



Community Development Department

Commercial Cannabis Permit Application

FORM D : Criminal Convictions

Staff Use Only		
Filing Date:	Counter Planner Initials:	Case Number:

List all criminal convictions for applicants and any owners, officers and managers, as identified on the Master Application Form, Section 8.

1. Date of Conviction: _____ Person Convicted: _____

County and State of Conviction: _____

Description: _____

2. Date of Conviction: _____ Person Convicted: _____

County and State of Conviction: _____

Description: _____

3. Date of Conviction: _____ Person Convicted: _____

County and State of Conviction: _____

Description: _____

4. Date of Conviction: _____ Person Convicted: _____

County and State of Conviction: _____

Description: _____

5. Date of Conviction: _____ Person Convicted: _____

County and State of Conviction: _____

Description: _____

6. Date of Conviction: _____ Person Convicted: _____

County and State of Conviction: _____

Description: _____

Attach Additional Sheets if Necessary

Check this box if there **are no** criminal convictions to list above.

If convictions are listed, this page equals 1 page of text. Additional sheets shall each count as additional pages. Application is limited to 75 pages of text and 25 pages of images.