Alcohol & 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**

# Cover Sheet for Marijuana Establishment Applications

## What is this form?

This cover sheet **must** be completed and submitted any time a document, payment, or other marijuana establishment application item is emailed, mailed, or hand-delivered to AMCO's main office.

Items that are submitted without this page will be returned in the manner in which they were received.

### Section 1 – Establishment Information

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

| | | | | | |
|---|---|---|---|---|---|
| **Licensee:** | Ayme's Garden, LLC | **License Number:** | 15867 | | |
| **License Type:** | Standard Marijuana Cultivation Facility | | | | |
| **Doing Business As:** | AYME'S GARDEN, LLC | | | | |
| **Physical Address:** | 9785 Totem Bight Rd. Suite 200 | | | | |
| **City:** | Ketchikan | **State:** | AK | **Zip Code:** | 99901 |
| **Designated Licensee:** | Kanoe Zantua | | | | |
| **Email Address:** | aymesgarden@gmail.com | | | | |

### Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

| | |
|---|---|
| **Attached Items:** | MJ-04 Corrections<br>• Page 2 - corrected facility square footage<br>• Page 5 - corrected information on additional space<br>• Page 7 - corrections continued from page 5 |

| *OFFICE USE ONLY* | | | | | |
|---|---|---|---|---|---|
| Received Date: | | Payment Submitted Y/N: | | Transaction #: | |

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### Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

| | |
|---|---|
| **Attached Items:** | Form MJ-04: Marijuana Cultivation Facility |

| *OFFICE USE ONLY* | | | | | |
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| Received Date: | | Payment Submitted Y/N: | | Transaction #: | |

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# Operating Plan Supplemental
# Form MJ-04: Marijuana Cultivation Facility

**What is this form?**

This operating plan supplemental form is required for all applicants seeking a marijuana cultivation facility license and must accompany the **Marijuana Establishment Operating Plan (Form MJ-01)**, per 3 AAC 306.020(b)(11). Applicants should review **Chapter 306: Article 4** of the **Alaska Administrative Code.** This form will be used to document how an applicant intends to meet the requirements of those regulations. If your business has a formal operating plan, you may include a copy of that operating plan with your application, but all fields of this form must still be completed per 3 AAC 306.020 and 3 AAC 306.420(2).

**What additional information is required for cultivation facilities?**

Applicants must identify how the proposed establishment will comply with applicable regulations regarding the following:

- Prohibitions
- Cultivation plan
- Odor control
- Testing procedure and protocols
- Security

**This form must be submitted to AMCO's main office before any marijuana cultivation facility license application will be considered complete.**

## Section 1 – Establishment Information

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

| | | | | | |
|---|---|---|---|---|---|
| **Licensee:** | Ayme's Garden, LLC | **License Number:** | 15867 | | |
| **License Type:** | Standard Marijuana Cultivation Facility | | | | |
| **Doing Business As:** | Ayme's Garden, LLC | | | | |
| **Premises Address:** | 9785 Totem Bight Road Suite 200 | | | | |
| **City:** | Ketchikan | **State:** | ALASKA | **ZIP:** | 99901 |



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## Operating Plan Supplemental

# Form MJ-04: Marijuana Cultivation Facility

### Section 2 – Prohibitions

Applicants should review 3 AAC 306.405 – 3 AAC 306.410 and be able to answer "Agree" to all items below.

| The marijuana cultivation facility will not: | Agree | Disagree |
|---|---|---|
| **Sell, distribute, or transfer any marijuana or marijuana product to a consumer, with or without compensation** | ☑ | ☐ |
| **Allow any person, including a licensee, employee, or agent, to consume marijuana or marijuana product on its licenses premises or within 20 feet of the exterior of any building or outdoor cultivation facility** | ☑ | ☐ |
| **Treat or otherwise adulterate marijuna with any organic or nonorganic chemical or compound to alter the color, appearance, weight, or odor of the marijuana** | ☑ | ☐ |

### Section 3 – Cultivation Plan

Review the requirements under 3 AAC 306.420, and identify how the proposed premises will meet the listed requirements.

**Describe the size of the space(s) the marijuana cultivation facility intends to be under cultivation, including dimensions and overall square footage. Provide your calculations below:**

The cultivation facility is a 46 ft X 40 ft area
Total Square feet: 1840

28 X 20

~~The Veg room will be in a 34 ft X 14 ft space (476 sq feet)~~ 20X28 (560 sq. ft)
~~The Flower room will be in a 46 ft X 18 ft space (828 sq feet)~~ 18X40 (720 sq. ft)
~~Bud Storage room will be in a 14 ft X 12 ft space (168 sq feet)~~ 10X12 (120 sq. ft)
~~Clone room will be in a 8 ft X 8 ft space (64 sq feet)~~ 8X8 (64 sq. ft)

Correct Dimensions:

Bathroom: 4x4 sf: 16
Misc. Storage: 8x6 sf: 48
Clone rm: 8x8 sf: 64
office: 8x6 sf: 48
clean entry rm: 8x4 sf: 32

Dry/cure room 18x12 sf: 216
Product storage 10x12 sf: 120
Veg Rm: 20x28 sf: 560
flower Rm: 18x40 sf: 720
hallway to bathroom: 4x4 sf: 16

ASZ
KZ



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## Operating Plan Supplemental

# Form MJ-04: Marijuana Cultivation Facility

**Describe the marijuana cultivation facility's growing medium(s) to be used:**

The plants in the facility will be grown in a coco/perlite medium.

**Describe the marijuana cultivation facility's fertilizers, chemicals, gases, and delivery systems, including carbon dioxide management, to be used:**

Plants in the facility will be grown in a coco/perlite medium. No gas will be used. Water lines will run from a reservoir to the plant trays and water will be fed to the plants using a drip system. Organic nutrients may be mixed into the water that will feed the plants.

