MARIJUANA LICENSING MANAGEMENT SYSTEM (MLMS)

Agent Handbook

Updated: April 16, 2025

ARIZONA DEPARTMENT OF HEALTH SERVICES

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ADHS LICENSING PORTAL INTRODUCTION

Marijuana Program Overview

The Arizona Department of Health Services (ADHS) Marijuana Program began in 2010 when Arizona voters passed Proposition 203, an initiative creating the Arizona Medical Marijuana Act (AMMA). The AMMA made medical marijuana available for qualified patients with debilitating medical conditions. By 2020, the program grew to more than 290,000 registered qualified patients and 130 registered dispensaries throughout the state of Arizona.

On November 3, 2020, voters passed Proposition 207, the Smart and Safe Arizona Act (SASAA). The SASAA made the responsible use of recreational marijuana legal for adults 21 years of age or older.

ADHS continues to regulate both the Medical Marijauana and Adult-Use Marijauana programs.

The statutes regarding the AMMA and SASAA are found online:

- AMMA is on Medical Marijuana Rules and Statutes web page
- SASAA is on Adult Use of Marijuana Statutes and Rules web page

This manual outlines the ADHS Licensing Management System functions available to the Dispensary PO/BM, Dispensary Agent, Facility Agent.

For initial account setup and login details please refer to the section titled:
ADHS Portal Account Registration
(located in the appendix of this handbook)

Note: This manual may not contain the most up-to-date images and details. Please refer to the AZDHS website for the latest news and information on the program.

https://azdhs.gov/licensing/marijuana/index.php

The characters, and other entities appearing in this manual are fictitious. Any similarity to actual persons, living or deceased or other real-life entities, is purely coincidental.

Marijuana Facility Roles

Role of a Principal Officer or Board Member (PO/BM) – Dispensary and Dual Facility

As a part of the initial application process to create and receive an approval to operate a marijuana facility, a list of initial principal officers and board members (PO/BM) is recorded on the certificate application. This indicates the marijuana facility has at least one dispensary PO/BM who submitted the information needed to perform the PO/BM role. A PO/BM, *and only a PO/BM*, is authorized to:

- Grant access to DAs to view their DA Card
- Grant agents access to the Card Search & Sales Verification System for qualified patients/caregivers
- Review the medical marijuana sales transactions of all agents and void or correct transactions
  Renew:
  - Facility Certificate
  - Dispens ary Agent cards
- Terminate Dispensary Agent cards
- Update Dispensary Agent card information
- Apply for facility certificate Approved To items
- Apply for:
  - Dispensary Agent Card
  - Approval to Operate
  - Location Changes
  - Facility modifications
- Update facility information:
  - Hours of operation
  - Add or remove a PO/BM or Medical Director
  - Revise the name of the facility or the DBA name
  - Update the designated person
  - Update the facility email address, phone number, mailing address

Additionally, a PO/BM may perform the duties of a Dispensary/Facility Agent.

Due to the confidentiality requirements of the Arizona Medical Marijuana Act (AMMA), dispensary matters, including dispensary agent cards may only be discussed with the dispensary PO/BM.

Role of a Principal Officer or Board Member (PO/BM) – Establishment Facility

An Establishment PO/BM is authorized to:

- Link and Unlink Facility Agent cards
- Apply for facility certificate Approved To items
- Renew Establishment Certificate
- Apply for:
  - Approval to Operate
  - Location Changes
  - Facility modifications
- Update facility information:
  - Hours of operation
  - Add or remove a PO/BM
  - Revise the name of the facility or the DBA name
  - Update the designated person
- Update the facility email address, phone number, mailing address

Role of a Dispensary Agent (DA) – Dispensary or Dual Facility

Dispensary Agent (DA): Means the same as "[n]onprofit medical marijuana dispensary agent" in A.R.S. § 36-1901. A dispensary agent is a principal officer, board member, employee or volunteer of a nonprofit medical marijuana dispensary who is at least 21 years of age and has not been convicted of an excluded felony offense.

A Dispensary Agent (DA), may:

- View Portal Messages from ADHS
- Send messages to ADHS
- View DA-specific Notifications
- View and print their DA Card [1]
- Verify qualifying patient and caregiver cardholders*
  Register new sales transactions*

Role of a Facility Agent (FA) – Dual Facility

Facility Agent (FA): A Facility Agent is a principal officer, board member, employee or volunteer of a marijuana retail facility who is at least 21 years of age and has not been convicted of an excluded felony offense.

A Facility Agent (FA), may:

- View FA-specific Notifications
- View and print their FA Card
- Verify qualifying patient and caregiver cardholders*
- Register new sales transactions*
- Link and Unlink to a facility

Role of a Facility Agent (FA) – Establishment Facility

Facility Agent (FA): A Facility Agent is a principal officer, board member, employee or volunteer of a marijuana retail facility who is at least 21 years of age and has not been convicted of an excluded felony offense.

A Facility Agent (FA), may:

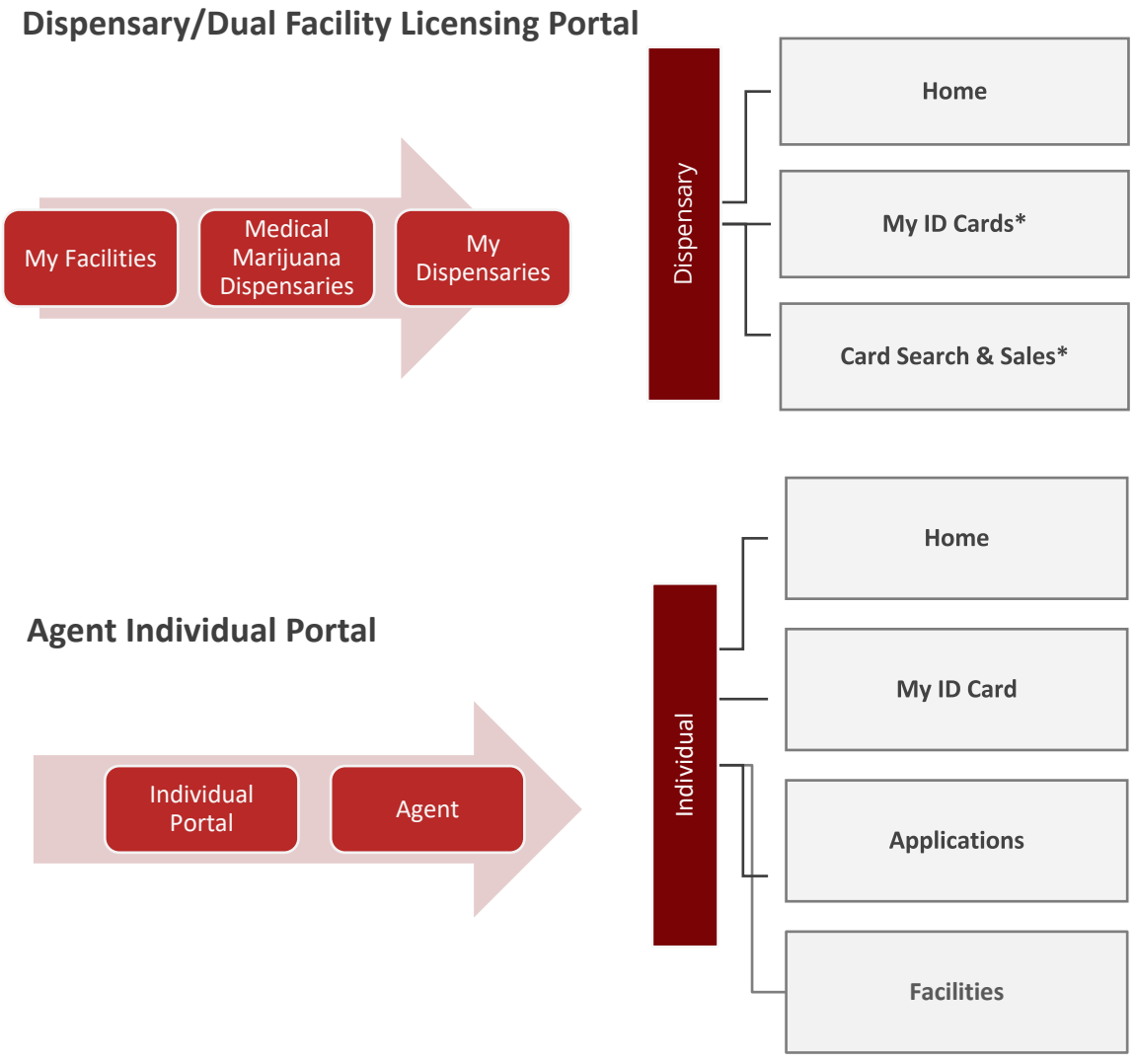
- View FA-specific Notifications
- View and print their FA Card
- Register new sales transactions
- Link and Unlink to a facility

[1] Access is granted by PO/BM

LICENSING PORTALS

Overview: Facility and Individual Licensing Portal

The ADHS Licensing Management System includes functionality to allow Marijuana Facilities to interact with Patients, Caregivers, their employees and the ADHS Marijuana Program in accordance with the AMMA and SSAA. This manual details the ADHS Licensing Management System: Facility Licensing Portal functions available to the Facility Agent and Dispensary Agent (diagrammed below).



***Access granted by PO/BM only applicable to Dispensary Agents**

ADHS Website and Portal Login

To access the Facility Licensing Portal, click the link to the Facility Licensing Portal on the Arizona Department of Health Services Medical Marijuana Home page. This ADHS website also provides additional AMMA and SASAA information. To create an ADHS Licensing portal account, see **ADHS Licensing Portal Account Registration** instructions.

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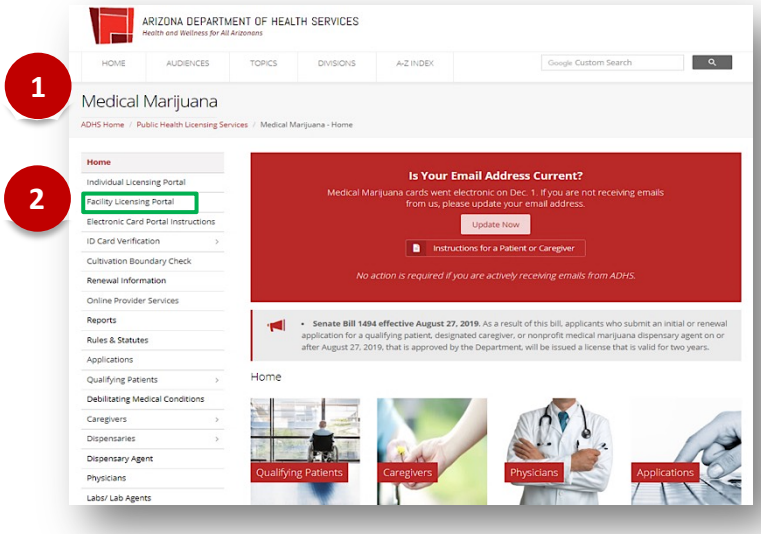
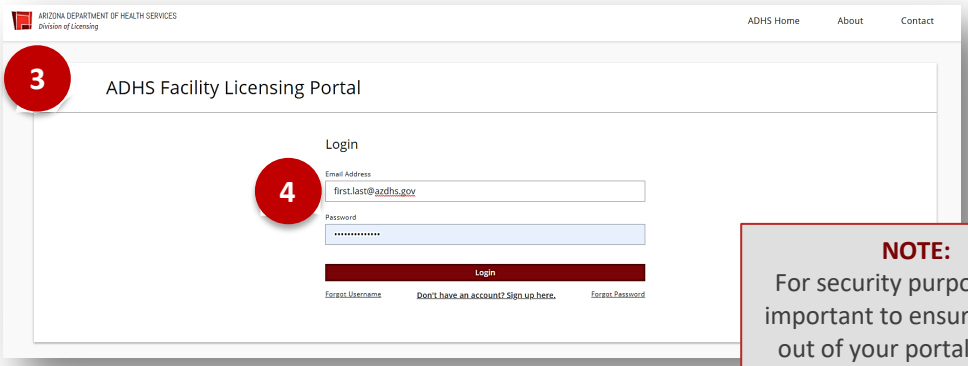
1. Access AZDHS.gov website – Search and access marijuana Homepage: https://azdhs.gov/medical-marijuana
2. Select **Facility Licensing Portal** link



3. View **Facility Licensing Portal** login page
4. Enter ADHS Licensing portal credentials

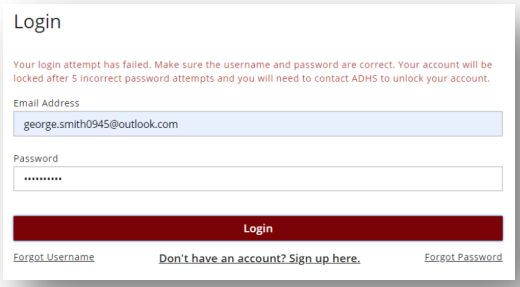
   NOTE: Facility Licensing Portal users are required to update their password every 1 year (365 calendar days)



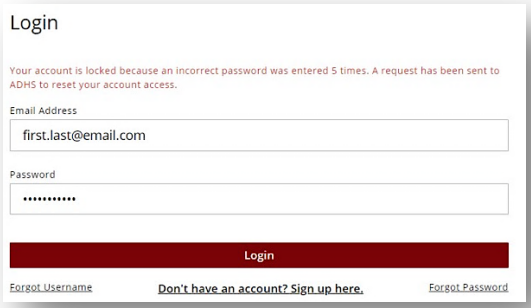
NOTE:
For security purposes, it is important to ensure you log out of your portal session when you are finished.

Portal Login: Locked Account

1. When attempting to login to the portal, the account will be locked after 5 invalid login attempts - message displayed: *"Your login attempt has failed. Make sure the username and password are correct. Your account will be locked after 5 incorrect password attempts and you will need to contact ADHS to unlock your account."*



2. If a dispensary account becomes locked, ADHS will automatically be notified and will process the request to unlock the account – message displayed: *"Your account is locked because an incorrect password was entered 5 times. A request has been sent to ADHS to reset your account access."*
   NOTE: Please allow 1 business day for processing



3. Email will be sent to account holder to notify them ADHS will have to unlock their account -email subject: "*You've been locked out of the ADHS Licensing Portal"*



ARIZONA DEPARTMENT OF HEALTH SERVICES
LICENSING

Hi Karl,

Your account is locked after too many login attempts.

We received your request to unlock your ADHS Facility Licensing portal account. We will process the request as soon as possible and email you when your account is unlocked. If you did not submit a request to unlock your account, please contact the Arizona Department of Health Services.

Thank you,
ADHS Licensing Team

4. ADHS will unlock the account and send an email with a link to the Facility Portal login or to Change your password – email subject: *"ADHS Facility Licensing Portal Unblock User"*



ARIZONA DEPARTMENT OF HEALTH SERVICES
LICENSING

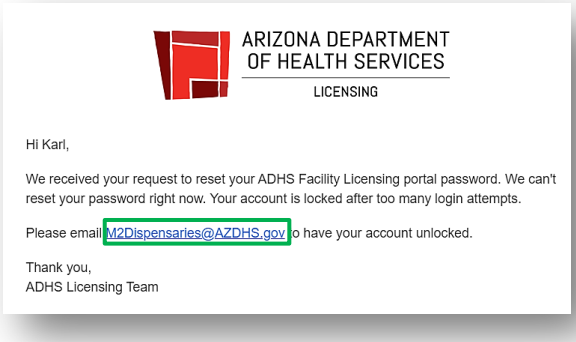
Hello Marybud,

Your account has been unlocked. Please login to the Facility Portal or Change your password to regain access.

