

Frequently Asked Questions

1 What is the status of my card?

All paperwork is processed within 5 weeks. If you do not receive a response within 6 weeks of the date on your certified mailing receipt, you may [contact us](#) by phone or email. You'll be asked to provide the following information to protect your confidentiality:

- Full legal name
- Date of birth
- First five digits of your Social Security number
- Current mailing address

2 My card was lost, stolen or damaged. What do I do?

Please submit a Report of Lost, Stolen or Damaged Card form along with a copy of your ID. You may download the form from our [forms page](#).

3 How do I return corrections to MMR? OR I forgot to send something with my application, what do I do?

The Registry accepts corrections to applications by mail, drop box, email, and fax. We do not accept applications by fax or email, only corrections to a pending application. If you have submitted corrections to your application, your paperwork will be forwarded for review.

If sending a payment:

Please include your name, DOB and first 5 digits of your SSN on your payment.

MAIL

Application Processing

HSV-8608

CDPHE

4300 Cherry Creek Drive South

Denver, CO 80246

EMAIL: medical.marijuana@state.co.us

Cell phone or tablet photos are accepted via email as well as scans. Documents must be clear. Please include your contact information should the Registry be unable to read a document.

DROP BOX:

710 South Ash St. (on CDPHE campus) at the southeast entrance of the building. The drop-box is on the wall just inside the first set of glass doors and is available Monday-Friday, 7 am to 6 pm. Please be sure all items placed in the drop-box are in a sealed envelope with CUSTOMER SERVICE written on the envelope.

4 My card is about to expire, how do I renew it?

The renewal process is the same as the process for a new application. We recommend you send your renewal application in 60 days before your card's expiration date. You may download the application from our [forms page](#).

5 What can I use as a proof of residency?

Effective Nov. 1, 2014, a Colorado driver's license or photo ID is required as proof of identity and residency for all applications. Patients who cannot provide one of these documents must submit a proof of identity and residency waiver. Proof of Residency Waivers submitted with out-of-state ID's are only valid for one (1) year. Upon renewing your medical marijuana card, you must provide a Colorado ID. Applications with proof of identity and residency waivers will require additional time for review and verification.

6 How do I change my caregiver or my legal name with the Registry?

Please complete a Change of Patient Records form. You may download the form from our [forms page](#). Please note the Registry does not print a replacement card for a change of address.

7 I was told I am listed with multiple centers, how do I designate my primary center or drop centers?

As of November 14th 2014, The Medical Marijuana Registry is no longer collecting center data. If you need information regarding the centers designated to your card, please contact the Marijuana Enforcement Division (MED) at [303-205-8421](tel:303-205-8421) or the centers you have previously visited.

8 I would like my name removed from the registry. How do I make that happen?

We cannot purge your name from the database. We can change your status to "surrendered" and all records remain confidential. Please submit a completed Request to Surrender Registry Card form. You may download the form from our [forms page](#).

9 My check bounced after my card was approved. How do I pay?

Please wait until an invoice is sent to you by the Department's Accounting Office. Payment cannot be credited to your account until an invoice has been issued. You will be given instructions in that invoice for making payment by credit card. If you have any questions you may leave a message for accounting by calling 303-692-2122.

10 There is a typo or error on my card. How do I fix this?

We apologize for the error. You may [contact us](#) by phone or email to notify us of the error. You will be asked to provide the following information to protect your confidentiality:

- Full legal name
- Date of birth
- First five digits of your Social Security number
- Current mailing address

Please note replacement cards are only printed for corrections that impact your ability to purchase marijuana. This includes: corrections to name, date of birth, social security number, issue or expiration dates, and caregiver name.