

## WAIVER REQUEST FORM: SECURITY REQUIREMENTS

Under 935 CMR 500.700(3), a Marijuana Establishment may request a waiver for a specific security requirement listed in 935 CMR 500.110. The Marijuana Establishment must submit additional waiver requests for additional security requirements—only one security requirement may be waived per request form.

Written documentation is required to evaluate the waiver request. The Marijuana Establishment must specifically state the security requirement requested to be waived, the reasons why it should be waived, and alternative and compensating steps or features that will be utilized in lieu of the security requirement. Once received by the Commission, your request will be sent to the chief law enforcement officer in the municipality where the Marijuana Establishment is or will be located. The chief law enforcement officer has 30 days to review the waiver and do one of the following:

- a. Certify the waiver is not unreasonable under the circumstances; or
- b. Provide the Commission with a statement why the waiver jeopardizes the health or safety of consumers or the public.

When the Commission receives the response from the chief law enforcement officer, it will review the waiver. Alternatively, if the Commission does not receive a response from the chief law enforcement officer within 30 days, the Commission will review the waiver as submitted by the applicant/licensee. Please note that the opinion of the chief law enforcement officer will be considered if submitted but is not determinative of the outcome.

The request must be filled out and signed by an individual with authority or control over the management and operations of the Marijuana Establishment. Additional documentation may be submitted along with the request form as long as it directly addressed the security requirement to be waived. Before the request is submitted, it must be notarized. Once completed, the waiver form and any additional information should be combined into a single PDF document and emailed to <a href="mailto:cannabislicensing@mass.gov">cannabislicensing@mass.gov</a>.

Marijuana Establishment Requesting the Security Waiver:		
Application/License Number(s) that will be Affected by the Waiver:		
Physical Address of the Marijuana Establishment Where the Waiver will be in Effect (if granted):		
Marijuana Establishment Representative Executing the Waiver Request:		

1. List the specific security requirement requested to be waived:		
2. List the reason(s) why this security requirement should be waived (use additional documents/page needed—please appropriately reference addendums):		

3.	List alternative and compensating steps or features that will be utilized in lieu of the security requirement ( <i>if granted</i> ):	
4.	In the opinion of the Marijuana Establishment or its representative, if the Commission waives this security requirement, will the waiving of this requirement jeopardize the health or safety of consumers, patients, or the public ( <i>please check one of the boxes below</i> )?	
	Yes No Unknown or can't be easily determined	

By signing this document, I affirm that all the information provided above is true and accurate. I understand that all requirements listed in 935 CMR 500 must be complied with unless otherwise notified by the Commission. Failure of the Marijuana Establishment or its representative to fully complete this form may result in the denial of your waiver request.

Marijuana Establishment's Representativ	e Printed Name:
Marijuana Establishment's Representativ	ve Signature:
Date of Request:	
AUTHEN	TICATION BY NOTARY PUBLIC
On this day of	, 2018, before me, the undersigned notary public,
personally appeared	, proved to me through satisfactory
evidence of identification to be the person	n whose name is signed above and that he/she did so voluntarily
for its stated purpose.	
	NOTARY STAMP/SEAL
Notary Public Signature	