



# Marijuana Business Sole Proprietor/Other Entity Form

## Form Instructions

### What is this form?

Use this form to provide information on any person or entity that is part of your business that will operate as a sole proprietor, general partnership, or any legal entity type other than a corporation, limited liability company (LLC), or limited partnership.

If your business structure involves more than three legal entities, provide a business structure diagram showing the legal entities involved, which entity or entities will hold the license, and each entity's relationship to one another.

### What happened to the Marijuana Business Structure Form?

From January 2016 to March 2017, marijuana license applicants were directed to use the "Marijuana Business Structure Form." That document has been replaced with the following forms:

- [Marijuana Business Corporate Questionnaire](#)
- [Marijuana Business Limited Liability Questionnaire](#)
- [Marijuana Business Limited Partnership Questionnaire](#)
- [Marijuana Business Sole Proprietor/Other Entity form](#)
- [Marijuana Business Individual History form](#)

### What information is required for my company?

- For sole proprietors:
  - Names of all individuals who will be licensed as sole proprietors. (For example, if two individuals will hold the license as co-licensees, each individual would need to be listed as a sole proprietor. If a person holds a licensable interest in your business through investment or other significant financial interest, they may be required to complete this form.) A legal entity cannot be a sole proprietor.
- For limited and general partnerships:
  - Names of all general and limited partners
- For other entity types:
  - Names of individuals and other entities involved
- Total percentage of ownership interest and investment commitment in US dollars.

### Who needs to complete a Marijuana Business Individual History form?

- Each sole proprietor.
- For General Partnerships, each partner
- For Limited Partnerships:
  - Each general partner; and
  - Each limited partner whose investment commitment is 10% or more of the total investment commitment of the partnership.
- Individuals otherwise entitled to a portion of the revenue
- Anyone entitled with an "ownership interest" as described in [OAR 845-025-1045\(3\)](#)
- **Other individuals as required by your License Investigator**
- If any member or owner is another legal entity, that entity must also complete business structure questionnaire for their entity type.



**OREGON LIQUOR CONTROL COMMISSION**

**Marijuana Business Sole Proprietor/Other Entity Form**

**Section 1 – Business Information**

<b>Legal Name:</b> <i>For sole proprietors, this is the legal name of the individual</i>				
<b>Mailing Address:</b>				
<b>City:</b>		<b>State:</b>		<b>ZIP:</b>
<b>Primary Business Phone:</b>		<b>Business Email:</b>		

**Section 2 – Members**

Check the box for “direct control” for any person or entity who may, other than as an employee acting under the direction of the owner:

- Exercise control over, or be entitled to exercise control over, the business.
- Incur, or be entitled to incur, debt or similar obligations on behalf of the business.
- Enter into, or be entitled to enter into, a contract or similar obligations on behalf of the business.

“Capital Investment” refers to all capital that the person has ever contributed to the business referenced in Section 1.

	<b>Name</b> <i>(First &amp; Last or Entity Name)</i>	<b>Date of Birth</b> <i>(MM/DD/YYYY)</i>	<b>Role/Title</b> <i>(e.g.: partner, trustee, beneficiary)</i>	<b>Capital Investment</b>	<b>Direct Control?</b>
1.				\$	<input type="checkbox"/>
2.				\$	<input type="checkbox"/>
3.				\$	<input type="checkbox"/>
4.				\$	<input type="checkbox"/>
5.				\$	<input type="checkbox"/>
6.				\$	<input type="checkbox"/>
7.				\$	<input type="checkbox"/>
8.				\$	<input type="checkbox"/>

*If your entity has more than 8 members or owners, attach additional documentation as needed.*

**Section 3 – Other Interests**

**Yes      No**



Is any person or entity entitled to a portion of the revenue of this business other than an owner or member of the business disclosed on this form? **(If yes, please attach a written explanation)**



Has any capital been invested in or loaned to the business other than by an owner or member of the business disclosed on this form? **(If yes, please attach a written explanation)**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_