

# MEDICAL CANNABIS

## MANUFACTURER LICENSE REGISTRATION FORM INSTRUCTIONS

### Overview

A Manufacturer license is required to:

- Process medical cannabis purchased from licensed Cultivation Centers into medical cannabis concentrates and medical cannabis-infused products.
- Package and label medical cannabis concentrates and medical cannabis-infused products for dispensing at licensed Retailers and Internet Retailers.
- Sell medical cannabis concentrates and medical cannabis-infused products at wholesale to licensed Retailers and Internet Retailers.

There are two (2) types of Manufacturer licenses available:

- Manufacturing Only (Type 1)
- Manufacturing and Extraction (Type 2). A Manufacturing and Extraction license is required if the facility intends to manufacture products utilizing hazardous materials, flammable and combustible liquids, compressed gases, cryogenic fluids, or extraction equipment.

### Eligibility

Only Cultivation Centers licensed by March 22, 2023 or Cultivation Center applicants that applied between November 29, 2021 and March 28, 2022, that scored 150 points or more are eligible to register for a Manufacturer license by right. Other parties may apply for Manufacturer licenses during open application periods specified at [abca.dc.gov](http://abca.dc.gov).

### To Request

Eligible applicants must submit a *Manufacturer License Registration Form* by May 1, 2024.

Licensees are advised that they must secure all operational permits required by the Office of the Fire Marshal as outlined in Sections F-107.10.1-F-107.10.43 of the DC Fire Prevention Code (2008).

Forms may be submitted by:

- Mail, drop box, or in-person. ABCA is located at 2000 14th Street NW, Suite 400, Washington, DC 20009.
- Email to [ABCA.CannabisLicensing@dc.gov](mailto:ABCA.CannabisLicensing@dc.gov).

Requests are not subject to a public comment period or ABC Board approval.

### Fees

A fee is assessed annually with the initial fee due upon submission of the registration form.

- Manufacturing Only (Type 1)—\$4,000
- Manufacturing and Extraction (Type 2)—\$8,000

Accepted methods of payment include:

- Check (no starter checks), money order, or cashier's check made payable to "DC Treasurer"
- Credit card. If not paying in-person, request a payment link by emailing [ABCA.CannabisLicensing@dc.gov](mailto:ABCA.CannabisLicensing@dc.gov).

Payment by phone and cash are not accepted. ABCA is not responsible for any costs incurred by an applicant in preparation or submission of an application.

License No.	Date Accepted	Accepted By	Hearing Date
Fees Paid \$	From	To	Issue Date
	From	To	

## MEDICAL CANNABIS MANUFACTURER REGISTRATION FORM

This form must be completed by licensed Cultivation Centers or eligible Cultivation Center applicants seeking a Manufacturer license. If the registrant is a Sole Proprietor, the individual must sign; Partnership, each Partner must sign; Corporation, the President or Vice President must sign; or LLC, the Managing Member must sign.

### SECTION I | LICENSE TYPE

Check one.

- Manufacturing Only (Type 1)       Manufacturing and Extraction (Type 2)

### SECTION II | PRODUCTS

Enter all items to be manufactured.

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### SECTION III | REGISTRANT INFORMATION

Business Entity Name

Business Entity Mailing Address      City      ST      Postal Code

Trade Name      License No.

Facility Address      City      ST      Postal Code

### SECTION IV | PRIMARY POINT OF CONTACT INFORMATION

First Name      Last Name

Title

Mailing Address *(If different from above)*      City      ST      Postal Code

Phone No.      Mobile No.      Email

**SECTION V | CERTIFICATION**

- I hereby certify under penalty of perjury that the information in this application and any attachments are true and correct.
- I understand that an operational permit must be obtained from the Office of the Fire Marshal, Fire Prevention Division, DC Fire and Emergency Medical Services Department, if I intend to manufacture medical cannabis products utilizing hazardous materials, flammable and combustible liquids, compressed gases, cryogenic liquids, or extraction equipment. (Consult Sections F-107.10.1-F-107.10.43 of the DC Fire Prevention Code.)

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First and Last Name	Signature	Date
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First and Last Name	Signature	Date
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**SECTION VI | LANGUAGE ACCESS**

I/we require vital documents to be translated into:

- Chinese       French       Korean       Spanish       Vietnamese       Other
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NOTICE: The District of Columbia will provide the appropriate services and auxiliary aids, including sign language interpreters, whenever necessary to ensure effective communication with members of the public who are deaf, hearing impaired or who have other disabilities affecting communications. Requests for services and auxiliary aids should be made at least ten days prior to any scheduled hearing. Please notify the ADA Coordinator at (202) 442-4423. In order to report fraud, waste, and abuse in District of Columbia government, call 1-800-521-1638.