



### CITY OF PORTLAND MARIJUANA CONTROL PLAN

Business Information				
Entity Name	Must match Secretary of State Business Registry <i>Gras on 7th Inc.</i>			
Trade Name (DBA)				
Facility Address	Street <i>621 SE 7th Ave</i>	City <i>Portland</i>	State <i>OR</i>	Zip <i>97214</i>
Mailing Address	Street <i>Same</i>	City	State	Zip
Phone Number:	<i>(503) 477-4580</i>		Email: <i>grascannabis@gmail.com</i>	
Website:	Facebook Link: <small>Optional</small>			

1. Please describe how your business will ensure that no one under the age of 21 is admitted, and how your business will educate patrons on the risks of marijuana use by minors.

Everyone including returning customers must present ID before sale, ID is checked on everyone entering even if they state they are not buying products. ID is checked for fakes.

Signs are posted on the premises advising of the rules. Bud tenders are experienced and well informed and can help customers understand the rules and risks for minors.

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Application No. *MRL 223-18*

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2. Please describe how your business will prevent cannabis products from being consumed around or near your business.

Customers are told they cannot consume in public or on premises. Poster and signs are posted on the interior and exterior of building as well.

3. Please describe how your business will prevent and address potential negative impacts to neighborhood livability such as noise, parking, garbage, or loitering from your patrons.

We have a designated parking lot. Noise is kept down and trash is inside and picked up if spilled on trash day.

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Application No. MRL 223-18

MRLA\_MCP\_ONI 02/03/2017

Page 2 of 3



4. Please briefly describe your business's process to respond to and resolve complaints and/or concerns from neighboring businesses or residences.

Management is notified immediately and response is made within 24 hours of complaint.

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MRLA\_MCP\_ONI 02/03/2017

Page 3 of 3