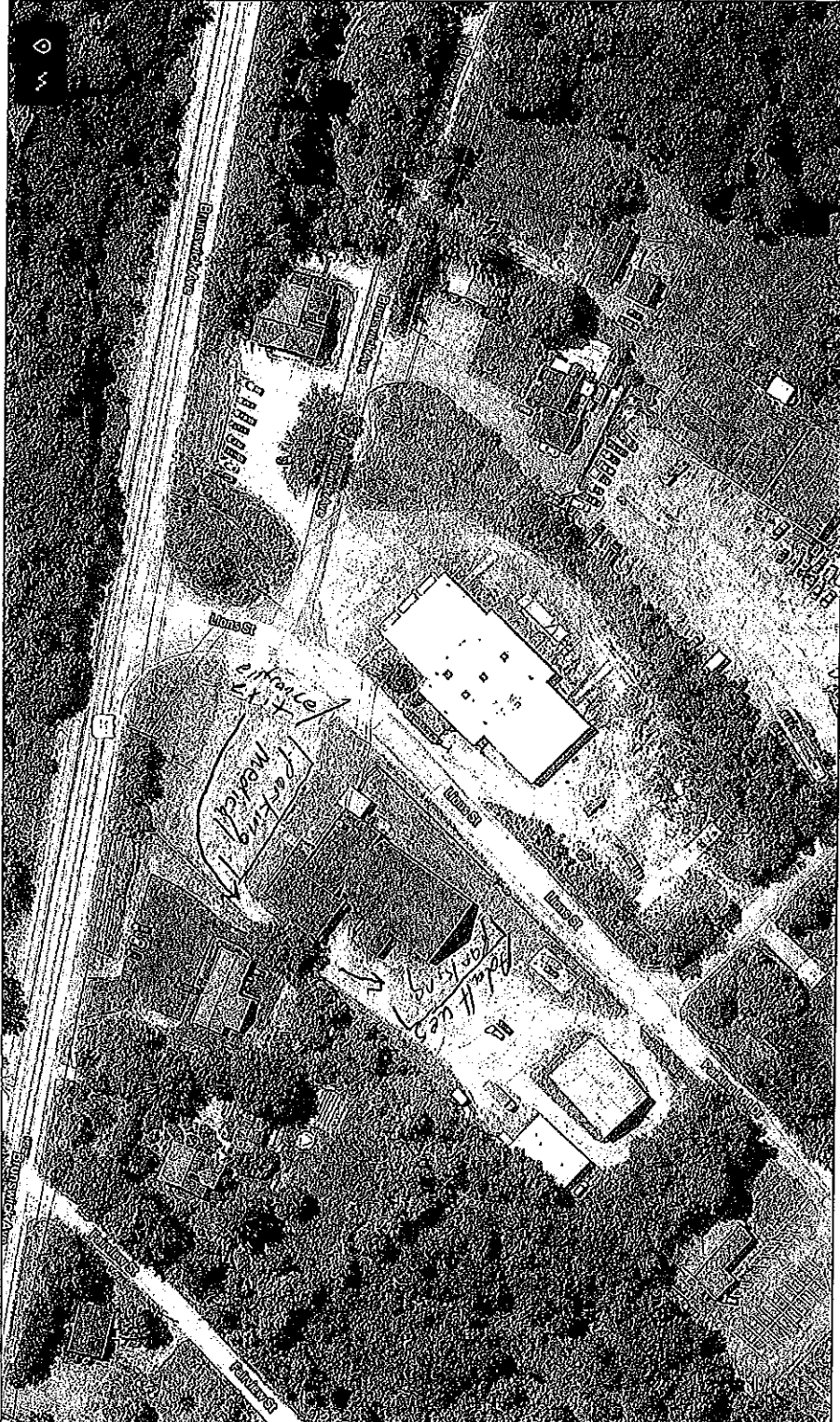
As a reminder, pursuant to Section 3.4.1(C) of the Adult Use Marijuana Program Rule: Licensees shall ensure that at all times during operating hours and hours of apparent activity that there is, on-site, an individual identification cardholder authorized to cooperate with Department inspection of the premises and business records.

