



Cannabis and Lower-Potency Hemp Edible Retail Registration

Initial Registration _____ Renewal _____

Local unit of government: CITY OF ST JOSEPH

Business name: _____

Business address: _____

Business Phone Number: _____

Business Email: _____

Minnesota cannabis business license number: _____

Provide copy of valid state license or other applicable written approval from Office of Cannabis Management

What type of license are you applying for?

____ Cannabis Retailer ____ Lower-Potency Hemp Edible Retailer

Is applicant current on all property tax and assessments at retail location:

Yes No

Is applicant in compliance with local ordinances?

Yes No

CONTACT INFORMATION FOR PERSON IN CHARGE OF LICENSES PREMISES

Name: _____ Phone Number: _____

Email Address: _____

The applicant named above has paid the appropriate fees, is current on all applicable tax obligations, has passed a preliminary compliance review, and is authorized to engage in retail cannabis sales in the jurisdiction named above.

Registration Fees:

Cannabis Retailer

Initial Registration \$500

Annual Renewal \$1,000

Low-Potency Hemp Edible Retailer

Initial Registration \$125

Annual Renewal \$125

Office Use Only

Approved by: _____

Title: _____

Date: _____