



Cannabis Licence Application Retail Store

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Cannabis Licence Application Retail Store

Section One – General Information

Whitecap Dakota First Nation (“WDFN”), issues licences for the possession, sale, importation, and delivery of cannabis as per the *WDFN Cannabis Law, 2020*. WDFN regulates the operation of cannabis retail stores for which a licence has been issued. Each licence holder is required to operate their business in accordance with applicable provincial, federal laws, and WDFN laws.

For more information about the application process and ongoing operating requirements, please see the WDFN Cannabis Regulations available at www.whitecapdakota.com/resource-library/.

Fee Schedule

A **non-refundable application fee** of two thousand dollars (\$2,000.00) shall be due and payable to WDFN upon receipt of application. In addition to the application fee, the licence is subject to **an annual licence fee** of fifteen hundred dollars (\$1,500.00) for retail stores. The licence may be issued for up to three (3) years, however annual licensing fees will be due each year. WDFN may also charge applicants for all reasonable expenses incurred as a result of investigations into individual or corporate backgrounds.

Processing Time

WDFN recommends that applicants allow up to sixty days (60) days for processing of application by WDFN once all application requirements have been received by WDFN. Several factors may contribute to the time needed to issue a licence, including:

- Any incomplete, missing, or incorrect information on the application;
- Review of personal and corporate information, and any related investigations, to establish that the applicant is of suitable character to operate a cannabis business;
- Approval of any construction or renovation plans or design for physical premises;
- Configuration on inventory tracking and reporting systems, followed by WDFN confirmation; and
- Confirmation that all owners and employees have taken mandatory social responsibility training (retail only).

Applying for a cannabis licence does not guarantee an approval. Any construction, renovations, leases, purchases, etc. completed prior to confirmation of licence eligibility are at your own risk.

For further information or help completing this application, please email tdesjarlais@whitecapdakota.com. You can also call the Whitecap Dakota First Nation Lands Department at (306) 477 – 0908.



Section Two – Before You Proceed

What do you need to start the application process?

To start the process, WDFN needs Sections Three (3) to Seven (7) inclusive from this application package in order to assess the character and financial status of any individuals and corporations that have an ownership or financial interest in the applicant business.

See the WDFN Cannabis Regulations, available at www.whitecapdakota.com/resource-library/ for detailed information about the application process as well as requirements for licencing and operation of your particular type of cannabis business.

Information required for all applicants:

- Applicant, Contact, and Business Information (Section Three (3))
- Certification of Information (Section Six (6))
Proof of legal possession of location of retail store

Information required individuals (Section Four (4), copy as needed):

- Personal Disclosure form, consisting of:
 - Part 1 – Personal information
 - Part 2 – Criminal record check
 - Part 3 – Personal and criminal history
 - Part 4 – Consent to obtain and release information and declaration of honesty (personal)

Who needs to provide this information?

- Any individual, applicants or partners
- If an applicant or partner is an Indian Band, the Chief and Council members
- If an applicant or partner is a corporation, all officers, directors and shareholders of that corporation who hold at least ten percent (10%) of voting or non-voting shares
 - If a shareholder is a corporation, this information is required for all shareholders of that corporation who hold at least ten percent (10%) of voting or non-voting shares, as well as all officers and directors
 - If a shareholder is an Indian Band, this information is required for the Chief and Council members
 - If a shareholder is a trust, this information is required for the trustee and all non-minor beneficiaries who hold at least ten percent (10%) of legal or beneficial ownership, along with a copy of the trust agreement or a lawyer's undertaking describing the trust structure.



Information required of corporations (Section Five (5), copy as needed):

- Corporate Disclosure form, consisting of:
 - Part 1 – Corporate information
 - Part 2 – Corporate History
 - Part 3 – Corporate financial information
 - Part 4 – Consent to obtain and release information and declaration of honesty (corporate)

Who needs to provide this information?

- Any individual, applicants or partners
- Corporations and trusts that hold at least ten percent (10%) of voting or non-voting shares of applicant or partner corporations.

