

#### TOWN HALL 365 BOSTON ROAD BILLERICA, MASSACHUSETTS 01821 978-671-0939 FAX: 978-671-0947

#### PROCEDURE TO APPLY FOR A MARIJUANA LICENSE

- □ Town of Billerica Application (with signoffs from appropriate town agencies and administrative fee). \*\*Note the Police sign off should be the last stop. The entire package should be given to Lt. Coffey for review. He will deliver it to the Select Board office when his review is complete.
- ☐ Town of Billerica Adult Use Marijuana Establishment and Medical Marijuana Treatment Center License Application
- □ Check made payable to the <u>Town of Billerica</u> for the Administrative Fee. See fees below:

#### New: \$100; Unless a Marijuana Cultivator Use, which is \$.10/sf

- □ Town of Billerica Criminal Record Background Check form must be filled out and submitted to the Billerica Police Department. This should be submitted when you are obtaining their signature on the application.
- □ Authorization Form Required. Advertising bill to be paid by the Applicant (when applicable).
- □ Copy of Workers' Comp Insurance Policy and Worker's Comp Affidavit
- □ Certified Plan of premises
- □ Copy of Recorded Planning Board Special Permit.
- ☐ Copy of the Dispensary Agent Permit
- □ Valid Government Issued ID showing applicant is 21 years old or older.
- □ Proof of current Dispensary Agent Registration, issued by the CCC or DPH.
- Read the Billerica Rules and Regulations for Adult Use Marijuana Establishments and Medical Marijuana Treatment Centers. Sign and return the back page as part of the application.
- □ Application to obtain certified list of abutters from Assessor's Office and submit to Select Board's Office.
- Once the application is complete, the <u>Applicant</u> will notify abutters by Certified Return Receipt Required mail not less than (7) seven days before hearing (hearing notification that should be sent to abutters will be emailed to applicant). The sender's address on the PS Form 3811 "Green Card" should be Town of Billerica, Select Board Office, 365 Boston Road, Billerica, MA 01821. The application address should also be listed on the green card to make sure it is applied to the proper application.



Fee	Paid:	\$

	ACTION:		or		HANGE	
Licensee of Business:						
<b>Doing Business As:</b>						
Street Address:			As	ssessors Pl	ate/Parcel:	
Phone #:		Zip Code:		7	Γax ID #:	
Alt. Phone #:		Er	mail:			
DESCRIPTION OF PREM	IISES:					
Include # floors, total SF, #	of patron restroor				Jse additional attachments	if necessary
and attach a plot plan of the	premises if there	are exterior	r changes.			
		_				
REQUIRED SIGNATURES	S: (Obtain nece	essary appro	ovals <u>befo</u> r	re su <u>bmis</u>	sion)	
Building Inspector:					Date:	
Comments:						
Board of Health:					Date:	
Comments:						
Police:					Date:	
Comments:						
<u>Fire</u> :					Date:	
Comments:						
Treasurer:					Date:	
Comments:						
Manager's Name:						
<b>Street Address:</b>						
City/Town/State/Zip:						
Phone #:	Tax ID	) #:		En	nail:	

