

**APPLICANTS OR PERMITTEES SHOULD KEEP A COPY OF THIS PERSONAL HISTORY DISCLOSURE
AND THE SUPPORTING DOCUMENTS FOR THEIR RECORDS.**

The Office will not be able to process this form unless it is completed using the [desktop version of Adobe Acrobat](#). The form may not be printed. A form that is printed or that is completed in your web browser will not have a valid digital signature and will not be accepted by the Office.

A holder of a cannabis laboratory testing permit or sampling approval, and its True Parties of Interest, and their immediate family members, shall have no interest in an adult-use cultivator, processor, distributor, retail dispensary, cooperative, microbusiness, delivery, nursery, on-site consumption, registered organization, cannabinoid hemp processor, or any other license or permit pursuant to the Cannabis Law.

True Parties of Interest, include, but are not limited to, those assuming any of the following positions:

- Sole Proprietor, General Partner, Limited Partner, Partner, LLC Member, LLC Manager, Stockholder;
- Chairman, Board Member, Director, Trustee;
- President, Vice President, Treasurer, Secretary, Officer, or Person with Equivalent Title or Responsibility;
- Current or Future Right to Investment, Ownership, Compensation, or Receive Revenue or Profit;
- Joint Account Holder or Guarantor;
- Authority to/ or Exercises Control; and
- Executive, Manager, or Supervising Employee with Ability to Control Licensee Decision Making (not intended to include line managers or supervisors)

Immediate family members include parents, guardians, spouses or dependents.

At the time of application, a cannabis laboratory must submit the Personal or Entity Disclosure form for all individuals and entities holding at least ten percent (10%) or more of any class of shares (including whether current or future), and for any individuals and entities that are true parties of interest (TPI) by any other positions or means as outlined above. Individuals and entities holding less than 10% of shares in a licensed entity remain True Parties of Interest in that licensee, and are therefore prohibited from holding any direct or indirect interest in any other license issued by the Office of Cannabis Management.

Each True Party of Interest of the applicant or permittee, as established in this guidance, must provide a completed, dated, and signed Personal History Disclosure and New York State Department of Tax and Finance Clearance Form (OCM-06002) to the applicant or permittee. The applicant or permittee will use the information from each Personal History Disclosure to complete the application. Each Personal History Disclosure and Tax and Finance Clearance Form must be submitted along with the application.

1. True Party of Interest Individual Information

1a. Personal Identity Information

First Name: Middle Name: Last Name: Suffix:

US Citizen: Yes No If not a U.S. citizen - country of citizenship:

Social Security Number (if applicable):

Date of Birth:

Aliases:

1b. Physical Address

Street 1:

Street 2:

City, Town, or Village: State: Country: Zip:

1c. Mailing Address (if different from above)

Street 1:

Street 2:

City, Town, or Village: State: Country: Zip:

1d. Personal Contact Information

Phone 1: Type:

Phone 2: Type:

Email:

1e. Contact (if different from 1d)

Name of Contact:

Office Address:

City, Town, or Village: State: Country: Zip:

Phone: Email:

1f. Sex Please select:

1g. Ethnicity Hispanic or Latino Not Hispanic or Latino

1h. Race Please select:

1f. Affiliated NYS Cannabis Applicant / Permittee

Applicant/Permittee that the Individual is a True Party of Interest to:

License Number (if applicable):

1g. If you are a TPI of a business entity that is also recognized as a TPI in a cannabis testing laboratory or sampling applicant or permittee then enter such entity's business name, FEIN, and relationship.

1h. Does the applicant or permittee have any compensation agreements with you, whether the agreement is directly with this party or indirectly through an intermediate entity? A compensation agreement is a legal document that guarantees that an individual or entity will receive compensation for certain actions. It can include compensation for an individual or entity getting paid as an employee, a commission that a worker is entitled to receive, compensation for a Non-Compete Agreement, etc.? If yes, describe the nature of the agreement and please provide a copy of the agreement with this disclosure.