What can be submitted later?

Depending on the ownership and accountability structures of the applicant, WDFN reserves the right to require the above information for other stakeholders, including investors, key operating personnel, and associates.

The information listed below (and detailed in Section Seven (7) of this application package) can be submitted at a later date but will be required before a licence can be issued. WDFN may also request additional information depending on the particular circumstances of the application.

- A floor plan drawing of the retail space and any related storage facilities;
- A detailed description of the inventory management and sales tracking system that will be used (see Appendix: Cannabis Tracking and Reporting in the WDFN Cannabis Regulations);
- A detailed description of security measures for all facilities associated with this application (see Appendix: Facility Security in the WDFN Cannabis Regulations);
- Copies of documents verifying legal possession of the premises;
- Copy of the WDFN Business Licence or written approval of the facility location(s) from WDFN; and
- Building inspection approval for all facilities.



Section Three – Applicant, Contact and Business Information

Application Information

Applicant/Legal name(s): _____
(must match name(s) registered on lease(s) for all facilities related to this application)

What type of entity are you? (please check one)

- Individual
- Corporation (for profit, non-profit, co-operative)
- Indian Band
- Partnership or joint venture of any combination of the above
- Other (please describe) _____

Proposed business type: (please check one)

- Retail standalone
- Retail integrated

Contact Information

(In order to streamline communication in this application process, WDFN requires that all correspondence regarding the licence application and related reporting be sent to one individual. Please identify here who that person will be and provide the necessary contact information.)

Contact name: _____

Mailing address: _____

City: _____ Province: _____ Postal Code: _____

Daytime phone: _____ Cell phone: _____

Email: _____ Fax: _____

WDFN requires a current email address for ongoing communication regarding this application. Please ensure that the email address provided is monitored regularly.

Please email your completed application to: tdesjarlais@whitecapdakota.com

A non-refundable application fee of two thousand dollars (\$2,000.00) will be required before this application can be processed. Cheques can be made payable to “Whitecap Dakota First Nation”.



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Business Information

Applicant/Legal name(s): _____

(must match name(s) on lease(s) for all facilities related to this application)

Business operating name: _____

All websites associated with this business: _____

What date would you like the licence to take effect? _____

Location of primary facility (retail store)

Street address: _____

City: _____ Province: Saskatchewan Postal Code: _____

For your building, do you: (please check one)

Own []

Rent []

Sub-lease []

If purchasing the premises, when do you expect to have the certificate of title? _____

If you are leasing or subleasing, when does the lease commence and expire? _____

Is the building located on reserve status land? Yes [] No []

Location of any additional facilities, if applicable (retail off-site storage facility)

Street address: _____

City: _____ Province: Saskatchewan Postal Code: _____

For your building, do you: (please check one)

Own []

Rent []

Sub-lease []

If purchasing the premises, when do you expect to have the certificate of title? _____

If you are leasing or subleasing, when does the lease commence and expire? _____



Section Four – Information Required of Individuals

Who must complete this part of the application?

In order to do business as a cannabis retailer, at WDFN, a business must apply to the WDFN for a cannabis licence or registration. WDFN is required by law and by corporate policy to determine whether or not an applicant for a cannabis licence is of good character. WDFN may consider the business itself, the owners and key decision-makers, and if necessary, any other businesses and individuals that have direct or indirect control or involvement in the business applying for the licence or registration.

The following individuals must complete and submit all forms in this section:

- Any individual, applicants or partners
- If an applicant or partner is an Indian Band, the Chief and Council members
- If an applicant or partner is a corporation, all officers, directors and shareholders of that corporation who hold at least ten percent (10%) of voting or non-voting shares
 - If a shareholder is a corporation, this information is required for all shareholders of that corporation who hold at least ten percent (10%) of voting or non-voting shares, as well as all officers and directors
 - If a shareholder is an Indian Band, this information is required for the Chief and Council members
 - If a shareholder is a trust, this information is required for the trustee and all non-minor beneficiaries who hold at least ten percent (10%) of legal or beneficial ownership, along with a copy of the trust agreement or a lawyer's undertaking describing the trust structure.