	Closed	Facility Opening Hour	Facility Closing Hour
Sunday		8am	6pm
Monday		8am	6pm
Tuesday		8am	6pm
Wednesday		8am	6pm
Thursday		8am	6pm
Friday		8am	6pm
Saturday		8am	6pm

SECTION 3: Cultivation Facility Site Information

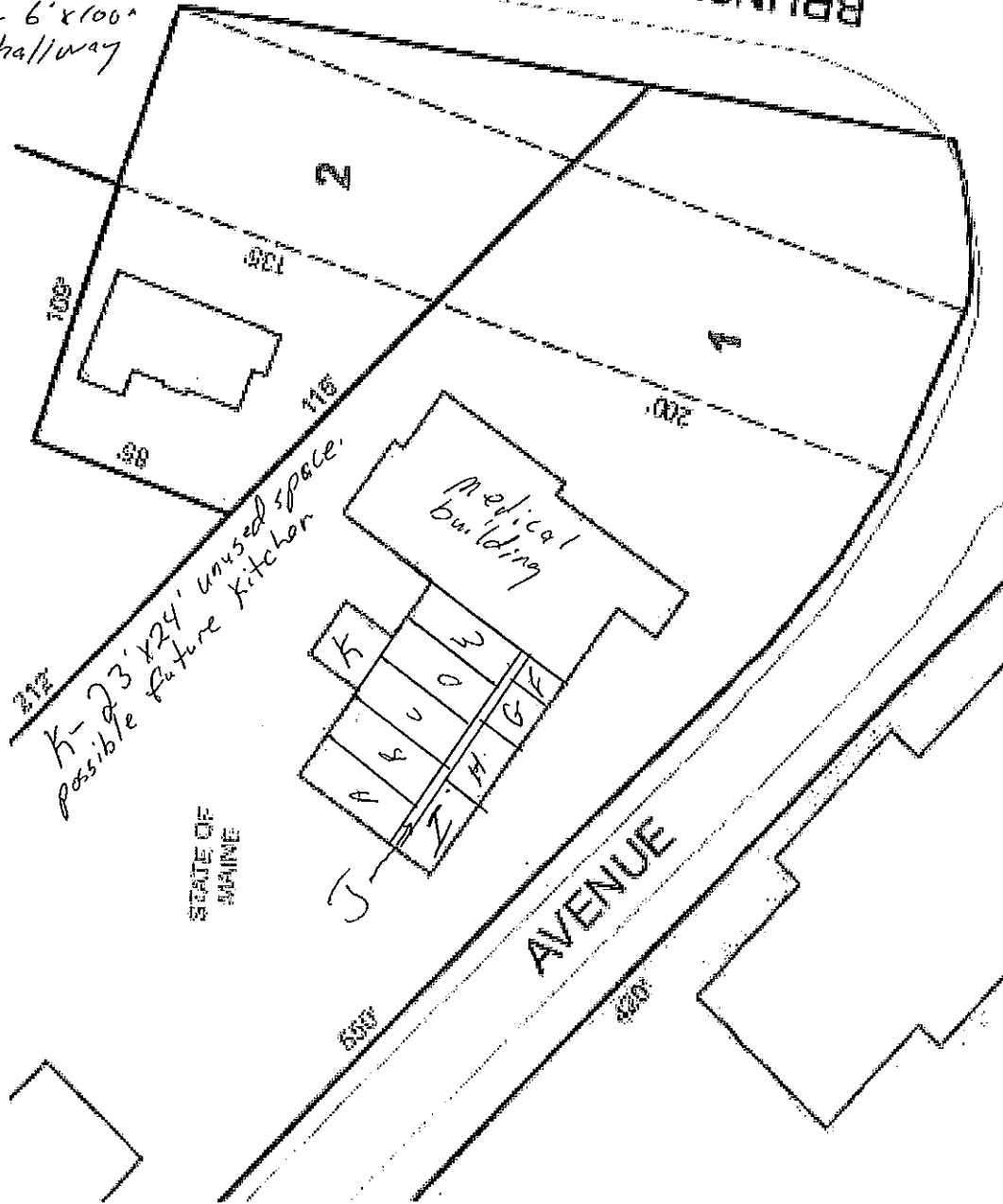
OMP recognizes that a specific location is not required during the conditional license application process. If the applicant does not have a site-specific location, provide a diagram and layout of the proposed Cultivation Facility.

