

Cannabis Control Division

Producer and Producer Micro-business Licensing Platform

Select License

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Instructions:

This online licensing system collects the information necessary to process your cannabis application. Please read each section carefully. If you need additional information while completing the application or if you have any questions, please call the Cannabis Control Division at 505-476-4995 or email us at RLD.CannabisControl@state.nm.us.

Once you have selected your preferred cannabis license type you'll be asked to create an account. As you complete the application, you'll be able to save the responses you've entered if you click the 'Save & Next' button at the bottom of each screen. You'll be able to come back to resume or complete your application, and your application will not be submitted to CCD until you click the 'Pay & Submit' button on the final screen.

Cannabis Producer

The annual fee for a cannabis producer license is \$2,500, and there is a \$1,000 annual fee for each licensed cannabis producer premise. You will also be charged a fee of \$10.00 for every mature cannabis plant that you'll be growing at any one time. The maximum number of mature cannabis plants that a cannabis producer can grow at any one time is 8,000 plants. There are four plant fee levels for a cannabis producer from which you can select the number of plants you will grow – Level 1: 201-1,000 mature cannabis plants; Level 2: 1,001-3,000 mature cannabis plants; Level 3: 3,001-6,000 mature cannabis plants; and, Level 4: 6,001-8,000 plants.

[Select](#)

Cannabis Producer Microbusiness

The annual fee for a cannabis producer microbusiness license is determined by the total number of mature cannabis plants you will be growing at any one time. The maximum number of mature cannabis plants that a cannabis producer microbusiness can grow at any one time is 200 plants. There are two plant fee levels for a cannabis producer microbusiness based on the number of plants you will grow at any one time – Level 1: no more than 100 mature cannabis plants; and, Level 2: 101-200 mature cannabis plants. The annual fee for a Level 1 cannabis producer microbusiness license to grow no more than 100 mature cannabis plants is \$500. The annual fee for a Level 2 cannabis producer microbusiness license to grow 101-200 mature cannabis plants is \$1,000.

[Select](#)

Cannabis Producer

Checking Candidacy

Primary Business Contact Information

Social and Economic Equity Plan

Applicant Information

Ownership Document Upload

Details of Premises to be Licensed

Premises Document Upload

Applicant/Business Certifications & Attestations

Fee & Payment

Checking Candidacy

State law provides that a person who holds a cannabis license, or is applying for a cannabis license, cannot hold an active liquor license. (See NMSA 1978, Section 26-2C-6(J) and Rule 16.8.2.8.F.)

* Do you have an active liquor license or a pending application for a liquor license?

☒ Yes ☐ No



Your response indicates you hold an active or have applied for a liquor license hence you do not meet the Cannabis licensing requirements.

* Do you intend to apply for a Vertically Integrated Cannabis Establishment license?

☒ Yes ☐ No

* Please indicate functions you will perform:

☒ Manufacture

☒ Retail Sales

☐ Courier

* Are you only producing medical-use cannabis?

☒ Yes ☐ No

[Cancel](#)

[Save & Next](#)

Cannabis Producer



Checking Candidacy



Primary Business Contact Information



Social and Economic Equity Plan



Applicant Information



Ownership Document Upload



Details of Premises to be Licensed



Premises Document Upload



Applicant/Business Certifications & Attestations



Fee & Payment

Checking Candidacy

State law provides that a person who holds a cannabis license, or is applying for a cannabis license, cannot hold an active liquor license. (See NMSA 1978, Section 26-2C-6(J) and Rule 16.8.2.8.F.)

* Do you have an active liquor license or a pending application for a liquor license?

☐ Yes ☒ No

* Do you intend to apply for a Vertically Integrated Cannabis Establishment license?

☒ Yes ☐ No

* Please indicate functions you will perform:

☒ Manufacture

☒ Retail Sales

☐ Courier

* Are you only producing medical-use cannabis?

