

COMMERCIAL CANNABIS BUSINESS SOLE PROPRIETORSHIP FORM



COMMUNITY DEVELOPMENT DEPARTMENT • 345 N EL DORADO STREET • STOCKTON, CA 95202 • (209) 937-8366 http://www.stocktonca.gov/cannabis • cannabislottery@stocktonca.gov

SOLE PROPRIETORSHIP VERIFICATION This form is for verification of Sole Proprietorship Ownership as part of the Cannabis Business Lottery. For more information, please email cannabislottery@stocktonca.gov .	
I,	, owner and sole proprietor of , as a supplement to my Commercial Cannabis Lottery
 Both I and the business named above are a single entity for tax and liability purposes. My business is not operated as a corporation, limited liability company, partnership, or trust. No other person, partnership, firm, or corporation has any right, title, or ownership interest therein. I declare under penalty of perjury that the foregoing is true and correct. 	
Applicant Name (print full name):	Date:
Applicant Signature:	