



Temporary License Application: Cannabis Manufacturing

Application Instructions:

Complete one form for each premises in which you will be conducting commercial cannabis manufacturing.

Please type or write legibly.

Submit the completed application and attachments via mail or email to:

MCLS@cdph.ca.gov

California Department of Public Health
Manufactured Cannabis Safety Branch
PO Box 997377, MS-7606
Sacramento, CA 95899-7377

If you have any questions, please visit our website, www.cdph.ca.gov/mcsb, or contact us at MCLS@cdph.ca.gov.

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SECTION A – LICENSE TYPE (Check all that apply)

Medicinal (M) Adult-Use (A)

SECTION B – APPLICANT INFORMATION

First Name	MI	Last Name
Title	Phone Number	Email Address

SECTION C – BUSINESS INFORMATION

Legal Business Name (as registered with the CA Secretary of State)	Trade Name (DBA)	Federal EIN
Mailing Address	City	State
	Zip	County

SECTION D – PREMISES INFORMATION

Physical Address of Manufacturing Premises	City	State	Zip	County
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SECTION E – OPERATIONAL ACTIVITIES (Check all that apply for the premises listed in Section D)

Product Types	M	A	Activities	M	A	Extraction Methods	M	A
Edibles			Extraction			Butane/Hexane/Propane		
Concentrates			Infusion			Ethanol		
Topicals			Packaging/Labeling			Carbon Dioxide (CO2)		
Capsules						Water/Food-grade Dry Ice		
Vape Cartridges						Food-grade Butter/Oil		
Tinctures						Mechanical		
Other:						Other:		

SECTION F – LOCAL AUTHORIZATION

Local Issuing Authority	Local Office Phone Number	Local Office Email Address
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SECTION G – LOCAL AUTHORIZATION ATTACHMENT

A copy of a valid license, permit or other authorization issued by the local jurisdiction that enables the applicant to conduct commercial cannabis activity at the premises listed in Section D.

SECTION H – DECLARATIONS AND SIGNATURE

I declare under penalty that:

- The information contained within and attached to this application is complete, true and accurate. I understand a misrepresentation of fact is cause for rejection of this application, denial of license or revocation of an issued license.
- I understand that the temporary license is a conditional license that authorizes my business to engage in the commercial cannabis activity described in the application.
- I understand that refusal by the licensing authority to issue or extend a temporary license shall not entitle the business to a hearing or appeal of the decision.
- I understand that the issuance of a temporary license does not obligate the Department to issue a non-temporary license, nor does it create a vested right to either an extension of the temporary license or to the granting of a non-temporary license.
- I understand that I am responsible for knowing and complying with all state laws and regulations governing medicinal and adult-use cannabis manufacturing pursuant to Medicinal and Adult-Use Cannabis Regulation and Safety Act and all other applicable laws and regulations, upon issuance of my temporary license. I understand that I am responsible for compliance with subsequent updates to cannabis manufacturing laws and regulations.

Signature	Print Name	Date
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