



MARIJUANA CONTROL PLAN MEDICAL DISPENSARIES AND MARIJUANA RETAILERS

Business Information				
Entity Name	Must match Secretary of State Business Registry Left Coast Canopy, LLC			
Trade Name	DBA Zion Cannabis, LLC			
Facility Address	Street 2331 SW 6th Ave.	City Portland	State OR	Zip 97201
Mailing Address	Street 2331 SW 6th Ave.	City Portland	State OR	Zip 97201
Phone Number: 971-255-1758		Email: joe@zioncannabis.com		
Website: www.ZionCannabis.com		Facebook Link:		

Primary Business Contact Information		
Contact	First Name Joseph	Last Name Dunne
Title	Managing Member / PRF	Email: joe@zioncanabis.com

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

(See Attachment)

INTERNAL USE ONLY

Application No. MRL 200
OHA Reg. No. / OLCC Lic. No. MMD 18646