



Surrender of License Form Commercial Licensees

This form must be submitted by an owner of the commercial entity who is listed as a person of interest in the application.

Please complete and mail this Surrender of License Form **with the commercial license** to:

OMMA
PO Box 262266
Oklahoma City, OK 73125-2600

IMPORTANT NOTE: Commercial Licensee shall cease all operations upon submission of this surrender of its license. Any medical marijuana still in licensee's possession must be disposed of in accordance with OAC 310:681-5-10. Any medical marijuana products still in licensee's possession must be liquidated within thirty (30) days in accordance with OAC 310:681-5-2(c)(3)(A) or disposed of in accordance with OAC 310:681-5-10.

Commercial Entity Information

OMMA License Number:

Entity Name:

Business Type:

Owner Submitting the Form:

Close of Business Information

Please provide contact information for at least one person. Contact information for additional individuals can be provided on a separate page if needed.

Person(s) responsible for the close of the business:

Full Name:

Mailing address:

Phone number:

Email address:



OKLAHOMA MEDICAL MARIJUANA AUTHORITY

OMMA.ok.gov

Person(s) responsible for the close of the business (continue):

Full Name:

Mailing address:

Phone number:

Email address:

Business records will be retained at this address:

Reason(s) for Surrender of License

Attestations

By my signature below, I attest that:

- The information provided in this form is true and correct;
- I am authorized to submit this Surrender of License Form;
- I understand the business records identified in OAC 310:681-5-6(b) must be retained for at least seven (7) years from the date of creation and these records are subject to auditing;
- I understand that any medical marijuana still in the possession of the commercial entity shall be disposed of in accordance with OAC 310:681-5-10 and that any medical marijuana products still in possession of the commercial entity shall be either liquidated within thirty (30) days of surrender in accordance with OAC 310:681-5-2(c)(3)(A) or disposed of in accordance with OAC 310:681-5-10; and
- I understand that monthly reports must be submitted to OMMA until all medical marijuana or medical marijuana products in licensee's possession at the time of surrender are lawfully disposed of or liquidated.

Signature: _____ Date: _____