TOWNSHIP OF BIRCH RUN SAGINAW COUNTY, MICHIGAN

RESOLUTION TO APPROVE RECREATIONAL MARIHUANA SCORECARD NO. 2022-09

At a Regular Meeting of the Birch Run Township Board, Township of Birch Run, Saginaw County, Michigan, held at the Township Meeting Room on the 8th day of February, 2022, at 7 o'clock Eastern Standard Time.

PRESENT: Letterman, C. Trinklein, Parlberg, Sheridan, Kiessling, D. Trinklein Jr, Watts ABSENT: None

The following resolution was made by Letterman and seconded by C. Trinklein:

WHEREAS, Birch Run Township has permitted certain types and quantities of recreationalmarihuana establishments to exist in the Township pursuant to applicable Township Ordinances and applicable state law.

WHEREAS, Birch Run Township has established a procedure for applicants to apply for Recreational Marihuana Operational Licenses.

WHEREAS Birch Run Township desires to create a Recreational Marihuana Application Scorecard for the accurate assessment of potential applicants.

THEREFORE, BE IT RESOLVED: That the Birch Run Township Board hereby approves the attached Birch Run Township Recreational Marihuana Application Scorecard.

All resolutions or parts of resolutions insofar as they conflict with the provisions hereof are rescinded to the extent of such conflict.

The foregoing resolution was duly adopted at a regular meeting of the Birch Run Township Board held on the 8th day of February, 2022.

YEAS: Letterman, Parlberg, Sheridan, D. Trinklein Jr, C. Trinklein NAYS: Kiessling, Watts ABSTENTIONS: None

RESOLUTION DECLARED ADOPTED.

State of Michigan)

) ss County of Saginaw)

I, the undersigned, the duly qualified and acting Township Clerk for Birch Run Township, Saginaw County, Michigan, DO HEREBY CERTIFY that the foregoing is a true and complete copy of certain proceedings taken by the Township Board of said Township at a regular meeting held on the 8th day of February, 2022.

IN WITNESS WHEREOF, I have hereunto fixed my official signature on this 9th day of February 2022.

Corey Trinklein, Clerk Birch Run Township Applicant: Address: License: Date:

Recreational Marijuana Scoring Results

| Recreational Marijuana Facilities Scoring Criteria | | | | |
|--|--|-------------------|---------------|--|
| Description | Criteria | Maximum Points | Earned Points | |
| I. Business Ownership | | | | |
| Ownership Structure | Content and sufficiency of information; Professionalism of submitted documentation including clear labeling of required items. | 1 | | |
| Organizational Chart Provided | Organizational chart provided with application materials. | 1 | | |
| Ownership Interests | At least 1 owner is an honorably discharged military veteran. | 1 | | |
| | At least 1 owner has an advanced medical degree. | 1 | | |
| Detailed Business Plan | Plan must be detailed with at least 3 years' valid pro forma included. | 1 | | |
| Owner-Occupied Building | At least 1 owner owns the building where the recreational marijuana facility is located. | 1 | | |
| Owner—Resident of Disproportionately-Impacted Community. | At least 1 owner resides in a municipality that has been disproportionately impacted by marijuana prohibition and enforcement (as defined by the Marihuana Regulatory Agency) and has so resided at least 5 years of the last 10 years. | 1 | | |
| Total - Business Ownership | | 7 | | |

| Recreational Marijuana Facilities Scoring Criteria | | | | |
|--|--|-------------------|------------------|--|
| Description | Criteria | Maximum Points | Earned Points | |
| II. Financial Stability | | | | |
| Applicant has disclosed and documented sources and total | At least \$300,000 | 1 | | |
| amount of capitalization to | At least \$500,000 | 1 | | |
| operate and maintain facility of: | At least \$1,000,000 | 1 | | |
| | CPA attested financial statements attached | 1 | | |
| Sufficient Financial Resources | Applicant, or any owners of Applicant haven't filed for bankruptcy in the last seven (7) years | 1 | | |
| | Applicant, or any owners of Applicant have not had IRS liens placed upon any financial accounts or property | 1 | | |
| Tax Return History | Applicant has filed both personal and corporate income tax returns for the past five (5) years | 1 | | |
| Total - Financial Stability | | 7 | | |