For additional questions, please contact the Arizona Department of Health Services.

Thank you,
ADHS Licensing Team

5. If account attempts to reset their password while their account is unlocked, an email will be sent to account user with explanation and instructions
    a. An account password cannot be reset while it is LOCKED
    b. Account holder must email ADHS to request an account unlock and password reset: marijuana@azdhs.gov



ARIZONA DEPARTMENT OF HEALTH SERVICES
LICENSING

Hi Karl,

We received your request to reset your ADHS Facility Licensing portal password. We can't reset your password right now. Your account is locked after too many login attempts.

Please email M2Dispensaries@AZDHS.gov to have your account unlocked.

Thank you,
ADHS Licensing Team

Accessing the Facility Licensing Portal

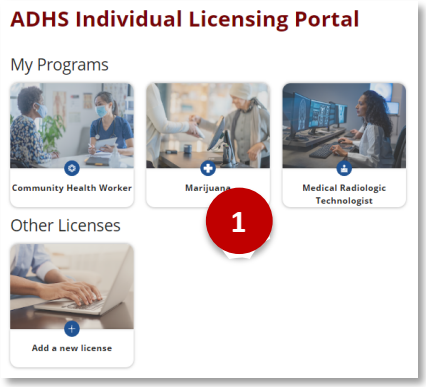
Access: PO/BM, FA (Dual) and DA

Only a PO/BM of an approved Dispensary may submit an application on behalf of the dispensary. To gain access to the Facility Licensing Portal-FLP, every user must have a:

- Unique email address
- Portal Account
- An association with a dispensary
- Valid Medical Marijuana Registry Identification Card or Facility Agent License

Individual Portal Navigation Overview

1. Individual Licensing portal will display My Programs – program tiles will only display if user has / had (within the last three years) an approved application submitted to the program



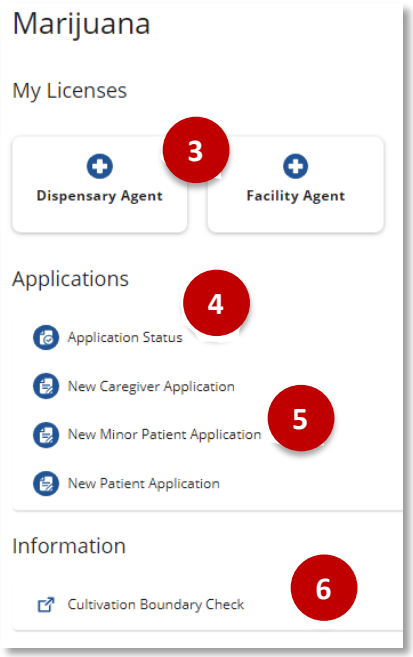
2. Once the user selects a program tile, the program page will display

3. If the user has an existing license, the program license tile(s) will display

4. Under the Application section will display the Application Status – select this link to check application statuses for submitted or drafted applications

5. Available new license applications (based on program type)

6. The Information section will display additional licensing information



NAVIGATION

Menu Bar

Access: DA and FA

The tab menu will display available functions for agents within the Individual Portal. The tabs will allow the agent to access various functions as noted.

Agent Portal Tabs

Facility Licensing Portal Menu bar will always display along the left of the portal screens



1. **My ID Cards:** View your Facility Agent Marijuana Registry Identification Card and Card History
2. **Card History**: Review of all related cards/licenses
3. **Applications:** Available applications such as Agent Card Changes
4. **Application History:** Application status and history
5. **Enforcements*:** Program Enforcements and related details
6. **Statements & Payments*:** Invoices and payment details
7. **Facilities:** Linking and unlinking to facilities – current linked facilities

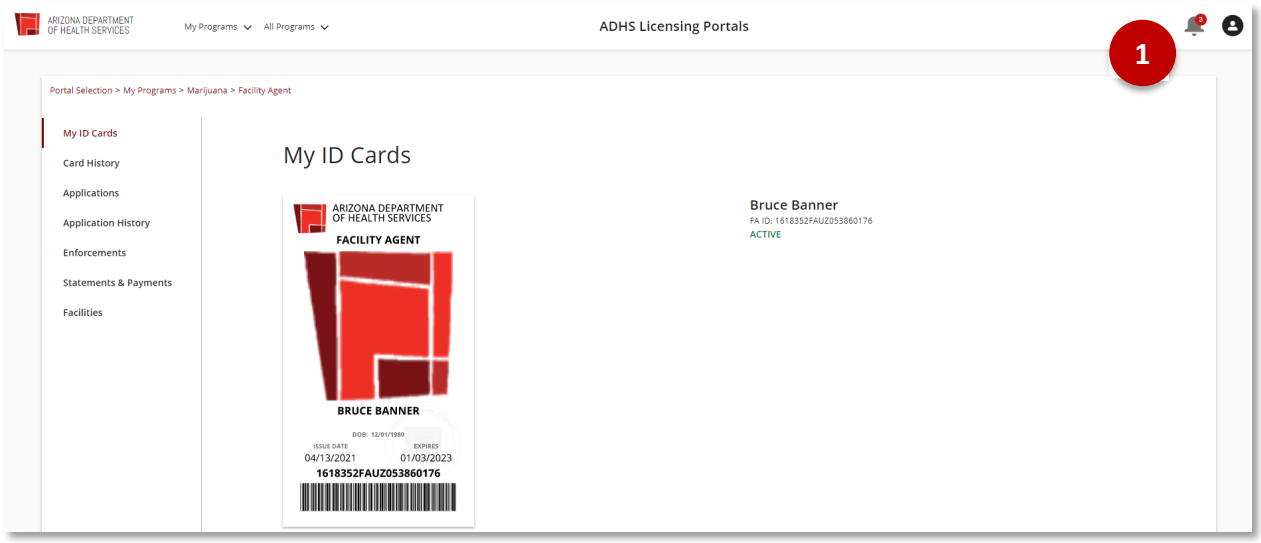
NOTE: Dispensary Agents will only have access to Enforcements and Statements & Payments tabs from within the Individual Portal

Notifications

Access: PO/BM, DA, FA (Dual)

1. **Bell Icon - Notifications:** Receive ADHS Licensing notifications – including: Application status and updates, action items, and more

   NOTE: DA has limited visibility to Notifications



My ID Cards: Card History and Download

Access: FAs, PO/BMs and DAs with Agent Card ID Access permission from the Facility Portal

FA cards are accessed via the Individual Portal once approved by ADHS

Dispensary Agent Card Access

1. Upon logging in to the licensing portal, select the **Facility Portal** tile

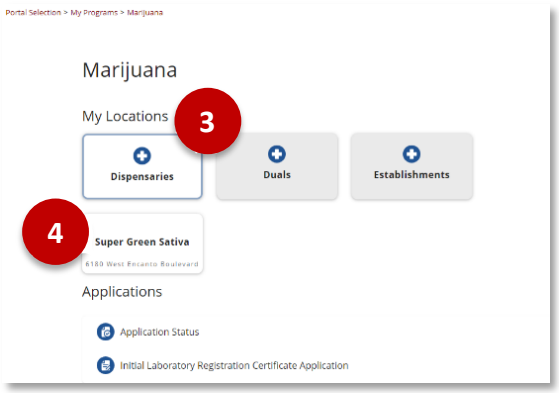


2. From the Facility Portal homepage, select the **Marijuana** program tile



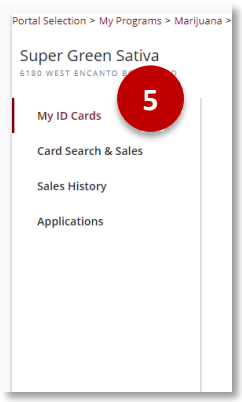
3. Select **Dispensary** or **Dual** tile

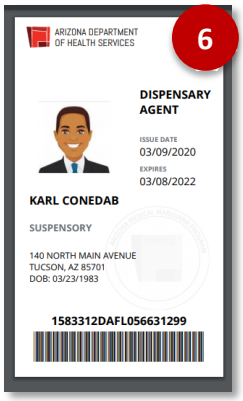
4. Select the desired **Facility Name** to enter the facility's portal account – appears below the Facility Type



5. From the Facility Licensing Portal, Select **My ID Cards**

6. View Dispensary Agent Registry Identification Card





Facility Agent Card Access

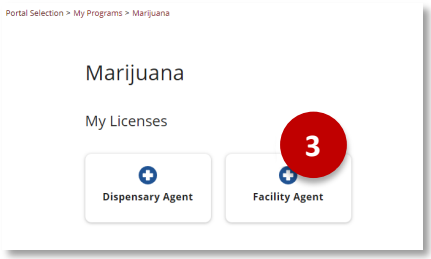
1. Upon logging in to the licensing portal, select the **Individual Portal** tile



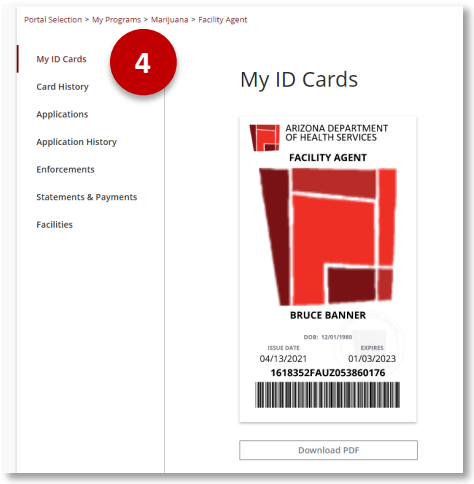
2. Select the **Marijuana** program tile



3. Select **Facility Agent** tile



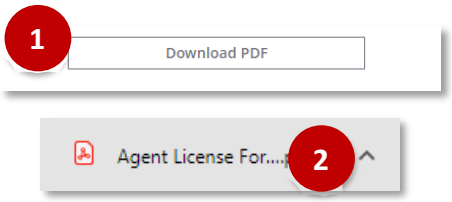
4. Select **My ID Cards**



Downloading the Agent Card

1. Click the **Download PDF** button

2. Click **PDF file link** for a printable version



Card History

View card history to the left of the screen – Portal will display up to 3 years of card history

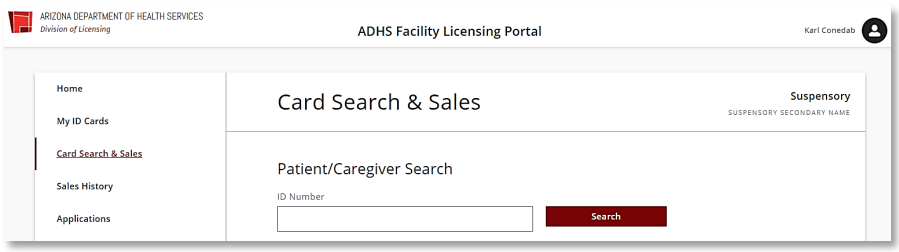
NOTE: DA will have access to view their card if the PO/BM grants them Agent ID Card Access



Card Search & Sales

Access: PO/BM, FA (Dual) and DAs with Card Search & Sales permission

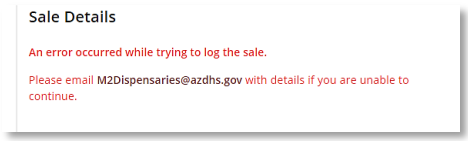
PO/BMs or Agents with **Card Search & Sales** access are directed to the landing page:



The following rules apply to all medical marijuana dispensary transactions:

- Card may be presented in either electronic or printed format
- You may only sell to caregivers and qualified adult patients
  - You may not sell to minor patients (patients under 18 years old). Minor patients can only receive their medication through their designated caregiver
  - Dispensary Agent, Lab Agent, Facility Agent cards do NOT qualify an individual tro purchase medical marijuana
- You may only sell to valid Medical Marijuana Registry Identification cardholders, i.e. ACTIVE status cards
  - You may not sell to cards that are INACTIVE, EXPIRED, or VOID
  - If the customer is a caregiver, both the caregiver and related patient cards must be ACTIVE
- You may not create a single transaction that exceeds 2.5 ounces in total
- You should only sell to customers who have not purchased more than 2.5 ounces in the last 14 days for the patient's card
  - You should not sell to a caregiver who has a patient with more than 2.5 ounces purchased in the last 14 days.
  - **NOTE:** The system will allow you to record a transaction for less than 2.5 ounces[1] that will exceed the patient's 2.5 ounce limit for a 14 day period, but you will be warned and a violation will be recorded.
  - Do NOT enter negative amounts
  - PO/BMs will have 72 hours to correct the transaction.
- All medical marijuana transactions will appear in the **Sales History** Tab for 60 days
  - If the customer wants to view their purchase history, they can view it in the customer's Individual Licensing portal account under the Tab: **Purchase History**

- If this message appears during any Card Search & Sales transaction, record the details of the activities on the screen and email to marijuana@azdhs.gov



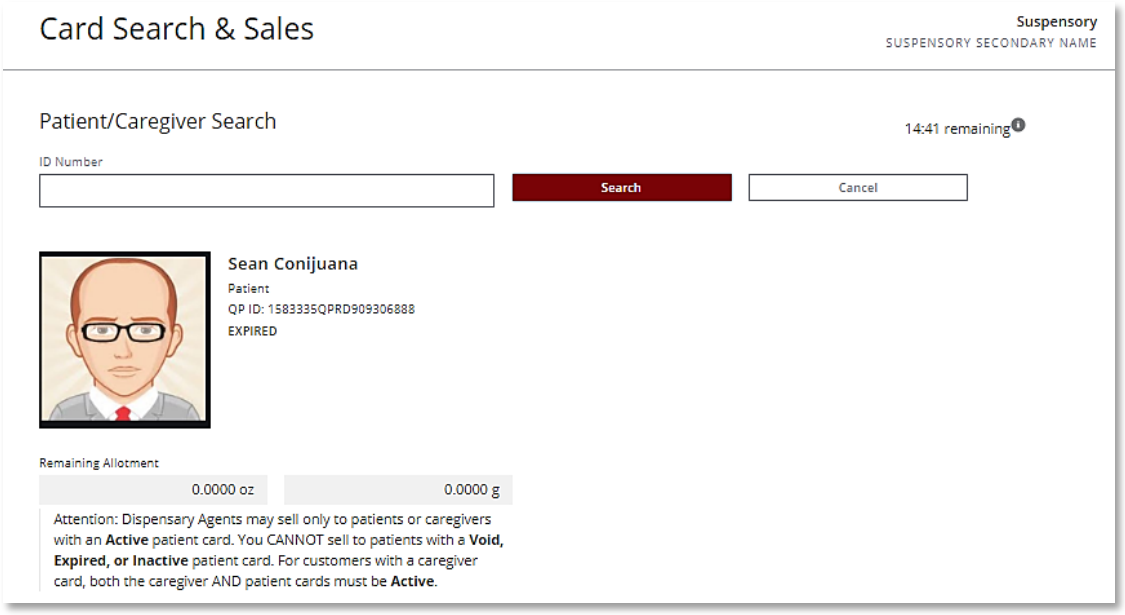
[1] Dispensing amount may be reported in ounces or grams. The Card Search & Sales verification system uses the standard conversion of grams to ounces (28.35 grams to the ounce), established by the National Institute of Standards & Technology.

Qualifying Patient (QP) and Caregiver (CG) Card Statuses	
QP or CG Card Status	Are Medical Marijuana Sales Allowed?

