Cannabis Waste Management Procedures

Please provide a detailed response to the items below. If more space is needed additional pages may be added. Microbusinesses must complete this form for each commercial cannabis activity they intend to engage in.

Business Name and Application Type:

Primary Contact Name, Email, and Phone Number:

1. Describe how cannabis waste is generated, stored, and managed within the licensed premises.

2. Identify the type of solid waste facility to which cannabis waste is transported to from the premises. (If not applicable state N/A):
   a. Solid-waste landfill operation or facility?
   b. Transformation operation or facility?
   c. Composting operation or facility?
d. In-vessel digestion operation or facility?

e. Transfer/processing operation or facility?

f. Chip-and-grind operation or facility?

3. Describe the procedures for ensuring that cannabis waste is stored in a secured waste receptacle and describe the measures taken to restrict access to the cannabis waste to the licensee, its employees, and third-party hauler.
4. If a third-party waste hauler collects and processes cannabis waste from the proposed premises, identify the type or types of third-party waste hauler(s) used: local agency, waste hauler franchised or contracted by a local agency, or a private waste hauler permitted by a local agency.

5. If a third-party waste hauler is used, describe the process for documenting and confirming the receipt of the cannabis waste at the solid waste facility.

6. If engaging in self-hauling of cannabis waste, describe the procedures followed, including how the delivery of cannabis waste is documented.
7. Identify whether the proposed commercial cannabis activities will result in the generation of hazardous waste such as spent solvents or compressed gas cylinders.

8. If hazardous waste is generated, describe how it will be stored and managed within the licensed premises. Attach a copy of the pertinent Hazardous Material Business Plan, if available.

9. If cannabis waste is composted within the licensed premises, describe the composting procedures.

10. Will your business generate four or more cubic yards of solid waste per week? If yes, describe the procedures for recycling organic waste such as composting on-site, self-hauling, or the use of a third-party hauler.
Delivery Procedures

Please provide a detailed response to the items below. If more space is needed additional pages may be added. Microbusinesses must complete this form if they intend to engage in retail activity that includes delivery.

Business Name and Application Type:

Primary Contact Name, Email, and Phone Number:

1. Provide a list of each vehicle that will be used in the delivery of cannabis goods. Provide, the year, make, model, color, vehicle identification number (VIN), and license plate number for each vehicle. Also, indicate whether each vehicle is equipped with a vehicle alarm system.

2. Provide a list of each employee that will be conducting deliveries of cannabis goods. Provide the full name, date of birth, and driver’s license number for each employee.

3. Describe the training provided to delivery employees.

4. Describe the process for accepting new delivery orders. If a technology platform is used, please describe how customers place orders, how the orders are received, and who at the retailer receives the orders through the platform.
5. Describe the process for preparing orders of cannabis goods for delivery.

6. Describe how cannabis goods will be stored in the delivery vehicle while deliveries are being conducted. Include the quantity of cannabis goods that will be carried by each delivery employee.

7. Describe the process that a delivery employee goes through prior to leaving the retail premises to conduct deliveries of cannabis goods.

8. Describe the process for tracking the location of delivery employees who are currently conducting deliveries.
9. Describe the methods used to communicate with the delivery employees who are engaged in conducting deliveries.

10. Describe the methods of route guidance used by delivery employees while conducting deliveries.

11. Describe the policies for delivery employees taking breaks and making stops while conducting deliveries.

12. Do delivery employees receive new orders while in the process of conducting deliveries? If so, describe that process.
13. Describe the process of preparing the delivery request receipt.

14. Describe the process each delivery employee goes through upon arriving at the delivery location and providing the cannabis goods to the customer.

15. Describe the process that a delivery employee goes through upon returning to the retail premises after conducting deliveries.