1. Provide a diagram of the property on which the Cultivation Facility is located, including all point(s) of ingress/egress from the closest maintained public way, employee entrance(s), point(s) of delivery, parking area(s), and public right(s) of way. (Acceptable file formats include, but are not limited to, the following: .BMP, .GIF, .JPG, .PDF, .PNG. Diagrams may also be inserted as additional pages to the end of this form or uploaded via the online facility application process as Other Supporting Documentation.)



2. Provide a diagram of the layout of the Cultivation Facility, including square footage of the areas in which cultivation does and does not occur and square footage of the entire facility. If the Cultivation Facility is co-located with an Adult Use Products Manufacturing Facility and/or Adult Use Marijuana Store, the diagram must clearly delineate the cultivation facility area from the other establishment(s). A Cultivation Facility that connects to another Adult Use establishment, requires at least a single, lockable door to be reflected in the diagram. (Acceptable file formats include, but are not limited to, the following: .BMP, .GIF, .JPG, .PDF, .PNG. Diagrams may also be inserted as additional pages to the end of this form or uploaded via the online facility application process as Other Supporting Documentation.)

- A, B, C, D, E - are @ 20' x 40' grow rooms
- F - is 14' x 20' water room, nutrient storage
- G - 20' x 14' break room, fridge, lunch break section
- H - 30' x 14' trimming room, harvest room
- I - 30' x 14' Drying room/curing room
- J - 6' x 100' hallway



3. If the property is also used as a residence, describe the location of that residence within the property and plans for complete separation of the residence from the facility, including:
- Entirely separate entrances from the public right of way, and
 - That no solvent extraction using potentially hazardous extraction methods or inherently hazardous extraction methods in the same building or structure as the residence.

N/A

SECTION 4: Co-Location of Adult Use Facilities

Is this Cultivation Facility co-located with an Adult Use Products Manufacturing Facility and/or an Adult Use Marijuana Store?

Yes No

If yes, complete Section 4(a) and (b)

SECTION 4(a): Type of Adult Use Facility Co-Location

Check all that apply.

Adult Use Products Manufacturing

Adult Use Marijuana Store

SECTION 4(b): Co-Location of Adult Use Marijuana Establishments

Section 2.4.9(B)(2) requires the following:

The Cultivation Facility may connect to another type of establishment by a single, lockable door. Regardless of common ownership, excise tax is payable when any marijuana seedlings, immature plants, marijuana, or marijuana products pass out of the cultivation facility into another type of marijuana establishment. All marijuana to pass through a single, lockable door must be entered into the tracking system, and excise taxes shall be paid in accordance with this Rule and 28-B M.R.S. § 1001.

Describe how all applicable requirements of Section 2.4.9 of the Adult Use Marijuana Program Rule will be met, including but not limited to the requirement described above.

SECTION 5: Co-Location of Adult Use Cultivation Facility and Medical Marijuana Facilities

Is this Adult Use Cultivation Facility co-located with any medical marijuana facility?

Yes No

If yes, complete Section 5(a) and (b)

SECTION 5(a): Type of Medical Marijuana Facility Co-Location

Check all that apply.

Registered dispensary cultivation operation

Registered caregiver's cultivation operation

SECTION 5(b): Co-Location of Adult Use Cultivation Facility and Medical Marijuana Facilities

1. List and describe all equipment with approval listing(s) to be used for cultivating both medical marijuana and adult use marijuana.

The only possible crossing equipment would be a trimming machine, used to clean the marijuana buds for sale. The trimming machine would be brought to the separate building areas (Medicinal vs. Adult-Use) when being used.

