



**Alaska Marijuana Control Board**

**Form MJ-15c: Operating Plan Change – Emergency Regulation**

**What is this form?**

This form is required for all retail marijuana store licensees seeking approval to temporarily change their operating plan due to the emergency regulations adopted in response to the COVID-19 pandemic. With this form, a licensee may request authorization to accept internet or telephonic orders of marijuana and marijuana products if consumers intend to be physically present at the time of purchase on the licensed premises, or at a location designated for curbside or exterior window pickup as authorized under 3 AAC 306.995.

With this form, please provide a diagram of the licensed premises that identifies the area designated for pickup. Before you submit these forms to AMCO, you will need to submit them to your local government to review and complete Section 5 – Local Government Review.

**This form must be completed and submitted to AMCO’s main office by email to [marijuana.licensing@alaska.gov](mailto:marijuana.licensing@alaska.gov) prior to changing existing operations or altering the floor plan. The licensed establishment’s operations may not be altered unless and until the director has given temporary approval. Please note that licensees seeking to change operating plans for multiple licenses must submit a separate completed copy of this form for each license.**

**Section 1 – Establishment Information**

Enter information for the business seeking to be licensed, as identified on the license application.

<b>Licensee:</b>		<b>MJ License #:</b>	
<b>License Type:</b>	Retail Marijuana Store		
<b>Doing Business As:</b>			
<b>Premises Address:</b>			
<b>City:</b>		<b>State:</b>	Alaska
		<b>ZIP:</b>	

**Section 2 – Diagram Requirements**

**For your security, do not include locations of security cameras, motion detectors, panic buttons, and other security devices.**

**The following details must be included:**

- |                                                 |                                                                      |
|-------------------------------------------------|----------------------------------------------------------------------|
| <input type="checkbox"/> License number and DBA | <input type="checkbox"/> Licensed premises boundary                  |
| <input type="checkbox"/> Legend or key          | <input type="checkbox"/> Restricted access areas                     |
| <input type="checkbox"/> Color coding           | <input type="checkbox"/> Storage areas                               |
| <input type="checkbox"/> Dimensions             | <input type="checkbox"/> Entrances, exits, and windows               |
| <input type="checkbox"/> Labels                 | <input type="checkbox"/> Walls, partitions, and counters             |
| <input type="checkbox"/> True north arrow       | <input type="checkbox"/> <b>Curbside/Exterior Window pickup area</b> |
| <input type="checkbox"/> Surveillance room      |                                                                      |



# Form MJ-15c: Operating Plan Change – Emergency Order

## Section 3 – Explanation of Operations

Provide details of the changes to your operation that you are requesting. Include a description of how orders will be taken, filled, and how marijuana or marijuana products will be brought to the consumer, as well as changes to security procedures. If alterations to the licensed premises are needed, detail them below.

## Section 4 – Declarations

Read each statement below, and then sign your initials in the corresponding box to the right:

Initials

The proposed changes conform to all applicable public health, fire, and safety laws. I have submitted this form to my local government for review and have included their response.

I understand that any approval granted by the director is temporary, and will expire on **August 14, 2020** unless the emergency order is extended, made permanent, or is otherwise repealed.

I certify that my video surveillance system required by 3 AAC 306.720 will cover all areas designated for curbside or exterior window pickup.



# Form MJ-15c: Operating Plan Change – Emergency Order

I agree that the area(s) designated for curbside or on the exterior of a window pickup are subject to inspection by AMCO and other law enforcement. An individual purchasing marijuana or marijuana products must show valid photographic identification as required by 3 AAC 306.350 and must be 21 or over.

I have attached an updated diagram of my licensed premises with the proposed changes that I am requesting.

As a marijuana establishment licensee, I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

\_\_\_\_\_  
Signature of licensee

\_\_\_\_\_  
Notary Public in and for the State of Alaska.

\_\_\_\_\_  
Printed name of licensee

My commission expires: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

## Section 5 – Local Government

Local Government Review is required to be completed before submission to the Alcohol and Marijuana Control Office.

**Local Government Review** (to be completed by an appropriate local government official):

Yes      No      Pending

The proposed changes shown on this form conform to all local restrictions and laws.

            

A local building permit is required for the proposed changes.

      

\_\_\_\_\_  
Signature of local government official

\_\_\_\_\_  
Building Permit #

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of local government official

\_\_\_\_\_  
Title

## Section 6 – AMCO Review

**AMCO Review:**

Approved      Disapproved

\_\_\_\_\_  
Signature of AMCO Enforcement Supervisor

\_\_\_\_\_  
Signature of Director

      

\_\_\_\_\_  
Printed name of AMCO Enforcement Supervisor

\_\_\_\_\_  
Printed name of Director

\_\_\_\_\_  
Date

**AMCO Comments:**