Requested Hours of Operatio Weekday (Monday-Friday):	n: (For new applica	tion or for change o	n license)	
Saturday:				
Sunday:				
Sunuay.				
LICENSE TYPE REQUESTI	ED:			
I IOIIOD (Cinala Ontion)	On-Premise Retai	l (S12)	Wine & Malt	All Alcohol
LIQUOR (Circle Option):	Off Premise Retai	l (S15)	Wine & Malt	All Alcohol
Type of Busin	ess S12 Only: Clu	ub Hotel/I	nnkeeper	Restaurant
1-Day Special:	Wine & Malt	All Alco	ohol (Non-prof	it Organizations Only)
COMMON VICTUALLER	(Circle Option):	Restaurant	Innholder	Cafeteria
ZBA/Special Permit?: Provi	de Copy if Yes	□ YES	□ N	10
MOTOR VEHICLE (Circle	Option): C	lass I Class l	II Class	III
HAZARDOUS MATERIAL	STORAGE (List T	ype):		
ENTERTAINMENT:				
Weekday: (Per MGL, Ch. 14	10, Section 183A):			
Sunday: (Per MGL, Ch. 136	Form 00 Dequire	<u></u>		
	- rorm 90 Kequire	<del>.u</del> ).		
Type of Entertainment:				
AMUSEMENT DEVICE (Po	er MGL. Ch 140. Se	ection 177A)		
# of Total Devices:	, 111GE, CM1110, SC	occion 17711)		
	Separately. Name of	Machine and Serial #	. Use separate p	paper if necessary.
#1:		#5:		•
#2:		#6:		
#3:		#7:		
#4:		#8:		
OTHER (Circle Option):				
Taxi Liver	y Bowling	Auctioneer	Other:	
			ı	
<b>Licensees Signature:</b>			Date:	
Title:				
The applicant certifies comp	liance with all Rules,	Regulations, Laws and	d By-Laws in eff	ect at this time. Under the
penalties of perjury, the si	gnature below certifie	es the above information	on as true and co	rrect to the best of their
knowledge a	na belief. False staten	nents can result in imr	nediate license r	evocation.
NAME OF INDIVIDUAL		ION THAT PAYS R OF BILLERICA:	EAL ESTATE	TAXES TO THE TOWN
				<u> </u>



#### TOWN HALL 365 BOSTON ROAD BILLERICA, MASSACHUSETTS 01821 978-671-0939 FAX: 978-671-0947

# Adult Use Marijuana Establishment and Medical Marijuana Treatment Center License Application

□New	□Renewal
1	e is required for each physical business location)
Establishment Name:	
<b>Establishment Street Address:</b>	
<b>Establishment Mailing Address (if different):</b>	
Establishment Phone #:	
Assessor's Map & Lot of Proposed Location:	
<b>Zoning District of Proposed Location:</b>	
Zoning Status (Special Permit Applied/Granted):	
Owned or Leased:	
If Leased; Name, Address	
and Phone # of Landlord:	
If Leased: Term of Lease:	
Applicant Name:	
Applicant Address:	
Applicant Phone #:	
Applicant Email:	
Owner/Corporate Name:	
SSN/TIN:	
Owner/Corporate Address:	
Owner/Corporate Phone #:	
Owner/Corporate Email:	
Person Directly Responsible for Daily Operations:	
Operations Person Title:	
Operations Person Address:	
Operations Person Phone #:	
24/7 Emergency Phone #:	
<b>Operations Person Email:</b>	

**Check All Applicable Proposed Use(s)** 

Use	Size of Facility	Date of Planning	Date of Board of
	(sq. ft)	<b>Board Approval</b>	Health Approval
Marijuana Cultivator			
Marijuana Research Facility			
Marijuana Product Manufacturer			
Marijuana Test Facility			
Marijuana Retailer			
Marijuana Transportation or Distribution Facility			
Marijuana Delivery Operator			
Marijuana Delivery Courier			
Medical Marijuana Treatment Center – Dispensary			
Medical Marijuana Treatment Center – Cultivation and Processing			

#### **Provide the following:**

- Proof that the Medical Marijuana Treatment Center and/or Marijuana Establishment is registered to do business in the Commonwealth of Massachusetts as a domestic business corporation or another domestic business entity in compliance with 935 CMR 500 and is in good standing with the Secretary of the Commonwealth and Department of Revenue.
- Documentation of a bond or other resources held in an escrow account in an amount deemed sufficient by the Town to adequately support the dismantling or winding down of the Medical Marijuana Treatment Center and/or Marijuana Establishment, if required.
- A list of all managers, officers, directors, persons or entities having direct or indirect authority *over* the management, policies, security operations or cultivation operations of the Medical Marijuana Treatment Center and/or Marijuana Establishment and their contact information
- A list of all persons or entities contributing any amount of the initial capital to operate the Medical Marijuana Treatment Center and/or Marijuana Establishment, including capital in the form of land or buildings.