2. Describe how the licensee will ensure that each shared piece of cultivation equipment is not used simultaneously on medical marijuana and adult use marijuana, with the purpose of ensuring that medical marijuana flowers and trim remain separate from adult use marijuana flowers and trim.

Each section of the building (Medicinal vs. Adult-Use) will have separate entrances. Each side of the building will have its own trimming room as well as Mother room so that the products never cross paths.

3. Describe how the licensee will separately track medical marijuana and adult use marijuana and will otherwise keep them from becoming intermixed.

The Medicinal Marijuana is stored on the Medicinal side of the building (separate entrance) with tags on every container, denoting that it is Medicinal Marijuana inside. Similarly, the Adult-Use Marijuana will be stored solely on the Adult-Use side of the building (separate entrance) with the proper Track and Trace tags on every container denoting that it is Adult-Use Marijuana inside.

SECTION 6: Equipment and Approval Listing

Provide approval listing(s) for all equipment listed below.

1. List all lights, irrigation system(s), greenhouse(s) and all other equipment to be used specific to the cultivation of marijuana within the cultivation facility.
 - 100-150 LED Lights
 - 50-60 Fans
 - 8-10 Dehumidifiers
 - 2 Large CO2 Tanks with lines leading to each Adult-Use Room
 - CO2 Regulator
 - 6 hoses with coordinating water pumps
 - Trim Machine

SECTION 7: Pesticides, Fungicides, Insecticides and Fertilizers

1. List all pesticides, fungicides, insecticides and fertilizers that will be present or used.

Mills Nutrient Line

- No pesticides will be used, live predator bugs will be used to control any insects and/or insect problems
- Over the counter cleaning products will be used to clean the facility, including the rooms between each harvest

SECTION 8: Utility Plans

OMP recognizes that a specific location is not required during the conditional license application process. If the applicant does not have a site-specific location, provide plans for how the following are intended to be done.

1. Describe plans for providing electricity, water, and other utilities necessary for the normal operation of the cultivation facility.

I plan to hire a licensed electrician run all the necessary wires and outlets. All plant dehumidifiers will be mounted to the walls of the corresponding grow rooms. There will be water lines run from the water room to each grow room with each room having a water spout for a hose to water the plants.

2. Describe plans for ventilation and filtration systems that prevent marijuana plant odors from significantly altering the environmental odor outside, while addressing the potential for mold.

I will have closed rooms with no ventilation to the outside. Each room will also have carbon filters installed to help negate any odors.

SECTION 9: Plans for Compliance with the Marijuana Legalization Act and the Adult Use Program Rules

OMP recognizes that a specific location is not required during the conditional license application process. If the applicant does not have a site-specific location, provide plans for obtaining proof of compliance with the following.

1. Describe plans for shipping and receiving of marijuana and marijuana products.

All product, either shipped or received, will be paired with Trip Tickets (see attached) that are in compliance with OMP Laws and Regulations. All product, either shipped or received, will be transported by either a licensed caregiver or licensed caregiver assistant.

2. Describe plans to dispose of or destroy used, unused and waste marijuana and marijuana products.

Our disposal plan is in compliance with the current OMP waste requirements. The key points are as follows. Non-hazardous marijuana waste must first be rendered unusable before disposal are prior to leaving a production facility. This waste can be turned unusable by grinding or mixing plant material with other food or yard waste until the mixture is at least 50% non-marijuana material by volume. Any marijuana plant material that has been contaminated or treated with a solvent is classified as hazardous material and must be disposed of following state's hazardous materials regulations. Root balls, soil, growing media, plant stalks, leaves, and branches are classified as exceptions to these waste requirements as long as they are rendered unusable and free of any flower and/or leaves with visible trichomes. A waste shredder is ideal to render plant material unusable.

3. Describe how the facility plans to prevent access to the premises by persons under age 21, including without limitation vendors and contractors.

This facility is not accessible by the public and any employee will be interviewed before entering the premises. Any contractors will have their credentials verified before entering the premises.

