



# MARIJUANA CONTROL PLAN MEDICAL DISPENSARIES AND MARIJUANA RETAILERS

Business Information				
Entity Name	Must match Secretary of State Business Registry Powellhurst Alternative Medical Center LLC			
Trade Name	DBA The Flower Shop Powellhurst			
Facility Address	Street	City	State	Zip
	17550 SE Division	Portland	OR	97236
Mailing Address	Street	City	State	Zip
	PO Box 16207	Portland	OR	97292
Phone Number:	(971) 254-9185		Email: flowershoppowellhurst@gmail.com	
Website:	theflowershoppdx.com		Facebook Link:	

Primary Business Contact Information		
Contact	First Name	Last Name
	Joshua Cino	
Title	Member	Email: joshcino@gmail.com

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

Only allow one customer per bartender  
 Restrict cash/inventory storage areas access  
 OLCC compliant cameras  
 Alfred Fire and Security alarm system w/ Panic buttons

INTERNAL USE ONLY

Application No. MRL237

OHA Reg. No. / OLCC Lic. No. \_\_\_\_\_