

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: MIChael Essary	Telephone No.:	F-Mail Addre	, , , ,	
Mailing Address:	Citv:	State:	Zin Code:	
Signature:		Date: 11//21/19		
Each responsible person(s) in the Marijuana Ou fingerprinting and a criminal background check as	tlet (MO) or Marijuan	na Production Fa	cility (MPF) shall undergo	
Submit this form in person to the San Diego Police to Permits & Licensing located at the rear of the business hours are Monday through Friday between	ce Department (SDPD)	located at 1401 office faces 15th	Broadway. Submit forms	
Please provide the following:				
1.Valid Identification				
2.Completed live scan form				
FO	R DSD USE ONLY			
Approved CUP for: ☑ MO ☐ MPF	Valid for Year: 2	Valid for Year: 2019		
MO/MPF Name: Balhou Ave (OOP)		s:_8863 Balbo	a Ave Ste E	
Conditional Use Permit (CUP) No.: 1296130		CUP PTS No.: 368347		
CUP Permit Approval Date: 07/09/2015	CUP Permit Expiration Date: 07/29/2020			
			Clear Form	
FOR	R SDPD USE ONLY			
Background Check:				
SDLAW	SDPD RESUL	TS		
Local	Passed			
Federal (Criminal History)	☐ Failed			
□ DMV Photo	Comments:_		123	
	·		70	
	5 <u></u>			
SDPD Officer: H. Hewwoler #59	74 AT 12	1/4/19	5 70	
SDPD Officer: H - HEUST ZEL Signature			l: 55	
	SDPD: Please E	-mail results to <u>DSD</u>	MarijuanaInfo@sandiego.gov	