



APPLICATION MODIFICATION REQUEST BUSINESS PREMISES RELOCATION

LIC-4002-MOD

DCR Record No: _____

Instructions: The purpose of this form is to make modifications to the Business Premises location on an Application or License. This form should be submitted to request a relocation prior to the execution of a new lease. If DCR approves the requested relocation, the Applicant will have 60 days, unless more time is authorized by DCR, to finalize and submit documents. **Please note: Applicants will not be able to conduct Commercial Cannabis Activity at the new location until the new Business Premises passes an Initial Inspection and Temporary Approval is issued.**

Existing Business Premises Location: _____

Proposed Business Premises Location: _____

Is the Primary Mailing Address for this Legal Business Entity changing? No Yes

If "Yes" provide the new Primary Mailing Address: _____

By signing below I declare under penalty of perjury that I am authorized to make the requested changes to the Application or License. I affirmatively represent to the City of Los Angeles and DCR that this modification to the Application or License is not made in breach of any agreement involving either the existing or new entity or any other related party. I understand that DCR's processing of this modification is based on these affirmative representations and this attestation, and any dispute, legal or otherwise, arising between the existing and new entities, or any other party, past, present, or future, concerning this modification does not involve the City or DCR. In processing this modification, the City and DCR do not validate any party's claims with regard to any disputes, legal or otherwise, arising between the existing and new entities, or any other party, past, present, or future. Additionally, I declare under penalty of perjury that the statements contained in this form and any attachments or supporting documents are complete and true to the best of my knowledge. I understand that submission of false or misleading information, or the failure to disclose a material fact, may result in denial of my License Application, administrative action or penalties, and/or revocation of authorization to conduct commercial cannabis activities.

I am: Owner Social Equity Individual Applicant Authorized Agent

Name / Title

Signature

Date

Signature instructions: This form requires a signature from the Authorized Agent designated on the Authorized Agent Acknowledgement (LIC-4009-FORM). If an Authorized Agent has not been designated, signatures are required from a sufficient number of Level 1 Owners to constitute a majority (51%) of the ownership of the Applicant or Licensee. "Level 1 Owners" are the natural persons or entities that own the Applicant or Licensee entity directly without any intervening entities or persons. If a Level 1 Owner is an entity, the CEO or President, or equivalent executive position, may sign on behalf of the entity.