



Medical Marijuana Program Dispensary Registration Certificate Application Instructions

Please note that application information and other instructions may change. Please refer back to the ADHS website for the most current information.

Please read these instructions carefully before you begin the Dispensary Registration Certificate Application process.

General Information

In accordance with A.R.S. § 36-2804, nonprofit medical marijuana dispensaries shall register with the Arizona Department of Health Services (Department). The Department may not issue more than one nonprofit medical marijuana dispensary registration certificate for every ten (10) pharmacies that have registered under section 32-1929, have obtained a pharmacy permit from the Arizona Board of Pharmacy, and operate in the State. As per A.A.C. R9-17-304, dispensary registration certificate applicants must submit to the Department an application in a Department-provided format (the [Dispensary Registration Certificate Application](#)). The Department will begin accepting Dispensary Registration Certificate Applications for 10 working days beginning May 14, 2012 through May 25, 2012.

How to Apply for a Dispensary Registration Certificate

1. Print and review the Dispensary Registration Certificate Application Checklist from the Arizona Medical Marijuana Program website (www.azdhs.gov/medicalmarijuana/dispensaries/). This checklist includes the information you will need to fill out on the Dispensary Registration Certificate Application (application) and will list additional documents and information that you will need to send in with the application.
2. Open the Dispensary Registration Certificate Application located on the Arizona Medical Marijuana Program website (www.azdhs.gov/medicalmarijuana/dispensaries/) and save a copy onto your computer.
3. Fill out the application, typing the required information into the blank boxes.
4. Once the application is filled out, print the application and make sure the appropriate parties sign and date where required.
5. Gather all other required documents (refer to the Dispensary Registration Certificate Application Checklist, Dispensary Registration Certificate Application, and R9-17-304 for details), including:
 - a. *If applicable*, a copy of documentation from an in-state or out-of-state financial institution that demonstrates that the entity applying for the dispensary registration certificate or a principal officer of the entity has \$150,000 available to begin operating the dispensary. The documentation must be dated within 30 days before submitting the application and demonstrate that the entity applying for the dispensary registration certificate or a principal officer of the entity has at least \$150,000 under their control and has had control of the monies for at least 30 days before submitting the application.
 - b. *If applicable*, a copy of the business organization's articles of incorporation, articles of organization, or partnership or joint venture documents including the name of the business organization, the type of business organization, and the names and titles of the individuals in R9-17-301.
 - c. A copy of each principal officers' and board members' signed and dated Medical Marijuana Dispensary Principal Officer and Board Member Attestation form (*see* Principal Officer and Board



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Member Attestation Form on the Medical Marijuana Program website

www.azdhs.gov/medicalmarijuana/dispensaries/).

- d. A copy of each principal officers' and board members' fingerprints on a fingerprint card, including information required in R9-17-304(C)(3)(c)(i) (*see* Fingerprinting Instructions on the Medical Marijuana Program website (http://www.azdhs.gov/medicalmarijuana/documents/Applicant_Fingerprinting_Instructions.pdf) for guidance on submitting fingerprint cards). Please note fingerprint cards from principal officers and board members will not be required if the fingerprints and information required in R9-17-304(C)(3)(c)(i) were submitted to the Department as part of an application for a designated caregiver or dispensary agent registry identification card within the previous six months; however, the registry identification number on the registry identification card issued to the principal officer or board member must be provided on the Dispensary Registration Certificate Application.
 - e. Copies of policies and procedures that comply with requirements in A.A.C. Title 9, Chapter 17, for inventory control, qualifying patient recordkeeping, security, and patient education and support.
 - f. A sworn statement signed and dated by the individual or individuals in R9-17-301 certifying that the dispensary is in compliance with any local zoning restrictions.
 - g. Documentation from the local jurisdiction where the dispensary's proposed physical address is located that there are no local zoning restrictions for the dispensary's location and the dispensary's location is in compliance with any local zoning restrictions (*see* sample form located on the Medical Marijuana Program website).
 - h. Documentation of ownership of the physical address of the proposed dispensary or permission from the owner of the physical address of the proposed dispensary for the entity applying for a dispensary registration certificate to operate a dispensary at the physical address (*see* sample form located on the Medical Marijuana Program website).
 - i. A copy of the dispensary's by-laws, including information required in R9-17-304.
 - j. A business plan demonstrating the on-going viability of the dispensary on a not-for-profit basis, including information required in R9-17-304.
 - k. The non-refundable \$5,000.00 Dispensary Registration Certificate Application fee in the form of a cashier's check or money order made payable to *Arizona Department of Health Services*.
6. Dispensary Registration Certificate Applications and all additional required documents will be accepted for 10 working days beginning May 14, 2012 through May 25, 2012. Applications will not be accepted before May 14, 2012 or after 5:00 p.m. on May 25, 2012. When mailing the application, please use an envelope that will not cause the fingerprint card(s) to be folded or creased.

Please mail Dispensary Registration Certificate Applications to:

Arizona Department of Health Services
ATTN: Medical Marijuana Program
P.O. Box 19000
Phoenix, AZ 85005