| Description | Criteria | Maximum Points | Earned Points |
|---|--|-------------------|---------------|
| II. Business Experience | | | |
| Documented Business History | Nature and type of prior business, years of operation, | 1 | |
| Current Business Ownership Documentation | Description of current business ownership, | 1 | |
| Business Diversification | Applicant holds other commercial licenses | 1 | |
| Medical Certifications | Applicant holds and maintains documented medical certifications or licenses | 1 | |
| Compliance History | Applicant has not had a permit or license revoked (including for medical or recreational Marijuana) by any state or municipality | 1 | |
| | Applicant has not engaged in an unapproved medical or recreational Marijuana provisioning center or dispensary in any Michigan municipality | 1 | |
| | Documented history or regulatory compliance at federal, state, and local levels | 1 | |
| | No history of federal, state, or local complaints/incidents | 1 | |
| Business Litigation | Applicant has not been involved and is currently not involved in any business litigation | 1 | |
| Total - Business Experience | | 9 | |

| Description | Criteria | Maximum Points | Earned Points |
|--------------------------------|--|-------------------|------------------|
| IV. Business Operations | | | |
| Job Creation | Applicant plans to create three | 1 | |
| | (3) or more full-time jobs | | |
| Applicant Describes a Staffing | Employ one (1) or more Saginaw | 1 | |
| Plan to: | County residents | | |
| | Employ one (1) or more Township | 1 | |
| | | - | |
| | Employ the chronically underemployed | 1 | |
| | Ensure safe dispensing, adequate | 1 | |
| | security, theft prevention, and | | |
| | maintenance of confidential | | |
| | information | | |
| | Provide training and educational | 1 | |
| | opportunities for employees | | |
| | including best practices for patient | | |
| | confidentiality, tracking, fraud etc. | | |
| | Requires employees to take | 1 | |
| | cannabis-training courses | | |
| | Provides equipment, standards, and | 1 | |
| | procedures for safe operation of its | | |
| | facilities and engages employees on | | |
| | best practices | | |
| Employee Compensation | Applicant proposes to pay a living | 1 | |
| | wage (at least 200% of the Federal | | |
| | Poverty Level for a family of two (2)) | | |
| | Applicant describes employing three | 1 | |
| | (3) or more employees at more than | | |
| | \$15/hour | | |
| | Applicant describes a plan to offer | 1 | |
| | employee benefits in addition to | | |
| | wages or salary | | |
| | Applicant describes a plan to provide | 1 | |
| | employer paid health insurance | | |
| Employee Integrity | Applicant has a documented code of | 1 | |
| | ethics and plan to ensure honesty | | |
| | and integrity of employees | | |
| Total - Business Operations | | 13 | |

| Recreational Marijuana Facilities Scoring Criteria | | | | |
|--|--|-------------------|------------------|--|
| Description | Criteria | Maximum Points | Earned Points | |
| 7. Facility Improvements | , Maintenance, Use and Security | | | |
| Capital Improvement | Applicant proposes facility capital improvement in excess of \$100,000 | 1 | | |
| | Applicant proposes facility capital improvement in excess of \$500,000 | 1 | | |
| Building | Applicant has provided rendering and/or blueprints or plans of facility as proposed to be used | 1 | | |
| Maintenance Plan | Applicant provides plan to inspect to ensure interior and exterior integrity and maintenance | 1 | | |
| | Applicant provides plan to keep exterior free of trash, graffiti, loiterers, etc. | 1 | | |
| Traffic | Applicant describes expected daily number of customers and proposed volume of vehicular traffic | 1 | | |
| Facility Plan Provides for: | Secure storage of recreational Marijuana | 1 | | |
| | Preventing visibility of recreational Marijuana from facility exterior or common public area within a building or structure | 1 | | |
| | Back-up power generation | 1 | | |

| Insurance Plan | Applicant demonstrates access and ability to insure facility, contents, and employees through property, business, general liability, and auto and worker's compensation insurances and demonstrates willingness to name Township as additional insured. | 1 | |
|---|---|----|--|
| Waste Management | Applicant describes a plan for disposal of waste Applicant describes "green" business practices and energy conservation techniques | 1 | |
| Security Plan | Applicant provided a detailed security plan | 1 | |
| | Applicant provided copies of material safety data sheets for hazardous compounds | 1 | |
| | Applicant has 24/7 video monitoring of the interior and exterior of the facility | 1 | |
| | Applicant has employed a security guard during business hours | 1 | |
| | If no security guard, then applicant has a security system in place to alert owner and police to possible tampering with the facility or its contents. | 1 | |
| Facility will be equipped with | Facility entry and exit | 1 | |
| the following alarms: | Glass breakage | 1 | |
| | Panic buttons | 1 | |
| | Motion sensors | 1 | |
| Total - Facility Improvements, Maintenance, Use and Security | | 21 | |

| Description | | Criteria | Maximum Points | Earned Points |
|-----------------------------|--------------------|--|-------------------|------------------|
| VI. | Community Outread | h and Relations | | |
| Applicant has Described: | s Demonstrated and | A plan to meet with neighborhood organizations, business association, crime watch and other neighborhood organizations to provide contact information for questions, concerns, issues, etc. | 1 | |
| | | A plan to provide on-going public information program to inform Township residents of cannabis issues and proper/safe/legal use of cannabis products | 1 | |
| | | A community commitment program and volunteerism plan | 1 | |
| | | Past acts of volunteerism and community involvement | 1 | |
| Applicant ha | as identified: | A specific owner and/or employee to serve as a liaison with the Township | 1 | |
| | | A specific owner and/or employee to serve as a liaison with the surrounding community | 1 | |
| Total - Com and Relation | nmunity Outreach | | 6 | |

| Recreational Marijuana Facilities Scoring Criteria | | | | |
|--|------------------------|---|-------------------|------------------|
| Description | | Criteria | Maximum Points | Earned Points |
| VII. | Compliance with Mas | ter Plan Objectives | | |
| Promote G Township | eneral Business in the | Redevelop vacant commercial building | 1 | |
| Improve quality of aging infrastructure | | Utilize Low Impact Development Practices for stormwater management (rain gardens, bioswales) | 1 | |
| | | Use 25% permeable pavement for parking surface | 1 | |
| | | Use 50% permeable pavement for parking surface | 1 | |
| | | Use 100% permeable pavement for parking surface | 1 | |
| | | Utilize solar energy for onsite energy usage | 1 | |
| Open Spac | ce Preservation | Provide 10% additional greenbelt landscaping | 1 | |
| | | Provide 25% additional greenbelt landscaping | 1 | |
| | | Provide 50% additional greenbelt landscaping | 1 | |
| Public Safet | у | At least 500 feet from another medical or recreational marijuana facility | 1 | |
| Public Safet | у | At least 1,000 feet from another medical or recreational marijuana facility | 1 | |
| | | At least 1,500 feet from another medical or recreational marijuana facility | 1 | |
| | | Provide a sidewalk/ pathway along frontage of facility | 1 | |

| Complete Streets Total - Master Plan | Provide at least 500 feet of pathway | 1 | |
|---|--|----|--|
| | Provide at least 1,000 feet of pathway | 1 | |
| | Provide at least 1,500 feet of pathway | 1 | |
| | | 16 | |
| | | | |

Summary Results

| Crite | eria | Maximum Points | Earned Points | |
|------------|--|----------------|---------------|--|
| | | Available | | |
| Ι. | Business Ownership | 7 | | |
| II. | Financial Stability | 7 | | |
| III. | Business Experience | 9 | | |
| IV. | Business Operations | 13 | | |
| V . | Facility Improvements, Maintenance, Use and Security | 21 | | |
| VI. | Community Outreach and Relations | 6 | | |
| VII. | Compliance with Master Plan | 16 | | |
| FIN | AL TOTAL: | 79 | | |