Active	Yes, if the patient has not reached their allotment
EXPIRED	No
INACTIVE	No

The following message is displayed in Card Search & Sales verification for a card that is not authorized to make a purchase

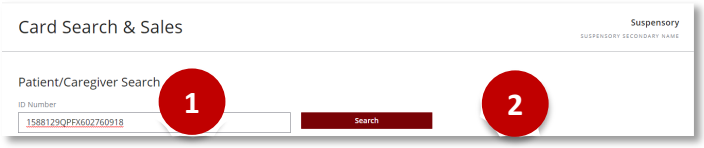
- "Attention: Dispensary Agents may sell only to patients or caregivers with an **Active** patient card. You CANNOT sell to patients with a **Void, Expired, or Inactive** patient card. For customers with a caregiver card, both the caregiver AND patient cards must be **Active.**"



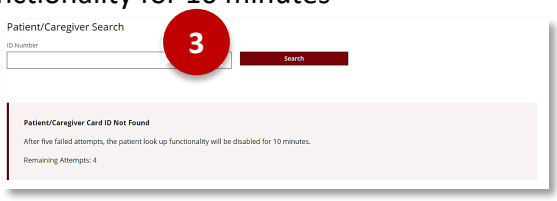
Register Purchase

Access: PO/BM, FA (Dual) and DA with Card Search & Sales permission

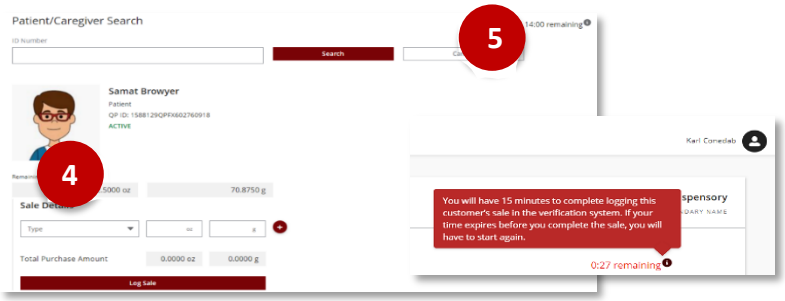
1. Enter the ID Number or scan the barcode as shown on the Patient / Caregiver card into the ID Number field
2. Click **Search** OR press **Enter/Return** key to search the Card Search & Sales verification system for the patient/caregiver card



3. If an invalid card number is entered, a warning will appear, and the number of remaining card search attempts displayed
   NOTE: After 5 invalid card search attempts, the PO/BM or dispensary agent (DA) will be locked out of all Card Search functionality for 10 minutes

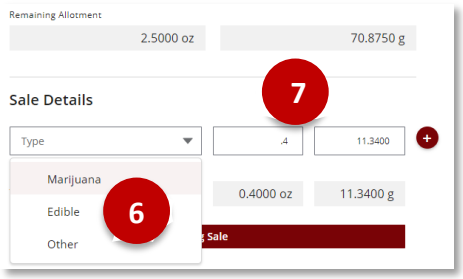


4. View cardholder information:
   - Verify the identity of the QP or CG by checking the photo ID of the QP or CG versus what is shown in the Card Search & Sales verification system
   - Verify whether the QP or CG registry identification card is ACTIVE
   - Offer any appropriate patient education or support materials
5. View time remaining to register a sale, once the timer reaches 0, the cardholder information will be cleared



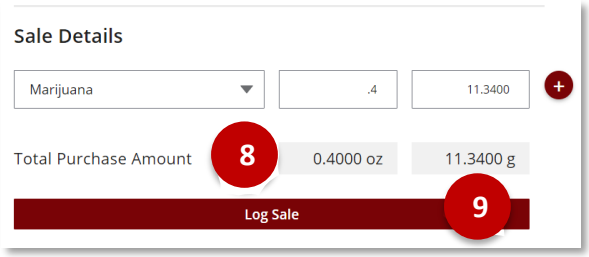
6. Select product **Type**:
   - Marijuana
   - Edible
   - Other - *ex: liquid vape*

7. Enter weight of product to be purchased, either ounces (oz) OR grams (g), the other weight will automatically be calculated
   Example: .4 ounces entered, and 11.34 grams auto calculated



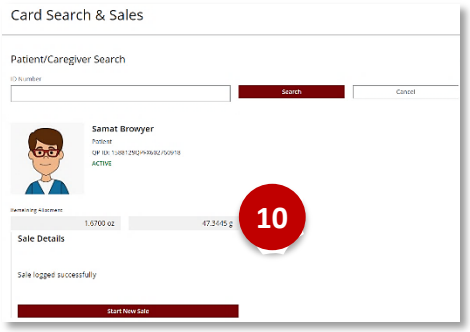
8. View **Total Purchase Amount**
   NOTE: To register additional items purchased, click the + to enter the Type and weight of additional item(s). **Total Purchase** amounts will reflect the total weight of all the items entered in this purchase.
9. Click **Log Sale** to register purchase on the cardholder's account

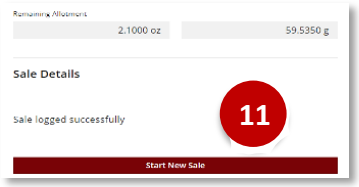
   NOTE: Negative purchase amounts are NOT allowed



10. Both the ounces (oz) and the grams (g) show the deduction in allotment based on the total of the purchase
11. Click **Start New Sale** to register another purchase for the **same cardholder**
    a. OR Click **Cancel** to clear the data from the screen

    NOTE: If Total Purchase amount is greater than the cardholder's **Remaining Allotment,** a warning "*Allotment violation detected – please confirm amounts before continuing*" will display (see Allotment Violation section below for information)

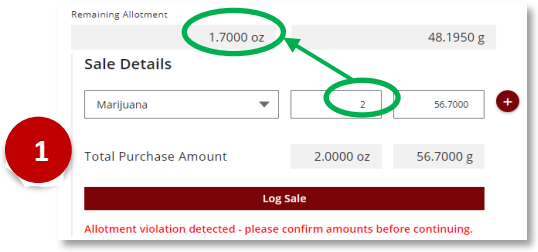

Card Search & Sales
Patient/Caregiver Search
Search
Cancel
Samat Browyer
ACTIVE
1.6700 oz
47.3445 g
Sale Details
Sale logged successfully
Start New Sale
10


2.1000 oz
59.5350 g
Sale Details
Sale logged successfully
Start New Sale
11

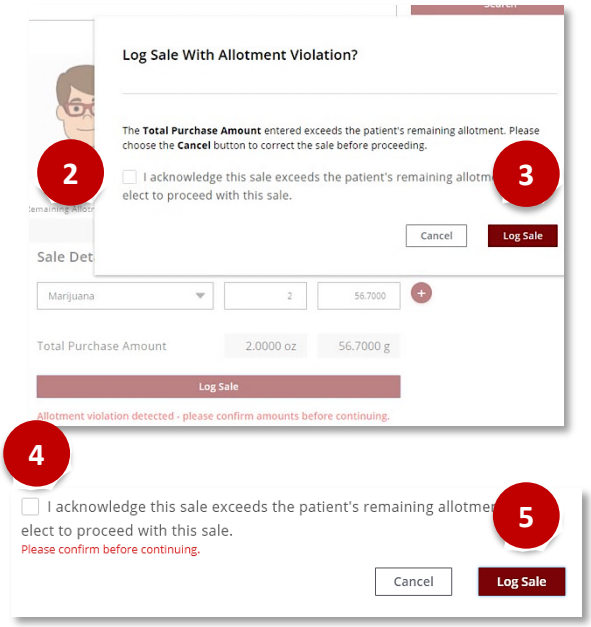
Allotment Violation

Access: PO/BM, FA (Dual) and DA with Card Search & Sales permission

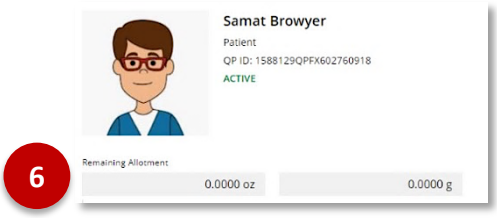
1. If **Total Purchase Amount** is greater than the cardholder's **Remaining Allotment**, a warning "*Allotment violation detected – please confirm amounts before continuing*" will display



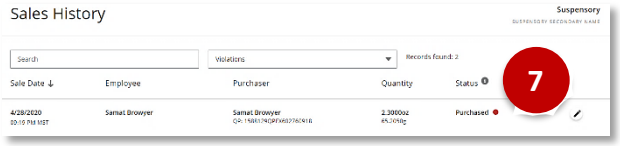
2. To continue with the purchase, DA must first acknowledge they want to proceed - **Check the box** "*I acknowledge this sale exceed the patient's remaining allotment, and I elect to proceed with this sale"*
   NOTE: At this point, the DA can click **Cancel** and return to the Sale Details screen to make a correction in the purchase amount
3. If Log Sale is selected without checking the box to acknowledge the Allotment violation – DA or PO/BM cannot proceed to log the sale
4. To proceed with the sale – **Check box** to acknowledge the allotment violation sale
5. Click **Log Sale**



6. View Patient/Caregiver Remaining Allotment
   NOTE: Remaining Allotment will display 0 (zero), not a negative value in the weight fields



7. Violation will be marked with a ● in the PO/BM Sales History Tab
   NOTE: Pencil ✎ icon indicates editable transaction



Caregiver Card

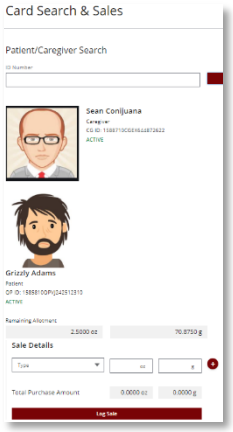
Access: PO/BM, FA (Dual) and DA with Card Search & Sales permission

A Caregiver Sales Transaction is processed in the same manner as for a patient. The same rules apply.

Caregiver and Adult Patient

1. Caregiver for an adult patient
2. View in Card Search & Sales Verification system
    a. Caregiver
    b. Minor Patient

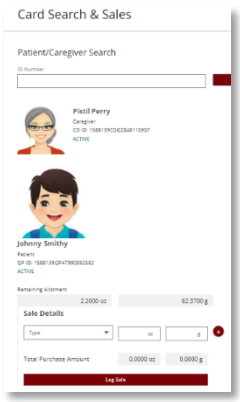




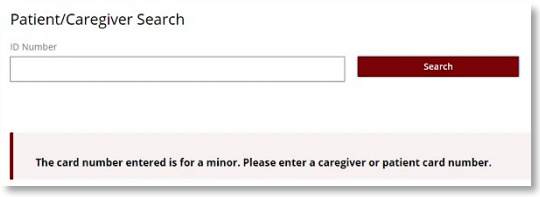
Caregiver and Minor Patient

3. Caregiver for a minor patient
4. View in Card Search & Sales Verification system
    a. Caregiver
    b. Minor Patient

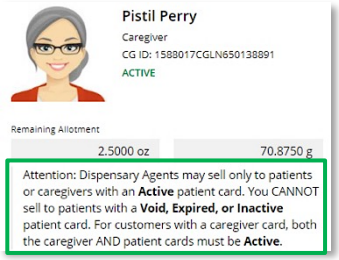




5. A caregiver must use their caregiver card to purchase for their **minor** patient, if the minor card number is entered, a reminder message will appear



6. A caregiver **will not** be able to purchase using an INACTIVE patient's card. A warning will appear, and the transaction will not be allowed
NOTE: Even though this caregiver card is ACTIVE, the patient's card is INACTIVE and will not display in the Card Search & Sales verification system



Individual Portal - Facility Agent: FA Overview

Access: Facility Agent

This section details the process from applying for and managing a Facility Agent (FA) card within the ADHS website. The first section will outline the FA application and continue to the Facility Agent portal functions.

Approved and active FA cards are required licenses for employees of Establishments and Duals. FA cards must be linked to an Establishment or Dual per statue for any legal protections as an establishment and/or dual employee to apply.

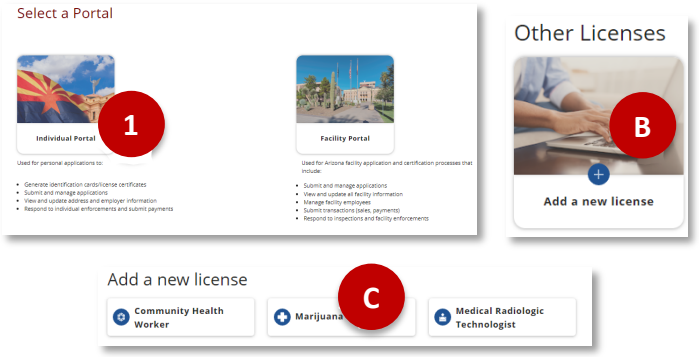
Application: Submit a Facility Agent Application & Renewal

Access: Account holders

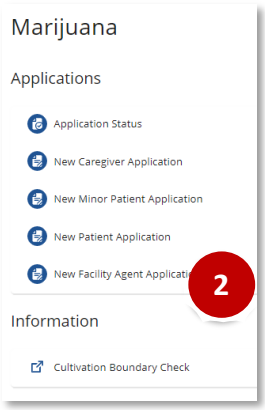
Overview: This application is used to apply for a Facility Agent card – which if approved, allows the user to work at duals/establishments. License does not guarantee employment.

Important: For additional application-related forms and documents, visit: https://azdhs.gov/licensing/marijuana/adult-use-marijuana/index.php#facility-agents

1. Upon logging into the Individual Licensing Portal,
    A. Select the **Add a new license** section
    B. Select the **Marijuana** tile under



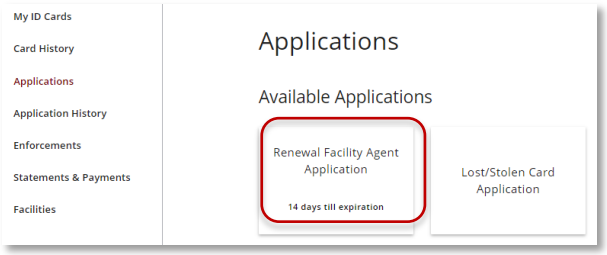
2. The Marijuana page will display available applications, select the **New Facility Agent Application** tile to open the application



For Renewals:

Renewal Applications will be available 90 days prior to the expiration date of the current license - Renewal notices will be sent via portal notifications and emails. When renewing prior to the expiration date, an Inactive Renewal License is created with the new expiration date and will be effective upon the expiration of the current license. AZ Care Check expiration dates will reflect as is, or if the licensee has renewed their license, the extended date for the renewal (Inactive Renewal) is displayed. The License number will not change during the renewal process.