If License Renewal, A	lso provide:	
		the prior year license application? □YES □NO
<ul><li>any special per</li><li>Provide proof</li><li>Have there been</li></ul>	rmit conditions. of valid State registration/licens	aforcement orders issued to the applicant by any State
If Yes, please state	e the nature of the violation:	
<ul> <li>and/or agreem</li> <li>Provide a copy</li> <li>Fees: The license applituse, which is \$0.10/sf.</li> </ul>	ent, signed by the applicant and of the host community agreem cation fee is \$100 for each proportion	ent osed use, with the exception of a marijuana cultivator
Hours of Operation:	Permitted Hours (May NOT exceed those allow Monday through Friday:	wed by Planning Board and Board of Health)
	Saturday:	
	Sunday:	
	Federal Holidays:	
federal and state tax ret	urns and paid all applicable fed	of my knowledge and belief, I have filed all required eral, state and Town of Billerica taxes required under and Town of Billerica regulations and bylaws.
Signature of Owner, M	Ianager or Corporate Officer:	
Title:		
Printed Name of Owno	er, Manager or Corporate	
Email:		
*Social Security or Fed	deral Identification Number:	

\*Your social security number may be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of MGL c. 62C s. 49A.

License and Permit Valid through: December 31st, 2022

Date:



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selectboard@town.billerica.ma.us

## AUTHORIZATION FORM LEGAL AD

DATE:		_
NAME:		
	(Please print)	
ADDRESS:		
	(Please print)	
EMAIL (to send legal ad proof):		
	(Please print)	
In connection with my application	n/petition for:	
the Select Board, for this applicat for the costs of said advertisemen	tion/petition in the loca t(s). I understand I w	e, as required for the Public Hearing before all newspaper and accept full responsibility will be responsible for submitting a check the legal advertisement prior to the
Signed:		
(Petitioner/Legal Representative of A		_



## Town of Billerica Police Department

6 Good Street
Billerica, MA 01821
(978) 215-9621 Fax (978) 670-2762
www.billericapolice.org

## **Criminal Record Background Check**

Date:		
Release: I,		
Name of Applicant		Date of Birth
allow the Town of Billerica Police Departme history.	ent to search my records	s to ascertain information on my personal
Authorization for Personal History:		
This authorization will give the Billerica Police history and character references.	ce Department permiss	ion to research your background, personal
Signature of Applicant	_	
Application Approved:	_	
Application Denied:	_ Reason:	



# The Commonwealth of Massachusetts Department of Industrial Accidents Office of Investigations Lafayette City Center 2 Avenue de Lafayette, Boston, MA 02111-1750 www.mass.gov/dia

**Workers' Compensation Insurance Affidavit: General Businesses** 

Applicant information	Flease Frint Legibly		
Business/Organization Name:			
Address:			
City/State/Zip:P	hone #:		
Are you an employer? Check the appropriate box:  1.			
I am an employer that is providing workers' compensation insura	nce for my employees. Below is the policy information.		
Insurance Company Name:			
Insurer's Address:			
City/State/Zip:			
Policy # or Self-ins. Lic. # Expiration Date: Expiration Date: Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).			
Failure to secure coverage as required under § 25A of MGL c. 152 to \$1,500.00 and/or one-year imprisonment, as well as civil penalti \$250.00 a day against the violator. Be advised that a copy of this s the DIA for insurance coverage verification.	can lead to the imposition of criminal penalties of a fine up es in the form of a STOP WORK ORDER and a fine of up to		
I do hereby certify, under the pains and penalties of perjury that	he information provided above is true and correct.		
Signature:	Date:		
Phone #:			
Official use only. Do not write in this area, to be completed by	city or town official.		
City or Town:Per	mit/License #		
Issuing Authority (check one):  1. Board of Health 2. Building Department 3. City.  5. Selectmen's Office 6. Other			
Contact Person:	Phone #:		

## **Information and Instructions**

Massachusetts General Laws chapter 152 requires all employers to provide workers' compensation for their employees. Pursuant to this statute, an *employee* is defined as "...every person in the service of another under any contract of hire, express or implied, oral or written."

An *employer* is defined as "an individual, partnership, association, corporation or other legal entity, or any two or more of the foregoing engaged in a joint enterprise, and including the legal representatives of a deceased employer, or the receiver or trustee of an individual, partnership, association or other legal entity, employing employees. However, the owner of a dwelling house having not more than three apartments and who resides therein, or the occupant of the dwelling house of another who employs persons to do maintenance, construction or repair work on such dwelling house or on the grounds or building appurtenant thereto shall not because of such employment be deemed to be an employer."

