



Planning Department
109 West 1st Street
Portales, NM, 88130
www.rooseveltcounty.com

**Roosevelt
County
Cannabis
Establishment**

Date: _____
Permit# _____
Fee: Per Roosevelt County Clerk

Application

Conditional Permit Permit

For purposes of this Application, the individual submitting the Application must be the partner, manager or director of any legal entity or the owner or manager of any noncorporate entity. Name of individual owner or manager of noncorporate entity _____

1. **Entity Name:** _____

2. **Trade Name:** _____

3. **Type of Corporate Structure:** Corporation LLC Partnership Other

Include a list all persons of interest in the Cannabis Establishment business.

- a) Applicant must include documentation showing the names, addresses, email, contact information of the majority of those individuals or other entities which own a majority of the interest in the corporation, Limited Liability Company (LLC), or any other legal entity other than an individual.
- b) If the applicant is an LLC, provide the names, addresses and contact information for any and all persons or entities who has, holds, or own any interest in the entity and the name and address of the registered agent in New Mexico sufficient for service of process.
- c) If the applicant is a corporation or an LLC, the applicant must include the name and address of the registered agent in New Mexico sufficient for service of process, the name of the director(s) and/or the managing member(s), together with residence address, birthdate of each member(s) or shareholder(s) in the entity and each officer(s), director(s) or member(s) of the entity.

The LLC, Corporation or other legal entity shall provide a certificate of good standing from the New Mexico Secretary of State's Office as of the date of the application

4. **NM Tax ID#** _____

5. **Federal Tax ID#** _____

Copy of current license issued by the State of New Mexico to operate a cannabis facility must be attached

6. **Facility Address:** _____

City: _____ Zip Code _____

7. **Mailing Address:** _____

City: _____ State: _____ Zip Code _____

8. **Primary Contact Name:** _____

Phone: _____ Email: _____

9. Property: Owned Real Estate Contract Leased

Name of Property Owner(s) _____

Legal description: _____

Universal Property Code (UPC) #: _____

Account #: _____

Phone #: _____ Email: _____

Expiration Date of Lease (if applicable): _____

Review-Roosevelt County Planning Staff _____

10. Development Plan: Site Plan Utility Plan Parking Lighting Fencing Security

A list and map of property owners within 1,000 feet of the facility (property line to property line)
(Roosevelt County Assessor's Office)

Distance requirements from specified uses listed in Section 4 of Roosevelt County Cannabis Ordinance No.2022(TBD)

Reviewed-Roosevelt County Planning Department: _____

Nearest school or day care facility (if applicable): _____ (Miles)

Nearest Cannabis retailers or consumption areas (if applicable): _____ (Miles)

Copy of the City of Portales Commercial Solid Waste Permit (if applicable): _____
_____ (Miles)

Copy of the City of Portales Commercial Liquid Waste Permit (if applicable): _____
_____ (Miles)

a scaled site plan (hand drawn or image) detailing, but not limited to, indoor and outdoor use, storage of HAZMAT (including quantities and types) to include organic as well as chemical, distance to property lines, distance between structures, and security fences.

(Please see site plan example.)

11. Cannabis Establishments:

Cannabis Producer/ Microbusiness

Cannabis Manufacturer

Cannabis Research/Testing Laboratory

Cannabis Integrate Product Facility

Cannabis Courier

Cannabis Extraction Facility

Cannabis Growth and Educational Stores

Cannabis Retailer

Cannabis Consumption Area

Cannabis Producer/Microbusiness Producer:

Required documentation of agriculture water rights.

NM Engineer’s Office(sign-off) _____

Copies of agriculture water right documentation (acre-feet): _____

12.Operation Hours for each day of the week: _____

13.Structures:

Number of proposed structures on site: _____

Proposed new structures reviewed and accepted by the City of Clovis or NM State Building Inspector

Reviewed- City of Clovis or NM State Building Inspector: _____

The application is subject to revisions consistent with state statutes and regulations that may be implemented, and that the applicant understands and agrees that they may be required to provide additional information is necessary to comply with such regulations

Oath of Application: I declare under penalty of perjury that this application and all attachments are true, correct, and complete to the best of my knowledge. I also acknowledge that it is my responsibility and the responsibility of agents and employees to comply with the provisions of the latest Roosevelt County Cannabis Ordinance No.2022-(TBD) and the Cannabis Regulation Act which govern my cannabis license.

Authorized Signature: _____ Date: _____

Printed Name: _____ Title: _____