

APPROVALS OF APPLICATION FOR PERMIT

1. Certification of Engineering Plans and Specifications:

a) Certificate by Applicant or Employee of Applicant (Must be completed)

I hereby certify that I am familiar with the information contained in this application, the attached schedules, and that to the best of my knowledge and belief such information is true, complete, and accurate, and the engineering plans and specifications were prepared by me or under my direction.

Name _____ Title _____

Signature _____ Date _____

b) Certificate by Design Engineer

I hereby certify that I am familiar with the contents of this application and the rules for ***The Compassionate Use of Medical Cannabis Pilot Program***, that the design of the cultivation center conforms to the requirements of the rules, and the engineering plans and specifications were prepared by me or under my direction.

Engineer _____
Name Registration No. Seal

Firm _____

Address: _____ Telephone No. _____

Signature _____ Date _____

2. Certification of Application for Medical Cannabis Cultivation Center :

Certificate by Applicant(s)

I/We hereby certify that I/We are familiar with the contents of this application, the attached schedules, and am/are authorized to sign this application in accordance with 8 IAC 1000.100(e) of the rules. I/We agree and understand that conditions of License Approval are that I/we construct and operate the Medicinal Marijuana Cultivation Center as submitted in this application and conform to all requirements of Part 1000.

Authorized Applicant:

Name _____ Title _____

Signature _____ Date _____

Company Name _____