Yes No

1i. Do you have any proposed or executed contract, term sheet, agreement, or side letter with the applicant or another party that relates to the ownership and control structure, assets, liabilities, real or intellectual property, revenue, funding or capitalization, royalties, or profit, or future profit, of the applicant or proposed permittee or comparable documents? If yes, describe the nature of the agreement and please provide a copy of the agreement with this disclosure.

Yes No

4. Employment History

List your employment history for the past FIVE (5) years to PRESENT DATE.

Also, list any employment history that shows experience in the cannabis industry. Add additional sheets if necessary.

From: To: Employer:
Position: Employer Address:
Type of Business: Reason for Leaving:

From: To: Employer:
Position: Employer Address:
Type of Business: Reason for Leaving:

From: To: Employer:
Position: Employer Address:
Type of Business: Reason for Leaving:

From: To: Employer:
Position: Employer Address:
Type of Business: Reason for Leaving:

From: To: Employer:
Position: Employer Address:
Type of Business: Reason for Leaving:

5. License History/ Affiliations

5a. Do you have any interest, direct or indirect, in any premises or business currently licensed by the Office of Cannabis Management where any cannabis is cultivated, processed, manufactured, distributed, tested, transported from, delivered from or sold at wholesale or retail, whether by stock ownership, interlocking directors, sharing parent companies, passive investor, mortgage or lien on, or ownership of any real or personal property, or by any other means including loans? If yes list:

Business Name	Business Address	Type of Interest	Date Interest Began	NYS Cannabis License ID
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5b. Do you currently or have you previously had any interest, direct or indirect, in a license or were you otherwise authorized in another state or jurisdiction to cultivate, process, manufacture, distribute, test, transport, deliver, or sell at wholesale or retail cannabis products in any form? If yes, list below. You must also provide a copy of each license or authorizing document verifying licensure in that state or jurisdiction with your disclosure.

State or Jurisdiction	License Type	License Number	Date Issued	Date Expiration
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5c. Other than as itemized in 5a or 5b have you ever applied in NYS or anywhere for a license to cultivate, process, manufacture, distribute, test, transport, deliver, or sell at wholesale or retail cannabis products in any form, including any application as a partnership, limited liability entity, corporation, institution, trust, estate, association, or any other entity? If yes list:

Name of Applicant	Address of Premises	Disposition	Date of Filing	License Number
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5d. Have you had a license, authorization, or application cancelled, denied, suspended, revoked or otherwise involuntarily terminated or sanctioned? If yes, please provide information, including a copy of documentation so indicating, or a statement that you were so licensed and were never sanctioned:

5e. Do you have any relationship, agreement, or arrangement with any official or any other individuals with control over the approval of an application or license, including, but not limited to, employees of the Office of Cannabis Management and members of the Cannabis Control Board? If yes explain:

5f. Do you have any relationship with applicant other than your role as indicated in question 2 above? If yes, please state exactly what the relationship is. (e.g., family member, friend, employer, etc.)

5g. Do you have any relationship with the current / past owner of the applicant? If yes, please state exactly what the relationship is. (e.g., family member, friend, employer, etc.)

5h. Are you a chief of police, police officer or subordinate of any police department in the state of New York; or an elected village officer that is assigned duties directly relating to the operation or management of the police department?

Yes No

6. Ongoing Activity

6a. If you are a President, Vice President, Secretary, Treasurer, Chairman, Officer, Director, Manager, Partner, General Partner, Limited Partner, Sole Proprietor, Stockholder, LLC Member, LLC Manager, Trustee (or immediate family member of any of the foregoing) of the applicant will you continue your present occupation or business?