4. Describe how the facility plans to conduct a background screening process for employees and vendors.

Employees will undergo a comprehensive background check, that includes a criminal history record check, before employment, as well as once every 5 years, in compliance with State of Maine Laws and Regulations. All vendors must submit copies of: Photo State ID/License, Adult-Use Card (must complete background check to acquire), Facility License, EIN Number, Resale Certificate. This information will be kept on file on location for every vendor and must be completed before business is done with them.

SECTION 10: Proof of Compliance with State and Federal Code(s)

OMP recognizes that a specific location is not required during the conditional license application process. If the applicant does not have a site-specific location, provide plans for obtaining proof of compliance with the following.

1. Provide proof of compliance with building code(s).

Proof of Compliance will be provided after the final walk through.

2. Provide proof of compliance with the National Fire Protection Association model fire code.

Proof of Compliance will be provided after the final walk through.

3. Provide proof of compliance with applicable electrical code(s).

Proof of Compliance will be provided after the final walk through.

4. Provide proof of compliance with any other applicable federal and/or state environmental requirements.

Proof of Compliance will be provided after the final walk through.

5. Provide proof of compliance with all state and federal laws regarding wastewater and waste disposal for the cultivation facility.

Proof of Compliance will be provided after the final walk through.

6. Describe the workplace safety plan consistent with 29 CFR Part 1910, covering personal protective equipment, hazard assessment, safe equipment operation, proper application of agricultural chemicals, ladder use, hazard communication and other state and federal workplace safety requirements.

The workplace safety plan will be consistent with that outlined in 29 CFR Part 1910, with necessary posters displayed in the workplace. All safety procedures will be outlined to employees on their first day of employment in the facility.

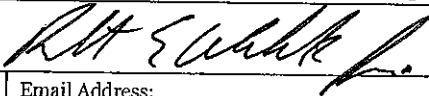
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Authorizing Business Representative's Signature



Date

6/15/21

Printed Name:

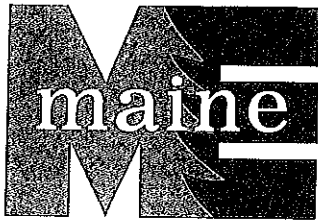
Robert E. Wheelock Jr.

Email Address:

bwheelockjr@gmail.com

Phone Number:

207-215-5782



OFFICE OF MARIJUANA POLICY

DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES

Maine Adult Use Marijuana Establishment Release of Information

Release – The application cannot be accepted without this release.

I, Robert E. Wheelock Jr., hereby authorize the Department of Administrative and Financial Services, Office of Marijuana Policy, (hereafter, the Department) to conduct a complete investigation into the background of the person(s) and/or entity, using whatever legal means they deem appropriate. I hereby authorize any person or entity contacted by the Department to provide any and all such information deemed necessary by the Department. I hereby waive any rights of confidentiality in this regard.

I hereby authorize and request all persons to whom this request is presented having information relating to or concerning the above named applicant to furnish such information to a duly appointed agent of the Department whether or not such information would otherwise be protected from the disclosure by any constitutional, statutory or common law privilege. I authorize the release of this information, even though such information may be designated as "confidential" or "nonpublic" under the provisions of state or federal laws.

The Department reserves the right to investigate all relevant information and facts to their satisfaction. I understand that the Department may conduct a complete and comprehensive investigation to determine the accuracy of all information gathered. However, the Department, and other agents or employees of the State of Maine shall not be held liable for the receipt, use, or dissemination of inaccurate information. I, on behalf of the applicant, its legal representatives, and assigns, hereby release, waive, discharge, and agree to hold harmless, and otherwise waive liability as to the State of Maine, Department of Administrative and Financial Services, Office of Marijuana Policy, and other agents or employees of the State of Maine for any damages resulting from any use, disclosure, or publication in any manner, other than a willfully unlawful disclosure or publication, of any material or information acquired during inquiries, investigations, or hearings, and hereby authorize the lawful use, disclosure, or publication of this material or information. Any information contained within my application, contained within any financial or personnel record, or otherwise found, obtained, or maintained by the Department, shall be accessible to law enforcement agents of this or any other state, the government of the United States, or any foreign country.