**Describe the marijuana cultivation facility's irrigation and waste water systems to be used:**

The facility will have a water reservoir which will disperse water into water lines that will run along the plant trays and will slowly drip water into the coco/perlite medium for the plants to wick. Bottomfeeding the plants in this type of medium will provide only the amount of water that the plants will need to survive. So there should be no waste water. Should any waste water occur, it will flow into a drip tray where it will evaporate.



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**Describe the marijuana cultivation facility's waste disposal arrangements:**

Any marijuana waste will be ground down and mixed with paper, dirt, and cardboard. We will then transport it at a scheduled time to the local landfill where they will mix it with waste of their own. This has been approved by DEC and landfill management.

## Section 4 – Odor Control

Review the requirements under 3 AAC 306.430, and identify how the proposed premises will meet the listed requirement.

**Describe the odor control method(s) to be used and how the marijuana cultivation facility will ensure that any marijuana at the facility does not emit an odor that is detectable by the public from outside the facility:**

The facility will use a type of carbon filters attached to the exhaust vents. These carbon filters are said to remove 99% of everything under 20 microns from the air in one pass. This includes all organic odors.



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# Operating Plan Supplemental
# Form MJ-04: Marijuana Cultivation Facility

## Section 5 – Testing Procedure and Protocols

Review the requirements under 3 AAC 306.455 and 3 AAC 306.465, and identify how the proposed premises will meet the listed requirements.

Applicants should be able to answer "Agree" to the item below.

| **I understand and agree that:** | Agree | Disagree |
|---|---|---|
| The board will or the director shall from time to time require the marijuana cultivation facility to provide samples of the growing medium, soil amendments, fertilizers, crop production aids, pesticides, or water for random compliance checks | ☒ | ☐ |

**Describe the testing procedure and protocols the marijuana cultivation facility will follow:**

~~After harvest, a minimum of four grams per strain will be selected to be packaged and tagged for transport to a licensed testing facility. The testing facility will be contacted to arrange the day the samples will be transported to their facility. Once those arrangements have been made, a travel manifest will be made prior to the transport of the marijuana samples.~~

* Please see additional space form (page 7) for revised answer



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# Form MJ-04: Marijuana Cultivation Facility Operating Plan Supplemental

**(Additional Space as Needed):**

Describe the testing procedure and protocols the marijuana cultivation facility will follow: (from page 5)

Each harvest will be submitted for laboratory testing. After a harvest, a random sample of bud and flower from each strain will be taken. The amount of each sample needed will be designated by the testing facility. The designated employee or licensee taking the sample will sign a statement form to ensure the samples are random. The statement form will be delivered to the testing facility with the samples. A copy will be kept with business records.

The sample will be packaged for transport in one quarter ounce bags (one per sample) and heat sealed to ensure no tampering occurs. The sample will be labeled for transport, and a transport manifest will be generated in METRC. The transport manifest will remain with the marijuana samples for the entire transport. One copy of the manifest will be maintained for business records, and one copy will be given to the testing facility.

The entire batch from which the sample was taken, will be segregated and stored in a locked product storage room, until the testing is complete. Testing results will be maintained for business records, ans copies will be given to marijuana licensees who purchase the product.



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# Operating Plan Supplemental
# Form MJ-04: Marijuana Cultivation Facility

## Section 6 – Security

Review the requirements under 3 AAC 306.430 and 3 AAC 306.470 – 3 AAC 306.475, and identify how the proposed premises will meet the listed requirements.

Applicants should be able to answer "Agree" to the two items below.

| **The marijuana cultivation facility applicant has:** | Agree | Disagree |
|---|---|---|
| Read and understands and agrees to the packaging of marijuana requirements under 3 AAC 306.470 | ☒ | ☐ |
| Read and understands and agrees to the labeling of marijuana requirements under 3 AAC 306.475 | ☒ | ☐ |

**Restricted Access Area (3 AAC 306.430):**

| | Yes | No |
|---|---|---|
| Will the marijuana cultivation facility include outdoor production? | ☐ | ☒ |

**If "Yes", describe the outdoor structure(s) or the expanse of open or clear ground fully enclosed by a physical barrier:**



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## Operating Plan Supplemental

# Form MJ-04: Marijuana Cultivation Facility

**Describe the method(s) used to ensure that any marijuana at the marijuana cultivation facility cannot be observed by the public from outside the facility:**

Observation of the inside of the cultivation facility will not be possible by anyone on the outside. The facility will be on the second floor of an existing building and any windows will be blacked out to prevent light from entering and to prevent any form of observation from the outdoors.
The facility will not be open to the public, therefore no one should be lingering on the property where the facility will be located. Any unauthorized peopole found on the property will be asked to leave immediately.

**I certify that as a marijuana cultivation facility, I will submit monthly reports to the Department of Revenue and pay the excise tax required under AS 43.61.010 and 43.61.020 on all marijuana sold or provided as a sample to a marijuana establishment, as required under 3 AAC 306.480.**

I declare under penalty of perjury that I have examined this form, including all accompanying schedules and statements, and to the best of my knowledge and belief find it to be true, correct, and complete.

Signature of licensee

Kance Zantua

Printed name

Subscribed and sworn to before me this 30 day of Oct., 2017.

STATE OF ALASKA
NOTARY PUBLIC
SHARON E WAGNER
My Commission Expires Nov. 7, 2020

S. E. Wagner

Notary Public in and for the State of Alaska.

My commission expires: 11/07/2020



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## Operating Plan Supplemental

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**(Additional Space as Needed):**



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