Yes No

6b. Will you take part in the operation of the business to be permitted? If yes, please explain the nature of activity and the hours you will devote to the business (hours, days, responsibilities):

7. Convictions, Sanctions, And Other Disciplinary Actions

7a. Have you ever been convicted (including pleas of guilty or suspended sentences) of any felonies, misdemeanors, or offenses? If yes, please attach a Certificate of Disposition by the court clerk for each case. If convicted of a felony, please submit a Certificate of Relief from Disabilities, if available. Please submit an Affidavit explaining all details.

7b. If you have previously been approved for a license and had been convicted of any felony, misdemeanor or other type of offense except minor traffic infractions, were all convictions reported to the Office of Cannabis Management? If no, please attach a Certificate of Disposition by the court clerk for each case. If convicted of a felony, please submit a Certificate of Relief from Disabilities, if available. Please submit an affidavit explaining all details.

7c. Are there any arrests, charges, indictments or summonses pending against you, including driving while intoxicated or impaired? If yes, please provide a copy of the Accusatory Instrument.

7d. Have you been a party to any judicial or administrative proceedings, or received any regulatory violations or fines? Please explain in detail, and please indicate if the actions are still pending or the outcome upon final resolution.

7e. Do you have any pending or unresolved litigation or labor law violations? If yes explain:

7f. Are you delinquent in filing any required tax returns or paying any amount owed to any state or federal government? If yes explain:

7g. Have you ever had any petition under any provision of the Federal Bankruptcy Code filed by or against you, or have you sought relief under any state insolvency law? List each bankruptcy or insolvency proceeding. Include additional pages if necessary.

7h. Are you out of compliance with child support obligations (general obligations law section 3-503(2))? If yes explain:

7i. Have you ever been disciplined or sanctioned by a state or federal agency? If yes explain: :

7j. Do you have any state or federal tax liens against any property? If yes explain:

7k. Have you been convicted of an offense related to the functions or duties of owning and operating a business within three years of the application date, a felony conviction within the past five years involving fraud, money laundering, forgery or other unlawful conduct related to owning and operating a business? If yes, please explain.

7l. Have you been convicted of a felony within the past five years for hiring, employing, or using a minor in transporting, carrying, selling, giving away, preparing for sale, or peddling, any controlled substance to a minor; or selling, offering to sell, furnishing, offering to furnish, administering, or giving any controlled substance to a minor? If yes explain:

7m. Have you ever made or received any bribe or kickback or made or received any payments alleged to have been a bribe or kickback to any employee, company or organization, to obtain favorable treatment? If yes explain:

8. Financial Disclosure

8a. List any New York State cannabis licenses for which you are a passive investor.

Licensee or Applicant	Name of Licensee/Applicant	License ID # (if applicable)	Interest %	Type of Interest
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8b. List any New York State cannabis licenses for which you are a financier.

Licensee or Applicant	Name of Licensee/Applicant	License ID # (if applicable)	Interest %	Type of Interest
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9. Attestations

I, _____, the _____, understand that the Office of Cannabis Management will rely on each and every answer in the application and accompanying documents in reaching its determination and state, under penalty of perjury, that all statements and representations therein are true to the best of my knowledge and belief; and

I attest that all required items are included with this form and/or have been submitted to a third party as specified by the Office of Cannabis Management at the time this document was submitted; and

I attest that I shall not have any direct or indirect ownership interest in a New York State Adult-Use Cannabis licensee, permittee, or Registered Organization; and

I attest that I shall not hold a permit, registration, or license in any category under the Cannabis Law; and

I attest that neither I am not, nor is any member of my immediate family, a board member, officer, manager, owner, partner, principal stakeholder or member of a registered organization under the Cannabis Law; and

I attest that I am of good moral character; and

By submitting this application, I agree to allow the Department of Taxation and Finance to share my confidential tax information with the Office of Cannabis Management for purposes of determining my eligibility to receive or hold a license to conduct an adult-use cannabis business; and

I attest that I am at least 21 years of age.

Signed:

OCM-06005 (8/22)

Date: