

**APPLICATION FOR PRELIMINARY INVESTIGATION
OF PROPOSED MARIJUANA FACILITY**

Departmental Use Only

This application will be rejected unless all questions are fully answered, a \$50 Non-refundable fee is paid, and the Health Department approval is obtained.

Pueblo City- County Health Department,
Attn: Environmental Health Div.
101 W 9th St.
Pueblo, CO 81003

Health Department Approval

Full Legal Name of Corporation

Trade Name (DBA)

Phone

Address of Property

City

State

Zip

Legal Description

Contact Name

Contact Phone

Contact Email

Mailing Address (If different from location above)

Facility Type (Check All that Apply)

Cultivation

Outside Grow

Greenhouse Grow

Hydroponic

Processing (Trimming)

Packaging

Other _____

Marijuana Product

Manufacturing Facility

Extraction

Water

Butane

CO₂

Infusion

Other _____

Store

Retail

Medical

Quality Assurance
Laboratory

Water Supply- Select the type of water supply system that services the establishment

Community/Public - name of district: _____

Non-Community - Public Water System ID Number (PWSID): _____

Private; description _____

Well on property

Cistern; Source of Water _____

Sewage Disposal – Select the type of sewage disposal system that services the establishment

Municipal/Public- Name of district: _____

On-site Waste Water Treatment System

A PLOT PLAN MUST BE ATTACHED SHOWING THE FOLLOWING: (May use the back of this application.)

1. Detailed directions for locating property.
2. Accurate boundary measurement.
3. Location of existing and proposed structures on property.

4. Location of proposed and/or existing Onsite wastewater treatment systems
5. Locations of water supply on property.
6. Location of all wells within 150 ft of property.

Application for Preliminary Investigation of a Property for Suitability of a Marijuana Facility is hereby submitted, including plans, specifications, and the required NON-REFUNDABLE FEE. This is **NOT A PERMIT** for installation. This application and any action precipitated are for the sole purpose of recommendation on a proposed zoning action through the Pueblo County Department of Planning and Development.

Processed Application Is To Be: Emailed MAILED PICKED UP

Signature of Owner or Agent _____ Date _____

Staff Initials _____



101 W. 9TH STREET
PUEBLO, COLORADO 81003-4103
(719) 583-4300

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Information needed for Marijuana Cultivations and Marijuana Infused Product Facilities

1. DBA name and address of Facility.
2. Cultivation practice – outside grow, greenhouse - hydroponic, or greenhouse – soil
3. Number of employees per shift
4. Number of shifts
5. What types of processes are being done in the facility – packaging, processing, marijuana infused products, hash oil extraction and process
6. Number and type of fixtures in facility
7. Retail sales?
8. Projected water usage and wastewater generated
9. Septic vs. municipal wastewater treatment
10. Water source
11. Wells on property
12. Residential structures on property and distance from facility
13. Engineer plans