

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

Departmental Use Only

*This application will be rejected unless all questions are fully answered, a \$150 Non-refundable fee is paid, and the Health Department approval is obtained.*

Pueblo City- County Health Department,  
Attn: Environmental Health Div.  
101 W 9<sup>th</sup> 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
    - CO<sub>2</sub>
  - 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. 9<sup>TH</sup> STREET  
PUEBLO, COLORADO 81003-4103  
(719) 583-4300

**BOARD OF HEALTH**  
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Michael J. Nerenberg, MD, Vice President  
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Donald Moore

**PUBLIC HEALTH DIRECTOR**  
Sylvia R. Proud, MS, IPMA-CP

### Information needed for Marijuana Cultivations and MIP Facilities

1. Name and address of facility.
2. Number of employees per shift.
3. Number of shifts.
4. What types of processes are being done in the facility – packaging, processing, marijuana infused products, hash oil extraction and process.
5. Number and type of water usage fixtures in the facility.
6. Projected water usage and wastewater generated.
7. Wells on property.
8. Residential structures on property and distance from facility.
9. Engineer plans for Onsite Wastewater Treatment System and Facility.