

CHARLES D. BAKER Governor KARYN E. POLITO Lieutenant Governor

September 29, 2016

Mr. Robert Proctor Elevated Non-Profit Corporation 1115 West Chestnut Street, Suite 205 Brockton, MA 02301

Re: Invitation to Submit Siting Profile

Dear Mr. Proctor,

Elevated Non-Profit Corporation is invited to submit a *Siting Profile* (Application 3 of 3) to the Department of Public Health ("Department"). Please note that in order to proceed, the applicant must receive a Provisional Certificate of Registration from the Department within one year of the date of this invitation. Please submit the *Siting Profile* so as to allow the Department sufficient time to review it, the applicant time to respond to any additional or revised information required, and the Department time to review any additional or revised information submitted.

Please note that you are required to submit a copy of the agreements identified in your responses to Questions C.11, C.12, C.14, and C.15 in the *Management and Operations Profile* as well as an independent legal opinion that those agreements are in compliance with the non-profit requirements of 105 CMR 725.100(A)(1) and the Guidance for Registered Marijuana Dispensaries Regarding Non-Profit Compliance (<u>http://www.mass.gov/eohhs/docs/dph/quality/medical-marijuana/applications/non-profit-compliance-</u> guidance.pdf). Please be advised that the applicant must submit such documents as soon as possible but prior to receiving a Provisional Certificate of Registration. An application will not be deemed complete until all materials requested by the Department are submitted.

Thank you for the information submitted on September 20, 2016 regarding Elizabeth Dost. That information has been reviewed for compliance with 105 CMR 725.100(A)(2) and has been deemed compliant. Please note that compliance with 105 CMR 725.100(A)(2) is reviewed on an ongoing basis.

Please follow all directions posted on the Medical Use of Marijuana Program website when completing the application forms. Please remember to type all responses in the application forms.

The Commonwealth of Massachusetts Executive Office of Health and Human Services Department of Public Health Bureau of Health Care Safety and Quality Medical Use of Marijuana Program 99 Chauncy Street, 11<sup>th</sup> Floor, Boston, MA 02111

MARYLOU SUDDERS Secretary

MONICA BHAREL, MD, MPH Commissioner

Tel: 617-660-5370 www.mass.gov/medicalmarijuana Please note that the background checks into any individuals or entities identified to the Department are ongoing. Any identified background check issues must be resolved prior to obtaining a Provisional Certificate of Registration.

The Siting Profile must be submitted by U.S. mail or hand-delivered to:

Department of Public Health Medical Use of Marijuana Program RMD Applications 99 Chauncy Street, 11<sup>th</sup> Floor Boston MA 02111

You may direct any questions regarding the application process to <u>RMDapplication@state.ma.us</u> or 617-660-5370.

Sincerely,

Lauren B. Nelson, Esq. Director of Policy and Quality Improvement Bureau of Health Care Safety and Quality Massachusetts Department of Public Health