

LICENSEE AUTHORIZATION FOR RELEASE OF INFORMATION

Business and Professions Code section 26260 permits the state cannabis licensing authorities to release nonpublic licensee information to financial institutions in order to facilitate the provision of financial services.

This form shall be used by the licensee to authorize this release and identify which financial institutions may request information. The form must be completed and signed by an owner of the business who has been identified and disclosed on the license application. Licensees may withdraw their waiver at any time by re-submitting this form with the withdrawal information completed.

LICENSEE INFORMATION

Business Name: _____ License Number(s): _____
Name of Owner Submitting Request: _____
Owner's Email Address: _____ Owner's Phone Number: _____

REQUEST INFORMATION

I wish to authorize release of information to financial institution(s) – *Complete Section A below*

I wish to withdraw an authorization previously provided – *Complete Section B below.*

SECTION A – Authorization for Release of Information

Name(s) of Financial Institution(s) Authorized to Receive Information:

Information That May Be Provided:

Application Information

Includes license application and renewal applications. Does not include criminal background or personal information of individual owners.

Compliance and Enforcement Information

Includes documents issued to a licensee pursuant to disciplinary proceedings such as Citations, Notice of Embargo or Notice of Suspension/Revocation.

Track and Trace Information

Includes inventory, sales (retail) and transfer reports. Does not include employee personal information or information about other licensed businesses.

The licensee hereby waives any applicable privilege and confidentiality and authorizes the licensing authority to disclose to the Financial Institution(s) identified above such nonpublic financial, regulatory and business information designated above concerning the licensee, its owners and financial interest holders, provided the nonpublic information is accompanied by a statement that the Financial Institution is to maintain the confidentiality of such information.

Signature of Owner: _____ Date: _____

SECTION B – Withdrawal of Authorization

Choose one:

I wish to withdraw all authorization provided for release of information to financial institutions

I wish to withdraw authorization provided for specific financial institution(s). *List the financial institution(s) that should no longer be able to receive your information:*

Signature of Owner: _____ Date: _____