

Request for Change of Ownership

If you are removing the original applicant from the ownership structure and transferring ownership to a brand-new applicant or adding a business partner who is to be the new main contact for the facility, please attach a new business license application with the new main contact information to this form.

| I, | , OW | /ner of the business |
|-------------------------------|---------------------------|--|
| located at Block(s) | , Lot(s) | , at the address |
| | , Mo | offat, CO 81143, MJ license no |
| request that the ownership of | said local business be cl | hanged/transferred as indicated below: |
| Full Transfe | r of Ownership 🛛 Rer | moving an Owner 🛛 Adding New Person(s) |
| | Previe | ous Owner: |
| Name Printed: | | |
| Mailing Address: | | Phone: |
| Email Address: | | |
| Signature: | | Date: |
| | Nev | <u>w Owner</u> : |
| Name Printed: | | |
| Mailing Address: | | Phone: |
| Email Address: | | |
| Signature: | | Date: |
| OFFICE USE ONLY: D | ate: | |
| | | MJ License No |
| | | |