MGL chapter 152, §25C(6) also states that "every state or local licensing agency shall withhold the issuance or renewal of a license or permit to operate a business or to construct buildings in the commonwealth for any applicant who has not produced acceptable evidence of compliance with the insurance coverage required." Additionally, MGL chapter 152, §25C(7) states "Neither the commonwealth nor any of its political subdivisions shall enter into any contract for the performance of public work until acceptable evidence of compliance with the insurance requirements of this chapter have been presented to the contracting authority."

#### **Applicants**

Please fill out the workers' compensation affidavit completely, by checking the boxes that apply to your situation and, if necessary, supply your insurance company's name, address and phone number along with a certificate of insurance. Limited Liability Companies (LLC) or Limited Liability Partnerships (LLP) with no employees other than the members or partners, are not required to carry workers' compensation insurance. If an LLC or LLP does have employees, a policy is required. Be advised that this affidavit may be submitted to the Department of Industrial Accidents for confirmation of insurance coverage. **Also be sure to sign and date the affidavit.** The affidavit should be returned to the city or town that the application for the permit or license is being requested, **not** the Department of Industrial Accidents. Should you have any questions regarding the law or if you are required to obtain a workers' compensation policy, please call the Department at the number listed below. Self-insured companies should enter their self-insurance license number on the appropriate line.

#### City or Town Officials

Please be sure that the affidavit is complete and printed legibly. The Department has provided a space at the bottom of the affidavit for you to fill out in the event the Office of Investigations has to contact you regarding the applicant. Please be sure to fill in the permit/license number which will be used as a reference number. In addition, an applicant that must submit multiple permit/license applications in any given year, need only submit one affidavit indicating current policy information (if necessary). A copy of the affidavit that has been officially stamped or marked by the city or town may be provided to the applicant as proof that a valid affidavit is on file for future permits or licenses. A new affidavit must be filled out each year. Where a home owner or citizen is obtaining a license or permit not related to any business or commercial venture (i.e. a dog license or permit to burn leaves etc.) said person is NOT required to complete this affidavit.

The Office of Investigations would like to thank you in advance for your cooperation and should you have any questions, please do not hesitate to give us a call.

The Department's address, telephone and fax number:

The Commonwealth of Massachusetts
Department of Industrial Accidents

Office of Investigations

Lafayette City Center 2 Avenue de Lafayette, Boston, MA 02111-1750

Tel. (857) 321-7406 or 1-877-MASSAFE Fax (617) 727-7749 www.mass.gov/dia

Form Revised 7/2019

## 46.0 Adult Use Marijuana Establishments and Medical Marijuana Treatment Centers

#### **Licensing Authority**

Per Section XXVI "Marijuana By-law" of the Town of Billerica General Bylaws, no person or entity shall carry on the business operating a Medical Marijuana Treatment Center and/or Adult Use Marijuana Establishment as defined in G.L. c.94G and 935 CMR 500.000 and 935 CMR 501.000, including the cultivation, processing, packaging, delivering, manufacturing, branding, delivery, selling or otherwise transferring or testing marijuana or marijuana products within the Town unless first duly licensed thereof by the Select Board, which license shall be renewed by said Medical Marijuana Treatment Center and/or Marijuana Establishment annually.

These regulations are adopted and may be amended from time to time by the Billerica Licensing Authority (Select Board), pursuant to the provisions of Section XXVI of the General Bylaws and Massachusetts General Laws, 940. Any and all Adult Use Marijuana Establishment and Medical Marijuana Treatment Center Licenses issued by the Select Board shall be governed by these regulations, Massachusetts General Laws, Chapter 940 and the rules and regulations of The Cannabis Control Commission of the Commonwealth of Massachusetts, as the same may be amended from time to time.

A. The Select Board as the licensing authority for the Town of Billerica hereby appoints the Chief of Police and any Police Officer of the rank of Sergeant or above as Authorized Agents for the purpose of implementation, enforcement and compliance of these Rules and Regulations.