☒ Yes ☐ No

[Cancel](#)

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Cannabis Producer

 Checking Candidacy

 Primary Business Contact Information

 Social and Economic Equity Plan

 Applicant Information

 Ownership Document Upload

 Details of Premises to be Licensed

 Premises Document Upload

 Applicant/Business Certifications & Attestations

 Fee & Payment

Primary Business Contact Information

▾ Primary Physical Address

* Address 1

500 Stars Drive

Address 2

* City

Santa Fe

* State

New Mexico ▾

* Zip Code

87501

☐ Mailing Address is different from Physical Address

* Business Legal Name

Star Holdings LLC

Doing Business As (DBA)

Star Cannabis LLC

* Type of Business

Corporation ▾

* FEIN/SSN

111222333

* County where Primary Business is Located

Taos ▾

Business Website

www.starcannabis.com

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Cannabis Producer

- ✓ Checking Candidacy
- ✓ Primary Business Contact Information
- **Social and Economic Equity Plan**
- Applicant Information
- Ownership Document Upload
- Details of Premises to be Licensed
- Premises Document Upload
- Applicant/Business Certifications & Attestations
- Fee & Payment

Social and Economic Equity Plan

Please provide the applicant's social and economic equity plan, which should describe the applicant's plan to encourage economic and social diversity in employment. The applicant's plan should include race, ethnicity, gender, age, and residential status of the licensee, all controlling persons and employees of the applicant and whether the applicant, controlling persons, employees or the locations where the cannabis products are produced are located in an underserved rural community, including tribal, acequia, land grant-merced, federally designated opportunity zone, or other rural historic communities.

* Please upload Social and Economic Equity Plan:

BUSINESS LEGAL NAME	UPLOAD FILES	FILES	ACTION
Star Holdings LLC		Test Document 2	

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Cannabis Producer

- ✓ Checking Candidacy
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- ✓ Social and Economic Equity Plan
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- Fee & Payment

Applicant Information

* Is the applicant a controlling person of this cannabis business?

☒ Yes ☐ No

▼ Applicant Information

Preferred Gender Pronoun

He ▾

* First Name

Nabeel

* Last Name

Khan

* Phone Number

9876543210

* Email Address

nabeel.khan@mtxb2b.com

* Date of Birth

07-08-1981



▼ Mailing Address

Address1

10016 Pilar Ave SW

Address2

City

Albuquerque

State

New Mexico

Zip Code

87121

The Cannabis Control Division (CCD) must adopt policies and procedures to promote and encourage full participation in the cannabis industry of representatives of communities that have disproportionately been harmed by rates of arrest through the enforcement of cannabis prohibitions and encourage racial, ethnic, gender, geographic diversity, and New Mexico residency among license applicants, licensees and cannabis industry employees. The policies and procedures must also encourage representatives from rural communities who are likely to be impacted by cannabis production, including agricultural producers from economically disadvantaged communities. To accomplish these legislative mandates, CCD has established a goal that at least 50 percent of applicants for licensure, licensees, and cannabis industry employees represent these groups.

* Are you a New Mexico resident?

☐ Yes ☒ No

* Please specify Race (Check all that apply)

- ☐ White
- ☐ Black or African American
- ☐ American Indian or Alaska Native
- ☐ Chinese
- ☒ Vietnamese
- ☐ Native Hawaiian
- ☐ Filipino
- ☒ Korean
- ☐ Samoan
- ☐ Asian Indian
- ☐ Japanese
- ☐ Chamorro
- ☐ Other Asian
- ☐ Other Pacific Islander
- ☐ Some Other Race
- ☐ Prefer not to answer

* Please specify Ethnicity (Check all that apply)

- ☐ Hispanic, Latino, or Spanish origin
- ☐ Mexican, Mexican American, Chicano
- ☒ Puerto Rican
- ☒ Not of Hispanic, Latino, or Spanish origin
- ☐ Another Hispanic, Latino or Spanish Origin
- ☐ Prefer not to answer

* Gender

Female

* Have you ever legally changed your name or used a different name for employment or school?

☒ Yes ☐ No

* Please provide all the previous names

George Khan

* Have you ever been convicted of the following crimes:

- A felony conviction involving fraud, deceit, or embezzlement
- A felony conviction for hiring, employing, or otherwise using a person younger than eighteen years of age to:
 - Prepare for sale, transport or carry a controlled substance; or,
 - Sell, give away or offer to sell a controlled substance to any person
- A felony offense for the possession, use, manufacture, distribution or dispensing or possession with the intent to manufacture, distribute or dispense a controlled substance, which no longer includes cannabis.

