

### **OMMP Medical Marijuana Destruction and Disposal**

Prior to destroying or disposing of any medical marijuana item, a registrant must obtain written approval from the Oregon Medical Marijuana Program (program) for a [Destruction and Disposal of Marijuana Plan](#) (Plan). Approval is required regardless of whether destruction and disposal is to occur as a result of formal enforcement action or is voluntary (business closure, old stock, etc.). The registrant will be notified in writing when the plan is approved and will be advised how to proceed.

**Voluntary destruction of marijuana.** Requires a [Voluntary Marijuana Item Destruction Request form](#) (for Dispensary and Processing Site registrants) or a [Grower and Caregiver Voluntary Marijuana Item Destruction Request](#) form, in addition to the [Destruction and Disposal of Marijuana Plan](#) and supporting documentation.

**Destruction.** Registrant must use a destruction method that: (1) Complies with all state and local laws (including waste disposal); and (2) Makes the marijuana item undesirable, unrecognizable and unfit for human or animal use; incapable of growth or germination. "Use" includes, but is not limited to, ingestion, inhalation, topical application, processing or remediation.

**Destruction Methods.** Allowable methods for making marijuana items unusable are by grinding (for solids) and incorporating or absorbing (for liquids) the marijuana items with other material so the resulting mixture is at least fifty percent (50%) non-marijuana waste. See Table 1, below.

**Alternative Destruction Methods.** It is understood that destruction methods may be available that are not included in Table 1. Registrants may propose alternative destruction methods to the program in writing. The program must approve the alternative destruction method, in writing, prior to destruction.

**Security.** After completing approved destruction, registrant must prevent public access to the marijuana items that have been destroyed. The destroyed marijuana material must be stored in (1) a secure, locked container that cannot be readily moved, or (2) inside a secure, locked building, until it can be transferred to landfill or compost facility, in accordance with approved plan.

**Disposal.** Disposal must be accomplished by delivery of the destroyed marijuana to an offsite solid waste processing facility, such as a municipal or regional landfill, incinerator or composting site. For more information on cannabis disposal, and disposal facilities available in your area, visit the Oregon Department of Environmental Quality (DEQ) website: <http://www.oregon.gov/deq/Regulations/Pages/Marijuana-Regulation.aspx>

**Hazardous Waste Determination.** The extraction process is considered an industrial process; making any waste generated an industrial waste. Generators of industrial waste must make their own determination whether their waste is a hazardous waste requiring special management and regulation. In most cases, cannabis extracts are not considered hazardous waste. For assistance, please contact the [DEQ Hazardous Waste Technical Assistance contact](#) responsible for your county.

**Documentation of Destruction and Disposal.** The program will make every effort to have staff directly witness and document destruction at the registrant's premises and to be available to witness offsite disposal.

In the event that program staff are not available to witness destruction, the registrant will be required to make the marijuana items undesirable, unusable and unrecognizable, in accordance with the approved plan, prior to disposal. The registrant must then secure and hold the destroyed marijuana material for three days during which time OMMP staff may arrive to confirm destruction. When approved to destroy or dispose of marijuana items independent of direct

program staff observation, the registrant shall submit a signed and notarized [Verification on Oath or Affirmation](#) form, provided by the program.

Table 1, Destruction and Disposal Methods

Marijuana Item	Destruction Methods to make items unusable prior to disposal	Disposal Method
Marijuana Plants and Usable Marijuana	Mix with yard debris, wood chips, sawdust, soil, manure, vegetable based grease or oils, other wastes.	Compost or anaerobic digester, if available off-site
	Mix with yard debris, wood chips, sawdust, soil, manure, vegetable based grease or oils, other wastes.	Landfill, transfer station or incinerator, if composting not available or feasible
Liquid Concentrate, Tincture, or Suppository	Absorb in cat litter, slack lime, soil or similar substance	Landfill, transfer station or incinerator
Solid concentrate Edible, or Transdermal Patch	Mix with soil, slack lime, garbage or similar substance	Landfill, transfer station or incinerator
For the following marijuana items, first determine if it is hazardous waste. (See <b>Hazardous Waste Determination</b> )		
Liquid Extract	If not a hazardous waste, absorb in cat litter, slack lime, soil or similar substance	Landfill, transfer station or incinerator
	If a hazardous waste, contact DEQ for assistance with how to manage	Hazardous Waste disposal
Solid Extract	If not a hazardous waste, mix with soil, slack lime, garbage or similar substance	Landfill, transfer station or incinerator
	If a hazardous waste, contact DEQ for assistance to manage as hazardous waste	Hazardous Waste disposal

**How to Submit.** Send the Plan Proposal form and supporting documentation to the Oregon Medical Marijuana Program, using one of the following methods.

Preferred method for MMD/MMPS registrants: Sign into your online account at <https://mmdapply.oregon.gov>. Upload the completed form and supporting documents to the “Documents” tab.

Available to all registrants:

- Email to [medmj.dispensaries@state.or.us](mailto:medmj.dispensaries@state.or.us).
- Fax to 971-673-0076.
- Mail to: Oregon Medical Marijuana Program  
P.O. Box 14116  
Portland, OR 97293-0116

**Destruction and Disposal of Marijuana Plan**

- A plan must be submitted whether destruction was ordered or is voluntarily initiated.
- If this plan is being initiated in response to OMMP issuance of a Final Order of Destruction Notice, the plan and supporting documents must be submitted to OMMP by the date provided on the Order.
- To ensure prompt review, be sure to complete all sections and sign your plan prior to submission.

