



MARIJUANA CONTROL PLAN MEDICAL DISPENSARIES AND MARIJUANA RETAILERS

Business Information				
Entity Name	Must match Secretary of State Business Registry Canna and the City, LLP			
Trade Name	DBA Canna and the City			
Facility Address	Street 3607 SW Corbett Ave	City Portland	State OR	Zip 97239
Mailing Address	Street 3607 SW Corbett Ave	City Portland	State OR	Zip 97239
Phone Number: 5037197216		Email: sean.asghari@cannaandthecity.com		
Website: www.cannaandthecity.com		Facebook Link: www.facebook/cannaandthecity		

Primary Business Contact Information		
Contact	First Name Shahram	Last Name Asghari
Title	PRF	Email: sean.asghari@yahoo.com

1. Please describe your plan to prevent theft at the licensed premises, including robberies, burglaries, and shoplifting.

We will keep all marijuana items in a secure room, out of the customers reach until they have purchased them. Only authorized individuals are allowed access to this secure "sales-room." Our customers are escorted through our shop one group at a time, and shown the various item by an experienced bud-tender who controls the items they are accessing. During all hours when our business is not operating our employees ensure that all entrances and exits are securely locked, and all marijuana items are kept in a large safe, inside a secure safe-room. There are always a minimum of two employee's present during business hours. We will also have a fully operational security alarm system, equipped with digital video surveillance that is running all the time.

INTERNAL USE ONLY

Application No. MRL-464

OHA Reg. No. / OLCC Lic. No. _____

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