



**MARIJUANA CONTROL PLAN
MEDICAL DISPENSARIES AND MARIJUANA RETAILERS**

Business Information				
Entity Name	Must match Secretary of State Business Registry Pakalolo PDX LLC			
Trade Name	DBA Pakalolo			
Facility Address	Street 1528 SE Holgate Blvd	City Portland	State OR	Zip 97202
Mailing Address	Street 1528 SE Holgate	City	State	Zip
Phone Number: 503-369-8955		Email: pakalolopdx@gmail.com		
Website: pakalolopdx.com		Facebook Link: facebook.com/pakalolopdx		

Primary Business Contact Information		
Contact	First Name Adrienne	Last Name Garcia
Title	Managing Partner	Email: pakalolopdx@gmail.com

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

Our building is on a busy street. Our entrance is well lit, and we have put up signs indicating that the premises is under video surveillance. Our camera plan is compliant with OHA Medical Dispensary standards - meaning we have cameras covering every door and every point of sale. We also have cameras on the safes. We follow state guidelines regarding the storage of items overnight (we put them all in the safes).

Our staff conducts inventory of flower, edibles, topicals and concentrates at regular intervals so that missing items would be noticed.

Our staff also conducts a daily cash reconciliation at closing.

Staff are instructed not to leave customers or patients alone in the dispensary.

INTERNAL USE ONLY

Application No. 26

OHA Reg. No. / OLCC Lic. No. 02107



2. Please describe your plan to control access to your establishment and ensure that no one under the age of 21 is admitted.

We check ID before persons are permitted to enter. Only those with a valid state-issued ID which indicates that the person is over 21 may enter the dispensary. We have a 'valid if on or before' date board at our check in window to help staff with date calculations.

We also have a 2015 ID guide to assist staff should they need it.

3. In order to reduce the possibility of underage persons, as established by law, from gaining access to marijuana products sold at the licensed premises, please describe your plan to educate patrons on the risks of marijuana use by minors.

We hand out the "Marijuana Can Make Kids ^{our} Very Sick" handout per state rules with every recreational flower sale. Also per state rules, ^{our} containers are child-proof. The health warnings regarding children are posted at our point of sale per state rules.

INTERNAL USE ONLY

Application No. _____

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

MRLA_MCP_ONI 11/23/2015



4. Please describe your plan to ensure that marijuana products sold by your business are not consumed irresponsibly in public or in the immediate vicinity of the license premises.

We do not allow smoking of any kind on the premises. Although it hasn't been an issue, We will post a "NO SMOKING" sign near our two entrances. We are sure to answer any questions about responsible consumption per the state rules (ie no public consumption). We always advise consumers to be considerate of others and to be knowledgeable about what is permissible and legal.

5. Please describe your plan to avoid potential negative impacts to neighborhood livability such as noise, parking or garbage from your patrons.

We pick up trash everyday that blows in from the street, so if there is any from our patrons, it is picked up. Generally though, our patrons are NOT litterbugs. Since our transactions are retail in nature and persons are not intoxicated leaving our shop, there are very few problems with noise or behavior.

INTERNAL USE ONLY

Application No. _____

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

MRLA_MCP_ONI 11/23/2015



6. Please describe the process to respond to complaints from neighboring businesses and residents regarding the licensed premises.

We have so far been very well received by the neighborhood, which is appreciated. However, if ever a neighbor has an issue, we would listen carefully and address the problem immediately. We want to be good neighbors and live in harmony with those around us. We realize that this is a community and we are part of it, we serve it, and we need to work within community standards. We will understand what those standards are by continuing to get to know our neighbors.

7. Please include any other pertinent information related to the licensed premises.

INTERNAL USE ONLY

Application No. _____

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

MRLA_MCP_ONI 11/23/2015

Page 4 of 4