#### **Definitions**

Unless otherwise indicated, terms used throughout these Rules and Regulation shall be defined as they are in 935 CRM 500.000 and in General Law, Chapter 940, §1.

#### Filing of Applications

As the Town of Billerica licensing authority, the Select Board requests that all license applications submitted to the Select Board must be complete in order to be processed by the Office of the Select Board for action at or following a public hearing. These applications must be received and deemed completed at least 14 days prior to the Select Board public hearing.

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The Office of the Select Board has prepared an application for the filing of license applications which itemizes the information that will be required for consideration of licensure. The Board shall hold a public hearing within 14 days of receipt of a completed license application or license renewal application, with due written notice provided to the applicant of the time, date and location where such application will be heard. Applicants shall be required, at their own expense, to publish legal notice of said public hearing in a newspaper of local circulation in the Town at least one week prior to the hearing and provide proof of mailed legal notice to abutters, owners of land directly opposite on any public or private street or way, and abutters to the abutters within three hundred feet of the property line as they appear on the most recent applicable tax list, at least 10 days prior to the scheduled meeting. Applicants can obtain the certified abutters list from the Assessor's Office for notification; proof of such notification shall be filed with the Select Board.

Complete information regarding legal notice and notification to abutters is available at the office of the Select Board. While the office of the Select Board will assist any applicant with the filing of an application, it is not the responsibility of the office staff to complete and submit the application and related forms required by the Town. It is the responsibility of the applicant to be fully versed in all relevant laws, rules and regulations pertaining to marijuana operations. Ignorance of the said laws, rules, regulations and procedures shall not constitute a defense for procedural mistakes or illegal behavior.

Applicants must sign a copy of the Rules and Regulations acknowledgement page and turn it in at the Select Board's office with their application.

#### **Annual License Fees**

Annual license fees must be paid prior to the issuance or renewal of any license. All annual license fees are non-refundable.

Each Applicant/Licensee shall pay the initial application fee(s) and annual license fee(s) as noted below:

- Initial License Application Fee: \$100 per facility.
- Annual License Renewal Fee: \$100 per facility.

#### **Evaluation Criteria**

The Select Board may approve, deny or approve the licenses with conditions. Such decision shall be based on the evidence taken at the public hearing, consistent with the protection of the health, safety and welfare of the public. The Select Board may also consider the following when evaluating applicants:

- a) The Applicant has obtained a Final License from the Cannabis Control Commission and has kept such license current and remains a Licensee in good standing with the Cannabis Control Commission;
- b) The Applicant is in compliance with, and has, at all times, remained in compliance with all local laws and regulations, including Special Permit conditions and applicable health codes;
- c) The Applicant has developed and successfully implemented a plan to ensure no diversion of marijuana or marijuana products to the illegal market or to minors and there have been no reported incidents of such diversion in the preceding 12 months;
- d) The Applicant has held a Community Outreach Meeting consistent with the Cannabis Control Commission's Guidance for License Applicants on Community Outreach and has developed a community mitigation plan to address reasonable concerns of abutters and the Town;
- e) The Applicant has made timely payment to the Town of all applicable fees and local taxes, including all payments under the Host Community Agreement;
- f) The Applicant is in compliance with, and has, at all times, remained in compliance with all non-monetary terms of the Host Community Agreement; and
- g) Any other Marijuana Licenses the Applicant holds.

#### **Proof of Establishment and Good Standing**

Proof that the Medical Marijuana Treatment Center and/or Marijuana Establishment is registered to do business in the Commonwealth of Massachusetts as a domestic business corporation or another domestic business entity in compliance with 935 CMR 500 and is in good standing with the Secretary of the Commonwealth and Department of Revenue.

Documentation of a bond or other resources held in an escrow account in an amount deemed sufficient by the Town to adequately support the dismantling or winding down of the Medical Marijuana Treatment Center and/or Marijuana Establishment, if required.

A list of all managers, officers, directors, persons or entities having direct or indirect authority over the management, policies, security operations or cultivation operations of the Medical Marijuana Treatment Center and/or Marijuana Establishment and their contact information.