☒ Yes ☐ No

* If you answered yes to the previous question, please provide an explanation that includes: 1) the date of conviction; 2) dates of incarceration, probation and parole; 3) a description of the crime/offense; and, 4) an explanation as to your rehabilitation since the conviction.

1) 05/01/1995
2) Incarceration dates 09/02/1998 to 10/05/1999
3) Stole merchandise from a clothing store
4) Took professional help

* Is the applicant the sole controlling person of the cannabis business?

☐ Yes ☒ No

Cancel

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Cannabis Producer

- ✓ Checking Candidacy
- ✓ Primary Business Contact Information
- ✓ Social and Economic Equity Plan
- ✓ Applicant Information
- Ownership - Controlling Person(s)**
- Ownership Document Upload
- Details of Premises to be Licensed
- Premises Document Upload
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- Fee & Payment

Ownership - Controlling Person(s)

For purposes of your cannabis business license, a controlling person is a person that controls a financial or voting interest of ten percent or more of your cannabis establishment or that is an officer or board member of your cannabis establishment (not including a bank or licensed lending institution). See NMSA 1978, Section 26-2C-2(U).

First Name	Last Name	Phone Number	Email Address
------------	-----------	--------------	---------------

[Add Business Controlling Person](#)[Cancel](#)[Previous](#)[Save & Next](#)

Preferred Gender Pronoun

He

* First Name

Clark

* Last Name

Kent

* Phone Number

(124) 312-4124

* Email Address

clark.kent@superherotest.com

* Date of Birth

08-21-1969

▼ Mailing Address

* Address 1

500 Superhero drive

Address 2

* City

Santa Fe

* State

New Mexico

* Zip Code

87501

The Cannabis Control Division (CCD) must adopt policies and procedures to promote and encourage full participation in the cannabis industry of representatives of communities that have disproportionately been harmed by rates of arrest through the enforcement of cannabis prohibitions and encourage racial, ethnic, gender, geographic diversity, and New Mexico residency among license applicants, licensees and cannabis industry employees. The policies and procedures must also encourage representatives from rural communities who are likely to be impacted by cannabis production, including agricultural producers from economically disadvantaged communities. To accomplish these legislative mandates, CCD has established a goal that at least 50 percent of applicants for licensure, licensees, and cannabis industry employees represent these groups.

* Are you a New Mexico resident?

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- ☐ Asian Indian
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- ☐ Chamorro
- ☐ Other Asian
- ☐ Other Pacific Islander
- ☐ Some Other Race
- ☐ Prefer not to answer

* Please specify Ethnicity (Check all that apply)

- ☐ Hispanic, Latino, or Spanish origin
- ☐ Mexican, Mexican American, Chicano
- ☒ Puerto Rican
- ☐ Not of Hispanic, Latino, or Spanish origin
- ☐ Another Hispanic, Latino or Spanish Origin
- ☐ Prefer not to answer

* Gender

Male

Cancel

Save

City: Santa Fe State: New Mexico Zip: 87501

The Cannabis Control Division (CCD) must adopt policies and procedures to promote and encourage full participation in the cannabis industry of representatives of communities that have disproportionately been harmed by rates of arrest through the enforcement of cannabis prohibitions and encourage racial, ethnic, gender, geographic diversity, and New Mexico residency among license applicants, licensees and cannabis industry employees. The policies and procedures must also encourage representatives from rural communities who are likely to be impacted by cannabis production, including agricultural producers from economically disadvantaged communities. To accomplish these legislative mandates, CCD has established a goal that at least 50 percent of applicants for licensure, licensees, and cannabis industry employees represent these groups.

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- ☐ Hispanic, Latino, or Spanish origin
☐ Mexican, Mexican American, Chicano
☒ Puerto Rican
☐ Not of Hispanic, Latino, or Spanish origin
☐ Another Hispanic, Latino or Spanish Origin
☐ Prefer not to answer

* Gender

Male

* Has this person ever legally changed their name or used a different name for employment or school?

