

Registration Expires: September 30 Each Year INSTRUCTIONS

Send original form to: Municipality of Anchorage Treasury Division, Marijuana Tax 632 W 6th Ave, Ste. 330 P.O. Box 196650 Anchorage, AK 99519-6650

IMPORTANT NOTICE

General Information

You must submit this application if:

- You are a sole proprietor, partnership, corporation, LLC or other organization which intends to engage in the retail sales of marijuana and marijuana products in the Municipality of Anchorage, Alaska.
- You will be responsible for collecting and/or remitting the municipal marijuana retail sales tax.

For assistance:

- If you have any questions about this application, filing tax returns or any other municipal marijuana retail sales tax-related matters, contact the Treasury Tax Enforcement Officers at (907) 343-6670.
- A variety of information, including AMC 12.50 and forms, is available on our web site at www.muni.org/marijuanatax.

Additional instructions are included in the appropriate section of the application.

Use the appropriate stand-alone schedule if additional rows are needed for physical locations, marijuana handlers, and responsible parties.

The application has also been designed to allow you to add additional sets of declarations and certifications in Section IX for each owner, partner, member or responsible party as described in AMC 12.50.090A2 or you may use the appropriate standalone schedule for the second and subsequent persons.

An application is considered complete only when all applicable information and any required financial guarantee have been provided to Treasury.

Treasury requires at least five business days after the application is deemed complete in order to verify the information and documentation provided before issuing the certificate of registration.

Complete this application and mail to:

Municipality of Anchorage Finance Dept., Treasury Div. Marijuana Sales Tax PO Box 196650 Anchorage, AK 99519-6650



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SECTION I. RETAILER TO BE REGISTERED (must be completed)

Enter the State of Alaska business license number and name as listed on the business license. Expired licenses will delay processing of the application.

Enter the date when the applicant will start (or started) retail sales activity in the Municipality.

| Enter applicant's Alaska corporate entity number and the organizat with a status other than in good standing may delay processing of t | | corporate re | ecords (if | applicable). A | n entity |
|--|-------------------------------------|----------------|-----------------|--------------------------|-----------------|
| Alaska business license #: Retailer name as shown on the Stat | e business license: | | Busines | s start date (n | nm/dd/yyyy): |
| | | | | | |
| Alaska Entity # (if applicable): Name of entity as show | vn in Alaska corporate records | (if applicable | -). | | |
| Alaska Entity # (ii applicable). | WITHIT Alaska Corporate records | (п аррпсави | 5). | | |
| | | | | | |
| | BE REGISTERED (must be com | · · · · · · | | | |
| Enter street name and number, city and zip code of the location wh schedule if you have multiple locations instead of completing this se | | • | | • | |
| Enter applicant's Alcohol & Marijuana Control Office (AMCO) licens | e number. Also list any associa | ated consum | ption end | dorsement nur | mber. |
| Enter applicant's METRC account number. | | | | | |
| Enter applicant's Municipal Clerk license number. | | | | | |
| Enter the square footage. Exclude storage rooms, offices and other | areas that are off limits to cus | tomers. | | | |
| | AMCO license num | | | Municipal | 0 |
| Street name and number, city and zip code of each location: | and consumptior endorsement numb | | | Clerk license number: | Square footage: |
| | | | | | |
| | | | | | |
| SECTION III. REASON(S) FO | R APPLICATION (must be com | pleted) | | | |
| Check all boxes that apply. If a choice is not listed, check "Other" a existing business was purchased, provide details regarding the form | | reason(s) fo | r submitti | ing an applica | tion. If an |
| 1. Check all boxes that apply: | 2. Complete if you purchased | d an existing | business | s: | |
| ☐ New Business | Date Purchased: | | | | |
| ☐ Change of Owner | | | | | |
| Open Additional Location | Former Business Name: | | | | |
| ☐ Name Change | Former Owner's Name: | | | | |
| ☐ Purchased Existing Business (Complete Item #2) | | | | | |
| Other (Specify): | Former Owner's Registrati | on Number: | | | |
| | Former Owner's Address: | | | | |
| | Former Owner's Phone Nu | ımber: | | | |