A list of all persons or entities contributing any amount of the initial capital to operate the Medical Marijuana Treatment Center and/or Marijuana Establishment, including capital in the form of land or buildings.

#### **Compliance with All Laws and Regulations**

In accordance with the provisions of M.G.L., Chapter 940, all licensees shall maintain their premises and operations in full compliance with all applicable state and local laws and regulations, including building codes, all health and sanitary codes, Town By-Laws and Zoning By-Laws. All taxes, assessments and charges owed to the Town of Billerica by the applicant or with respect to the licensed premises must be paid on a current basis. All applications shall include a plan to adopt and use the green technology alternatives.

#### **Corporate and Trade Names**

No License shall assume obligations for, or engage in the operation of, a licensed premise under any corporate or trade name other than that under which he or she is licensed. Any change in corporate name or any change in trade name (including any "DBA") shall require the prior approval of the Select Board.

#### **Cessation of Operations**

Any licensee intending to close a licensed business, or to otherwise cease operation of a licensed business, whether on a temporary or permanent basis, must notify the Select Board in writing, 30 days before such closing or cessation of operations, stating the reason and length of such closing or cessation of operation. Failure to provide such notice may result in the modification, suspension or revocation of the license. Any Medical Marijuana Treatment Center and/or Marijuana Establishment that does not open for business for sixty consecutive days without sufficient explanation, in the opinion of the Select Board, and notification to the Licensing Authority shall be deemed to have ceased operations.

The medical marijuana treatment center and/or marijuana establishment shall remove all material, plants, equipment, and any other marijuana related items upon ceasing its operation according to Board of Health regulations.

#### **Bankruptcy and Court Proceedings**

A licensee shall immediately notify the Select Board, in writing, of any proceedings brought by or against the licensee under the bankruptcy or insolvency laws or of any other court proceedings which may affect the status of the license or operation of the licensed business.

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#### Foreclosure on Loans

Assignment of stock in incorporated licensed places for the purpose of safeguarding the assignee on loans, or like matters, gives no right to such assignee to conduct the business of the licensee; therefore, licensees must notify the Select Board immediately when the assignee forecloses under such assignment of stock.

#### Manager

No medical marijuana treatment center and/or marijuana establishment shall be managed by any person other than the licensee or their assign. Such licensee or assign shall be on the premises during regular hours of operation and responsible for all activities within the licensed business and shall provide up to date emergency contact information for the Billerica Police Department to have on file.

#### Manager's Responsibilities

The Manager shall at all times maintain order and decorum in the premises and in the immediately surrounding area of the premises and shall cooperate in all ways with Town officials in ensuring safe and orderly operations.

There shall be no disorder, indecency, or diversion to minors on the licensed premises. The Manager will ensure that noise and odor does not become disturbing to abutters and/or neighbors.

The Select Board deems the Manager of licensed premises to be the principal representative of the licensee with respect to all operations of the licensed business.

The Manager shall be responsible for the conduct of all business at the medical marijuana treatment center and/or marijuana establishment relative to adult use of marijuana in accordance with and pursuant to applicable state laws and regulations, including, but not limited to 935 CMR 500.00, et seq. and 935 CRM 501.000, et seq., as well as General Laws, Chapter 94G, Town of Billerica By-Laws, these Rules and Regulations and other local bylaws and regulations.

Without limiting the scope of the previous provisions of this subsection, for purposes of licensure, the Owner and Manager shall be responsible for ensuring the following:

- a) Careful selection of qualified employees of the licensed business, including clerks and persons who engaged with the public in any capacity;
- b) Training of employees in all matters relating to the sale or service of adult use of marijuana in accordance with 935 CMR 500.105, as may be amended from time to time;
- c) Training of employees to spot and confiscate fraudulent identification and to tum over such identification to the appropriate law enforcement authorities.

