

Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

marijuana.licensing@alaska.gov https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

Alaska Marijuana Control Board

Form MJ-15: Operating Plan Change

Why is this form needed?

This operating plan change form is required for all marijuana establishment licensees seeking to change a licensed marijuana establishment's existing operating plan, as required by 3 AAC 306.100. With this form, a licensee may request changes to as much or as little as desired of Form MJ-01 and/or the corresponding operating plan supplemental for the establishment's license type. The required \$250 change fee may be made by check, cashier's check, or money order.

Please complete and submit with this form the pages of Form MJ-01 and/or the corresponding operating plan supplemental that contain sections that you are requesting to change. **All fields must be completed of any page for which you are requesting changes** – upon board approval, the submitted pages will replace those currently on file. If your current, approved operating plan is on the original version of the forms, you may be required to complete and submit the new operating plan forms in their entirety.

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The form(s) that I am red	questing board a	approval to cha	nge is:							
Form MJ-01:	Form MJ-01: Marijuana Establishment Operating Plan									
Form MJ-03:	3: Retail Marijuana Store Operating Plan Supplemental									
Form MJ-04: Marijuana Cultivation Facility Operating Plan Supplemental										
Form MJ-05: Marijuana Product Manufacturing Facility Operating Plan Supplemental										
Form MJ-06: Marijuana Testing Facility Operating Plan Supplemental										
The licensed establishme approval or the Marijuan seeking to change opera	na Control Board	d (MCB) has giv	en final approval o	of the char	nges. Pleas	e note th	at licensees			
each license.	Section	on 1 – Esta	blishment In	formati	on					
Enter information for the bu	usiness seeking to	be licensed, as id	entified on the licen	se applicatio	on.					
Licensee:				MJ License #:						
License Type:										
Doing Business As:										
Premises Address:										
City:				State:	Alaska	ZIP:				

[Form MJ-15] (rev 3/2/2022) Page 1 of 2



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Section 2 – Summary of Changes										
Provide a summary of the changes for which you	u are requesting	g approval.								
S	ection 3 -	- Declarations								
Read each statement below, and then sign your	initials in the co	orresponding box to the rig	ght:		Initials					
			5 ···•·							
The proposed changes conform to all applicable	public health, fi	re, and safety laws.								
I understand that any temporary approval grante investment I make, based upon temporary appro		•	on by the MCB; t	therefore, an	у					
I hereby certify that I am the person herein name application, and I know the full content thereof.					e					
other documents submitted are true and correct	. I understand t	hat any falsification or mis	representation (of any item o						
response in this application, or any attachment, or revoking a license/permit. I further understand										
an application and commit the crime of unsworn					,					
Printed name of licensee	. <u></u> Si	gnature of licensee								
Timica name of necinsee	3.	Bridear C or nocusee								
AMCO Director Review for Temporary Approval Pending Final MCB Decision: Approved Disagram										
Drinted warms of Director										
Printed name of Director	Date									
Signature of Director	-									
Director Comments:										

[Form MJ-15] (rev 3/2/2022)
License #_____