The renewal application (when available) will be displayed on the Applications tab of the Facility Agent portal



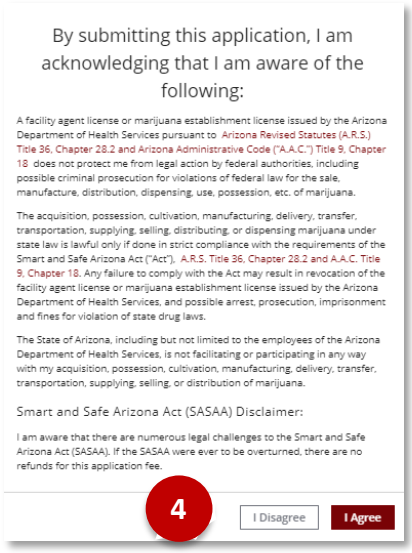
3. Agreement Page will be displayed – select **Agree and Proceed** button to proceed



4. Acknowledgement pop will display

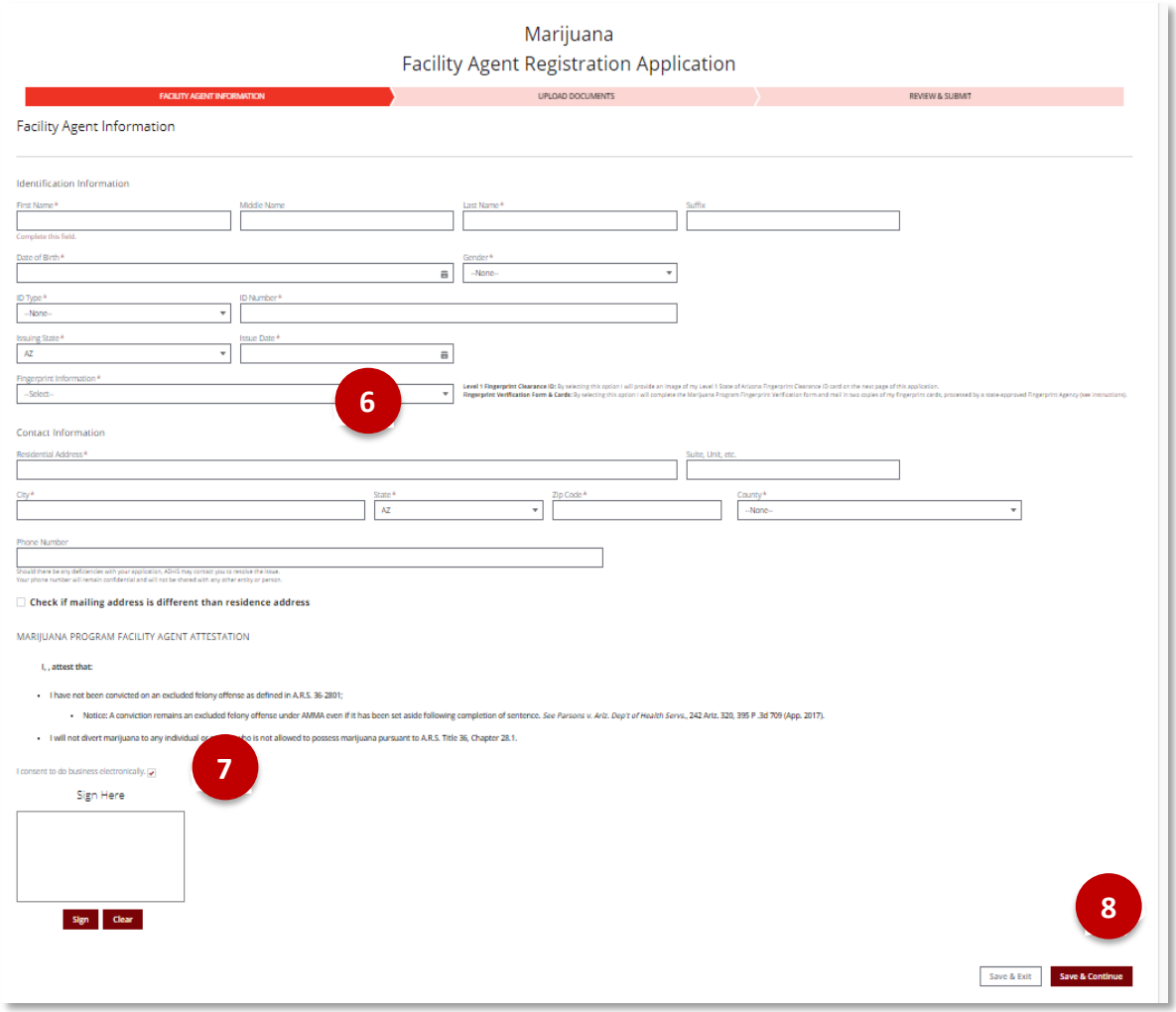
   I Disagree –return to Agreement Page

   I Agree – proceed to application



5. Enter all required Identification information
6. Fingerprint Information can be submitted in two types
    a. Level 1 Fingerprint Clearance ID -- an ID card issued by the Arizona Department of Public Safety. It is the size of a credit card and does not include inked fingerprints - more details
    b. Fingerprint Verification Forma & Card: this is the paper form and card that will need to be sent as hardcopy to ADHS
7. Select "**I consent to do business electronically**" checkbox to electronically sign

    NOTE: if not checked, a copy of the signed attestation must be uploaded
8. Click **Save & Continue** to proceed with the application process
    a. To exit the application process, click Save & Exit to save progress (which creates an application with a Not Submitted status) and return later to complete the application. The Not Submitted application link will be in the Application tab

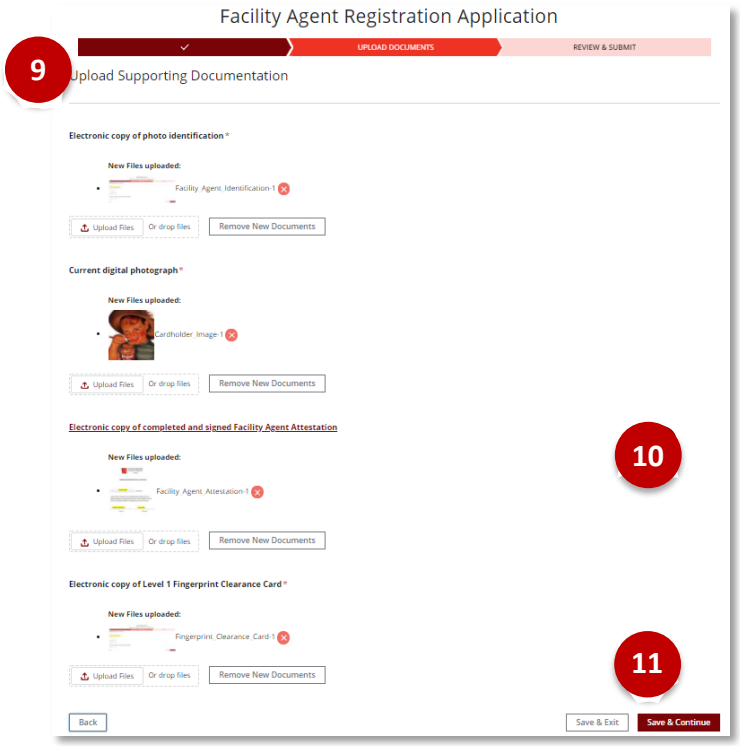


9. Upload the required supporting documents, indicated by *

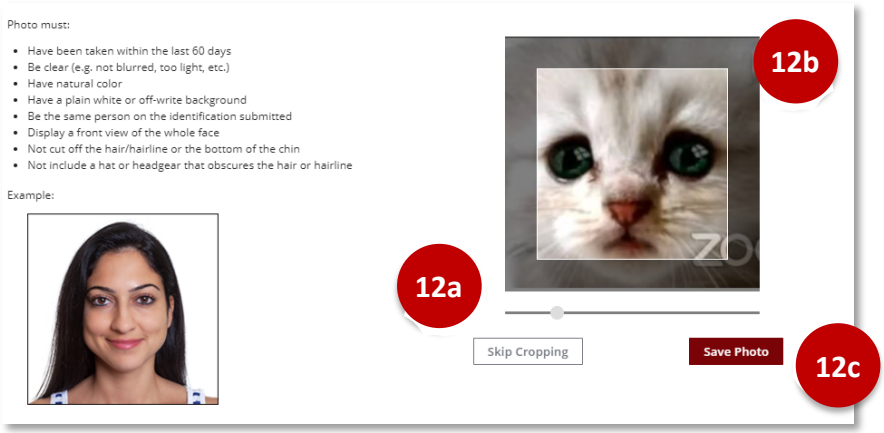
When dragging a file over, be sure to "drop" the file within the "dashed-outlined" box

10. Click **Done** after each upload

11. Click **Save & Continue** to proceed with the application process

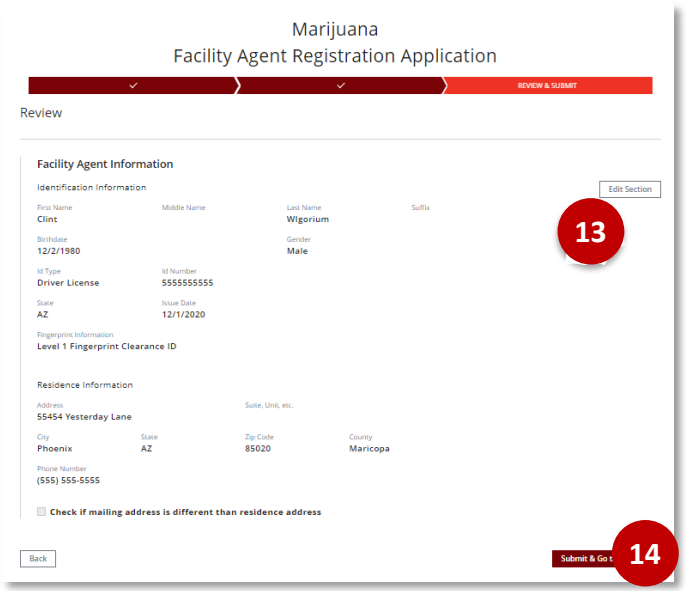


12. After uploading a current digital photo in an application on the upload page, the cropping pop-up will appear
    a. Use the slider to zoom in/out of the photo
    b. Use cursor to move the photo within the box
       NOTE: Be sure to adhere to the photo guides noted on the pop-up
    c. Select **Save Photo** to save the cropped image to the application or select **Skip Cropping** to save the uncropped version of the photo



13. Review application data click **Edit Section** to change any information in the section. Then, click **Save and Continue** until returning to the Review and Submit page

14. Click **Submit & Go to Payment** to proceed to payment process



Application: Responding to a RFI or NOD

Access: FA only

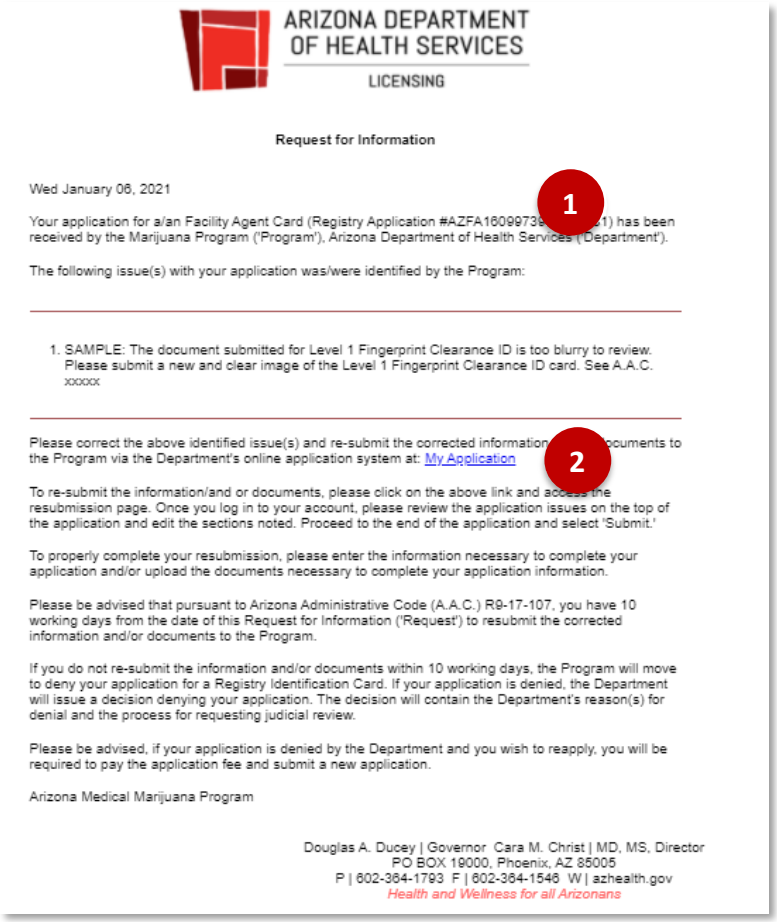
Overview: RFI (Request for Information) and NOD (Notice of Deficiency) are application issues identified by ADHS during the review process – these items are either missing information or errors in the application that will need to be corrected and resubmitted by the applicant

1. Go to email to view status or issue notification tile from the Facility Agent Home page
2. To address the issue – Click **My Application** link to View and correct application – Email Subject for Issues (NOD or RFI): ADHS Application Requires Resubmission

NOTE: Check SPAM / Junk folder for email notifications from ADHS

NOTE: This example is an RFI with the issue reason: **Level 1 Clearance ID is blurry**

- To correct this issue, a new ID card file needs to be uploaded and the application resubmitted.



ARIZONA DEPARTMENT OF HEALTH SERVICES
LICENSING

Request for Information

Wed January 06, 2021

1

Your application for a/an Facility Agent Card (Registry Application #AZFA1609973[illegible]1) has been received by the Marijuana Program ('Program'), Arizona Department of Health Services ('Department').

The following issue(s) with your application was/were identified by the Program:

1. SAMPLE: The document submitted for Level 1 Fingerprint Clearance ID is too blurry to review. Please submit a new and clear image of the Level 1 Fingerprint Clearance ID card. See A.A.C. xxxxx

Please correct the above identified issue(s) and re-submit the corrected information and/or documents to the Program via the Department's online application system at: My Application

2

To re-submit the information/and or documents, please click on the above link and access the resubmission page. Once you log in to your account, please review the application issues on the top of the application and edit the sections noted. Proceed to the end of the application and select 'Submit.'

To properly complete your resubmission, please enter the information necessary to complete your application and/or upload the documents necessary to complete your application information.

Please be advised that pursuant to Arizona Administrative Code (A.A.C.) R9-17-107, you have 10 working days from the date of this Request for Information ('Request') to resubmit the corrected information and/or documents to the Program.

If you do not re-submit the information and/or documents within 10 working days, the Program will move to deny your application for a Registry Identification Card. If your application is denied, the Department will issue a decision denying your application. The decision will contain the Department's reason(s) for denial and the process for requesting judicial review.

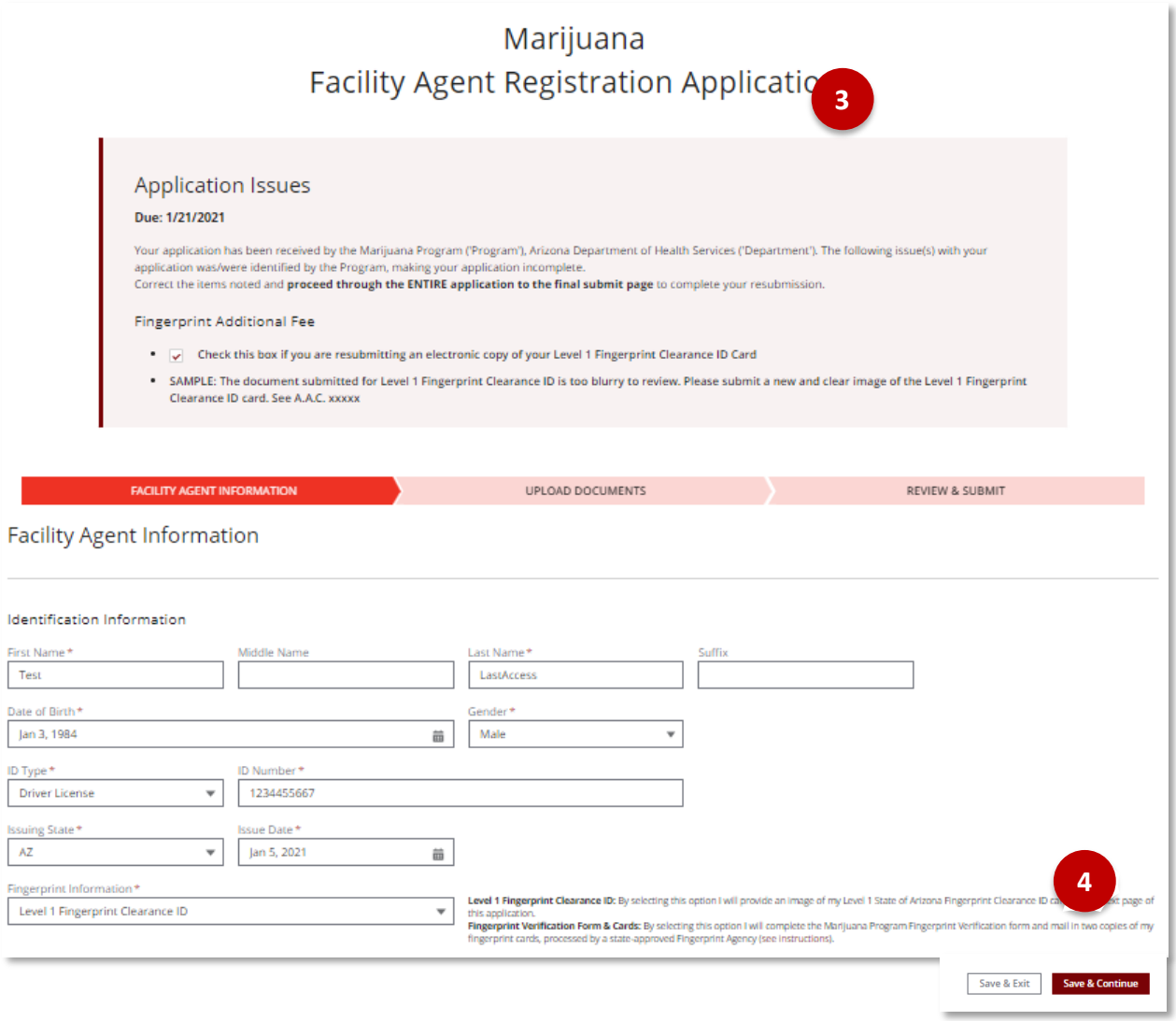
Please be advised, if your application is denied by the Department and you wish to reapply, you will be required to pay the application fee and submit a new application.