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- d) That no criminal activity, including the sale and distribution of narcotic drugs, takes place on the licenses premises, including within any parking area on the licensed premises; Reporting any criminal activity that occurs on the licensed premises to the Police Department immediately.
- e) Immediate reporting to the Police Department all instances of attempted purchase or procurement of service of marijuana by minors, including attempts to gain access to premises which minors are excluded from, and the nature of the appropriate action taken by the licensee in response thereto. Such appropriate action shall include (I) Reporting to the Registry of Motor Vehicles instances involving possession or use of a false, forged or counterfeit license to operate motor vehicles or identification card issued by the Registry of Motor Vehicles; (2) confirmation of the name and address of any minor presenting a or motor vehicle operator's license; and (3) if a purchase was made or service was procured, the name of the licensee's employee participating therein.
- f) Enforcement of all laws, regulations and rules relating to the operation of the licensed business.
- g) That the licensed premises, including the exterior, are maintained in a safe, clean, neat and sanitary condition at all times.

Failure of the Owner / Manager to comply with these Rules and Regulations or to otherwise properly discharge the duties of Manager may result in removal of the Manger or suspension or revocation of the license by the Select Board, as it may deem appropriate

#### Service Prohibited to Certain Individual

In accordance with M.G.L., Chapter 94G, Section 7, no marijuana or marijuana products shall be sold to anyone less than twenty-one (21) years of age or a registered qualified patient.

#### **Employees of the Licensee**

An up-to-date list of all employees shall be available on the licensed premises at all times for review by authorized agents of the Select Board and the Chief of Police or his designee.

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#### Suspension, Revocation, or Modification of License

All licenses are subject to suspension, revocation or modification for breach of any conditions thereof, regulations or laws of the Town or Commonwealth. The Select Board reserves the right to modify or supplement any license conditions or any regulations pertaining thereto after proper notice to the licensee. The licensee shall be notified by the Town in writing that the Town intends to conduct a public hearing to consider the suspension, revocation and/or modification of the license not less than 21 days after the licensee receives the notice. The notice should include a reasons for calling such hearing.

Any violations of the rules and regulations of the Town of Billerica, of the Select Board or the Commonwealth of Massachusetts regarding the sale or service of marijuana may result in a warning, suspension, modification or revocation of a license, as the Select Board shall deem appropriate. Any complaints and/or reports relative to any licensed premises presently on file shall continue in full force until disposed of by this Select Board.

#### **Determination of Penalties**

The Board shall endeavor to be fair and judicious in the determination of penalties imposed for violations of the terms and conditions of licenses. Penalties shall be progressive in nature, and may in the discretion of the Board, be increased or decreased based on certain aggravating or mitigating factors, including, but not limited to, the following:

#### **Aggravating factors**

- 1. Failure to request a proper identification card, operator's license or passport.
- 2. Juvenile appearance of purchaser.
- 3. Use/acceptance of altered identification
- 4. Failure/refusal of licensee to cooperate in investigation.
- 5. Multiple sales on the same occasion.
- 6. Quantity sold per individual.
- 7. Staff not adequately trained.
- 8. Under-age employee (21)
- 9. Illegal conduct on premises.
- 10. Concealing violation.
- 11. Furnishing false information to investigator.
- 12. Exceeding lawful capacity of premises.
- 13. Intimidating or coercing witnesses, or attempting to do so.
- 14. Offense occurring while under suspension of prior penalty.
- 15. Sale occurring while license suspended.
- 16. The occurrence of any personal injuries or fatalities related to the underlying violation.

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#### **Mitigating factors**

- 1. Reasonable reliance upon an identification card or operator's license for proof of identity or age. (M.G.L. Ch. 94G)
- 2. Acceptance of responsibility by licensee as evidenced by;
  - Substantial and voluntary assistance offered in investigation.
  - Public acknowledgment of responsibility.
  - Agreement to participate in training program by licensee, manager, and servers.
  - Prompt notice of decision not to contest charge and agreement to proposed recommended resolution.
  - Licensee agreement to participate in an effective program to detect and prevent future offenses.
  - Age of past violations (beyond 7 years).

#### **Suggested Penalty Guideline**

The following penalties represent guidelines for the minimum action to be taken by the Select Board for violations of the laws, rules and regulations relating to the Medical Marijuana Treatment Center and/or Adult Use Marijuana Establishment operations. They do not preclude the Board from taking such further or additional action as the specific circumstances and merits of each case may warrant. Suspensions of licenses shall take place on consecutive days, unless other timeframes are specifically designated by the Board.