Depending on the ownership and accountability structures of the applicant, WDFN reserves the right to require the above information for other stakeholders, including investors, key operating personnel, and associates.

General Information

1. Provide an answer to every question. If there is not enough room to provide a complete answer, use a separate sheet of paper and reference the applicable section.
2. All personal information you provide to WDFN is confidential. WDFN is required under *The Freedom of Information and Protection of Privacy Act* to protect the confidentiality of personal information in its possession and control, and to use the information only for the purpose for which it is collected.



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3. WDFN will conduct a due diligence interview or investigation in order to establish your suitability to be involved with a cannabis licence or registered business. Through the interview or investigation process, WDFN will gather any information it considers necessary and may request additional information from you, including character references. By signing the attached consent, you are agreeing that WDFN may collect and use this information for the current and any future applications that you are involved with.
4. You are required to inform WDFN within seven (7) days of any changes to the information you supplied that might affect your suitability. Changes that you report must include, but are not limited to, change of address, and/or if you are the subject of a cannabis investigation by the regulatory agency, other than as an applicant for licencing, or registration purposes. This requirement applies both before and after the licence or registration is issued.
5. If you have any questions regarding this form, please contact:

Lands Manager, Economic Development and Lands
Whitecap Dakota First Nation
Phone: (306) 477 – 0908
Fax: (306) 374 – 5899
Email: tdesjarlais@whitecapdakota.com.
6. Give this completed form to the person responsible for submitting the application and/or Personal Disclosure forms to WDFN. If you would like to send this form directly to WDFN, please email it to: tdesjarlais@whitecapdakota.com.



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Personal Disclosure (copy as necessary)

I am submitting this Personal Disclosure to WDFN in respect to a cannabis licence, or application.

Part 1 – Personal Information

Legal first, middle and surname:						
List any other names you have used (maiden name, birth name, etc.):						
Mailing address:						
Home street address (current residence – if different from mailing address):						
City:		Province/State and Country:		Postal/Zip Code:	Driver's Licence #:	
Home phone:		Work/business phone:		Cell phone:		
Primary email address:						
Secondary email address:						
Gender:	Date of birth: YY MM DD		Height:	Weight:	Eye colour:	Hair colour:
<input type="checkbox"/> Female <input type="checkbox"/> Male						
Place of birth (City, Province/State, Country) & Citizenship:						
The inclusion of a colour photocopied Government issued ID (front and back) is a requirement for the WDFN due diligence investigation.						

Part 2 – Criminal Record Check

A copy of a criminal record check from the police agency in the jurisdiction where you live, completed within the last three (3) months, must be attached to this Personal Disclosure form.

DECLARATION – All of the information provided on this form is true and complete to the best of my knowledge. I understand that the WDFN collects the information for the purpose of determining my suitability as an individual involved with a cannabis licence. I CONSENT to the release to WDFN of any information as may be necessary to verify the information contained on this form. My signature authorizes the Royal Canadian Mounted Police (RCMP), through the CPIC system; or other law enforcement agencies, to release records of criminal charges or convictions for which a pardon has not been granted, records of discharges which have not been removed for the CPIC system in accordance with *The Criminal Records Act*, and employees, from all liability respecting the release information to WDFN. I further authorize WDFN to obtain a criminal record check during the time of application, the period of the licence or registration granted pursuant to any cannabis applications and any renewals.