Arizona Medical Marijuana Program

Douglas A. Ducey | Governor Cara M. Christ | MD, MS, Director
PO BOX 19000, Phoenix, AZ 85005
P | 602-364-1793 F | 602-364-1546 W | azhealth.gov
Health and Wellness for all Arizonans

3. View Application Issue description

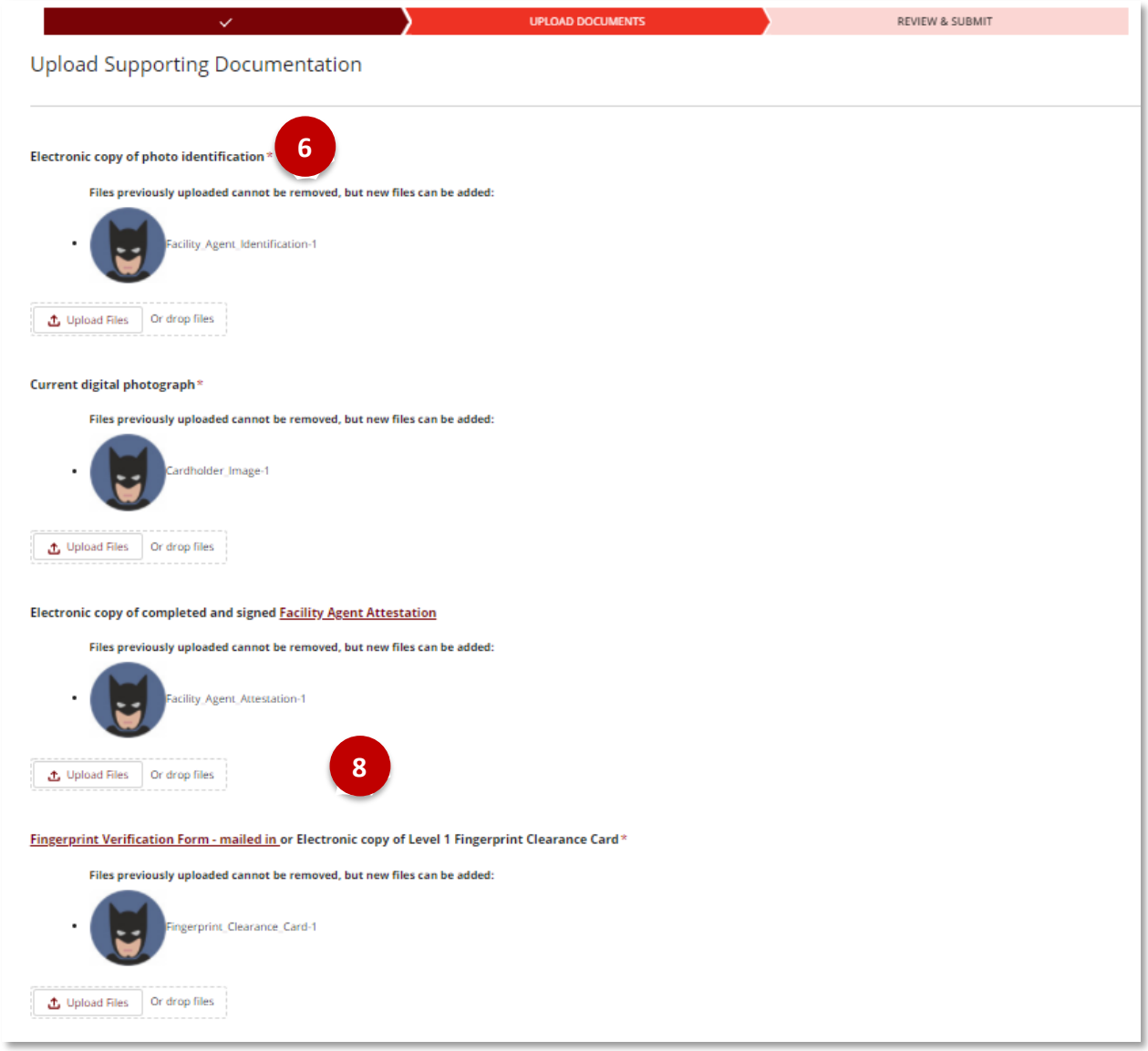
4. Application data will display, correct as necessary, and click **Save & Continue** to continue processing application

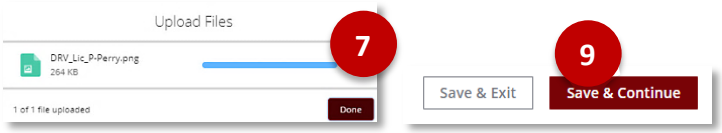


IMPORTANT: To resubmit the application, applicants must proceed to the final section of the application (this includes payment, when applicable) The application will NOT be considered resubmitted if applicants exit prior to proceeding through the ENITRE application to the final submit page

5. The message reminder to Upload Supporting Documentation * indicates required files – the application displays the original files with system-assigned file names, original files cannot be deleted, additional files may be added to correct issues if necessary
6. Click Upload Files to attach the additional and correct Clearance ID (or drop files to “Drag and drop” the new file)
7. Click Done to accept the file

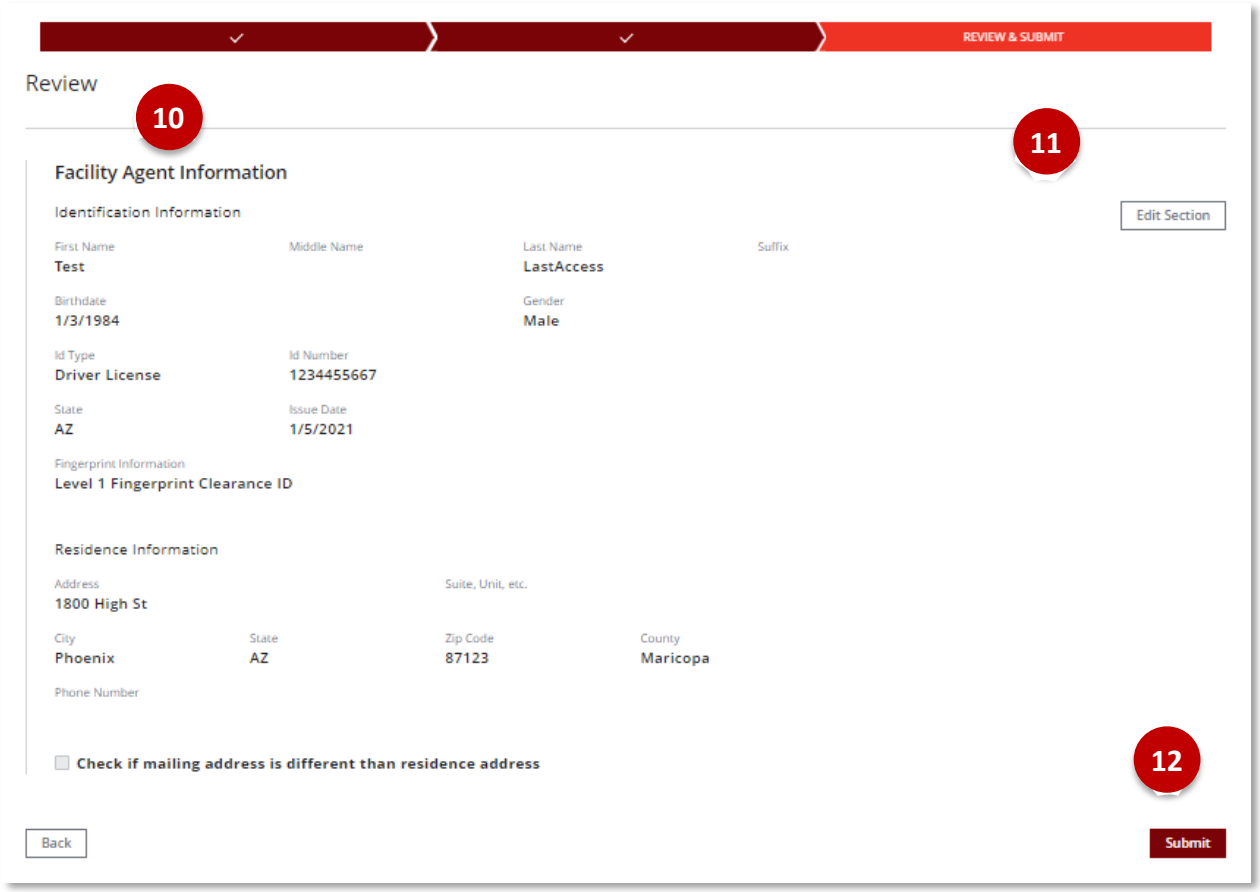
8. View the correct file was uploaded and now attached to the application
9. Click **Save & Continue**





10. Review application data
11. To edit information in application, click **Edit Section** OR click **Back** to return to previous page
12. Click **Submit** to send corrected application back to ADHS for processing

a. If additional payment is required, the **Submit & Go To Payment** button will display and when clicked will take applicant to the payment portal. Upon successful payment – the application will be resubmitted

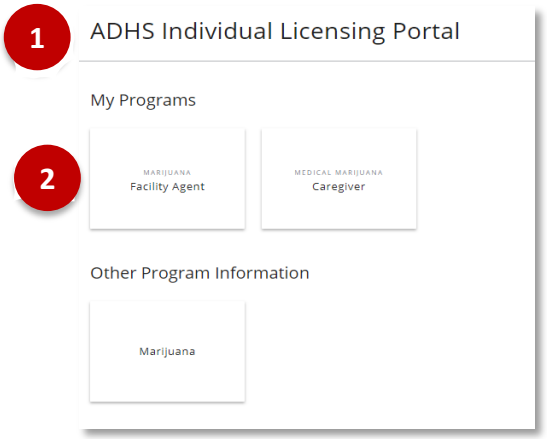


Application: Approval of New FA Application

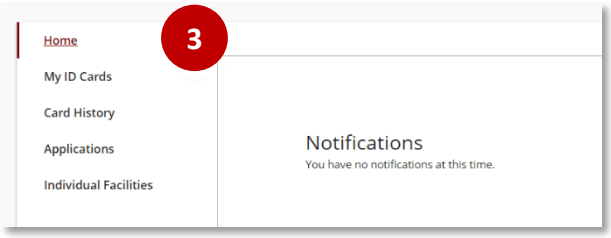
Access: PO/BM and FA only

Overview: Upon approval of the Facility Agent Application, users will be granted access to additional Facility Agent functionality from the portal

1. From the Individual Licensing Portal On the main Program Page, a new tile **Facility Agent** is now available
2. Select the tile to open the Facility Agent portal



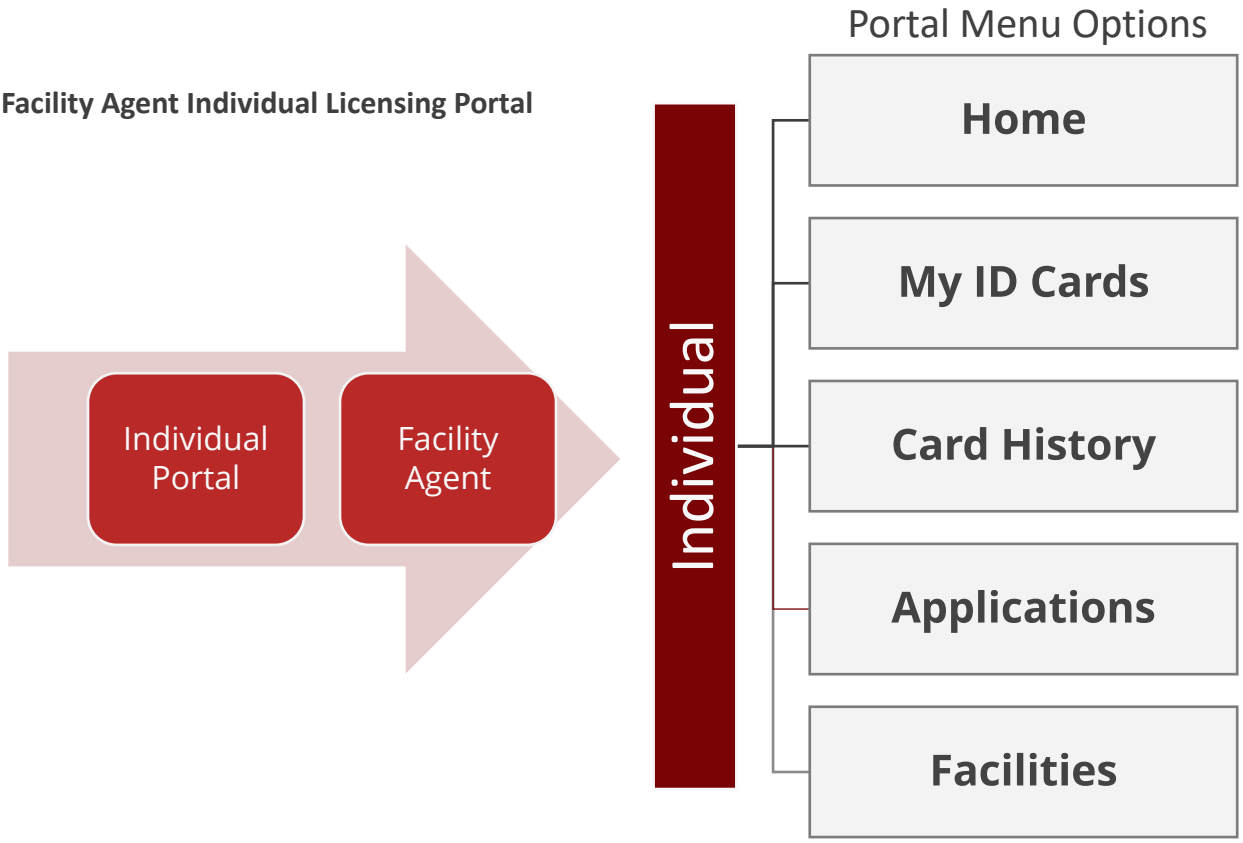
3. Access to the Facility Agent portal is now available – refer to **Individual Portal - Facility Agent: Portal Overview** section for details*



