



**TOWN OF GRAND LAKE  
REGULATED MARIJUANA  
LICENSE APPLICATION**

- NEW LICENSE**       **RENEWAL**       **TRANSFER OF OWNERSHIP**

**APPLICANT MUST CHECK THE APPROPRIATE BOX(ES)**

1. Applicant is applying as a

- Corporation       Limited Liability Company  
 Partnership (includes Limited Liability and Husband and Wife Partnerships)       Association or Other  
 Individual

Verts Grand Lake LLC      [REDACTED]  
2. Applicant If an LLC, name of LLC; if partnership, at least 2 partner's names; if corporation, name of corporation      Fein Number

Verts Neighborhood Dispensary      [REDACTED]      [REDACTED]  
2a. Trade Name of Establishment (DBA)      State Sales Tax No.      Business Telephone

525 Grand Ave.

3. Address of Premises (specify exact location of premises)  
Grand Lake      Grand      CO      80447  
City      County      State      ZIP Code

[REDACTED]      [REDACTED]      CO      [REDACTED]  
4. Mailing Address (Number and Street)      City or Town      State      ZIP Code

**REGULATED MARIJUANA LICENSE FEES**

- Application Fee for New Regulated Marijuana License.....\$3,000.00\*  
 Renewal Application Fee for Regulated Marijuana License.....\$2,000.00\*  
 Application Fee for Transfer of Ownership.....\$1,000.00\*

\* Plus reimbursement of any additional fees or expenses incurred by the Town and/or reimbursement of any Town expenses incurred in excess of this amount.



## APPLICATION DOCUMENTS CHECKLIST AND WORKSHEET

Instructions: This checklist should be utilized to assist applicants with filing **all** required documents for licensure. **All** documents must be properly signed and correspond with the name of the applicant exactly. **All** documents must be typed or legibly printed. Application fees are nonrefundable.

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### ITEMS SUBMITTED, PLEASE CHECK ALL APPROPRIATE BOXES COMPLETED OR DOCUMENTS SUBMITTED

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#### I. APPLICANT INFORMATION

- A. Applicant/Licensee identified.
- B. Copy of State of Colorado Regulated Marijuana Business License; or if not yet received, Copy of State of Colorado Regulated Marijuana Business License Application and all associated application materials.
- C. License type or other transaction identified.
- D. If any information in the Applicant's Lottery Phase Application has changed, Applicant has included all such changed information in this License Phase Application, including all related documentation.
- E. Additional information may be required by the local licensing authority or their designee(s).

#### II. DIAGRAM OF THE PREMISES

- A. No larger than 8 1/2" X 11".
- B. Dimensions included (doesn't have to be to scale). Exterior areas should show control (fences, walls, etc.).
- C. Separate diagram for each floor (if multiple levels).

#### III. PROOF OF PROPERTY POSSESSION

- A. Deed in name of the Applicant ONLY (or)
- B. Lease in the name of the Applicant ONLY with proper consent from the Landlord and acceptance by the Applicant.
- C. Lease Assignment in the name of the Applicant (ONLY) with proper consent from the Landlord and acceptance by the Applicant.
- D. Other Agreement if not deed or lease.

#### IV. BUSINESS PLAN

- A. Updated and comprehensive business plans, tailored to the location specified in the License Phase Application, covering all subject areas set forth in Section 6-5-7(c)(9)

#### V. FINDINGS OF SUITABILITY

- A. Proof of Findings of Suitability issued by the MED for all Controlling Beneficial Owners of the Applicant

#### VI. TOWN OF GRAND LAKE DOCUMENTS

- A. Town of Grand Lake Business License
- B. Town of Grand Lake Sales Tax License
- C. Proof of Submission to the Town of a Conditional Use Permit Application pursuant to Town Code 12-2-31(B)



19. If applicant is a corporation, partnership, association or limited liability company, applicant **must list** ALL OFFICERS, DIRECTORS, GENERAL PARTNERS, AND MANAGING MEMBERS.

NAME	HOME ADDRESS, CITY & STATE	DOB	POSITION
Ashley Ingles	[REDACTED]	[REDACTED]	Manager
Alexander Close	[REDACTED]	[REDACTED]	Manager
Matthew Ingles	[REDACTED]	[REDACTED]	Manager
Daniel Rowland	[REDACTED]	[REDACTED]	Manager

Registered Agent (if applicable) Address for Service  
 Cordillera Advisory Management, Inc. [REDACTED]

**OATH OF APPLICANT**

*I declare under penalty of perjury in the second degree that this application and all attachments are true, correct, and complete to the best of my knowledge. I also acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the Town Code and the Colorado Marijuana Code.*

Authorized Signature: [REDACTED]	Title: [REDACTED]	Date: 04-20-2026
	Manager	

**REPORT OF TOWN CLERK**

<b>Date application filed with Town Clerk</b>	Date of local authority hearing (for new license applicants, cannot be less than 14 days from date of the report of findings from the Application investigation pursuant to 6-5-8(e), and shall only be scheduled after the Town Planning Commission has reported its recommendations to the Town Board pursuant to 6-5-9(a)(2).
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**THE TOWN CLERK HEREBY AFFIRMS:**

That each person required to has:

<input type="checkbox"/> Submitted all License Phase Application materials pursuant to Section 6-5-8	Yes No
.....	<input checked="" type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> That the local authority, or their designee(s), has conducted, or intends to conduct, an inspection of the proposed premises to ensure that the applicant is in compliance with, and aware of, all provisions of the State and Town marijuana code	<input checked="" type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Date of Inspection or Anticipated Date <u>July 1, 2026</u>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<input type="checkbox"/> Further findings of the Application investigation, pursuant to Section 6-5-8(e), attached.	<input type="checkbox"/> <input type="checkbox"/>
	<input type="checkbox"/> <input type="checkbox"/>

Town Clerk	Telephone Number	TOWN, CITY
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Signature	Title	Date
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Signature (attest)	Title	Date
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