

CANNABIS COMPLIANCE BOARD STATE OF NEVADA

Website: ccb.nv.gov Main Line: (775) 687-6299

CANNABIS ESTABLISHMENT (CE)

Change of Location Request Form

(Pursuant to NRS 678B.210, NRS 678B.250, NRS 678B.500, and NCCR 6.065)

Submit through your Accela account as an "Amendment" to the license.

Date:	Establishmen	t ID # (Exam	nple: D026): 2	20-Digit License	e #:			
Cannabis Establishment Name:								
Point of Contact (POC) Name: Phone:								
Email:			_ POC Signature:					
Current Establishment Physical Address:								
City:	State:	_Zip:	Current Jurisdictio	n City:	Cou	inty:		
Proposed Physic	cal Address:		City:		_State:	_ Zip:		

Assessor's Parcel Number (APN):

TAB	CHECKLIST – Please complete and submit with requested documents in all tabs.	Yes/No
Ι	Include required documentation from a public meeting in the local jurisdiction approving the	
	location change. Agenda & meeting minutes are suggested.	
II	Professional survey demonstrating the proposed location meets the statutorily required distance from schools and community facilities (1,000 feet from schools & 300 feet from community facilities/parks/etc.). For Washoe & Clark Counties: 1,500 feet from an establishment that holds a nonrestricted gaming license.	
III	Written and signed attestation: New address meets/exceeds merits of previous location.	
IV	Documentation that proves the applicant has secured a lease or other property agreement that allows operation of a cannabis establishment on the property, or a letter from the landlord of the property stating the licensee is authorized to operate a cannabis establishment on the property.	

NOTE: Submit the Nevada Business Registration ("NBR") form

(https://tax.nv.gov/uploadedFiles/taxnvgov/Content/Forms/Tax-F006%20Nevada%20Business%20Registration.pdf) and the \$15.00 administrative fee directly to the Department of Taxation with a copy of the CCB location change approval letter, once obtained from the CCB. DO NOT submit the NBR or \$15.00 fee to the CCB.