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| Retailer Name: | | |
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|---------|--|--|------------------------------------|---|--------|
| | SECT | ION IV. CONTACT INFORMATION | (must be complete | ed) | |
| Enter t | the name and contact information for the p | erson Treasury can contact in case | e we have any que | stions regarding this application. | |
| Enter a | applicant's complete mailing address where | e mail is (or will be) customarily re | ceived, business pl | none number(s), and the business websi | te(s). |
| | | | | | ····· |
| Na | ıme: | Title: | | | |
| | | | | | |
| Pho | one: Fa | X: | Email: | | |
| Mailing | g address of business organization: | Business phone numb | per: Business | s web site(s): | |
| | , | | | | |
| | | | | | |
| | SECTION V. RESPONSIBL | E PARTIES - OWNERS, OFFICERS | S. DIRECTORS. ET | C. (must be completed) | |
| | | | | | |
| | | erisi directorsisi deneral barther | igi memnerigi ni i | I CONTRICTABLE I DAT AIVIL I 2 SU LIGUA 2 | |
| LIII | er the name(s) of business owners(s), office | | | | |
| | Full Name (Print) | | ship to Retailer | Phone Number | |
| | | | | | |
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| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | Full Name (Print) | | ship to Retailer | Phone Number | |
| | Full Name (Print) | Title/Relations | ship to Retailer | Phone Number | |
| | SECTION VI. CURR er the full name and permit number of curre | Title/Relations | MIT HOLDERS (mueers per AMC 12.50. | Phone Number | |
| | SECTION VI. CURR er the full name and permit number of curre | Title/Relations ENT MARIJUANA HANDLER PERI ent marijuana handler permit holde | MIT HOLDERS (mueers per AMC 12.50. | Phone Number St be completed) 090A4: |] |

SECTION VII. SECURITY FOR FIDUCIARY PERFORMANCE (required)

AMC 12.50.160 Security for fiduciary performance. Your application will not be approved until Treasury Division has had an opportunity to review the information you have provided in this application, to determine the appropriate amount of the financial guarantee, notify you of the required amount, and to review the financial guarantee you provide.

The amount of the financial guarantee shall be in an amount that the chief fiscal officer determines to be an average amount of annual sales tax collected by the retailer, comparable retailer(s), industry averages, or \$10,000.00, whichever is higher. The requirement for a financial guarantee shall remain in force for the entire period the applicant is registered as a retail marijuana store in accordance with AMC 12.50.090.

The guarantee required shall be provided by the retailer or by personal guarantee from an owner(s), partner(s), member(s), officer(s), director(s), or responsible party(ies) of the retailer, or any combination thereof.

The approved methods are surety bond, deposit in escrow, or letter of credit as described in AMC 12.50.160C.

After 24 consecutive reporting periods of filing tax returns and remitting taxes due by the due date, the retailer may request, in writing, a waiver of the requirement to post a guarantee.

Treasury may review the adequacy of any financial guarantee during the time a financial guarantee must be in effect, and may require an increase in the financial guarantee based on your level of sales activity as reported on tax returns and/or as determined by audit.