Individual Licensing Portal - Facility Agent: Portal Overview

Access: Facility Agent

Overview: With an approved Facility Agent card, the Facility Agent has access to the Facility Agent portal and various functions related to the digital card, applications, and managing links to facilities



- **Home:** Notifications and Message ADHS
- **My ID Cards:** View your Facility Agent Card
- **Card History:** View and search card history
- **Applications:** View and Submit card change applications, report lost/stolen cards, check application status, and view approved application history
- **Facilities:** View list of linked facilities, manage linked facilities

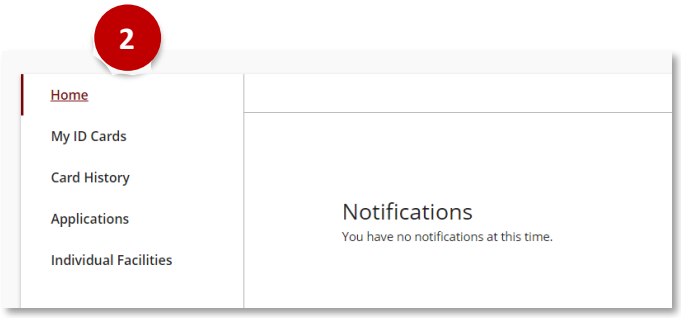
Individual Portal - Facility Agent: Accessing Portal

Access: Facility Agent

Overview: Accessing the FA portal upon receiving an approved FA license via the Individual Licensing Portal

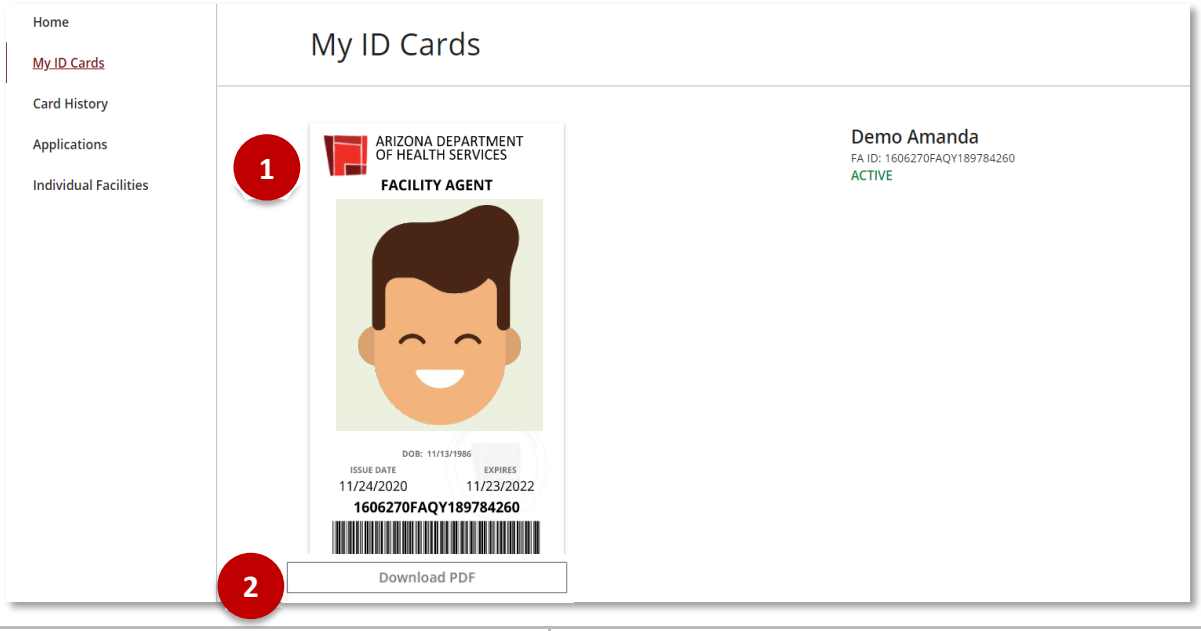
Only a Facility Agent with an approved Facility Agent Card may gain access to the Facility Agent portal, every Facility Agent user must have a:

- Unique email address (same login details should be used if agent has had a Dispensary/Lab Agent or qualified patient/caregiver account previously)
- Portal Account
- Valid Facility Agent card

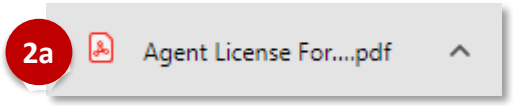
1. Upon login to Facilities Licensing portal, select Facility **Agent** tile	
2. View **Facility Agent Portal Menu bar**: a. Home b. My ID Cards c. Card History d. Applications e. Facilities	

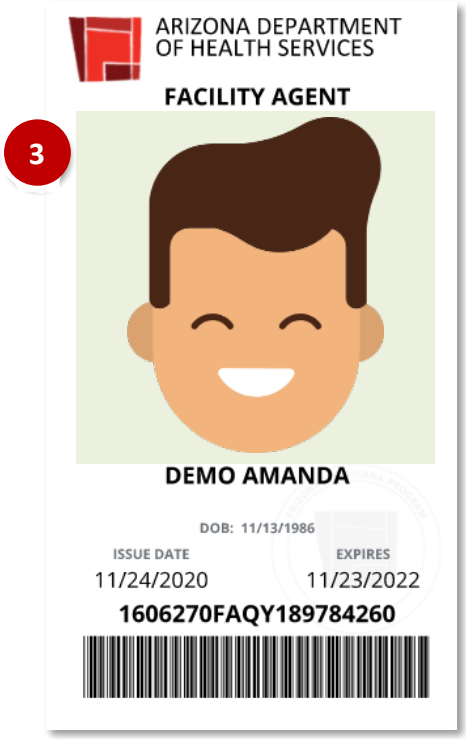
Individual Portal - Facility Agent: My ID Cards

Access: Facility Agent



1. **Facility Agent Card:** View
2. Click the **Download PDF** button
    a. Click PDF file link for a printable version



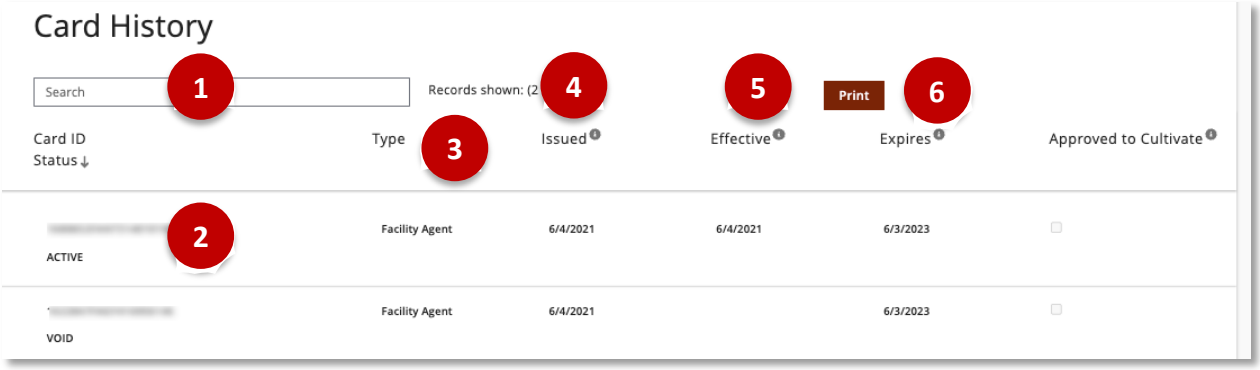


3. **"Facility Agent"** is the only role displayed on facility agent cards

Individual Portal - Facility Agent: Card History

Access: Facility Agent

1. **Search bar:** Enter search criteria to filter card list
2. **Card ID:** Numeric ID for the card
3. **Type:** Card type detail
4. **Issued Date**: Date that the card was issued. This is typically the date that the application for the card was approved and can be different than the Effective Date of the card.
5. **Effective Date** The first day that the card is active
6. **Expires Date** The last day the card is active
7. **Status:** Current status of card (Active, Expired, etc.)



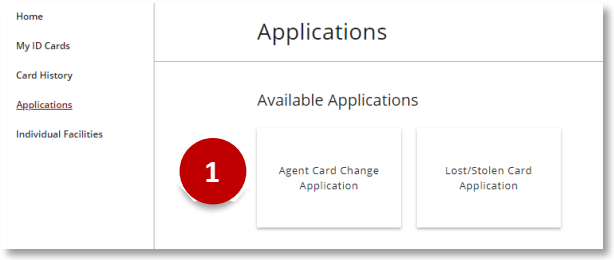
Individual Portal – Facility Agent: Card Change Application

Access: Facility Agent

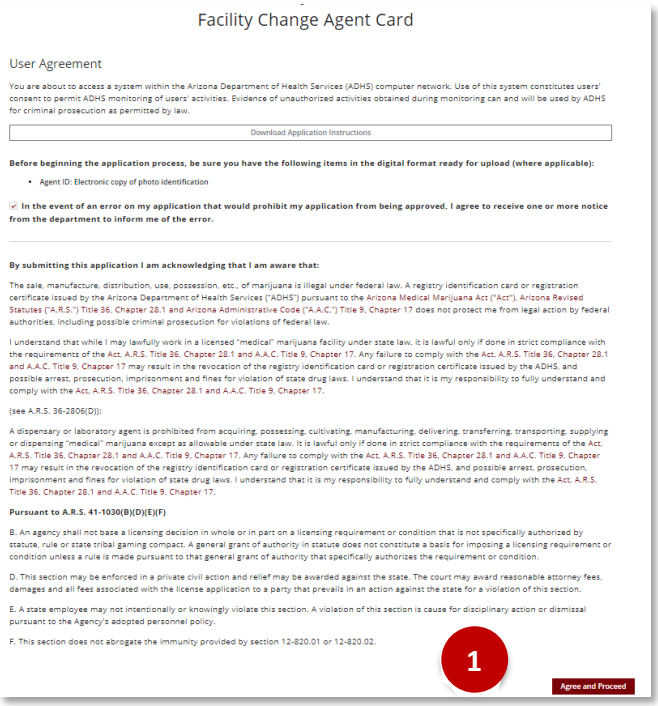
Overview: Card change applications are used to update details associated with the agent's card

1. From the facility agent portal main page, select the Application tab – then select the **Agent Card Change Application** tile

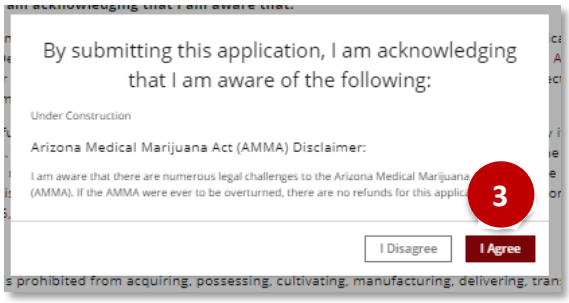
   NOTE: If your name and/or contact information has changed, you must submit a Change Application at least 30-days prior to submitting a Renewal Application to ensure your renewal is processed in a timely manner



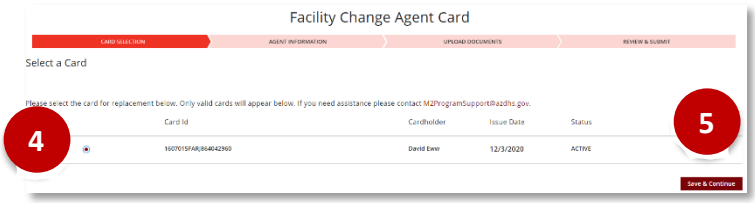
2. Read and acknowledge user agreement, click **Agree and Proceed**



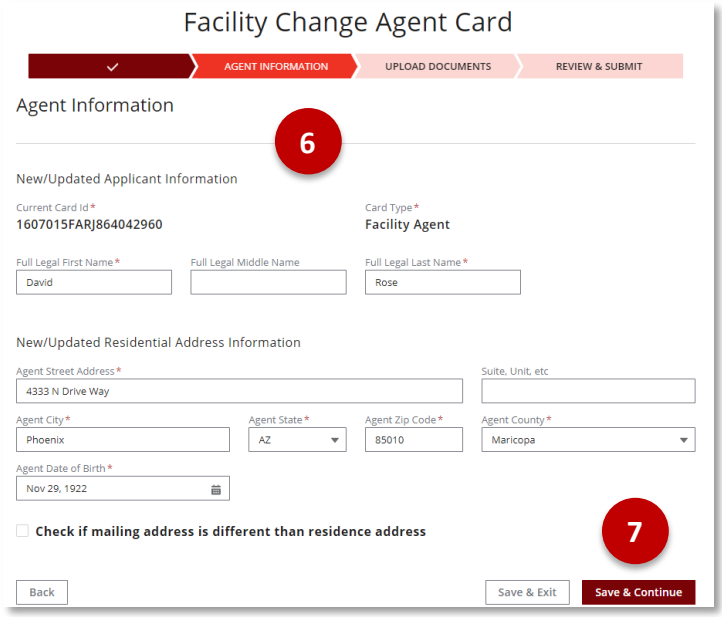
3. Read and click **I Agree** to acknowledge you accept the disclaimer message



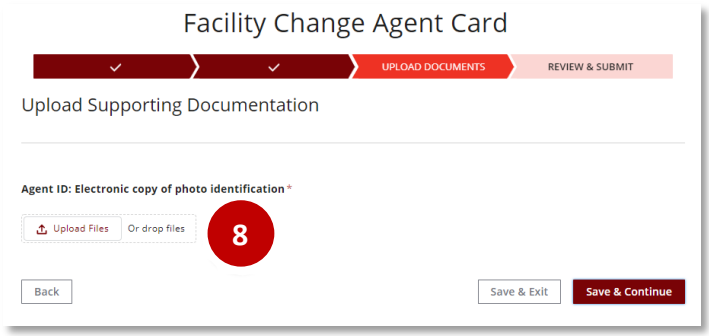
4. Click the radio button to select the appropriate card to process
5. Select **Save & Continue**



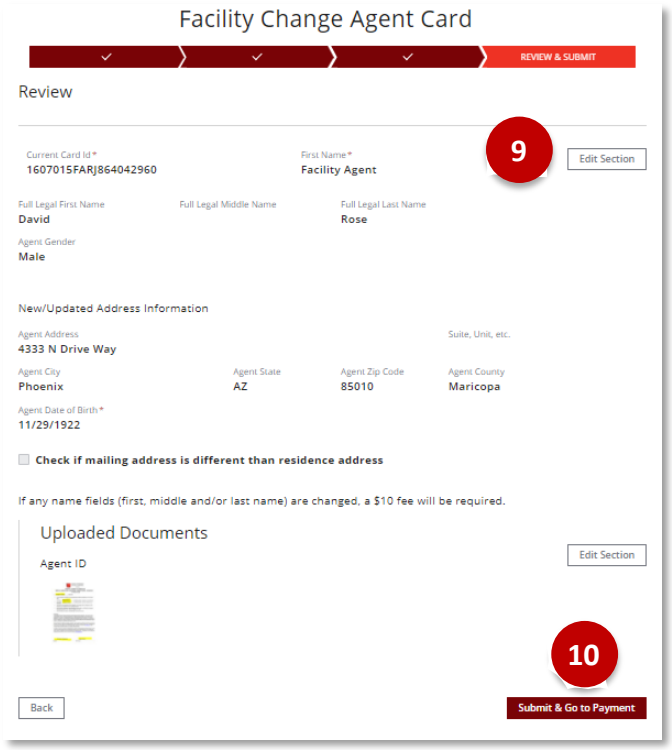
6. Edit card details as needed, click desired fields to edit information
7. Click **Save & Continue** to proceed