☒ Yes ☐ No

* Please provide all the previous names

Bruce Wayne, Barry Allen, Hal Jordan

* Has this partner of your limited partnership, this member of your limited liability company, this director, officer, or trustee of your corporation or trust, or this controlling person of the applicant been convicted of the following crimes:

- A felony conviction involving fraud, deceit, or embezzlement
- A felony conviction for hiring, employing, or otherwise using a person younger than eighteen years of age to:
 - Prepare for sale, transport or carry a controlled substance; or,
 - Sell, give away or offer to sell a controlled substance to any person
- A felony offense for the possession, use, manufacture, distribution or dispensing or possession with the intent to manufacture, distribute or dispense a controlled substance, which no longer includes cannabis.

☐ Yes ☒ No

Cancel

Save

Cannabis Producer

- ✓ Checking Candidacy
- ✓ Primary Business Contact Information
- ✓ Social and Economic Equity Plan
- ✓ Applicant Information
- Ownership - Controlling Person(s)**
- Ownership Document Upload
- Details of Premises to be Licensed
- Premises Document Upload
- Applicant/Business Certifications & Attestations
- Fee & Payment

Ownership - Controlling Person(s)

For purposes of your cannabis business license, a controlling person is a person that controls a financial or voting interest of ten percent or more of your cannabis establishment or that is an officer or board member of your cannabis establishment (not including a bank or licensed lending institution). See NMSA 1978, Section 26-2C-2(U).

First Name	Last Name	Phone Number	Email Address
Clark	Kent	(124) 312-4124	clark.kent@superherotest.com ▾

[Cancel](#)[Add Business Controlling Person](#)[Previous](#)[Save & Next](#)

Cannabis Producer

- ✓ Checking Candidacy
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- ✓ Social and Economic Equity Plan
- ✓ Applicant Information
- ✓ Ownership - Controlling Person(s)
- ✓ Ownership Document Upload
- Details of Premises to be Licensed**
- Premises Document Upload
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Details of Premises to be Licensed

Please enter the information for each premises for which you are seeking a license.

Premises Detail

Address 1	City	Total number of cannabis plants
-----------	------	---------------------------------

Cancel

Add Premises

Previous

Save & Next

Cannabis Producer**Details of Premises to be Licensed**

Premises Detail

*Address 1	Address 2	*City
<input type="text" value="3223 Wayne Road"/>	<input type="text"/>	<input type="text" value="Santa Fe"/>
*State	*Zip Code	
<input style="background-color: #f0f0f0;" type="text" value="New Mexico"/>	<input type="text" value="87501"/>	

▼ Business Hours of Operation

*Start Of Day	*End Of Day
<input type="text" value="07:00 am"/>	<input type="text" value="02:00 pm"/>

*What is the initial amount of mature cannabis plants you intend to carry?

*What is the initial amount of immature cannabis plants you intend to carry?

*What is the estimated water usage for the entered plant counts? (In Gallons)



Cancel

Save

Cannabis Producer

- ✓ Checking Candidacy
- ✓ Primary Business Contact Information
- ✓ Social and Economic Equity Plan
- ✓ Applicant Information
- ✓ Ownership - Controlling Person(s)
- ✓ Ownership Document Upload
- ✓ Details of Premises to be Licensed
- Premises Document Upload**
- Applicant/ Business Certifications & Attestations
- Fee & Payment

Premises Document Upload

For each of the premises you are requesting, please upload the following seven (7) required documents required for your application.

Please click on each document name to view additional information.

> [Premises Diagram](#)

> [Premises Ownership](#)

> [Demonstration of Water Right](#)

> [Water and Energy Use Plan](#)



> [Current Business License](#)

> [Fire Inspection Report](#)

> [Zoning Approval](#)

Please upload files here.

Note: Multiple files can be uploaded.

