

State of California, Department of Cannabis Control

# Licensee Authorization Form for Information Release

Business and Professions Code section [26260](#) allows the Department of Cannabis Control to release non-public licensee information to financial institutions to help the licensee access financial services.

This form shall be used by the licensee to authorize the release of information to financial institutions that request it. The form must be completed and signed by an owner of the business who has been identified and disclosed on the license application. Licensees may withdraw their waiver at any time by re-submitting this form with the withdrawal information completed.

## Licensee Information

Business Name:

License Number(s):

Name of Owner Submitting Request:

Owner's Email Address:

Owner's Phone Number:

## Request Information

I wish to authorize release of information to financial institution(s) – *Complete Section A below*

I wish to withdraw an authorization previously provided – *Complete Section B below.*

## Section A – Authorization for Release of Information

Name(s) of Financial Institution(s) Authorized to Receive Information:



## Information That May Be Provided

### Application Information

*Includes license application and renewal applications. Does not include criminal background or personal information of individual owners.*

### Compliance and Enforcement Information

*Includes documents issued to a licensee pursuant to disciplinary proceedings such as Citations, Notice of Embargo or Notice of Suspension/Revocation.*

### Track and Trace Information

*Includes inventory, sales (retail) and transfer reports. Does not include employee personal information or information about other licensed businesses.*

The licensee hereby waives any applicable privilege and confidentiality and authorizes the Department to disclose to the Financial Institution(s) identified above such nonpublic financial, regulatory and business information designated above concerning the licensee, its owners and financial interest holders, provided the nonpublic information is accompanied by a statement that the Financial Institution is to maintain the confidentiality of such information.

Signature:

Date:

## Section B – Withdrawal of Authorization

Choose one:

I wish to withdraw all authorization provided for release of information to financial institutions

I wish to withdraw authorization provided for specific financial institution(s). *List the financial institution(s) that should no longer be able to receive your information:*

Signature:

Date:

