

City of San Diego Development Services 1222 First Ave., MS-501 San Diego, CA 92101 (619) 446-5000

Cannabis Criminal Background Check

FORM
DS-192

September 2019

Responsible Person: Te	elephone No.:	E-Mail Add	lress:		
Mailing Address:	tv:	State:	Zip Code:	_	
Signature:	ż	Date:	1 1 :		
12		1	1/21/19		
Each responsible person(s) in the Marijuana Outlet (MO) or Marijuana Production Facility (MPF) shall undergo fingerprinting and a criminal background check as required by <u>San Diego Municipal Code Section 42.1507</u> .					
Submit this form in person to the San Diego Police to Permits & Licensing located at the rear of the S business hours are Monday through Friday between	DPD building. The	office faces 15			
Please provide the following:					
1.Valid Identification					
2.Completed live scan form					
FOR DSD USE ONLY					
Approved CUP for: ☒ MO ☐ MPF	Valid for Year: 20	Valid for Year: 2019			
MO/MPF Name:	_ MO/MPF Address	MO/MPF Address: 8863 Balboa Ave Ste E			
Conditional Use Permit (CUP) No.: 1296130	CUP PTS No.: 368				
CUP Permit Approval Date: 07/09/2015		CUP Permit Expiration Date: 07/29/2020			
				lear Form	
FOR SDPD USE ONLY					
Background Check:	CDDD DECLUT	c		6.5	
SDLAW Local	SDPD RESULT	5	<u>~</u>	essa CSB	
Federal (Criminal History)	PassedFailed		NO.		
DMV Photo	Comments:		2	2	
2 PMV Friedo	comments				
			Ö	N	
SDPD Officer: H. Way Av 212 5974 Print Name	Date:	?/,9	o.D.	Leven	
SDPD Officer: Likeway Eas					
	SDPD: Please E-r	nail results to <u>D:</u>	SD_MarijuanaInfo	@sandiego.gov	