

PROPERTY OWNER CONSENT FORM

Commercial Cannabis Business

PROPERTY OWNER INFORMATION:

OWNER MANAGER OTHER: _____

Name of Property Owner Title

Property Owner's Business Name (if applicable) Phone Number

Mailing Address City State Zip Code

PREMISES LOCATION INFORMATION:

Physical Address City State Zip Code

Tenant Applicant (Business Name)

I/We, as the owner(s) of the subject property, consent to the filing of this application and use of the property for the purposes described herein. We further consent and hereby authorize City representative(s) to enter upon my property for the purpose of examining and inspecting the property in preparation of any reports and/or required environmental review for the processing of the application(s) being filed.

Name **Signature**

Title **Date**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document, to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

Subscribed and sworn to before me this _____ day of _____, 20_____, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me _____.
(Name, Notary Public)

Notary Signature **Date of Notarization**

[Notary Seal]