Signature of applicant:	Date:
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Part 3 – Personal and Criminal History

Legal Name from Part 1: _____

<p>Have you ever been investigated, arrested, detained, interviewed, charged or convicted of an offence (such as criminal, drug, gaming, customs, income tax or any offence related to any government assistance program) in any jurisdiction?</p> <p>If yes, please attach details including date and place of investigation, detention, arrest, charge or conviction, the description/circumstances of the offence(s), the disposition of sentence and the name of investigating police agency or enforcement body.</p>	<p>Yes [] No []</p>
<p>To your knowledge, do you have any charges or warrants outstanding or pending in any jurisdiction?</p> <p>If yes, please attach details including date of charge/offence(s), description/circumstances of the offence(s), and the name of investigating police agency or enforcement body.</p>	<p>Yes [] No []</p>
<p>To your knowledge, has a business or corporation in which you had an interest or served as an officer or director ever been investigated, charged or convicted of an offence (such as criminal, drug, gaming, customs, income tax or any offence related to any government assistance program) in any jurisdiction? Or has that business or corporation ever been a defendant in a civil suit based in whole or part on fraud, deceit, misrepresentation, breach of trust or similar conduct?</p> <p>If yes, please attach details including date and place of investigation, detention, arrest, charge or conviction, the description/circumstances of the offence(s), the disposition of sentence and the name of investigating police agency or enforcement body.</p>	<p>Yes [] No []</p>
<p>Have you or a business you were involved with ever applied for a cannabis licence, registration, or other similar qualification (such as a liquor licence or permit)?</p> <p>If yes, please attach details including date, the name of the jurisdiction, and the outcome (such as whether the application was approved, refused, suspended, revoked, or withdrawn).</p>	<p>Yes [] No []</p>
<p>Have you had any claims made against you based in whole or in part on fraud, deceit, misrepresentation, breach of trust or similar conduct in any jurisdiction? This includes being a civil suit.</p> <p>If yes, please attach details including the date of the lawsuit; a description of the lawsuit, including court file number and the names of other parties named in the lawsuit; the outcome of lawsuit, and the name and address of court.</p>	<p>Yes [] No []</p>
<p>Have you ever made an assignment into bankruptcy, been petitioned into bankruptcy, or filed a proposal under an Act or legislation for Bankruptcy and Insolvency?</p> <p>If yes, please attach details including file number, reason and details of bankruptcy, the date of discharge, and the name of the trustee.</p>	<p>Yes [] No []</p>
<p>Do you control, manage or hold trust any assets or liabilities for another person or entity?</p> <p>If yes, please attach details.</p>	<p>Yes [] No []</p>
<p>Are any of your assets or liabilities controlled, managed or held in trust by someone else?</p> <p>If yes, please attach details.</p>	<p>Yes [] No []</p>
<p>Have you ever had assets seized for non-payment of has other action been taken to collect an account or debt that you owed?</p> <p>If yes, please attach details.</p>	<p>Yes [] No []</p>
<p>Have you ever had a garnishee order executed against your salary or bank account?</p> <p>If yes, please attach details.</p>	<p>Yes [] No []</p>



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Part 4 – Consent to obtain and release information and declaration of honest (personal)

Legal Name from Part 1: _____

The Whitecap Dakota First Nation (“WDFN”) is required to collect personal information for the purpose of licencing or registering prospective and current cannabis businesses. The following consent form allows WDFN representatives to verify or investigate the information provided in the Personal Disclosure form and any licence or registration application. WDFN is required under *The Freedom of Information and Protection of Privacy Act* to protect the confidentiality of such information in its possession and control, and to use the information only for the purpose for which it is collected. WDFN will retain the personal information on this form only as long as it is necessary to fulfill the purposes for which it was collected and in accordance with approved mandatory retention policies and schedules established with cooperation of the Saskatchewan Archives Board under *The Saskatchewan Archives Act*.

