



**COLORADO**  
Department of Revenue  
Specialized Business Group—Marijuana

# Marijuana Accelerator Endorsement Application

**Marijuana Enforcement Division**

# Colorado Marijuana Enforcement Division

## Accelerator Endorsement Application

### **APPLICATION CHECKLIST**

**1 Application Fully Completed**

Type or clearly print an answer to every question. If a question does not apply, indicate this with an N/A. If the available space is insufficient, continue on a separate sheet and precede each answer with the appropriate title.

**2 All Requested Information Attached**

The following information requested on the application must also be submitted if applying for an Accelerator Endorsement:

- Equity Assistance Proposal
- Equity Partnership Agreement

**3 Application and License Fees**

**All applications and documentation submitted must be single-sided and on 8.5x11 inch paper.**

See fee table on website: [www.colorado.gov/revenue/med](http://www.colorado.gov/revenue/med)

Application fees remitted to the State Licensing Authority and/or the Department of Revenue, are non-refundable.

- Submit complete original or scanned application packet.
- Cash, checks (in the name of the applicant or applicants attorney's trust account), money orders and major credit cards (subject to service charge).
- Mail-in applications can only be paid by check or money order.

You are responsible for knowing who your Local Licensing Authority is.

**4 Application Submittal**

Applications can be submitted in person or by mail with all attachments and requisite fees:

Marijuana Enforcement Division  
1707 Cole Blvd., Suite 300, Lakewood, CO 80401  
ATTN: Business Licensing

**Note: Incomplete applications will not be processed. Applicants must collect the incomplete application and fees (including those mailed in or delivered via 3rd party), from the Lakewood Office prior to the end of the next business day.**

**Endorsement Applicants should contact the Local Licensing Authority in the jurisdiction to verify if co-located and/or separate Accelerator businesses are permitted.**

Marijuana Endorsement Number (Assigned by the Division)
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## Colorado Marijuana Licensing Authority

# Marijuana Accelerator Endorsement Application

<b>Definition</b>							
<b>Accelerator-Endorsed Licensee:</b> a Retail Marijuana Store Licensee, Retail Marijuana Cultivation Facility Licensee or Retail Marijuana Products Manufacturer Licensee endorsed to host and offer technical and capital support to an Accelerator Licensee operating on the Endorsement Holder's Licensed Premises or a separate licensed premises provided by the Endorsed Licensee.							
<b>Application Type</b> <input type="checkbox"/> New Application <input type="checkbox"/> Renewal Application							
Applicant's Last Name (Please Print)			First Name (Please Print)			Full Middle Name	
Gender <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> X		Race <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Caucasian <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Mixed Race <input type="checkbox"/> Native American <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Undisclosed/Unknown					
Date of Birth		Social Security Number			Government issued ID & Jurisdiction		
Physical Appearance ⇨		Height	Weight	Hair Color	Eye Color	U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	If "No", List Country of Citizenship
<b>Physical Address</b>							
Street Address							
City			County			State	Zip
Phone Number		Email Address					
<b>The Applicant Must provide an Equity Assistance Proposal that includes:</b>							
<ul style="list-style-type: none"> <li>• Types of assistance to be provided</li> <li>• What, if any, services will be subcontracted to a 3rd party</li> <li>• Timelines assistance will be provided</li> <li>• If rent will be charged</li> </ul>				<ul style="list-style-type: none"> <li>• How the Accelerator Licensee will be protected if there is a change of ownership or change of location of licensed premises</li> <li>• Has the Applicant Licensee been subject to any administrative action by the State or Local Licensing Authority and what, if any, restrictions are levied</li> </ul>			
<b>Pursuant to Rule 3-1105 (D), prior to hosting or offering technical and/or capital support to an Accelerator Licensee, an Endorsed Licensee must provide an Equity Partnership Agreement that is executed by both the Accelerator-Endorsed Licensee and the Accelerator Licensee.</b>							
<b>Endorsement Applicant must submit Addendum A if more than one RMB will host an Accelerator Licensee</b>							
<b>Associated Regulated Marijuana Business(RMB)</b>							
Business Name of Associated RMB					License Number		
Street Address of Associated RMB			City		State	Zip	
Business Phone Number		Contact Email Address					
Local Licensing Authority Contact Name (If Applicable)					Local Licensing Phone Number (If Applicable)		
Has the Applicant been granted approval of the Accelerator Endorsement by the local licensing authority? (If required)							<input type="checkbox"/> Yes <input type="checkbox"/> No

# Affirmation of Eligibility for Accelerator-Endorsed Licensee

Applicant affirms that, prior to submission of this application he/she was compliant with the following criteria established pursuant to Rule 2-285.