ADDRESS 1	CITY	UPLOAD FILES	FILES	ACTION
3223 Wayne Road	Santa Fe			
8110 Washington Avenue	Taos			

[Cancel](#)

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Cannabis Producer

- ✓ [Checking Candidacy](#)
- ✓ [Primary Business Contact Information](#)
- ✓ [Social and Economic Equity Plan](#)
- ✓ [Applicant Information](#)
- ✓ [Ownership - Controlling Person\(s\)](#)
- ✓ [Ownership Document Upload](#)
- ✓ [Details of Premises to be Licensed](#)
- [Premises Document Upload](#)**
- [Applicant/ Business Certifications & Attestations](#)
- [Fee & Payment](#)

Premises Document Upload

For each of the premises you are requesting, please upload the following seven (7) required documents required for your application.

Please click on each document name to view additional information.

▼ [Premises Diagram](#)

The diagram must show (as applicable):

- the boundaries of the property and the proposed premises to be licensed;
- the dimensions of each area that cannabis plants will be cultivated;
- the location(s) and the dimensions of other areas where other horticulture will be cultivated; and,
- where all cameras are located and assign a number to each camera for identification purposes.

The diagram must include (as applicable):

- any equipment to be used;
- entrances and exits;
- interior partitions;
- location of lights in the cannabis plant cultivation area(s) and the maximum wattage or wattage equivalent;
- walls;
- rooms;
- windows;
- doorways; and,
- a brief statement or description of the principal activity to be conducted in each area on the premises.

The diagram must be to scale and in black-and-white print, and it should not contain any highlighting.

If the proposed premises consists of only a portion of a property, the diagram must be labeled indicating which part of the property is the proposed premises and what the remaining property is used for.

If the proposed premises consists of only a portion of a property that will contain two or more licensed premises, then the diagram must be supplemented with a description of how two or more licensed premises will be managed on the property.

If the proposed premises is located on only a portion of a property that also includes a residence, the diagram shall clearly show the designated buildings for the premises and the residence.

(Please see Rule Ref 16.8.2.24 NMAC.)

> [Premises Ownership](#)

> [Demonstration of Water Right](#)

> [Water and Energy Use Plan](#)

✓ Premises Ownership

Please provide fully executed and dated documentation of the applicant's ownership or legal authority to use the property, buildings, or other facilities, establishing the applicant is, or will be, entitled to possession of the premises for which the application is made.

✓ Demonstration of Water Right

Please provide demonstration of a legal right to use the quantity of water that the division determines is needed for cannabis production, as evidenced by either:

- a) Documentation from a water provider that the applicant has the right to use water from the provider and that the use of water from cannabis production is compliant with provider's rules; or
- b) Documentation from the office of the state engineer showing that the applicant has a valid and existing water right, or a permit to develop a water right, for irrigation purposes for outdoor cultivation, or a commercial purpose for indoor cultivation at the proposed place of use of the cannabis establishment. The documentation may include any of the following:
 - (1) a state engineer permit or license in good standing, but not including a permit issued pursuant to Sections 72-12-1, -1.1, -1.2, or -1.3, NMSA 1978;
 - (2) a subfile order or decree issued by a water rights adjudication court;
 - (3) the findings of an office of the state engineer hydrographic survey; or
 - (4) other documentation the office of the state engineer has deemed in writing as acceptable.

✓ Water and Energy Use Plan

Please provide a plan to use, or certification that the applicant cannot feasibly use, energy and water reduction opportunities, including:

- a) drip irrigation and water collection;
- b) natural lighting and energy efficiency measures;
- c) renewable energy generation; and
- d) estimated water and energy use related to the applicants cultivation plan.

✓ Current Business License

Please provide a copy of the current and valid business license.

✓ Fire Inspection Report

Please provide a copy of the current and valid fire inspection report.

✓ Zoning Approval

Please provide a copy of the current and valid zoning approval.

Water and Energy Use Plan

Please provide a plan to use, or certification that the applicant cannot feasibly use, energy and water reduction opportunities, including:

- a) drip irrigation and water collection;
- b) natural lighting and energy efficiency measures;
- c) renewable energy generation; and
- d) estimated water and energy use related to the applicants cultivation plan.

Current Business License

Please provide a copy of the current and valid business license.

Fire Inspection Report

















Please provide a copy of the current and valid fire inspection report.

