

Annex B – Registration Form Annex for Production by Designated Person

This Annex is to be completed by the proposed designated person if the applicant indicated that cannabis is to be produced by a designated person under Section 4 of the Access to Cannabis for Medical Purposes Regulations Registration Form.

If you have indicated that you plan to produce your own cannabis, you must complete Annex A; you can disregard Annex B.

B1. Designated Person's Information			
Mrs. Miss Ms. Mr.			
Full name(last/first/middle):			
Gender: M F X (person does not identify or associate with either gender)			Date of birth:
Telephone number:		Fax number (if applicable):	
Email (if applicable):			
Preferred Official Language: English French			
Ordinary Place of Residence:			
Address: (If no street address please write Lot or Concession number instead)			Apartment number
City	Province	Postal code	
Is your place of ordinary residence a private residence? Yes No			
If you checked No, please indicate the type and name of the establishment:			
Is the mailing address the same as the address of your ordinary place of residence?			
Yes No (If No, please complete the Mailing Address portion below)			
Mailing Address			
Address:			Apartment number:
City:	Province:	Postal code:	
B2. Police Document			
A document issued by a Canadian police force establishing that, within the 10 years preceding the application, you have not:			
<ul style="list-style-type: none"> • been convicted, as an adult, of a designated drug offense, as defined in section 2 of the <i>Narcotic Control Regulations</i>. • been convicted of a designated drug offence as a young person in ordinary court, as those terms were defined in subsection 2(1) of the <i>Young Offenders Act</i>, chapter Y-1 of the Revised Statutes of Canada, 1985, immediately before that Act was repealed. • received, as a young person, an adult sentence, as those terms are defined in subsection 2(1) of the <i>Youth Criminal Justice Act</i>, in respect of an offence referred to in the first point above. 			
Original police document is provided with this application.			

B3. Production site

Please choose one of the following three options:

I will produce marihuana plants at my ordinary place of residence (the address was provided in section B1 of this Annex.)

I will produce marihuana plants at the applicant's ordinary place of residence (the address that was provided in Section 2 of the *Access to Cannabis for Medical Purposes Regulations* Registration Form.)

I will produce marihuana at a site other than either my ordinary place of residence or at the ordinary residence of the applicant.

If you selected the third option, please provide the following information for the proposed site where the marihuana plants will be produced:

Address: (Field)

City:

Province:

Postal code:

The proposed production site is my ordinary place of residence or that of the applicant or is owned or part owned by me or the applicant: yes no

If you answered yes, please skip Section B4 and move to Section B5.

B4. Production Site Owner's Consent

Mrs. Miss Ms. Mr.

Production Site owner's full name (Last/first/middle):

Production site owner details:

Address:

Apartment number:

City

Province

Postal code:

Telephone number

I confirm that I am the sole owner of the above-mentioned site, which is the proposed production site, and give my consent to *(full name of designated person)* to produce marihuana plants on this property in accordance with the *Access to Cannabis for Medical Purposes Regulations*.

Signature of Production Site Owner: _____

Date:

Note: If the property is co-owned, please provide the name and address of each additional property owner in the space below.

Co-property owner's full name:

Address:

Apartment number:

City

Province

Postal code:

Telephone number

I confirm that I am a co-owner of the above-mentioned site, which is the proposed production site, and give my consent to *(full name of applicant)* to produce marihuana plants on this property in accordance with the *Access to Cannabis for Medical Purposes Regulations*.

Signature of Production Site Co-Owner: _____

Date:

B5. Production Area

I will produce marihuana plants (please choose only one):

Entirely indoors; or, Entirely outdoors; or, Partly indoors and partly outdoors

B6. Storage Site

Where will the cannabis, other than marihuana plants be stored?

At my ordinary place of residence (the address which was provided under Section B1 of this Annex)

At the proposed production site (the address which is provided under Section B3 of this Annex.)

B7. Authority to communicate to Canadian police

To reduce the possibility of police intervention when you engage in activities allowed under your registration Health Canada may communicate limited information to Canadian police in response to a request in the context of an investigation under the Controlled Drugs and Substances Act, or the Access to Cannabis for Medical Purposes Regulations.

B8. Designated Person's Declaration and Signature

I declare that, within the ten (10) years preceding the date of this application, I have not been convicted, as an adult, of a designated drug offence, as defined in section 2 of the *Narcotic Control Regulations*.

I declare that, within ten (10) years preceding the date of this application, I have not been convicted, as an adult, of an offence committed outside of Canada that, if committed in Canada, would have constituted a designated drug offence.

I declare that, within ten (10) years preceding the date of this application, I have not been convicted of a designated drug offence as a young person in ordinary court, as those terms were defined in subsection 2(1) of the *Young Offenders Act*, chapter Y-1 of the Revised Statutes of Canada, 1985, immediately before the Act was repealed.

I declare that, within ten (10) years preceding the date of this application, I was not a young person who received an adult sentence, as those terms are defined in subsection 2(1) of the *Youth Criminal Justice Act*, in respect of a designated drug offence.

I declare that, within ten (10) years preceding the date of this application, I did not commit an offence committed outside Canada when I was at least 14 years old but less than 18 years old that, if committed in Canada, would have constituted a designated drug offence and would have resulted in a longer sentence than the maximum youth sentence that could have been imposed under the *Youth Criminal Justice Act* for such an offence.

If I've indicated on this application that I plan to produce marihuana plants entirely outdoors or partly outdoors and partly indoors, I declare and confirm that the boundary of the land on which the production site is located does not have any point in common with the boundary of the land on which a school, public playground, day-care facility or other public place frequented mainly by persons under 18 years of age is located.

I declare and confirm that the cannabis will be stored indoor at the proposed storage site referred to in section B6 of this Annex.

I declare that I will comply with the limit on the maximum storage quantity of dried marihuana or its equivalent indicated in the registration

I declare that I will comply with the limit on the maximum number of plants in production indicated in the registration

I declare that I will take all necessary measures to ensure the security of the marihuana plants and cannabis

I attest that the information contained in this registration form Annex B is correct and complete

Designated person's signature:

Print name:

Date:

Important

1 - Please ensure that you have signed and dated the declaration attesting that the information on this registration form Annex B is correct and complete

2 - It is important to understand that all mandatory information requested must be provided to avoid unnecessary delays

3 - We cannot process the application until ALL required information is received

4 - Please retain a photocopy of this Annex B form for your files

5 - If you have questions regarding this form; please contact health Canada toll-free at 1-866-337-7705