I, THE UNDERSIGNED, HEREBY:

- (a) consent to the direct and indirect collection from any source and to the use by WDFN of all personal, corporate, financial, business, general, or criminal information or documents that WDFN may reasonably require to determine the applicant’s suitability to obtain and hold a cannabis licence, namely whether the applicant (including but not limited to individuals such as shareholders, officers, directors and affiliated companies, identified in connection with the applicant) is of good character;
- (b) consent to the release by WDFN of any information authorized to be collected pursuant to clause (a), to any law enforcement agency, other regulatory jurisdiction or agency with which WDFN has an arrangement or agreement;
- (c) release all persons referred to in paragraph (c) including their offices, agents and employees, from all liability respecting the release of information to WDFN pursuant to paragraph (c);
- (d) acknowledge and understand that a photocopy of this document will have the same force and effect as the original;
- (e) understand that the consent is in effect for as long as this corporation is involved with a cannabis business permitted or registered by WDFN; and
- (f) certify that the information provided in the Corporate Disclosure form is accurate, correct, true, and free of omissions. I understand that if any of the information provided in this form is not accurate, correct, true, and free of omissions, WDFN may deny any application or may subsequently revoke any licence with which I, the corporation, and/or the applicant is involved. I further understand that if any of the information provided in the application is fraudulent, I, the corporation, and/or the applicant may be subject to prosecution under the *Criminal Code of Canada*.

I have read and understand the above statement.

First and last name (please print)

Date

Signature



Section Five – Information Required of Corporations

Who must complete this part of the application?

In order to do business as a cannabis retailer at Whitecap Dakota First Nation, a business must apply to the WDFN for a cannabis licence or registration. WDFN is required by law and by corporate policy to determine whether or not an applicant for a cannabis licence is of good character. WDFN may consider the business itself, the owners and key decision-makers, and if necessary, any other businesses and individuals that have direct or indirect control or involvement in the business applying for the licence or registration.

The following individuals must complete and submit all forms in this section:

- All applicant or partner corporations
- Corporations and trusts that hold at least ten percent (10%) of voting or non-voting shares of applicant or partner corporations

Depending on the ownership and accountability structures of the applicant, WDFN reserves the right to require the Corporate Disclosure form for other stakeholders, including investors and shareholders that hold less than ten percent (10%) of shares.

General Information

1. Provide an answer to every question. If there is not enough room to provide a complete answer, use a separate sheet of paper and reference the applicable section.
2. WDFN will retain the information on this form only as long as it is necessary to fulfill the purposes for which it was collected and in accordance with approved mandatory retention policies and schedules established with cooperation of the Saskatchewan Archives Board under *The Saskatchewan Archives Act*. WDFN is required under *The Freedom of Information and Protection of Privacy Act* to protect the confidentiality of the information you provide and to use it only for the purposes for which it was collected.
3. You may withdraw your application if your plans change or if you do not wish to provide information about your business. To withdraw your application, submit a written request to WDFN at the address listed on this application form. However, once an application form and related documents are received by WDFN, they become property of WDFN and will not be returned. Any fees you have paid will be non-refundable.
4. If you have any questions regarding this form, please contact:

Lands Manager, Economic Development and Lands
Whitecap Dakota First Nation
Phone: (306) 477 – 0908
Fax: (306) 374 – 5899
Email: tdesjarlais@whitecapdakota.com.

5. Give this completed form to the person responsible for submitting the application and/or Corporate Disclosure forms to WDFN. If you would like to send this form directly to WDFN, please email it to tdesjarlais@whitecapdakota.com.



