

Business Disclosure

We use the information in this application to assess your business's eligibility for a licence. You must submit a non-refundable \$500 fee before your application will be processed.

NOTE: Attach a separate sheet if you need additional space for any responses.

SECTION A: Business Applicant

Include copies of supporting corporate documents with this application. This can include articles of incorporation, charter, by-laws, corporate annual return, business registration, partnership agreement, or shareholders' agreement.

1. Legal Business Name (name of partnership, corporation or sole proprietor):

2. Trade Name (if different from legal business name):

3. Type of Business:

Privately-Held Corporation

Publicly-Traded Company

Partnership

Sole Proprietorship

Limited Partnership

Other (please specify) _____

4. Business Address and Contact Information:

# AND STREET	CITY/TOWN	PROVINCE	POSTALCODE

LAST NAME	FIRST NAME	POSITION/TITLE

BUSINESS PHONE	FAX	EMAIL

5. Mailing Address (if different from business address):

# AND STREET/P.O. BOX #	CITY/TOWN	PROVINCE	POSTALCODE



6. Does the business applicant have a relationship with any licensed cannabis producer(s)/ processor(s) and/or any retail cannabis licensees? YES NO

If yes, provide details:

7. Does the business applicant have a relationship with any third party to distribute cannabis in Manitoba? YES NO

If yes, provide details: _____

8. List all trade names and addresses under which the business applicant has conducted business for the past five years:

TRADE NAME	ADDRESS

SECTION B: Operational Details

9. Select the cannabis distributor activity(ies) the business applicant is applying for:

- acquire cannabis and sell to the Manitoba Liquor and Lotteries Corporation
- store cannabis in Manitoba
- deliver cannabis to cannabis stores

10. Will the business applicant have a cannabis storage facility (premises where authorized cannabis activities may occur, including but limited to receiving, storing, handling, sorting and preparing for distribution and/or transportation)? YES NO

NOTE: If YES, answer questions 11 and 12. If NO, proceed to question 13.

11. Cannabis Storage Facility Address (if different from business address):

# AND STREET	CITY/TOWN	PROVINCE	POSTAL CODE

12. Select the type of property that your retail cannabis store will occupy:

Owned Premises

NOTE: A certified copy of the Status of Title showing ownership of the land is required prior to licensing.

Leased Premises

NOTE: A copy of the lease agreement and a certified copy of the Status of Title is required prior to licensing.

13. What inventory management system will be used?



SECTION C: Business Applicant Background

14. Criminal Proceedings

Has the business applicant ever been charged with any criminal offence in any jurisdiction?

YES NO

If yes, provide details: _____

15. Civil Proceedings

Has the business applicant ever had any claims made against it based in whole or in part of fraud, deceit, misrepresentation, breach of trust or similar conduct in any jurisdiction?

YES NO

If yes, provide details: _____

16. Bankruptcy and Insolvency Proceedings

Has the business applicant declared bankruptcy or had a receiver of assets appointed for any type of bankruptcy or insolvency proceedings under any law in any jurisdiction in the last five years?

YES NO

If yes, provide details: _____

SECTION D: Financial Information

17. The following financial information must be included with this form.

- Audited financial statements for the past three years.
- All annual and/or consolidated annual reports submitted to shareholders and partners.
- List of all companies, business organizations, entities or individuals that hold 10% or more shares in the business applicant, along with any companies to which the business applicant owes long-term debt.
- List of any persons or businesses that have loaned monies, equipment or assets to the business applicant. Provide the entity name and address, date of loan, amount of asset loaned, reason for loan and the loan status.
- Organizational chart depicting the relationship between all parent, controlling, subsidiary and affiliated companies.

18. Has any interest or shares in the business applicant been pledged as a security for any debts?

YES NO

If yes, provide details: _____



SECTION E: Licensing/Registration History

19. Has the business applicant ever applied to any licensing agency in any jurisdiction for any privileged licence (such as liquor, gaming or cannabis)? YES NO

If yes, provide the following information:

NAME OF LICENSING AGENCY	ADDRESS	TYPE OF LICENCE	DATE OF APPLICATION	DISPOSITION

20. Has the business applicant ever had a privileged licence denied, withdrawn, refused, revoked, suspended or cancelled in any jurisdiction? YES NO

If yes, provide following information:

DATE OF APPLICATION (MM/DD/YYYY)	NAME OF LICENSING AGENCY	ADDRESS	TYPE OF LICENCE	DISPOSITION	REASON FOR ACTION

21. Does the business applicant have any interest in any other entities that possess a privileged licence? YES NO

If yes, provide following information:

ENTITY	INTEREST IN ENTITY	TYPE OF LICENCE

22. Will any third party receive, either directly or indirectly, any compensation based on the profits made by the distribution of cannabis? YES NO

If yes, provide details:



SECTION F: Principals

23. Provide the full legal names and positions of all principals of the business applicant. Each principal must submit a Personal Disclosure. The LGCA may request a Personal Disclosure from any other individual having a financial interest in, or some responsibility for the business applicant's operations.