**Registrant Information**

Registrant Name:	Registration #:	Registration Type: <input type="checkbox"/> Grower <input type="checkbox"/> Patient <input type="checkbox"/> Caregiver <input type="checkbox"/> MMD <input type="checkbox"/> MMPS
Phone:	Email:	

**Destruction/Disposal Method**

Specify the marijuana item types and the methods proposed for destruction and disposal of each type, below:

Type (check all that apply)	Mix with at least 50 %: (choose for each type)	Disposal Method (choose for each type)
<input type="checkbox"/> Marijuana Plants	<input type="checkbox"/> yard debris <input type="checkbox"/> wood chips <input type="checkbox"/> sawdust <input type="checkbox"/> soil	<input type="checkbox"/> Compost - if available off-site <input type="checkbox"/> Anaerobic Digester
<input type="checkbox"/> Usable Marijuana	<input type="checkbox"/> manure <input type="checkbox"/> other wastes* <input type="checkbox"/> vegetable based grease or oils	<input type="checkbox"/> Landfill <input type="checkbox"/> Transfer Station <input type="checkbox"/> Incinerator
<input type="checkbox"/> Liquid Concentrate <input type="checkbox"/> Tincture <input type="checkbox"/> Suppository	Absorb in: <input type="checkbox"/> cat litter <input type="checkbox"/> slack lime <input type="checkbox"/> soil <input type="checkbox"/> other*	<input type="checkbox"/> Landfill <input type="checkbox"/> Transfer Station <input type="checkbox"/> Incinerator
<input type="checkbox"/> Solid Concentrate <input type="checkbox"/> Edible	Mix with: <input type="checkbox"/> soil <input type="checkbox"/> slack lime <input type="checkbox"/> garbage <input type="checkbox"/> other*	<input type="checkbox"/> Landfill <input type="checkbox"/> Transfer Station <input type="checkbox"/> Incinerator
<input type="checkbox"/> Liquid Extract	If not a hazardous waste, absorb in: <input type="checkbox"/> cat litter <input type="checkbox"/> slack lime <input type="checkbox"/> soil <input type="checkbox"/> other*	<input type="checkbox"/> Landfill <input type="checkbox"/> Transfer Station <input type="checkbox"/> Incinerator
	If a hazardous waste, contact DEQ for assistance with how to manage	<input type="checkbox"/> Hazardous Waste Disposal*
<input type="checkbox"/> Solid Extract	If not a hazardous waste, mix with: <input type="checkbox"/> soil <input type="checkbox"/> slack lime <input type="checkbox"/> garbage <input type="checkbox"/> other*	<input type="checkbox"/> Landfill <input type="checkbox"/> Transfer Station <input type="checkbox"/> Incinerator
	If a hazardous waste, contact DEQ for assistance with how to manage	<input type="checkbox"/> Hazardous Waste disposal*

\*Propose an alternate method for destruction/disposal, or Hazardous Waste disposal, explain in detail below:

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**Plan Details:**

Provide the following details about your plan. Please specify if a line item does not apply to your situation by noting N/A in the space provided.

		OMMP USE	
	Proposed	Approved	Initials
Date/ Time of Destruction:			
Location of Destruction:			
Method of Securing items post Destruction (3 Day Hold):			
Date/ time of Disposal:			
Location of Disposal:			
Method of Transporting items to Disposal:			
Method of securing destroyed items during transport:			

**Additional Information:**

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List all parties, including yourself, that will be present to witness and/or participate in your plan:

Name	Phone	Email

**Required Documents:**

Please submit the appropriate documents, as outlined below, with your plan. Each plan is reviewed on a case by case basis. You may be asked to provide additional documentation. You will be notified once your plan has been approved.

<u>Reason to Destroy</u>	<u>Documents</u>
<input type="checkbox"/> Failed Test	<input type="checkbox"/> Lab Results from failed test <input type="checkbox"/> Photographs clearly depiction items to be destroyed <input type="checkbox"/> Inventory
<input type="checkbox"/> Excess Mature Plants <input type="checkbox"/> Excess Immature Plants	<input type="checkbox"/> Site Plan showing the layout of the garden clearly displaying which plants are to be destroyed <input type="checkbox"/> Photographs clearly depicting plants to be destroyed <input type="checkbox"/> Inventory
<input type="checkbox"/> Registrant ceasing operations <input type="checkbox"/> Excess Inventory <input type="checkbox"/> Waste <input type="checkbox"/> Spoilage	<input type="checkbox"/> Copies of documents related to closure <input type="checkbox"/> Photographs clearly depicting items to be destroyed <input type="checkbox"/> Inventory
<input type="checkbox"/> Other	<input type="checkbox"/> Written explanation of reason destruction is necessary <input type="checkbox"/> Copies of documents that may support this request <input type="checkbox"/> Photographs clearly depicting items to be destroyed <input type="checkbox"/> Inventory

**Destruction Inventory:**

Complete and attach to this Plan the [Destruction Inventory](#) form itemizing all products you are proposing to destroy.

**Signature:**

By signing below, I (print name) \_\_\_\_\_ attest that I have the authority to destroy and dispose of the marijuana items specified on the Destruction Inventory form provided to OMMP with this proposal.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

OMMP USE	
<b>Reviewer:</b> _____	<b>Reviewed Date:</b> _____
<b>Plan Approved on</b> ____/____/____	<b>Approval Letter Sent:</b> ____/____/____
<b>Notes:</b>	