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

License Renewal Form

(NCCR 5.095; NRS 678B.210; NRS 678B.250; NRS 678B.390)

INSTRUCTIONS: Please follow the steps below.

1. **Fees**: Make checks payable to State of Nevada. In the Memo section, write "Agency Code 270". Do not include any reference to "cannabis" or "marijuana" on your payment or your payment may be returned. Send to the address below.

Renewal	Dispensary	Cultivation	Production	Laboratory	Distribution	Consumption
Type						Lounge
Adult-Use	\$5,000.00	\$1,000.00	\$1,000.00	\$3,000.00	\$5,000.00	\$10,000.00
Medical	\$5,000.00	\$1,000.00	\$1,000.00	\$3,000.00	N/A	N/A

Payment Options:

- A. Standard Mail: CCB RENEWALS, P.O. Box 1948, Carson City, NV 89701
- B. Express Courier: CCB RENEWALS, 3850 Arrowhead Drive, Suite 100, Carson City, NV 89706
- C. ACH payment through your Accela Customer Portal account

2. Application Submission:

It is the Licensee's responsibility to submit a complete renewal application through Accela and pay the appropriate annual license renewal fee prior to the expiration of the license. Upload this completed, notarized form and record of payment in the "Documents" section of the application.

Note: Licensees are no longer required to obtain a Letter of Good Standing from the Department of Taxation nor upload it as part of the annual license renewal application. Licensees are still required to remain in tax compliance pursuant to NCCR 5.100(1.)(h), and must be in compliance when renewing the license.

I request that the Cannabis Compliance Board ("CCB") renew the Cannabis Establishment ("CE") license identified below.

Entity Name:			
CE ID #:	CE License Number:		
Point of Contact Name:			
Signature:		Date:	

License Renewal Form - Page 2

(Name), being first duly sworn, deposes and states as follows:							
I am the current Point of Contact on record with the CC	B for:						
Cannabis Entity Name:							
CE ID #: CE 20-digit license #:							
I am legally authorized to act for and bind said cannabis	establishment.						
I have read the foregoing License Renewal Form and known information contained in this form is true and correct and renewal of the License as set forth above.							
Signature		Date					
STATE OFss.							
COUNTY OF	-						
SUBSCRIBED AND SWORN to before me this	day of		, 20				
Notary Public							