8. Upload copy of photo ID representing the change being made – select **Save & Continue** to proceed



9. Review details on the Agent form – Select **Edit Section** or **Back** button to return to the form to make further edits
10. Select the **Submit & Go to Payment** to proceed with payment process

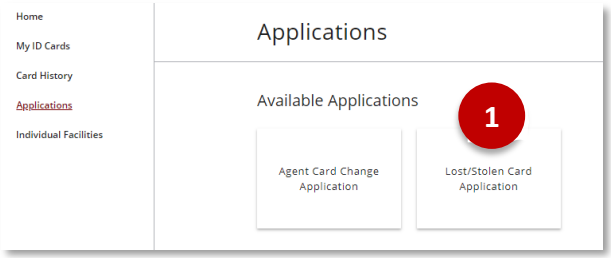


Individual Portal - Facility Agent: Lost / Stolen Card Application

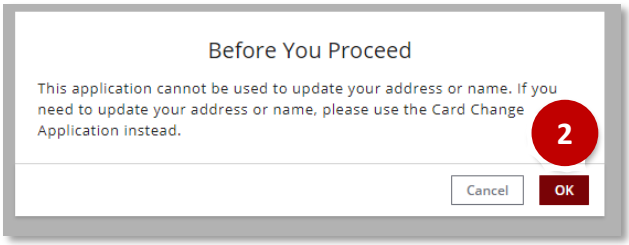
Access: Facility Agent

Overview: Agents submit this application to replace a lost or stolen card

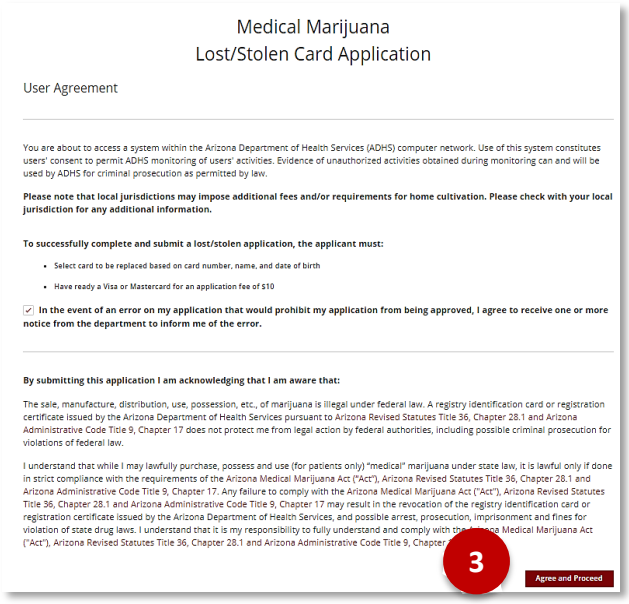
1. From the Facility Agent portal main page, select the **Application tab** – then select the **Lost/Stolen Card Application** tile



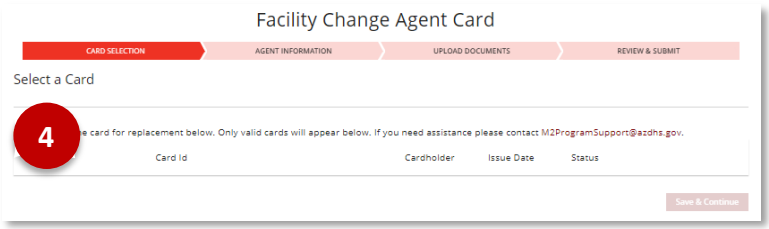
2. Read and click **OK** on the acknowledge you accept the notification
    - **Cancel** to return to the Applications tab



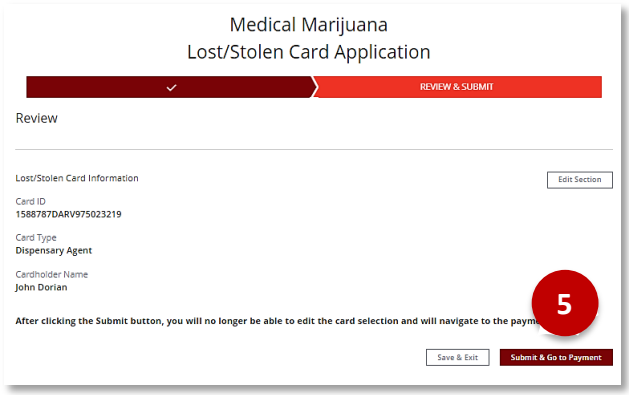
3. Read and acknowledge user agreement, click Agree and Proceed



4. Click the radio button to select the appropriate card to process as lost/stolen



5. Review Agent details and click **Submit & Go to Payment**
   - Procced with payment



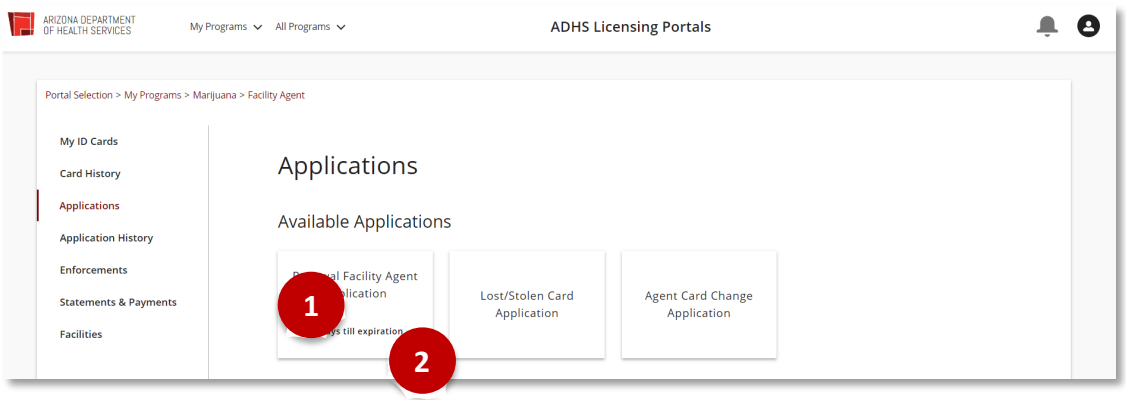
Individual Portal - Facility Agent: FA Card Renewal

Access: Facility Agent

Overview: Agents will have access to the FA card renewal application 90 days prior to the expiration date of the current card. Agents are able to submit the application 90 days prior to the expiration date and up until the expiration date

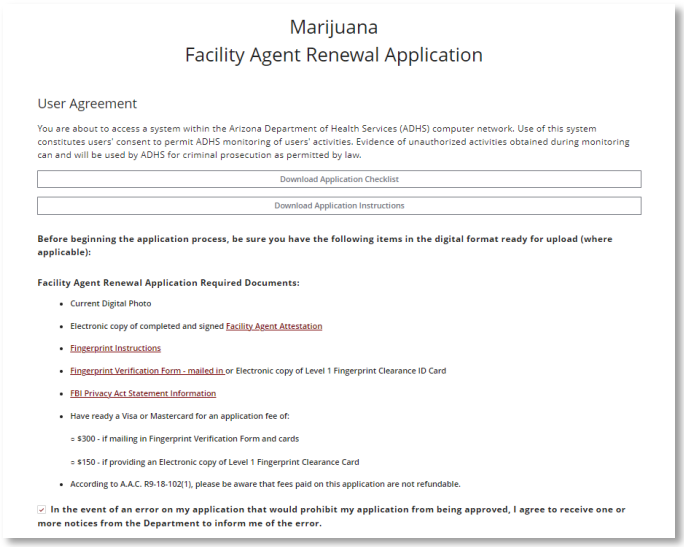
1. Within 90 days of the expiration of the Facility Agent card, the renewal tile will be made available in the portal – Agents will also receive email reminders to renew

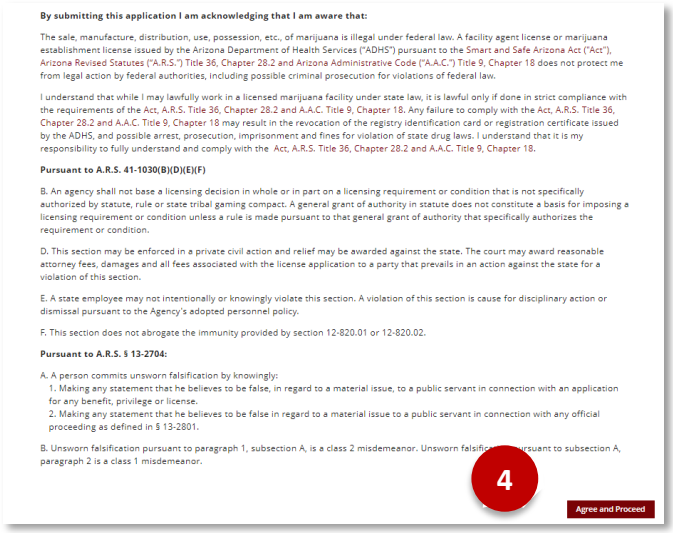
2. The renewal tile will also display days remaining until the expiration date



3. Agreement page will display – Review as needed

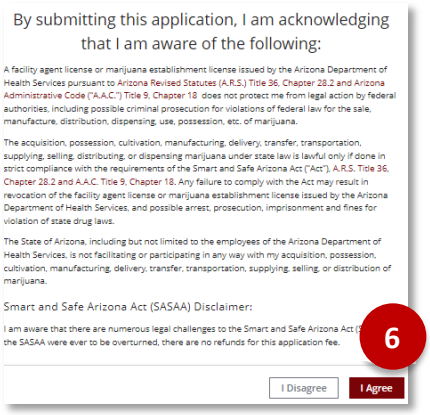
4. Select **Agree and Proceed** to continue



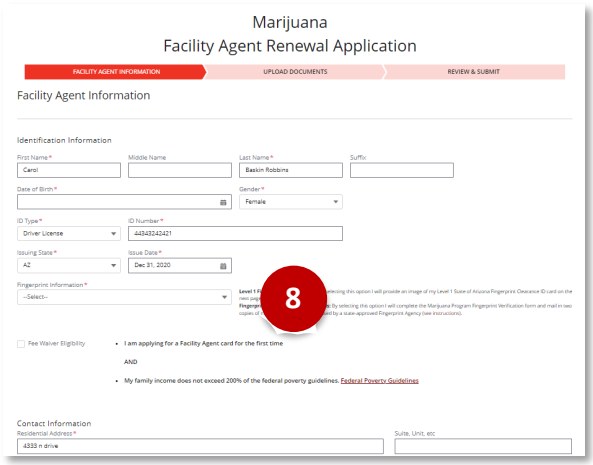


5. Review the acknowledgement pop-up

6. Select the **I Agree** button to proceed



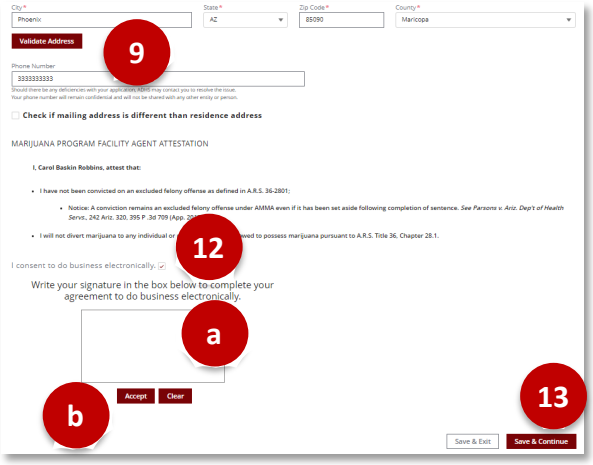
7. Facility Agent Information form will display with prepopulated fields based on the current agent card details – edit as needed



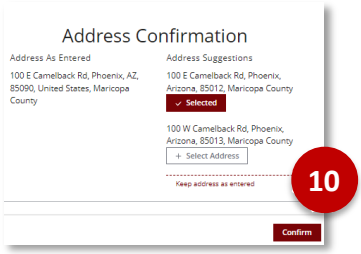
8. Select the Fingerprint Verification type:

   a) **Level 1 Fingerprint Clearance ID:** By selecting this option I will provide an image of my Level 1 State of Arizona Fingerprint Clearance ID card on the next page of this application.
   b) **Fingerprint Verification Form & Cards:** By selecting this option I will complete the Marijuana Program Fingerprint Verification form and mail in two copies of my fingerprint cards, processed by a state-approved Fingerprint Agency (see additional instructions)

9. Edit the address fields if needed, select **Validate Address**



10. Select **Confirm –** to proceed



11. Sign digitally –

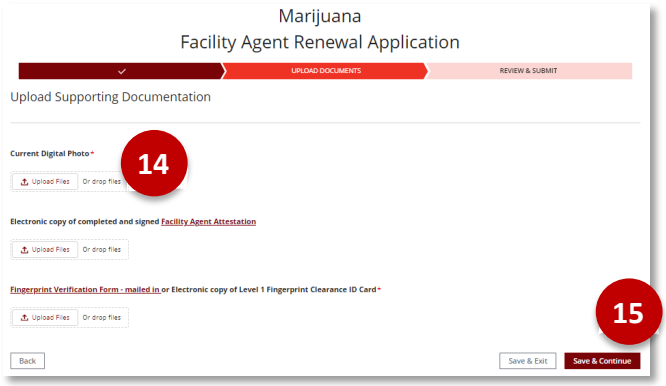
    a) Use the cursor to enter a signature
    b) Select the Accept button to save the signature

12. To submit a signed attestation form, deselect the **"I consent to do business electronically"** checkbox and upload the attestation

13. Select **Save & Continue** to proceed

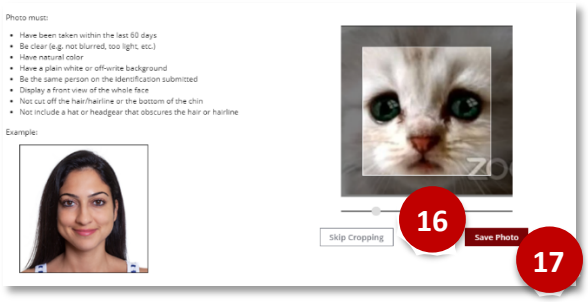
14. Upload required documents

15. Select **Save & Continue** to proceed



16. The Current Digital Photo upload component will prompt a photo cropping tool - crop as needed

17. Select **Save Photo** to confirm

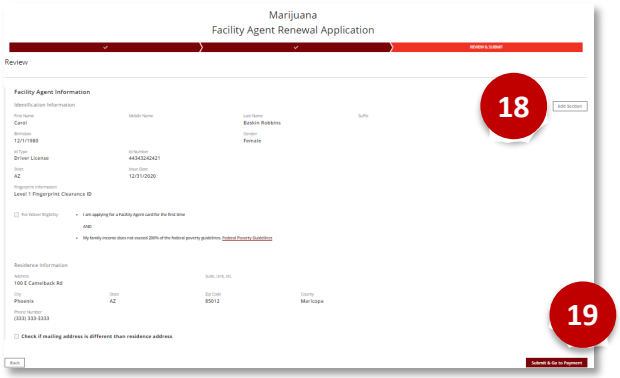


18. Review page will display

19. Select **Edit** to return to the section to correct the field(s) as needed

20. Selet **Submit & Go To Payment**

21. Proceed with payment process as previous outlined

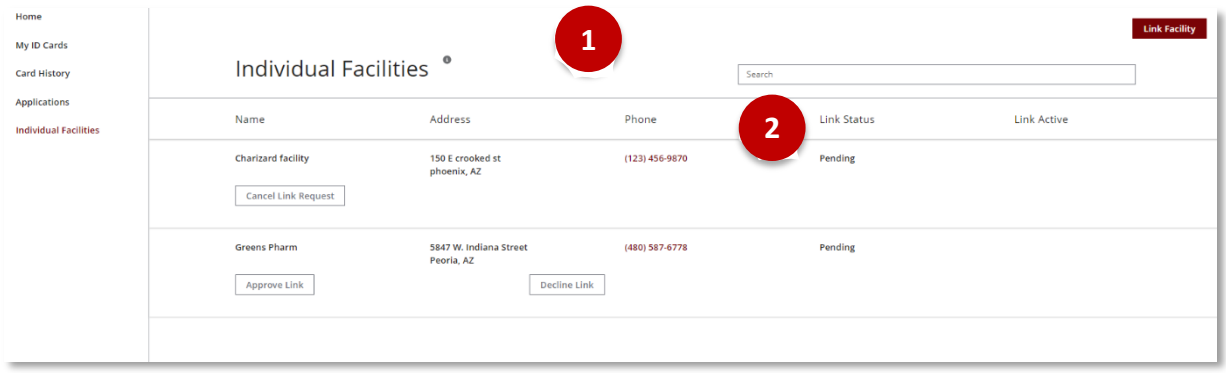


Individual Portal - Facility Agent: Facility Tab

Access: Facility Agent

Overview: Agents will have access to the Facilities tab used for managing link request and facilities the agent is associated