The LGCA considers principals to be:

- a) officers and directors of a corporation;
- b) partners of a partnership;
- c) individual and corporate general partners of a limited partnership;
- d) any person responsible to direct the affairs of the organization; and
- e) any person who directly or indirectly holds 10% or more shares of the business.

FULL LEGAL NAME	POSITION	% OWNERSHIP (if applicable)

NOTE: Business principals may be required to fill out a Business Disclosure.

SECTION G: Authorization

It may be necessary for the LGCA to share some of the personal information you have provided with entities and organizations outside of the LGCA, and/or to collect additional information about you from outside entities and organizations, to assess your eligibility to be granted a licence, or to continue being licensed, under The Liquor, Gaming and Cannabis Control Act. The LGCA will use the results of background investigations to complete or verify the information you provided in this application.

The LGCA will conduct background investigations when you first apply for a licence under The Liquor, Gaming and Cannabis Control Act and periodically during the term of your licence.

Your consent is required so that personal information about you can be indirectly collected and disclosed by the LGCA under the authority of The Freedom of Information and Protection of Privacy Act and The Liquor, Gaming and Cannabis Control Act, including:

- name;
- home address;
- telephone number;
- current and previous employment information;
- credit history;
- criminal background; and
- licensing or registration history.

CONSENT

I consent and authorize the entities and organizations below to disclose personal information about me to the LGCA for the purposes of conducting background investigations:

- law enforcement agencies;
- credit bureaus;
- industry associations;
- former or current employers; and
- federal, provincial and municipal government departments and agencies.



I consent to the LGCA collecting my personal information from these entities and organizations, and to the LGCA disclosing my personal information to these entities and organizations as may be necessary to obtain the information the LGCA requires to conduct background investigations for licensing purposes under The Liquor, Gaming and Cannabis Control Act.

I consent to the LGCA disclosing my personal information contained in this application or collected during the course of its investigations to law enforcement agencies, or to liquor, gaming and/or cannabis regulators for liquor-, gaming- and/or cannabis-related investigations.

UNDERSTANDING

I understand that:

- I have the right to withdraw my consent at any time by notifying the LGCA. My consent cannot be withdrawn retroactively;
- I cannot provide partial consent or withdraw part of my consent to the disclosure and collection of my personal information;
- my consent is voluntary; however refusal to provide consent may be grounds for the denial of my application, or revocation or suspension of any licence(s) granted by the LGCA;
- my consent continues until I notify the LGCA that I withdraw my consent;
- the outside entities and organizations referred to above that will collect and disclose my personal information will be instructed not to use or disclose the information, except for the purposes noted above.
- The LGCA will disclose only as much information about me to these entities and organizations as is necessary; and
- the personal information received by the LGCA will be kept in a confidential file and access to the information will be limited to individuals conducting the LGCA's background investigations.

DECLARATION

I certify that all of the information provided in this application is true and complete. I understand that any false or inaccurate statements or omissions made in this application may disqualify me, or the business applicant, from receiving a licence under The Liquor, Gaming and Cannabis Control Act.

Print Name

Position/Title

Signature of Applicant

Date (MM/DD/YYYY)

SUBMISSION INSTRUCTIONS

Email, fax or mail this application to:

Email: licence@LGCAmb.ca Fax: 204-927-5385 or 1-866-999-6688 (Manitoba only toll-free fax)

Mailing address: LGCA - Licensing Department
1055 Milt Stegall Drive, Winnipeg, Manitoba, R3G 0Z6



PRIVACY NOTICE

The LGCA is collecting your personal information to conduct investigations for the purposes of licensing prospective and current licensees in Manitoba under The Liquor, Gaming and Cannabis Control Act (C.C.S.M. c. L153).

The LGCA is authorized to collect your personal information under subsections 36(1)(a) and (b) of The Freedom of Information and Protection of Privacy Act (C.C.S.M. c. F175), because the collection is authorized by The Liquor, Gaming and Cannabis Control Act and your personal information relates to and is necessary for the LGCA's background investigations. Your personal information will only be used by the LGCA to process your application, to assess your eligibility to receive and maintain a licence, and for enforcement purposes under The Liquor, Gaming and Cannabis Control Act.

Your personal information is protected by The Freedom of Information and Protection of Privacy Act. The LGCA cannot use or disclose your personal information for other purposes, unless you consent or the LGCA is authorized to do so by The Freedom of Information and Protection of Privacy Act.

If you have any questions or concerns about the LGCA's collection of your personal information, please contact the LGCA's Freedom of Information and Privacy Protection Coordinator at FIPPAcoordinator@LGCAMB.ca or 204-927-5300 or 1-800-782-0363 (Manitoba only toll-free telephone).

Available in alternate formats, upon request.