Authorizing Business Agent's Signature

Date

Printed Name:

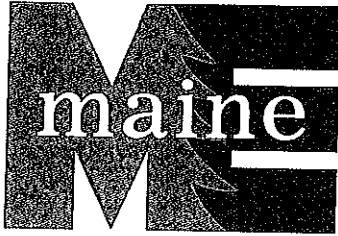
Email Address:

Phone Number:

Robert E. Wheelock Jr.

bwheelockjr@gmail.com

207-215-5782



OFFICE OF MARIJUANA POLICY

DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES

Maine Adult Use Marijuana Establishment Principal Attestation

Section 4(a)(1): Maine Adult Use Marijuana Establishment – Principals. Each person listed in Section 4(a) of the application must complete this Principal Attestation and must attest under penalty of perjury to the accuracy of the information provided in this Principal Attestation form.

Notice: This License Application for Maine Adult Use Marijuana Establishment is an official document. If you provide false information on your application, and/or do not disclose all information the application asks, the license is subject to denial, and you may be subject to criminal prosecution.

Legal Name	Title within the Organization	SSN	DOB	IIC Number
Robert E. Wheelock Jr.	Owner	-		

Section 4(a)(1): State of Residency. Title 28-B requires that every officer, director, manager and general partner of a business entity be a natural person who is a Maine resident, however OMP is currently not enforcing the residency requirement provision of the statute.

1. In which state do you currently claim residency?

Maine

2. List every municipality and state in which you have resided during the previous five years:

Sidney, Maine

Section 4(a)(2): Employment.

1. Are you an employee of the Department of Administrative and Financial Services or any other state agency with regulatory authority over Adult Use Marijuana in Maine?

Yes No

2. Are you an employee of the State of Maine?

Yes No If "yes," by which agency are you employed:

3. Are you a member of law enforcement, a corrections officer, or a person subject to the provisions found in Title 25, Chapter 341 of the Maine Revised Statutes?

Yes No

Section 4(a)(3): Tax Compliance.

1. Have you paid income and other taxes owed to the State of Maine, to another jurisdiction, if applicable, and to the United States Internal Revenue Services over the two years immediately preceding the year in which the application was filed?

Yes No If "no," explain here:

2. Do you have any outstanding tax liens imposed or levied in the State of Maine or in another jurisdiction within the five years immediately preceding the year in which the application was filed?

Yes No If "yes," explain here:

Section 4(a)(4). Prior Drug Convictions.

1. Have you ever been convicted for a violation of a state or federal controlled substance law that is a crime punishable by imprisonment for one year or more?

Yes No

2. If you answered "yes" to question 1 above, was the offense for which the sentence, including any term of probation, incarceration or supervised release, was completed 10 or more years prior to the submission of an application for a license under this Rule?

Yes No

3. If you answered "yes" to question 1 above, was the offense regarding conduct that is now authorized under the Personal Adult Use of Marijuana and Marijuana Products; Home Cultivation of Marijuana for Personal Use?

Yes No

Section 4(a)(5). Character and Fitness Requirements.

1. Have you ever been convicted of, or currently facing prosecution for, any state or federal offense involving dishonesty, deception, misappropriation, or fraud?

Yes No If "yes," explain here:

2. Have you ever faced penalties under the Maine adult use marijuana program?

Yes No If "yes," explain here:

3. Have you had an individual identification card issued under the Adult Use Marijuana Program revoked within the previous two years?

Yes No If "yes," explain here:

4. Have you ever been subject to two or more individual identification card revocations that were issued under the Adult Use Marijuana Program?

Yes No If "yes," explain here:

5. Have you had a registry identification card or registration certificate issued under the Maine Medical Use of Marijuana Act subject to revocation, suspension, limitation, or any other penalization?

