

**NJEDA CANNABIS BUSINESS DEVELOPMENT
GRANT PROGRAM ANNUAL COMPLIANCE
CERTIFICATION FORM #**

Product Number (PROD#):

Grant Agreement Effective Date:

The undersigned, on behalf of _____ (the “Grantee”), a duly authorized representative of the Grantee, hereby certifies that:

1. The Grantee remains **open and operating** within the State of New Jersey.
2. The Grantee is in **good standing** with the New Jersey Cannabis Regulatory Commission (NJCRC).
3. The Grantee has **not transferred or sold** its cannabis business license.
4. The Grantee has **not applied for or operated** any cannabis business outside of New Jersey during the compliance term.
5. The Grantee continues to comply with all terms and conditions outlined in the executed Grant Agreement.

I understand that failure to comply with these terms may result in **recapture of grant funds** as outlined in the Grant Agreement. Pursuant to written policy, the Authority allows documents to be signed electronically and hereby agrees to be bound by such electronic signatures. Your signature below shall serve as evidence that the Grantee also agrees to be bound by electronic signatures.

AUTHORIZED REPRESENTATIVE NAME: _____

SIGNATURE: _____

TITLE: _____

DATE: _____