16. Describe the applicant’s methods of auditing the activities of the delivery employees to ensure that cannabis goods do not go unaccounted for when the delivery employee returns to the retail premises.
Inventory Procedures

Please provide a detailed response to the items below. If more space is needed additional pages may be added. Microbusinesses must complete this form for each commercial cannabis activity they intend to engage in.

Business Name and Application Type:

Primary Contact Name, Email, and Phone Number:

1. Using a diagram, indicate where on the licensed premises cannabis goods will be stored.

2. Describe who has access to the areas in which cannabis goods are stored.

3. Describe the security measures in place at the location where cannabis goods are stored.

4. Describe the conditions of the location where the cannabis goods are stored. Can the temperature and/or humidity be controlled?
5. Describe the training provided to employees regarding inventory procedures.

6. Describe the process for receiving new inventory of cannabis goods.

   a. Describe where the cannabis goods are received.

   b. Identify who will receive the cannabis goods, such as a manager or an employee.

   c. Describe how the cannabis goods are moved to the cannabis storage area.
d. Describe what records are produced.

7. Describe the type of inventory records that are produced and maintained regarding the movement of inventory.

8. Describe the process for removing cannabis goods from inventory.

a. Describe what happens to the cannabis goods after they are removed from inventory, including any records that are produced.

9. Describe the methods used to ensure that the cannabis goods stored are preserved and do not degrade.
10. How often is inventory reconciliation conducted?

a. Describe the process for inventory reconciliation and the types of records that are produced.
Non-Laboratory Quality Control Procedures

Please provide a detailed response to the items below. If more space is needed additional pages may be added. Microbusinesses must complete this form for each commercial cannabis activity they intend to engage in.

Business Name and Application Type:

Primary Contact Name, Email, and Phone Number:

1. Describe the applicant’s procedures for packaging and labeling.

   a. Procedures for verifying labeling contents for cannabis goods batches, when transferring between licensees and storage. Include how the applicant verifies the name, license number of manufacturer or cultivator, date of entry into storage area, unique identifiers and batch number, description of cannabis goods, weight and/or quantity of units in batch, and expiration or sell-by date (if applicable).

   b. Procedures for verifying labeling contents for cannabis goods for retail sale including final form of verification, primary panel labeling, informational panel labeling.

   c. Procedures for verifying labeling contents for cannabis goods for retail sale including net weight (if applicable), identification of the source and date of cultivation, type of cannabis, date of packaging, county of origin (if applicable), allergen warning (if applicable), and unique identifier.
d. Procedures for verifying government warning label requirements.

e. Procedures for verifying cannabis products required to have "For Medical Use" labeling, if applicable.

f. Procedures for verifying packaging requirements including tamper-evident, child-resistant, and resealable child-resistant exit packaging, if applicable.

2. Describe how the applicant will avoid and/or limit deterioration and contamination of any cannabis goods, including, but not limited to: pest control, environmental controls, maintenance and cleaning services.

3. Describe the applicant's procedures for handling returns.
4. If applying for a distributor license, provide the following information.

   a. Storage procedures, which include:
      i. Whether the applicant is providing storage-only services to other licensees, and if so, which licensees and license types.

         ii. Identify all limited-access areas on the premises, and storage areas of cannabis goods in limited-access areas.

         iii. Procedures for storage and separation of cannabis goods batches for testing.

   b. Labeling and packaging procedures, which include:

      i. When labeling and packaging will occur.
ii. Area of premises where labeling and packaging will occur.

c. Sampling procedures, which include:
   i. Provide the timeframe for making testing arrangements after taking physical possession of cannabis goods batches.

   ii. Provide the sampling procedures for ensuring correct batch size, incremental sampling, and how the distributor will ensure that the distributor employee has no contact with cannabis goods or sampling equipment.

   iii. Provide procedures for video recording sampling of cannabis goods batches.

   iv. Provide chain of custody procedures for cannabis goods batches.
d. Testing Results Procedures, which include:

   i. Procedures for a failed sample, including remediation and/or cannabis waste procedures.

   ii. Procedures for a passed sample.

   iii. Track and Trace procedures following testing.