Zoning Approval

Please provide a copy of the current and valid zoning approval.

Please upload files here.

Note: Multiple files can be uploaded.

ADDRESS 1	CITY	UPLOAD FILES	FILES	ACTION
3223 Wayne Road	Santa Fe		Water Use Plan	
			Current Business License	
			Energy Use Plan	
			Fire Inspection Report	
			Premises Ownership	
			Premises Diagram	
			Zoning Approval	
8110 Washington Avenue	Taos		Fire Inspection Report	
			Premises Ownership	
			Water Use Plan	
			Zoning Approval	
			Current Business License	
			Energy Use Plan	
			Premises Diagram	

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Cannabis Producer

- ☒ Checking Candidacy
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- ☒ Social and Economic Equity Plan
- ☒ Applicant Information
- ☒ Ownership - Controlling Person(s)
- ☒ Ownership Document Upload
- ☒ Details of Premises to be Licensed
- ☒ Premises Document Upload
- ☒ **Applicant/Business Certifications & Attestations**
- ☐ Fee & Payment

Applicant/Business Certifications & Attestations

1) I consent to undergo a national criminal history background check and department of public safety (DPS) statewide criminal history screening background check. I understand for purposes of this rule, background checks shall be required for: (1) each partner of a limited partnership; (2) each member of a limited liability company; (3) each director, officer, or trustee of a corporation or trust; and (4) any controlling person of the applicant.

2) I certify I will adhere to production requirements pursuant to the Cannabis Regulation Act, the Lynn and Erin Compassionate Use Act, and division rules, including creating and maintaining a cultivation plan, and cannabis waste procedures for cannabis or cannabis products.

3) I certify I will adhere to cannabis transport requirements pursuant to the Cannabis Regulation Act, the Lynn and Erin Compassionate Use Act, and division rules, including the transport of unprocessed cannabis or cannabis products to other cannabis establishments.

4) I certify I will adhere to New Mexico department of agriculture (NMDA) pesticide registration, licensing, and use requirements to ensure a safe product and environment.


5) I certify I will adhere to security requirements pursuant to the Cannabis Regulation Act, the Lynn and Erin Compassionate Use Act, and division rules, including requirements relating to safety and security procedures, security devices to be used, placement of security devices, personal safety, and crime prevention techniques.

6) I certify I will adhere to quality assurance requirements pursuant to the Cannabis Regulation Act, the Lynn and Erin Compassionate Use Act, and division rules, including requirements relating to routine testing by a licensed testing laboratory, division inspection of licensed premises during normal business hours, and testing of cannabis.

7) I certify I will adhere to applicable federal, state and local laws governing the protection of public health and the environment, including occupational health and safety, food safety, environmental impacts, natural resource protections, air quality, solid and hazardous waste management, and wastewater discharge.

8) I certify I have never been denied a license or had a license suspended or revoked by the division or any other state cannabis licensing authority or a detailed description of any administrative orders, civil judgments, denial or suspension of a cannabis license, revocation of a cannabis license, or sanctions for unlicensed medical or commercial cannabis activity by any state licensing authority, against the applicant, controlling person, or a business entity in which the applicant or controlling person was a controlling person within the three years immediately preceding the date of the application.

9) I certify that that my business is in good standing with the New Mexico Secretary of State, including all documents filed with the New Mexico Secretary of State.

 I attest to the following: Under penalty of perjury, I hereby declare that the information contained within and submitted with the application is complete, true and accurate. I understand that a misrepresentation of fact or violation of these rules may result in denial of the license application or revocation of a license issued.

* Attestation Signature

Nabeel Khan

* Attestation Date

08-20-2021



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Cannabis Producer

- ✓ Checking Candidacy
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- Fee & Payment**

Fee & Payment

CATEGORY	RESPONSE	COST
License Type	Cannabis Producer	\$2500
Number of Premises	2	\$1000
Total Due		\$3500

The total amount due today will be **\$3500**. Your per plant fee will be charged to you when your requested plant count has been approved.

You may not begin to grow cannabis until your application has been approved and your approved plant count fee has been received.

