

DEPARTMENT OF HOUSING, ECONOMIC DEVELOPMENT & COMMERCE

CANNABIS CONTROL BOARD

ODOR MITIGATION FORM

Company Name:			
Address:			<u>.</u>
City:	state:	zip:	
Phone:	email:		
License Number:			
A cannabis establishment and cannabis related odor. The building shall be equitype and capacity to eliminate cannabis filters are required to be replaced regul	pped with a v	entilation system with carbon f ating from the interior of the pr	ilters sufficient in emises. The carbon
We hereby certify the (installation), (marequirements of Ordinance number § 8	•	f the ventilation system utilized	for the
(Check all that apply) Meets or exceeds the design criteria fo	r same.		
Has been maintained for the current ye	ar		
Contractor			
(Signature)	~ 	(Print Name)	(Date)
Design Professional Signature and Seal			
(Signature)	1	(Print Name)	(Date)