Sample Preparation - Standard Operating Procedures

Please provide a detailed response to the items below. If more space is needed additional pages may be added.

Laboratory Name:

Primary Contact Name, Email, and Phone Number:

1. Provide a description of storage and handling procedures for samples.

2. Specify preservation methods used for samples. Include methods that prevent sterility issues and cross-contamination.
3. Provide the hold time for all sample types and matrices.

5. Signature of supervisory or management laboratory employee: ____________________________ Date: ____________________________

Applicant Signature ____________________________ Date Signed ____________________________
Sampling - Standard Operating Procedures

Please provide a detailed response to the items below. If more space is needed additional pages may be added.

Laboratory Name:

Primary Contact Name, Email, and Phone Number:

1. Provide a description of the procedure(s) used for obtaining representative samples for all matrices.

2. Specify the following:

   a. Equipment and supplies used during sampling, such as a calibrated scale, gloves, collection bags, etc.

   b. Sampling tools used for each matrix type, including changing disposable gloves between the sampling of each batch and the sterilization or sanitation methods to prevent cross-contamination.
c. Any preventative measures used to ensure the sampling area is free of contaminants.

d. The procedure for weighing samples during collection with a calibrated balance, including calibration steps.

e. Storage and preservation of samples collected, including how the samples will be contained to prevent contamination and tampering.

f. The procedure for assigning each representative sample a unique sample identifier.
g. The procedure for recording the conditions during sampling and transportation on the chain of custody form, including any problems, issues, or observations.

h. How the sampling procedure follows chain of custody protocols.

4. Signature of supervisory or management laboratory employee: ___________________________ Date: ___________________________

Applicant Signature: ___________________________ Date Signed: ___________________________
Security Procedures

Please provide a detailed response to the items below. If more space is needed additional pages may be added. Microbusinesses must complete this form for each commercial cannabis activity they intend to engage in.

Business Name and Application Type: ____________________________

Primary Contact Name, Email, and Phone Number: ____________________________

1. Describe who is responsible for implementing the Security Operating Procedures and list each person’s role and responsibilities.

2. Describe how the applicant will ensure all access points will be secured, which includes a description of all entrances and exits, windows, and doorways and the types of locks used.

3. Describe the procedures for allowing individuals access to the premises, which includes:
   
   a. A list of employees who have access including their roles and responsibilities.
   
   b. A description of how the applicant will ensure only authorized persons have access to the licensed
c. A description of how the applicant will maintain an accurate record of all non-employee authorized individuals allowed onsite, in conformance with section 5042 of the Bureau’s regulations.

4. Describe how the applicant will comply with the employee badge requirement in section 5043 of the Bureau's regulations, including how the applicant will assign employee numbers and what the procedures are when an employee changes responsibilities or leaves the employment of the licensee.

5. Provide a description of the video surveillance system, which includes:
   
   a. A description of the types of cameras and video storage equipment.

   b. A description of the camera placements and the number of cameras to be used.

   c. A description of the procedures for the maintenance of the video surveillance equipment.
d. A description of how the applicant will be notified of video surveillance system-failure or malfunction.

e. A description of how the video surveillance system will be monitored.

f. A description of how the applicant will produce copies of video recordings at the licensed premises.

g. A description of how the applicant will share the video surveillance system with other licensees (when sharing services at the same location), if applicable.

6. Provide information regarding the use of security personnel onsite, which includes:
   a. Whether the security personnel will be employed by the applicant or contracted. If contracted, provide the name of the security company, license numbers, contact person, phone number of personnel that will be providing services, and a copy of the contract.
b. Where the security personnel will be stationed on the licensed premises and/or which areas will be covered by roving security.

c. The hours security personnel will be onsite.

d. A description of how the applicant will share security personnel with other licensees (when sharing services at the same location), if applicable.

e. Will the security personnel be armed or unarmed?