Yes No If "yes," explain here:

6. Have you ever been subject to an enforcement action in any other jurisdiction's marijuana program?

Yes No If "yes," list and describe each enforcement action here:

7. Do you have outstanding court-ordered payments?

Yes No If "yes," explain here:

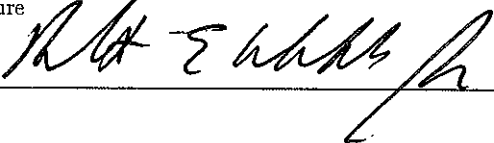
8. Do you have past due taxes or fees?

Yes No If "yes," explain here:

9. Do you have other tax delinquencies?

Yes No If "yes," explain here:

Section 4(a)(6). Other Marijuana Establishments. Identify any other marijuana establishments, including those outside of Maine, in which you hold a Direct or Indirect Financial Interest as defined in the Adult Use Marijuana Program Rule. Attach a separate sheet if necessary.

Name of Marijuana Establishment Green ReLeaf LLC	
Location of Marijuana Establishment 333 Brunswick Ave, Gardiner, Maine 04345	
Description of Financial Interest Owner	
Acknowledgment and Signature.	
I understand I am responsible for knowing and complying with all state laws and regulations governing Adult Use Marijuana pursuant to the Maine Revised Statutes, as well as the rules promulgated thereunder. <input checked="" type="checkbox"/> Agree <input type="checkbox"/> Disagree	
I understand and agree to provide documents, if requested, to prove what I have stated in this Principal Attestation form. I understand and agree that federal, state and local officials or other persons and organizations may verify the information I have given. If I have given incorrect information, my application may be denied, and I may be charged with giving false information. I understand the questions on this application and the penalty for hiding or giving false information or breaking any of the rules in the penalty warning. I certify under penalty of perjury that my answers, including those related to drug offenses are true and complete.	
Principal's Signature 	Date 6/15/21

MAINE REVENUE SERVICES
Authorization to Review and Disclose
Status of Tax and Filing Obligations to the
Maine Office of Marijuana Policy -
PRINCIPALS



This form is for use by a principal in an adult use marijuana establishment. For purposes of this form, a "principal" means any person who is an officer, director, manager, or general partner in an adult use marijuana establishment. It also includes any person who operates an adult use marijuana establishment as a sole proprietorship.

PART I:

Principal Name: Robert E. Wheelock Jr.	Phone #: :	FEIN/SSN:
Alternate Name You May Have Filed Under:	Home Address: 105 Tiffany Rd, Sidney, Maine 04330	
Legal Name of Maine Adult Use Marijuana Establishment for Which You Are a Principal		FEIN

If you are a principal in more than one adult use marijuana establishment, check here and attach a sheet listing the name and FEIN of all establishments for which you are a principal.....

PART II:

List Names and FEINs of all businesses, other than the adult use marijuana establishment(s) listed above, for which you are a principal. For purposes of this form, a "principal" means an owner, officer, director, manager, or general partner. Maine Revenue Services may require you to provide additional documentation to verify your relationship with the businesses listed.

Name	FEIN	Name	FEIN
Green ReLeaf LLC			
Name	FEIN	Name	FEIN

If you need additional space, check here and attach a sheet listing the name and FEIN of any other businesses for which you are a principal.....

PART III:

I understand that taxpayer information is confidential under 36 M.R.S. § 191. By signing this form, I authorize Maine Revenue Services to review my confidential information and disclose the status of my Maine tax and filing obligations directly to the Maine Office of Marijuana Policy, pursuant to 36 M.R.S. § 191(2)(A). I further certify that I am an owner, officer, director, manager, or general partner acting on behalf of the business entities listed in Part II and that I have authority to sign this form, and I authorize Maine Revenue Services to review the entities' confidential information and disclose the status of their Maine tax and filing obligations directly to the Maine Office of Marijuana Policy, pursuant to 36 M.R.S. § 191(2)(A). The disclosure will be limited to the information included in Part IV below.

Principal's signature: Date: 6/15/21

Forms must be sent to Maine Revenue Services at mrs.compliance.omp@maine.gov, faxed to 207-287-6627, or mailed to:

**Maine Revenue Services
 Attn: Compliance Division
 P.O. Box 1060
 Augusta, ME 04332-1060**