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Part 2 – Corporate History

List all other jurisdictions where this corporation or a related business currently operates, has previously operated, plans to operate, or has applied to operate a cannabis related business.	
Has your business ever had a cannabis related licence, or other similar qualification refused, suspended, revoked, or withdrawn? If yes, please attach details including name of the jurisdiction and the reason and date of action.	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
Has your business ever been investigated, charged or convicted of an offence (criminal, liquor, drug, customs, income tax or any offence related to any government assistance program) in any jurisdiction? Or has your business ever been a defendant in a civil suit based in whole or part on fraud, deceit, misrepresentation, breach of trust or similar conduct? If yes, please attach details including date and place of investigation, detention, arrest, charge or conviction, the description/circumstances of the offence(s), the disposition of sentence and the name of investigating police agency or enforcement body.	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
Has your business had any claims made against it based in whole or in part on fraud, deceit, misrepresentation, breach of trust or similar conduct in any jurisdiction? This includes a civil suit. If yes, please attach details including the date of the lawsuit; a description of the lawsuit, including court file number and the names of other parties named in the lawsuit; the outcome of lawsuit, and the name and address of court.	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
Has your business ever made an assignment into bankruptcy, been petitioned into bankruptcy, or filed a proposal under an Act or legislation for Bankruptcy and Insolvency? If yes, please attach details including file number, reason and details of bankruptcy, the date of discharge, and the name of the trustee.	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
Do you control, manage or hold in trust any assets or liabilities for another person or entity? If yes, please attach details.	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
Are any of your assets or liabilities controlled, managed or held in trust by someone else? If yes, please attach details.	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
Have you ever had assets seized for non-payment or has other action been taken to collect an account or debt that you owed? If yes, please attach details.	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]

Part 3 – Corporate Financial Information

Financial statements for the past three years, or to the date your business first undertook any kind of activity including fundraising (whichever is less), must accompany the Corporate Disclosure form. They must be prepared by an accountant holding a professional designation and certified correct and in accordance with generally accepted accounting principles. The statements must reflect the business operation for which the Corporate Disclosure form is being submitted and must include a balance sheet and income statement. Where application, consolidated financial statements must be submitted. If your business was formed recently and does not have three (3) years of financial statements, please provide the statements you do have and check the appropriate box below. Note that WDFN may request additional financial information from individuals or corporations where necessary.

- [] I confirm that I have attached three (3) years of required financial statements as described above.
- [] I have provided partial or no financial statements because business activity began in the year _____.

WDFN reserves the right to require updated financial information as necessary.



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Part 4 – Consent to obtain and release information and declaration of honest (corporate)

The Whitecap Dakota First Nation (“WDFN”) is required to collect personal information for the purpose of licencing or registering prospective and current cannabis businesses. The following consent form allows WDFN representatives to verify or investigate the information provided in the Personal Disclosure form and any licence or registration application. WDFN is required under *The Freedom of Information and Protection of Privacy Act* to protect the confidentiality of such information in its possession and control, and to use the information only for the purpose for which it is collected. WDFN will retain the personal information on this form only as long as it is necessary to fulfill the purposes for which it was collected and in accordance with approved mandatory retention policies and schedules established with cooperation of the Saskatchewan Archives Board under *The Saskatchewan Archives Act*.

I, THE UNDERSIGNED, HEREBY:

- (a) consent to the direct and indirect collection from any source and to the use by WDFN of all personal, corporate, financial, business, general, or criminal information or documents that WDFN may reasonably require to determine the applicant’s suitability to obtain and hold a cannabis licence, namely whether the applicant (including but not limited to individuals such as shareholders, officers, directors and affiliated companies, identified in connection with the applicant) is of good character;
- (b) consent to the release by WDFN of any information authorized to be collected pursuant to clause (a), to any law enforcement agency, other regulatory jurisdiction or agency with which WDFN has an arrangement or agreement;
- (c) release all persons referred to in paragraph (c) including their offices, agents and employees, from all liability respecting the release of information to WDFN pursuant to paragraph (c);
- (d) acknowledge and understand that a photocopy of this document will have the same force and effect as the original;
- (e) understand that the consent is in effect for as long as this corporation is involved with a cannabis business permitted or registered by WDFN; and
- (f) certify that the information provided in the Corporate Disclosure form is accurate, correct, true, and free of omissions. I understand that if any of the information provided in this form is not accurate, correct, true, and free of omissions, WDFN may deny any application or may subsequently revoke any licence with which I, the corporation, and/or the applicant is involved. I further understand that if any of the information provided in the application is fraudulent, I, the corporation, and/or the applicant may be subject to prosecution under the *Criminal Code of Canada*.

I have read and understand the above statement.

