



MARIJUANA CONTROL PLAN MEDICAL DISPENSARIES AND MARIJUANA RETAILERS

| Business Information | | | | |
|----------------------|-----------------------------------------------------------------|----------------------|------------------------------------------|------------------|
| Entity Name | Must match Secretary of State Business Registry MJC, LLC | | | |
| Trade Name | DBA Greener Grasses | | | |
| Facility Address | Street 909 NE Dekum St. suite A | City Portland | State OR | Zip 97211 |
| Mailing Address | Street 909 NE Dekum St. Suite A | City Portland | State OR | Zip 97211 |
| Phone Number: | 503 804 5732 | | Email: pdgreenergrasses@gmail.com | |
| Website: | Facebook Link: | | | |

| Primary Business Contact Information | | |
|--------------------------------------|-------------------------|------------------------------------------|
| Contact | First Name Jacob | Last Name Austin |
| Title | PRD/ Owner | Email: pdgreenergrasses@gmail.com |

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

Only 4 customers are allowed into the dispensary at a time. We have 9 cameras inside and outside of the facility. We use an alarm system, and we have a check in window with a lobby. Employees are trained by our security team on SOPs and to watch for theft. All product is kept behind the counter, and in the safe, in the safe room.

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

We have a separate lobby with a locked door. Customers/patients have to check in at a window, where their required information is submitted into our POS system. If a customer's birthday is not before today's date in 1995, the POS system sends up a red flag and that customer is not allowed into the facility and is asked to leave.

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 have the required signage at the pos, we also have the required hand outs that are placed in every customer's bag.

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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 have outdoor cameras, we also answer any and all questions asked by the customers about where they can intake. We have educated our customers about "What's legal, and we have the "educate before you recreate" required signage at pos.

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

We only have street parking available at our location, but we give a discount for tri met users, to encourage people to use public transportation. We also have bike parking in the front of our store. Our employees pick up garbage around our building 2 times a week, and we've emailed the city and asked for public garbage cans to be placed outside, we would change the garbage if the city would just add the can. We have the support of the neighborhood.

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

I respond to every complaint personally. We have had Zero complaints from neighbors. I would say that we have had more people coming in, from the neighborhood to say thanks for moving in. We have had no complaints or sounds of regret for moving into this neighborhood.

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

We are a "neighborhood shop" 98% of our customers are from inside the neighborhood and the response has been overwhelming.

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