

to name on State MJ license):

NAME UNDER WHICH BUSINESS WILL BE CONDUCTED:

NAME AND ADDRESS OF APPLICANT (Name of Applicant must be identical

## **Petersburg Borough Marijuana & Marijuana Products Excise Tax Registration**

Send Registration with payment to: Petersburg Borough Finance Department Excise Tax PO Box 329 Petersburg, Alaska 99833

| Date Rec'd by Borough: |  |
|------------------------|--|
|------------------------|--|

STATE MJ LICENSE NO.:

STATE BUSINESS LICENSE NO.:

The Borough Certificate of Registration will be issued in the name of the applicant below, which must match the name of the licensee under a valid State of Alaska Marijuana License. All Petersburg Borough marijuana tax returns must be filed under the name of the applicant. A Certificate issued hereunder is not assignable or transferable by the Certificate holder.

FEDERAL EIN:

|                          |   | CONTACT NAME:  | TELEPHONE NUMBER:                        |  |
|--------------------------|---|--|--|--|
|                          |   | EMAIL ADDRESS:   | FAX NUMBER:                              |  |
| PHYSICAL  <br>FACILITIES | LOCATION(S) WITHIN THE BOROUGH OF MARIJUANA<br>S:   |  |  |  |
| Note: A o                | copy of your State of Alaska Marijuana Licen  | se issued under AS 17.38 mu                                      | ust accompany this application.          |  |
| payable to               | FION FEE: A \$25.00 nonrefundable regise: <b>Petersburg Borough</b> der penalties of perjury that I have examined the |  |  |  |
| SIGNATURE:               | ·   |  | DATE:                                    |  |
| NAME (PLEASE PRINT):     |   |  | TITLE (PLEASE PRINT):                    |  |
| For Bo                   | orough Use Only:  |  |  |  |
|                          | CERTIFICATE   | JRG BOROUGH<br>OF REGISTRATION<br>lisplayed at place of business | <u>5</u> )                               |  |
|                          | CERTIFICATE #:  |  |  |  |
|                          | NAME OF CERTIFICATE HOLDER:   | PETER:   | PETERSBURG<br>ALASKA                     |  |
|                          | ISSUE DATE:   |  |  |  |
|                          | EXPIRATION DATE:  | Certifying Signatur  | Certifying Signature of Borough Official |  |
|                          | This certificate is not assignable or transferable.   |  |  |  |
|                          |   |  | <u>—</u>                                 |  |