*Payment Method

Card Payment ▾

By clicking **Pay and Submit**, I hereby affirm and certify that all information submitted to the Cannabis Control Division for licensure are complete, true and correct to the best of my knowledge and belief. I understand that any misrepresentation, falsification, or omission of any facts called for in the application for licensure may render this application void and will be cause for termination of the license application. **Any fees submitted with this license application will not be refunded.**

Please click the **'Pay and Submit'** button to complete your payment and submit your completed application for review.

[Cancel](#)

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[Pay and Submit](#)

Thank You

Thank You ! Your application has been successfully submitted.

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Cannabis Producer Microbusiness

Checking Candidacy

Primary Business Contact Information

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Fee & Payment

Checking Candidacy

State law provides that a person who holds a cannabis license, or is applying for a cannabis license, cannot hold an active liquor license. (See NMSA 1978, Section 26-2C-6(J) and Rule 16.8.2.8.F.)

* Do you have an active liquor license or a pending application for a liquor license?

☐ Yes ☒ No

* Do you intend to apply for an integrated cannabis microbusiness license?

☐ Yes ☒ No

[Cancel](#)

[Save & Next](#)

Cannabis Producer Microbusiness

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* Do you have an active liquor license or a pending application for a liquor license?

☒ Yes ☐ No



Your response indicates you hold an active or have applied for a liquor license hence you do not meet the Cannabis licensing requirements.

* Do you intend to apply for an integrated cannabis microbusiness license?

☒ Yes ☐ No

* Please indicate functions you will perform:

- ☒ Manufacture
- ☒ Retail Sales
- ☒ Courier

[Cancel](#)

[Save & Next](#)

Cannabis Producer Microbusiness

- ✓ Checking Candidacy
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- Fee & Payment

Details of Premises to be Licensed

▼ Premises Detail

* Address 1	Address 2	* City
<input type="text" value="500 Parker Drive"/>	<input type="text"/>	<input type="text" value="Santa Fe"/>
* State	* Zip Code	
<div>New Mexico ▾</div>	<input type="text" value="87501"/>	

▼ Business Hours of Operation

* Start Of Day	* End Of Day
<input type="text" value="08:00 am"/>	<input type="text" value="03:00 pm"/>

* What is the initial amount of mature cannabis plants you intend to carry?

— Clear —

0 - 100

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Cannabis Producer Microbusiness

- ✓ Checking Candidacy
- ✓ Primary Business Contact Information
- ✓ Social and Economic Equity Plan
- ✓ Applicant Information
- ✓ Ownership Document Upload
- Details of Premises to be Licensed**
- Premises Document Upload
- Applicant/Business Certifications & Attestations
- Fee & Payment

Details of Premises to be Licensed

▼ Premises Detail

* Address 1	Address 2	* City
<input type="text" value="500 Parker Drive"/>	<input type="text"/>	<input type="text" value="Santa Fe"/>
* State	* Zip Code	
<input type="text" value="New Mexico"/>	<input type="text" value="87501"/>	

▼ Business Hours of Operation

* Start Of Day	* End Of Day
<input type="text" value="09:00:AM"/>	<input type="text" value="04:00:PM"/>

* Which plant growth level are you applying for?

* What is the initial amount of mature cannabis plants you intend to grow?

* What is the initial amount of immature cannabis plants you intend to grow?

* What is the estimated water usage for the entered plant counts? (In Gallons)

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Fee & Payment

CATEGORY	RESPONSE	COST
License Type	Cannabis Producer Microbusiness	\$1000
Number of Premises	1	--
Total Due		\$1000

The total amount due today will be **\$1000**. You may not begin to grow cannabis until your application has been approved.

* Payment Method

Card Payment ▾

By clicking **Pay and Submit**, I hereby affirm and certify that all information submitted to the Cannabis Control Division for licensure are complete, true and correct to the best of my knowledge and belief. I understand that any misrepresentation, falsification, or omission of any facts called for in the application for licensure may render this application void and will be cause for termination of the license application. **Any fees submitted with this license application will not be refunded.**

Please click the '**Pay and Submit**' button to complete your payment and submit your completed application for review.

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Thank you!