

## INSTRUCTIONS

As an associate of an applicant for a cannabis marketing licence, complete all fields and save as high quality PDF. Contact [LCRBcannabis@gov.bc.ca](mailto:LCRBcannabis@gov.bc.ca) to arrange a secure file transfer of the form and supporting documents. Please include the cannabis retail store licence application number in the email. Do not include the form, documents or any personal information.

## DOCUMENT CHECKLIST

In addition to this form, provide the LCRB with the following documents.  
All documents must be clear and legible, and must be submitted in high-quality PDF format.

### Documents Related to Your Partnership

Partnership Agreement

List of **all** key personnel of the partnership

*Key personnel are those people having authority and responsibility for planning, directing, and controlling the activities of the partnership, either directly or indirectly*

*Examples of key personnel may include partners and senior managers*

### Consent for Cannabis Security Screening Forms

Completed "Consent for Cannabis Security Screening" forms for the following individuals:

*If the partnership is a general or a limited liability partnership: All partners*

*If the partnership is a limited partnership: All general partners and all limited partners holding a 10% or greater interest in the partnership*

The form and instructions can be found at:

<https://www2.gov.bc.ca/gov/content?id=B8E6EBE15A594CB7832B490C0A2815B2>

### Associate Information Forms

Completed "Cannabis Marketing Licence Application: Associate Information Form" for the following individuals:

*If the partnership is a general or a limited liability partnership: All partners*

*If the partnership is a limited partnership: All general partners and all limited partners holding a 10% or greater interest in the partnership*

The form and instructions can be found at:

<https://www2.gov.bc.ca/gov/content?id=B8E6EBE15A594CB7832B490C0A2815B2>

### Associate Organization Assessment Forms

Completed "Associate Organization Assessment" forms for the following:

*If one or more of the partners is a private corporation, public corporation, partnership or society, all of those partners must submit additional documentation*

*Partners' documentation must be submitted separately from the application*

*Please direct the above partners to <https://www2.gov.bc.ca/gov/content?id=B8E6EBE15A594CB7832B490C0A2815B2> for instructions for submitting their documentation*

### Attestation Forms

Completed "Identity Verification" and "Witness of Signature" forms for the following individuals:

*If the partnership is a general or a limited liability partnership: All partners who are individuals*

*If the partnership is a limited partnership: All general partners and all limited partners holding a 10% or greater interest in the partnership, who are individuals*

The form and instructions can be found at: <https://www2.gov.bc.ca/gov/content?id=B8E6EBE15A594CB7832B490C0A2815B2>:

#### Privacy Collection Notice

The information requested on this form is collected by the Liquor and Cannabis Regulation Branch under Sections 26 (a) and (c) of the Freedom of Information and Protection of Privacy Act for the purpose of cannabis licensing, compliance and enforcement matters in accordance with the Cannabis Control and Licensing Act. Should you have any questions about the collection, use, or disclosure of personal information, please contact the Freedom of Information Officer at PO Box 9292 STN PROV GVT, Victoria, BC, V8W 9J8 or by phone toll free at 1-866-209-2111.

**PART 1: INFORMATION ABOUT THE LICENCE APPLICATION**

Get the information below from the applicant

**Reference Number**

*The application (or "job") number the LCRB gave the applicant.*

**Applicant Name**

*The name of the legal entity applying for the cannabis marketing licence.*

**PART 2: DETAILS OF THE ASSOCIATE PARTNERSHIP**

Complete all fields. Fields that are incomplete or incorrect will cause delays.

**Business Number**

*9 digit number from the Canada Revenue Agency*

**Partnership Type**

General

Limited

Limited Liability

**Business Contact**

*The name and contact information of the person the LCRB should contact for ongoing communications*

**Contact Person**

**Phone**

**Email**

**Mailing Address**

*The address for snail mail.*

**Associate/Partnership Name**

**Address**

**City**

**Country**

**Province/State**

**Postal Code/ZIP Code**

**PART 3: PARTNERS**

If the associate is a **general partnership**, include the following information for **all general partners**.

If the associate is a **limited partnership**, include the following information for:

- All general partners
- Limited partners holding at least a 10% interest

If more space is required, please use a separate piece of paper and upload it as a PDF along with supporting documents. Please title the additional page as "Partners."

Partner Type	Organization Name <i>Not applicable to individuals</i>	First Name <i>Only applicable to individuals</i>	Last Name <i>Only applicable to individuals</i>	General or Limited? <i>Only applicable to Limited and Limited Liability Partnerships</i>

**PART 3: PARTNERS - CONTINUED**

Partner Type	Organization Name <i>Not applicable to individuals</i>	First Name <i>Only applicable to individuals</i>	Last Name <i>Only applicable to individuals</i>	General or Limited? <i>Only applicable to Limited and Limited Liability Partnerships</i>

Check this box if an additional page is included

Have instructions for submitting additional documentation been provided to partners who are private corporations, public corporations or societies?

Yes

No, the partnership does not have any partners who are private corporations, public corporations or societies

**PART 4: CONNECTIONS TO B.C. CANNABIS RETAIL STORE LICENSEES OR APPLICANTS**

Does the partnership have any association, connection or financial interest in a B.C. cannabis retail store licensee or applicant?

Yes      No

**i** This includes, but is not limited to:

- Directly holding voting shares in a licensee or applicant
- Indirectly holding voting shares in a licensee or applicant. For example, through a subsidiary or holding voting shares in a company that holds voting shares in a licensee or applicant.
- Having a beneficial interest in a licensee or applicant. For example, through a trust.
- A contractual business arrangement of any sort.

*If Yes - Provide the name of the licensee or applicant and details of the connection (e.g. percentage and type of shares held).*

Does a B.C. cannabis retail store licensee or applicant have any association, connection or financial interest in the partnership?

Yes      No

**i** This includes, but is not limited to:

- Directly holding voting shares in the partnership.
- Indirectly holding voting shares in the partnership. For example, through a subsidiary or holding voting shares in a company that holds voting shares in the partnership.
- Having a beneficial interest in the partnership. For example, through a trust.
- A contractual business arrangement of any sort.

*If Yes - Provide the name of the licensee or applicant and details of the connection (e.g. percentage and type of shares held).*

**PART 5: CONNECTIONS TO FEDERALLY LICENSED PRODUCERS OF CANNABIS**

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Does the partnership have any association, connection or financial interest in a federally licensed producer of cannabis?

Yes      No

**i** This includes, but is not limited to:

- Directly holding voting shares in a federal producer
- Indirectly holding voting shares in a federal producer. For example, through a subsidiary or holding voting shares in a company that holds voting shares in a federal producer.
- Having a beneficial interest in a federal producer. For example, through a trust.
- A contractual business arrangement of any sort.

*If Yes - Provide the name of the federal producer and details of the connection (e.g. percentage and type of shares held).*

Does a federally licensed producer of cannabis have any association, connection or financial interest in the partnership?

Yes      No

**i** This includes, but is not limited to:

- Directly holding voting shares in the partnership.
- Indirectly holding voting shares in the partnership. For example, through a subsidiary or holding voting shares in a company that holds voting shares in the partnership.
- Having a beneficial interest in the partnership. For example, through a trust.
- A contractual business arrangement of any sort.

*If Yes - Provide the name of the federal producer and details of the connection (e.g. percentage and type of shares held).*