First and last name (please print)

Signature

Name of corporation

Date



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Section Six – Certification of Information

I, THE UNDERSIGNED, HEREBY:

1. Certify that I/we am/are the applicant(s) named in this application **OR** I am the _____ of the Corporation/Indian Band named in this application and [position or office held] have authority to speak on their behalf;
2. Certify that the facts contained in this application are complete and true in substance in fact;
3. Certify that the applicant has complied with the requirements of *The WDFN Cannabis Law, 2020*, *The WDFN Cannabis Regulations* and any other applicable laws.
4. Acknowledge and understand that a photocopy or other electronic reproduction of this document will have the same force and effect as the original;

I have read and understand the above statement.

Name(s): _____

Signature(s): _____

Business Name: _____

Date: _____ Witness: _____



Section Seven – Additional Information to be Submitted

The following additional information will be required in order to complete your application and before a licence can be issued but does not have to be included in your initial application package.

- A detail description of the inventory management and sales tracking system that will be used.
 - For specifications, see the Appendix: Cannabis Tracking and Reporting section of the WDFN Cannabis Regulations
 - WDFN will confirm that your system is appropriately configured before a licence will be issued.
- A detailed description of security measures that will be put in place for the protection and safeguarding of inventory, including an engineer's report confirming that the cannabis storage area(s) complies with security requirements.
 - For specifications, see Appendix: Cannabis Tracking and Reporting in the WDFN Cannabis Regulations
 - **It is strongly recommended that you discuss your proposed security measures with WDFN before any construction or renovations start**
- A floor plan drawing of the retail store space and any related storage facilities (all changes to the layout of an existing retail store, or related storage facility require approval prior to proceeding with the renovations):
 - If you are planning changes to the layout of an existing permitted retail store, or related storage facility, please ensure your floor plan drawing clearly labels the proposed renovations.
 - A floor plan is not typically required if the retail store, or related storage facility has been previously permitted and the application is not making any changes to the current layout.
- The applicant must be lawfully entitled to possession of the premises where the cannabis retail store and any related storage facilities will be located on WDFN. To verify legal possession, the following documentation is required for all relevant locations:
 - If the applicant owns the premises, a copy of the certificate of title
 - If the applicant leases that premises from the owner, a copy of the lease agreement
 - If the applicant leases the premises from a lessee, a copy of the sublease as well as a copy of the head lease and the landlords written consent
- Copy of WDFN Business Licence or written approval of the facility location
- Class 2 or 3 building inspection approval for all facilities (must comply with provincial building standards)

Before a permit can be issued:

- WDFN will confirm that all owners and employees completed social responsibility training
- A WDFN Cannabis Inspector will attend the proposed location in order to verify the contents of the submitted application package. This will include but not limited to the verification of the security safeguards as well as the existence and proper configuration of the inventory management and sales tracking system
- You will be required to complete and submit a Declaration of Compliance Form (Section Eight) verifying that the business complies with all applicable legislation. If the location is under construction or renovation, this form should not be completed until premises have received approval from a Building Inspector.
- Payment of all applicable fees (application, annual licence fee, development permit and levies).



Section Eight – Declaration by Applicant

COMPLIANCE WITH OTHER APPLICABLE LEGISLATION

WDFN requires all licenced businesses to comply with any relevant federal, provincial, or WDFN laws.. All licenced cannabis facilities must also have approval from a Building Inspector to ensure the facilities comply with relevant building codes.

By completing the declaration below, you are confirming that your facilities and operation are and will remain in compliance with any relevant federal, provincial, or WDFN laws.

IMPORTANT NOTICE:

If a licenced cannabis business is not in compliance with applicable building code requirements or any other relevant laws, WDFN may refuse to issue a licence, or may suspend or cancel an existing cannabis licence.

DECLARATION:

I, THE UNDERSIGNED, HEREBY solemnly declare that the facilities and operations to which this application relates are and will remain in compliance with any relevant federal, provincial, or WDFN laws.

Name(s): _____

Signature(s): _____

Business Name: _____ Date: _____

Witness: _____