

**COMPLIANCE with the Compassionate Use of Medical Cannabis Program Act (410 ILCS 130/)  
and Illinois Cannabis Regulation and Tax Act (410 ILCS 705/).**

**Child Care Facility Attestation**

**I am aware of the restrictions outlined in the Compassionate Use of Medical Cannabis Program Act (410 ILCS 130/) and Illinois Cannabis Regulation and Tax Act (410 ILCS 705/).**

- **Cannabis of any type or form shall not be consumed, possessed, stored in and/or on the premises of any licensed or unlicensed child care facility.**
- **Cannabis of any type or form shall not be consumed, stored or possessed by any person at any time when they are, or will be transporting a youth-in-care. Cannabis shall not be stored, possessed or consumed within any vehicle used to transport youth-in-care.**
- **No child who is a resident of a licensed or unlicensed child care facility, and no employee of a licensed or unlicensed child care facility shall be in proximity to any type or form of cannabis where it can be observed and/or the odor can be detected.**

Applicant/Licensee understands that any divergence from compliance with the Public Acts noted above, shall require immediate notification to the assigned licensing representative and submission of an updated CFS 452-7.

“I hereby certify and affirm, under penalty of perjury, that” (Check one)

- I will comply with the **Compassionate Use of Medical Cannabis Program Act (410 ILCS 130/)** and the **Illinois Cannabis Regulation and Tax Act (410 ILCS 705/)**.
- I will not or cannot comply with the **Compassionate Use of Medical Cannabis Program Act (410 ILCS 130/)** and the **Illinois Cannabis Regulation and Tax Act (410 ILCS 705/)**.

*Failure to certify willingness to comply with the Public Acts noted above, shall result in denial of an initial application for licensure and enforcement action against an existing license. This form shall be certified prior to the issuance of an initial license and prior to renewal of an existing license.*

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Applicant/Licensee Signature and Printed Name

Date

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Applicant/Licensee Signature and Printed Name

Date