1. The Applicant currently holds an owner interest in a Retail Marijuana Store, Retail Marijuana Cultivation Facility, or a Retail Marijuana Products Manufacture licensed in the State of Colorado pursuant to Article 10 of Title 44 of the Colorado Revised Statutes.
2. In the previous two years the Applicant has not been subject to a license revocation or active suspension issued by the State Licensing Authority, any Local Licensing Authority or Local Jurisdiction or any other state in which it operated.
3. The Applicant has operated the licensed marijuana business for at least two (2) years prior to the date of application
4. If the Applicant has NOT operated a licensed marijuana business for at least two years, the applicant affirms he/she satisfies at least one of the following: (Check the applicable criteria)
  - The Applicant possesses a valid commercial marijuana license issued in another state and has operated such license for the preceding two years;
  - For the preceding two years the Applicant has participated in an accelerator, incubator, or social equity program that may, but is not required to be, associated with the commercial marijuana industry:
  - The Applicant has at least two years of regulated cannabis industry experience at a managerial or executive level; or
  - The Applicant has at least two years of business experience in a highly regulated industry other than the marijuana industry.
  - N/A- Applicant has successfully operated a RMB for at least two (2) years prior to submitting this application.
5. The applicant has included the Applicant's Equity Assistance Proposal containing the information required by the 3-1100 Series Rules.

I, \_\_\_\_\_, as the applicant for this Social Equity Accelerator-Endorsement  
Print

state under penalty of perjury, pursuant to §18-8-503, that the foregoing is true and correct to the best of my knowledge, information and belief.

Signature <b>THIS FORM MUST BE SIGNED IN ADOBE ACROBAT PRO OR READER</b>		Date
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### Addendum A - Additional Accelerator Host Licensed Premises

<b>Associated Regulated Marijuana Business(RMB) Identify the business that will host the Accelerator Licensee</b>			
Business Name of Associated RMB		License Number	
Street Address of Associated RMB		City	State Zip
Business Phone Number	Contact Email Address		
Local Licensing Authority contact name (If Applicable)		Local Licensing Phone Number (If Applicable)	
Has the Applicant been granted approval of the Accelerator Endorsement by the local licensing authority? (If required)			<input type="checkbox"/> Yes <input type="checkbox"/> No

<b>Associated Regulated Marijuana Business(RMB) Identify the business that will host the Accelerator Licensee</b>			
Business Name of Associated RMB		License Number	
Street Address of Associated RMB		City	State Zip
Business Phone Number	Contact Email Address		
Local Licensing Authority contact name (If Applicable)		Local Licensing Phone Number (If Applicable)	
Has the Applicant been granted approval of the Accelerator Endorsement by the local licensing authority? (If required)			<input type="checkbox"/> Yes <input type="checkbox"/> No

<b>Associated Regulated Marijuana Business(RMB) Identify the business that will host the Accelerator Licensee</b>			
Business Name of Associated RMB		License Number	
Street Address of Associated RMB		City	State Zip
Business Phone Number	Contact Email Address		
Local Licensing Authority contact name (If Applicable)		Local Licensing Phone Number (If Applicable)	
Has the Applicant been granted approval of the Accelerator Endorsement by the local licensing authority? (If required)			<input type="checkbox"/> Yes <input type="checkbox"/> No

<b>Associated Regulated Marijuana Business(RMB) Identify the business that will host the Accelerator Licensee</b>			
Business Name of Associated RMB		License Number	
Street Address of Associated RMB		City	State Zip
Business Phone Number	Contact Email Address		
Local Licensing Authority contact name (If Applicable)		Local Licensing Phone Number (If Applicable)	
Has the Applicant been granted approval of the Accelerator Endorsement by the local licensing authority? (If required)			<input type="checkbox"/> Yes <input type="checkbox"/> No