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Anchorage, AK 99519-6650

| SECTION VIII. DECLARATIONS AND CERTIFICATIONS (must be completed) | |
|--|----|
| Each responsible party for the applicant must initial each declaration or certification in the box provided to signify affirmation. If you are unable to affirm a declaration or certification, attach a narrative describing the reason(s) why a declaration cannot be affirmed. Treasury will then review the adequacy of the explanation . | |
| Enter the name of the responsible party completing this section: | |
| In the most recent five-year period I, as an owner, partner, member, or responsible party for my business as described in AMC 12.50.090A2, have not been convicted of a crime related to theft of tax dollars, attempted theft of tax dollars, failure to remit taxes due, embezzlement, felony theft, or similar financial crimes (AMC 12.50.0704a, AMC 12.50.100A6). | |
| I, as an owner, partner, member, or responsible party for my business as described in AMC 12.50.090A2, at any time during the most recent five-year period, have not had a certificate of registration under this chapter revoked (AMC 12.50.0704b, AMC 12.50.100A5). | |
| I, as an owner, partner, member, or responsible party for my business as described in AMC 12.50.090A2, do not have any delinquent tax obligations to the municipality or have substantial unpaid delinquent financial obligations to the municipality (AMC 12.50.07D4, AMC 12.50.090D, AMC 12.50.100A4). | |
| I, as an owner, partner, member, or responsible party for my business as described in AMC 12.50.090A2, do not have any unresolved issues regarding a prior certificate of registration issued under this chapter (AMC 12.50.070A4d). | |
| I, as an owner, partner, member, or responsible party for my business as described in AMC 12.50.090A2, have not structured the retailer's business organization in a manner that avoids payment of taxes, penalties, interest or costs due under this chapter (AMC 12.50.100A3). | |
| SECTION IX. BINDING AGREEMENTS (must be completed) | |
| Binding agreements are required by AMC 12.50.090. Applicant(s) must initial each of the listed agreements below for the application to be completed. Compliance with AMC Chapter 12.50 requirements ensures continuing eligibility to conduct retail sales of marijuana and marijuana products to consumers. These binding agreements apply to the retailer, its own and all responsible parties. | ct |
| Any contemporaneous or future complaints against the applicant filed by the department in the Alaska Court System related to responsibilities, duties, consequences, or disputes associated with this chapter shall at all times be within the venue of the | |
| Anchorage District or Superior Courts located in Anchorage, Third Judicial District (AMC 12.50.090A7a). | |
| | |
| Anchorage District or Superior Courts located in Anchorage, Third Judicial District (AMC 12.50.090A7a). In the event an owner, partner, managing member, responsible party, or employee of the retailer subsequently commits civil fraud, as defined by this chapter and demonstrated by a preponderance of the evidence to have occurred, the aforenamed parties shall remit to the municipality an amount that equals the taxes that would have been paid to the municipality if all the retail sales taxes | |



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| | Retailer Name: |
|---|---|
| Applicant full | y understands the applicable requirements and responsibilities of AMC 12.50 (AMC 12.50.090A10). |
| the registere | remain in compliance with all relevant municipal and State of Alaska laws and administrative requirements related to d business, including but not limited to: business license, retail marijuana licenses, special land use permit and any dic reporting (AMC 12.50.90C). |
| | or and acceptance of the certificate of registration issued under AMC 12.50 constitutes confirmation and ment on behalf of the retailer and all responsible parties for the retailer of the fiduciary duties pursuant to this chapter 090G). |
| *************************************** | SECTION X. REQUIRED FEE (must be completed) |
| REQUIRED: | Amount of Fee Enclosed |
| number, mus | stration fee for the first location, plus \$25.00 for each additional location with the same business license st accompany this application. Examples: fee to register one location is \$250.00, fee to register two locations ee to register three locations is \$300.00, etc. (AMC 12.50.11 0A). |
| If the addition | nal location is operating under a separate business number, a separate application must be completed. |
| | SECTION XI. AFFIRMATION AND SIGNATURE (must be completed) |
| belief, it is tru Tax on Mariji certify that I i bind, in the S | elow, I declare that I have examined this application, including any accompanying listings, and to the best of my knowledge and up, correct, and complete. I certify that I have received a copy of Anchorage Municipal Code (AMC) Chapter 12.50, Retail Sales using an and Marijuana Products, and understand the fiduciary responsibilities, liabilities, and requirements set forth therein. I further am an owner, trustee, managing partner, managing member, corporate officer, or other person duly authorized to contractually State of Alaska, the business named on this application. |
| | wledge a certificate issued under this chapter is a privilege for a retailer to have and there is no right, entitlement or property ted by the issuance of a certificate to a retailer. |
| Name (Print): | Title (Print): |
| Signature: | Date: |



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| Retailer Name: | |
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FINAL INSTRUCTIONS:

Attach the following documents to your application:

- 1. Current State of Alaska business license (AMC 12.50.090A3).
- 2. Current State of Alaska Alcohol & Marijuana Control Office license (AMC 12.50.090A 4).
- 3. If needed, continuation forms for physical locations, responsible parties and employees.
- 4. Current Retail Sales Establishment license issued by the Municipal Clerk (AMC 12.50.090A 10)

Please allow at least five business days for processing of a completed application by Treasury.

Reminder: An application is not considered complete until all sections have been completed, all required documents provided, and the financial guarantee provided as security for fiduciary performance has been reviewed and accepted by Treasury.