



Chaves County Planning and Zoning Dept.  
 #1 St. Mary's Place- Roswell, NM 88203  
 P.O. Box 1817- Roswell NM 88202-1817  
 Phone: (575) 624 6606  
 Website: www.chavescounty.gov

<b>Chaves County Cannabis Establishment</b>	
Date:	_____
Permit#	_____
Fee:	<input type="checkbox"/> New (\$500)

# APPLICATION

**Entity Name:** \_\_\_\_\_

**Trade Name:** \_\_\_\_\_

**Type of Corporate Structure:**  Corporation  LLC  Partnership  Other

Include a list all persons of interest in the Cannabis Establishment business.

NM Tax ID# \_\_\_\_\_

**Facility Address:** \_\_\_\_\_

City: \_\_\_\_\_ Zip Code \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

**Primary Contact Name:** \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Property:**  Owned  Real Estate Contract  Leased

Name of Property Owner(s) \_\_\_\_\_

Legal description: \_\_\_\_\_

UPC #: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Expiration Date of Lease (if applicable): \_\_\_\_\_

Zoning District: \_\_\_\_\_

Review-Chaves County Planning and Zoning Staff \_\_\_\_\_

**Development Plan:**  Site Plan  Utility Plan  Parking  Lighting  Fencing  Security

A list and map of property owners within 1,000 feet of the facility (property line to property line)

(Chaves County Assessor's Office)

Distance requirements from specified uses listed in Section 6, Article 23 of Chaves County Zoning Ordinance No.7

Reviewed-Chaves County P & Z Director: \_\_\_\_\_

Nearest Cannabis retailers or consumption areas (if applicable): \_\_\_\_\_(Miles)

**Cannabis Establishments:**

Cannabis Producer/ Microbusiness

Cannabis Manufacturer

Cannabis Research/testing Laboratory

Cannabis Integrate Product Facility

Cannabis Courier

Cannabis Extraction Facility

Cannabis Growth and Educational Stores

Cannabis Retailer

Cannabis Consumption Area

**Structures:**

Number of proposed structures on site: \_\_\_\_\_

Proposed structures reviewed and accepted by the Chaves County Building Inspector

Reviewed-Chaves County Building Inspector: \_\_\_\_\_

**Cannabis Producer/Microbusiness Producer:**

Required documentation of agriculture water rights.

NM Engineer's Office(sign-off) \_\_\_\_\_

Copies of agriculture water right documentation (acre-feet): \_\_\_\_\_

**Oath of Application:** I declare under penalty of perjury that this application and all attachments are true, correct, and complete to the best of my knowledge. I also acknowledge that it is my responsibility and the responsibility of agents and employees to comply with the provisions of the latest Chaves County Zoning Ordinance No.7 and the Cannabis Regulation Act which govern my cannabis license.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_