

State of California, Department of Cannabis Control
Gavin Newsom, Governor www.bcc.ca.gov

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 and cannabis products ~~goods~~ will be stored.

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

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

4. Describe the conditions of the location where the cannabis and cannabis products ~~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 and cannabis products goods.

a. Describe where the cannabis and cannabis products goods are received.

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

c. Describe how the cannabis and cannabis products 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 or cannabis products ~~goods~~ from inventory.

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

9. Describe the methods used to ensure that the cannabis and cannabis products ~~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.

Applicant Signature

Date Signed