- 1st Violation: Letter of reprimand/warning to 5 day suspension, with revocation considered in aggravated circumstances.
- 2nd Violation: 5 days to 10 days suspension, with revocation considered in aggravated circumstances.
- 3rd Violation: 10 days to 30 days suspension, with revocation considered in aggravated circumstances
- 4th Violation: Revocation or Termination of license

#### Misconduct related to an underlying Violation

For instances of violations based on sale to a minor, the Board will impose no less than a suspension as a penalty.

While the Board will endeavor to impose penalties upon licensees in a manner consistent with these regulations, where exigent or special circumstances warrant, such as a violation of these regulations resulting in serious personal injury or death, the Board reserves the right to immediately order a full hearing, provide licensee and other affected parties an opportunity to present evidence, and to revoke a license where the evidence warrants a revocation.

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#### **Display of Licenses and Permits**

All licenses and permits issued by the Town shall be displayed on the premises in a conspicuous place where the public has access and may read the license/permit. A copy of these Rules and Regulations will be issued to all licensees by the Select Board and shall be made available on the premises for inspection.

#### **Hours of Operation (See Hours of Operation Upon the License)**

Hours of Operation for Medical Marijuana Treatment Centers and/or Marijuana Establishments will be from 9AM - 9PM seven days a week, unless otherwise limited by the Town.

#### Access to Premises by Police and Agents

The licensee shall ensure that procedures are in place, be it by posting a person or otherwise, to allow Police and authorized agents of the Select Board immediate access to the premises at anytime employees are on the premises. Any unjustified delay in providing such access shall be cause for action against the licensee. The Billerica Police Department and or the Licensing Authority will also have access to on site cameras upon request.

#### **Inspection of Premises**

The licensed premises shall be subject to inspection by the members of the Select Board or duly authorized agents of the Select Board, upon prior notice. Any unjustified hindrance or delay of such inspection caused by an employee of the licensee shall be cause for action against the licensee.

#### **Premises Description – Internal and External Alterations**

All medical marijuana treatment centers and/or marijuana establishments shall submit plans to the Building Department which shall include, but not be limited to the following elements: Organizational Structure, Location, Property Description, Hours of Operation and Staffing, description of proposed operations, distribution practices, employee safety, general compliance, fire prevention, sanitation requirements, electrical system overview, proposed energy demand and proposed electrical demand off-sets, ventilation system and air quality, proposed water system and utility demand prior to the issuance of a building permit. No alterations shall be made to these plans or the building without prior written approval of the Select Board and other applicable boards and commissions.

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#### Removal of Marijuana Products/Waste Disposal

The medical marijuana treatment center and/or marijuana establishment will be required to submit a waste removal plan to the Select Board, Police Department, and the Board of Health. External trash must be secured properly in an enclosed, locked location.

#### **Consumption on Premises**

No marijuana or marijuana product shall be smoked, eaten or otherwise consumed or ingested on the premises, driveways, or parking areas where sold. All Medical Marijuana Treatment Centers and/or Marijuana Establishments permitted under this section shall comply with all state and local laws, rules and regulations governing the smoking of tobacco.

#### **Annual Financial Reports**

All holders of Medical Marijuana Treatment Center and/or Marijuana Establishment Licenses, shall furnish an annual report for the preceding calendar year detailing its gross sales.

#### Separability

All provisions of these regulations are hereby declared to be separable. In the event that any provision herein shall be deemed to be invalid or unenforceable by any court or authority with appropriate jurisdiction, all remaining provisions shall continue in full force and effect.

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TOWN HALL 365 BOSTON ROAD BILLERICA, MASSACHUSETTS 01821 978-671-0939 FAX: 978-671-0947

#### RULES AND REGULATIONS ACKNOWLEDGEMENT FORM

## This Form MUST Be Submitted during the Yearly Renewal Process

Name:	
Name of Establishment:	
Address:	
	Billerica, MA
Signature:	
Date:	

I am the Manager or duly authorized designee of the above listed establishment and I hereby certify that I have read and understand the Town of Billerica Rules and Regulations for the Licensing and Sale of Adult Use Marijuana Establishments and Medical Marijuana Treatment Centers.

America's Yankee Doodle Town