

# **Supplemental Form:**

### **Retailer Inventory Transfer Request**

#### What is this form?

An applicant for an OLCC Recreational Marijuana Retailer License may use this form to request the transfer of inventory from a registered medical marijuana dispensary.

#### In addition to the information on this form, the following are required:

- The business location to be licensed by the OLCC must be the same location as the medical marijuana dispensary from which the inventory is to be transferred.
- The person requesting the transfer must be an applicant for the OLCC Retailer license and must be the owner of the registered medical marijuana dispensary.
- All items to be transferred must be packaged, labelled, and tested in accordance with OAR 845-025-7000 to 845-025-7060 and 845-025-5700 and must meet the concentration limits in OAR 333-007-0210 or 333-007-0220.
  NOTE: Items in the dispensary inventory prior to October 1, 2016 that are transferred under this request that were tested in accordance with OAR 333-008-1190 do not need to be re-tested or have its packaging and pre-approved by the OLCC.
- If any items to be transferred exceed the concentration limits in OAR 333-007-0210, the applicant must first be registered to sell marijuana items for medical purposes as described under OAR 845-025-2900. If seeking to register to sell marijuana items for medical purposes after licensure by the OLCC, the applicant must submit a completed Form MJ 16-5202 Sale of Marijuana for Medical Purposes Registration.

#### Section 1 – Business Information

Application ID:				
Business Name:				
Trade Name:				
Mailing Address:				
City:		State:	ZIP:	
Premises Address:	 			
City:		State:	ZIP:	
MMD #:				

OLCC USE ONLY

**OHA** Transfer Approved

**Full Approval** 

**OHA** Transfer Denied

**OLCC** Representative

Partial Approval

Date

Initial



## **Supplemental Form:**

**Retailer Inventory Transfer Request** 

	Section 2 – Own	er Requ	esting Transfer		
Retailer Owner:	last name		first name		middle initial
MMD #:			Date of Birth (MM-I	DD-YYYY)	
Phone:		Email:			
Mailing Address:					
City:		State:		ZIP:	
	er listed above the Primary No, complete Section 3.	PRD for	Yes		No

#### **Section 3 – Primary PRD Information**

Complete this section <u>only</u> if the Retailer Owner requesting the transfer listed in Section 2 is NOT the Primary PRD for the dispensary.

Primary PRD:			
l	last name	first name	middle initial
MMD #:		Date of Birth (MM-DD	-YYYY):
Phone:	Emai	:	
Mailing Address:			
City:	State	:	ZIP:
Is the Prima	ry PRD an applicant for the license?	: Yes	No



# **Supplemental Form:**

**Retailer Inventory Transfer Request** 

#### Section 4 – PRD Authorization to Release Information

By signing or e-signing this section, the owner and the Primary PRD acknowledge the following and authorize the Oregon Health Authority to disclose the Primary PRD's registration information to the Oregon Liquor & Cannabis Commission:

- The Commission will not permit the transfer of a marijuana cannabinoid product, concentrate or extract packaged for ultimate sale to the consumer that exceeds the concentration limits established for retail adult use under OAR 333- 007-0210 unless the applicant registers with the OLCC to process medical grade cannabinoid concentrates, extracts or products.
- Any items described above that exceed the concentration limits sold at a Retailer premises must be segregated from recreational products and sold only to an OMMP cardholder with a current valid registration.
- Applicants must return any marijuana item that is the lawful property of a patient to the patient prior to licensure.
- Applicants must remove from the premises any marijuana items that have not been approved by the Commission for transfer prior to being licensed by the Commission.
- All marijuana items transferred under this request must be tested in accordance with OAR 845-025-5700 and labelled and packaged in accordance with OAR 845-025-7000 to 845-025-7060 before being sold to a consumer.
- The testing requirements above do not apply to items received prior to October 1, 2016, provided the items were tested in accordance with OAR 333-008-1190 and each item includes a conspicuous label that reads: "DOES NOT MEET NEW TESTING REQUIREMENTS" in 12 point font and bold, capital letters.

In addition to the above, OAR 845-025-2910 requires that this request include information for each PRD registered at the dispensary that is the proposed premises to be licensed. <u>This includes additional PRDs who are registered at the dispensary site who are not applicants for the Retailer license.</u>

All PRDs currently registered at the dispensary must complete a **Form MJ 16-5201A PRD Information Disclosure**. The OLCC will verify the submitted information with the Oregon Health Authority. Failure to disclose whole and accurate information may result in the denial of this request.

Number of PRDs regis	tered at the proposed premises
Electronic or physical signature of Primary PRD	
Electronic or physical signature of Owner (if different)	



# **Supplemental Form:**

### **Retailer Inventory Transfer Request**

#### Section 5 – Amount Requested for Transfer

Your transfer request must include specific information on the amounts of marijuana requested for transfer. If you request an amount in excess of the amount you are allowed to possess under OHA rules, your request may be denied.

For usable marijuana, enter the amount in the space provided. For all other product types, indicate the request by checking the box below and attach additional documentation as noted. See the statement on page 1 if any items to be transferred exceed the concentration limits in OAR 333-007-0210 and will be sold from the licensed Retailer premises to OMMP cardholders for medical purposes. All transferred items must be entered into the Cannabis Tracking System in accordance with the guidelines found in the **Inventory Transfer Guide**.

Total amount of usable marijuana. Indicate unit of measurement:			
□ Ounces □ Grams			
I am requesting the transfer of Concentrates			
Your documentation should list the total amount of cannabinoid concentrates requested for transfer. Concentrates are cannabinoid products that are created using mechanical extraction (such as grinding) or by using a non-hydrocarbon-based solvent without the use of high heat or pressure. Amounts should be separated by item type and unit of measurement. Unit of measurement should be by weight or volume unless the item is pre-packaged.			
I am requesting the transfer of Extracts			
The total amount of cannabinoid extracts requested for transfer. Extracts are cannabinoid products that are created by use of a hydrocarbon-based solvent or by the application of high heat and pressure. Amounts should be separated by item type and unit of measurement. Unit of measurement should be by weight or volume unless the item is pre-packaged.			
I am requesting the transfer of Edibles			
The total amount of cannabinoid edibles requested for transfer. Amounts should be separated by item type and unit of measurement. Unit of measurement should be by weight or volume unless the item is pre-packaged.			
I am requesting the transfer of Topicals			
The total amount of cannabinoid topicals requested for transfer. Topicals are cannabinoid products intended to be applied to the skin or hair. Amounts should be separated by item type and unit of measurement. Unit of measurement should be by weight or volume unless the item is pre-packaged.			