7. Provide a description of the security alarm system, which includes:

a. The name, license number, address, phone number, and contact person of the alarm company that installed, maintains, and monitors the alarm system.
b. How the applicant will ensure the alarm system remains operational, including the frequency of maintenance checks by the alarm company.

c. A description of the alarm system features, including whether it has motion detection sensors inside the premises.

d. A description of how an alarm will be responded to, including whether law enforcement personnel will be notified.

e. A description of how licensees will be sharing the alarm system with other licensees (when sharing
Test Methods - Standard Operating Procedures

Please provide a detailed response to the items below. If more space is needed additional pages may be added.

Laboratory Name:

Primary Contact Name, Email, and Phone Number:

1. List all analytes and matrices tested by the method.

2. 

3. Please list the following:
   a. Brand name and model of instrumentation used.
   b. Other equipment used for testing (e.g. balance, centrifuge, vials).
   c. List and describe procedure(s) for making reagents, solutions, standards, and reference materials used in the method.

4. Provide the method sensitivity, which may include the LOD and LOQ for each analyte tested.
5. Describe the types, frequency, and acceptance criteria for quality control samples.

6. Describe the types, frequency, and acceptance criteria for calibration standards.

7. Describe the procedure for analyzing analytical batch samples.

8. Describe corrective action procedures used when LQC samples fail.

9. Provide calculations used, if any.

10. Describe any potential interferences with the analysis.

11. Specify the ISO/IEC 17025 accreditation body and accreditation or certificate number for the method, if applicable.

12. Signature of supervisory or management laboratory employee: Date:

Applicant Signature Date Signed
Transportation Procedures

Please provide a detailed response to the items below. If more space is needed additional pages may be added. Microbusinesses must complete this form for each commercial cannabis activity they intend to engage in.

Business Name and Application Type:

Primary Contact Name, Email, and Phone Number:

1. Identify whether the applicant intends to transport cannabis goods, or will be contracting for transportation services.

2. If transporting cannabis goods, provide the following information:
   a. Whether the applicant intends to transport to all license types, or is limiting transportation to only certain license types.
   b. The geographic regions the applicant will transport to and from, and whether the applicant expects to transport overnight.
   c. Vehicle and trailer information, which includes:
      i. Number of vehicles to be used.
ii. Type of vehicles or trailers to be used, including make, model, year, and vehicle identification number (VIN).

iii. Registration and insurance information for each vehicle being used.

iv. Whether the applicant has or will be applying for a motor carrier permit, list permit numbers (if applicable).

d. Driver information, which includes:
   i. All employees that are or will be transporting cannabis goods, either as a driver, or a passenger, including name and age of employee, driver’s license information, and list the roles and responsibilities for each employee.
ii. Will any security personnel accompany employees transporting cannabis goods? Specify whether security personnel will be employees or contracted. If contracting for security, provide the name of the company, license number, contact person, and phone number.

e. Information regarding the storage of cannabis goods in the vehicle, which includes:
   i. A description of how the applicant intends to store cannabis goods in each vehicle or trailer, i.e., what area of the vehicle or trailer will be used for storage.

ii. A description of how the applicant intends to secure cannabis goods in each vehicle.

iii. A description of how the applicant will ensure that cannabis goods are not visible or identifiable from outside each vehicle.
f. Information regarding all security measures the applicant will have in place for the transportation of cannabis goods, including, but not limited to:

i. Describe the alarm systems for each vehicle.

ii. Other security measures used during the transporting of cannabis goods.

g. Whether the applicant is located within a building or on the same parcel of land, as another licensee, for which transportation by motor vehicle is not operationally feasible, and how the applicant will be transporting cannabis goods, if not by motor vehicle.

3. If contracting for transportation services, provide a list of transportation services used, and a copy of the contract for each, if applicable.