1. Default view will show column details for facilities with a link request - as shown below
2. Additional link functions will display based on the link status - details will be outlined later in this section



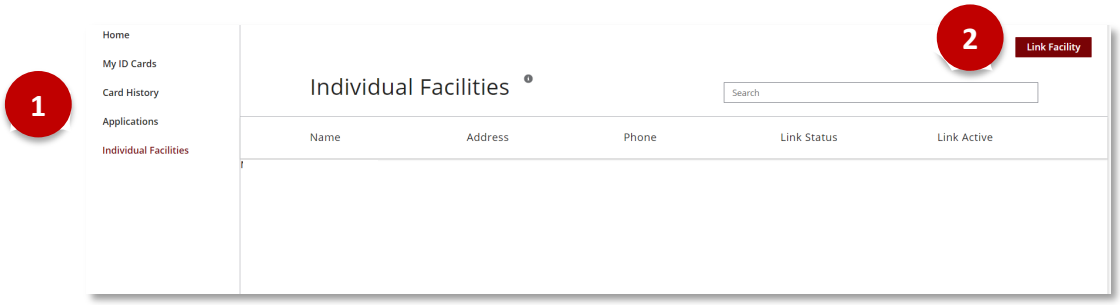
Individual Portal - Facility Agent: Initiate Link to Facility

Access: Facility Agent

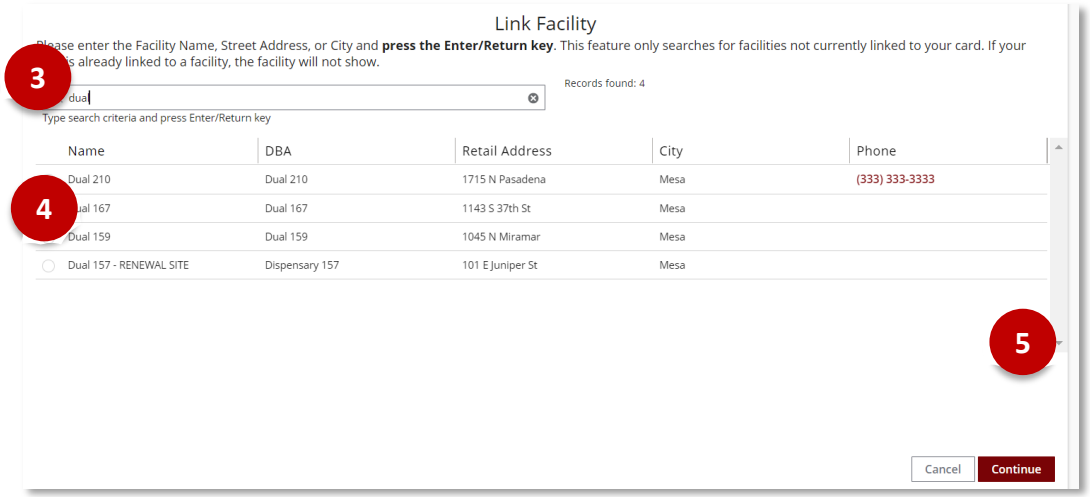
Overview: Agents can initiate a link request to a facility from the FA portal

Facility agents with an approved facility agent card may initiate a link request to a dual or establishment facility. The facility will be required to approve the link before it is active

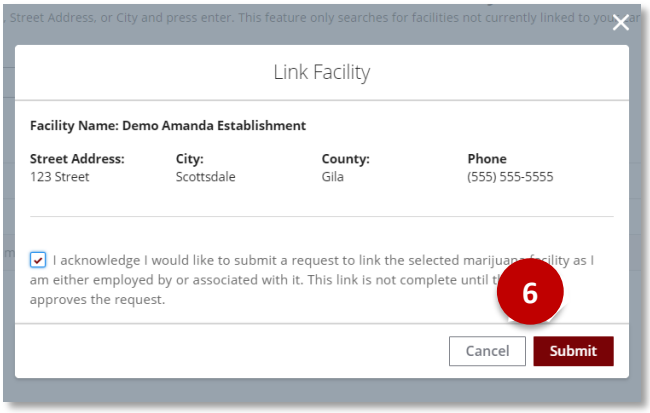
1. Upon entering the facility agent portal select the **Facilities** tab - page will display facilities with link statuses
2. To begin a link request, select the **Link Facility** button on the top-right of the screen



3. Page will display **Link Facility Search** form – enter facility details in search bar (facility name or address) – DBA column displays the facility's *doing business as* name
4. Select the radio button next to the desired facility (only one can be selected)
5. Select the **Continue** button to submit request - **Cancel** to exit out



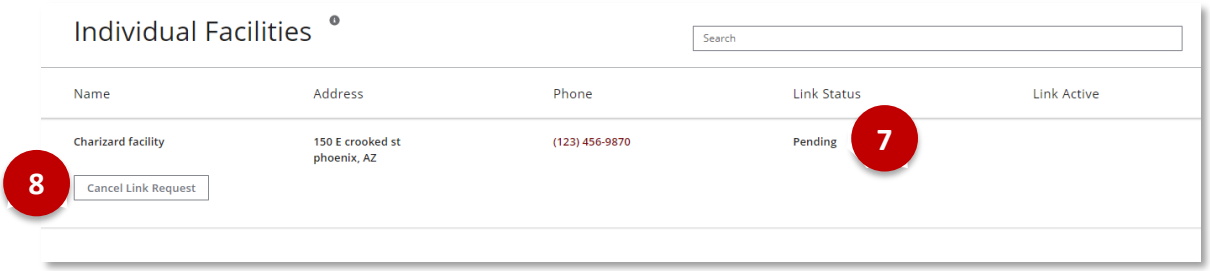
6. Pop-up will display facility details and acknowledgement details
    - Select **Submit** to confirm link request
    - Click **Cancel** to return to the individual tab screen



7. After a link request has been submitted, the individual facilities page will display the facility details for the request with link status as “pending”

    Important: the facility PO/BM will receive a notification of the request. The request will be pending until the facility approves the request – once approved by the facility, the link will show as Approved and Active. If the request is declined, the link will not be approved or active.

8. Cancel the request by selecting the **Cancel Link Request** button below the facility name – only available if the associated facility has not acted on the link request

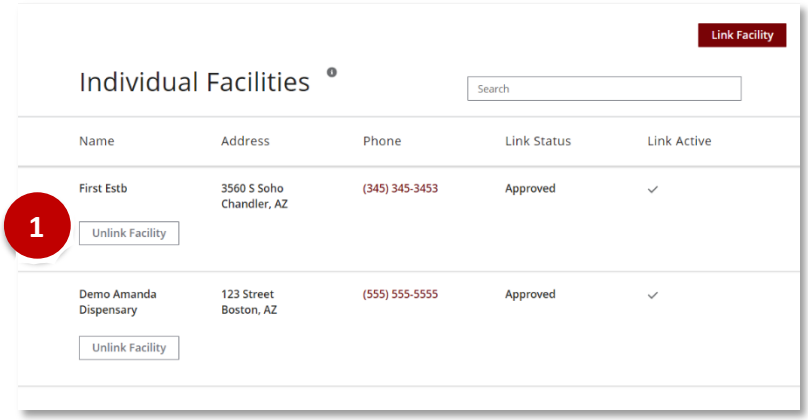


Individual Portal - Facility Agent: Unlink from a Facility

Access: Facility Agent

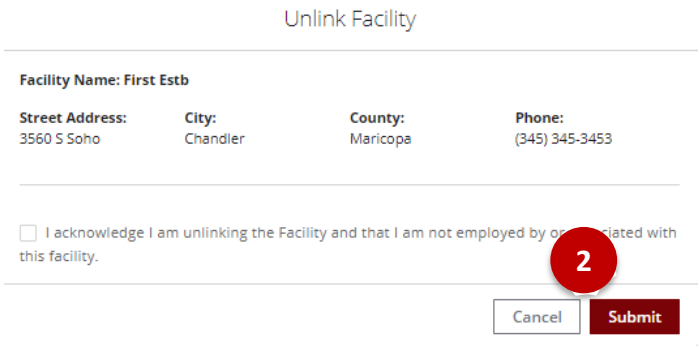
Overview: Facility Agents can unlink from facilities via the Individual Facilities tab

1. From the **Facilities** tab, the list displays all currently linked facilities – including pending links – select the **Unlink Facility** button below the desired facility name to unlink



2. Confirm the facility details pop-up and acknowledgement - click **Submit** to continue

   Click **Cancel** to return to the Individual tab screen



IMPORTANT: After an unlink request has been submitted, the Individual Facilities page will no longer display the facility as an active link

Individual Portal - Facility Agent: Approve/Decline a Link Request

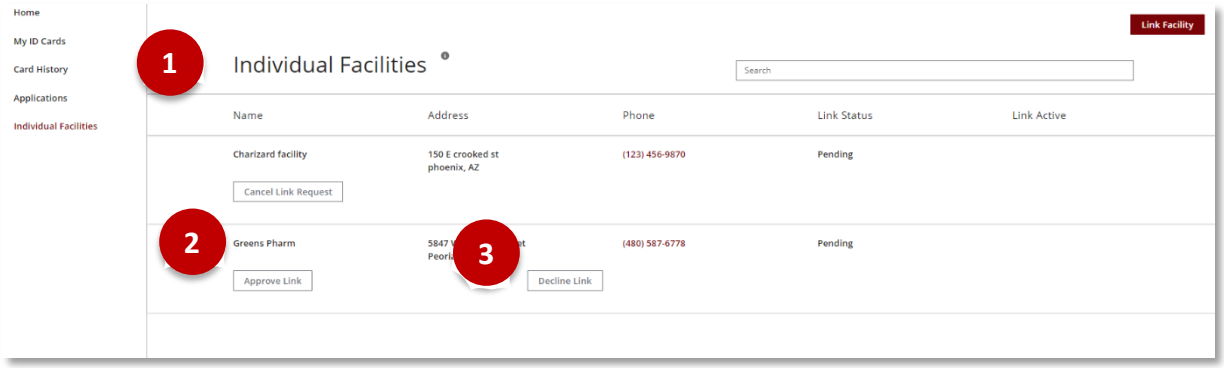
Access: Facility Agent

Overview: Facility Agents can approve or decline link requests submitted by a facility

1. After a link request has been submitted by a facility, the Individual Facilities page will display the facility details for the request

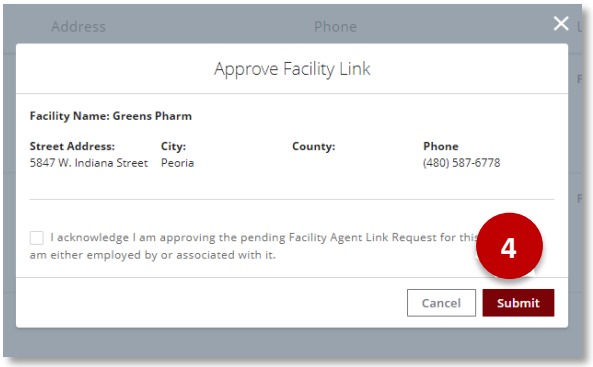
   NOTE: An email will be sent to the Facility Agent email address when a facility requests to link

2. Approve the request by selecting the **Approve Link** button
3. Decline the request by selecting the **Decline Link** button



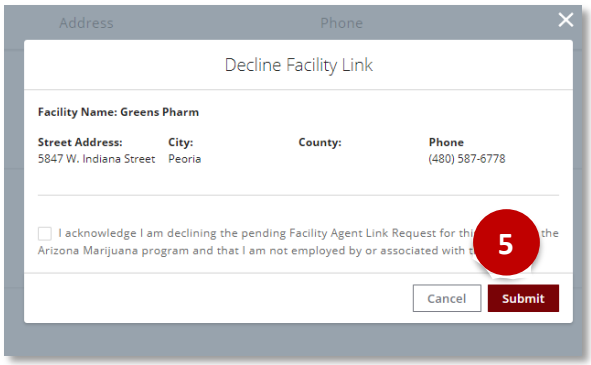
4. If **Approve Link** button was selected, the Approve Facility confirmation will display – select the checkbox and **Submit** to confirm

   NOTE: Approved Links will associate the FA with the marijuana establishment, which is important for the employee protections to be activated



5. If **Decline Link** button was selected, the Decline Facility confirmation will display – select the checkbox and **Submit** to confirm

   NOTE: Declined Links will not associate FA to facility

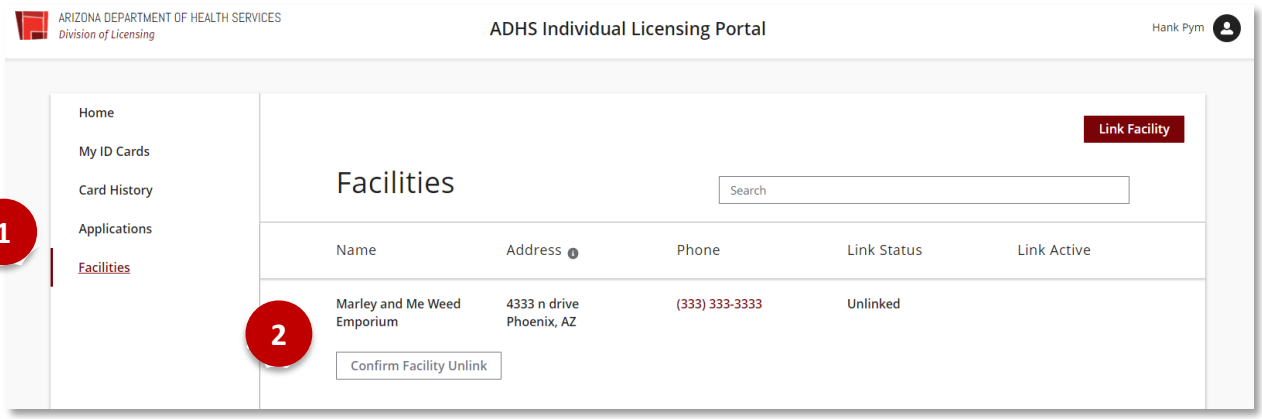


Individual Portal - Facility Agent: Confirm Facility Unlink

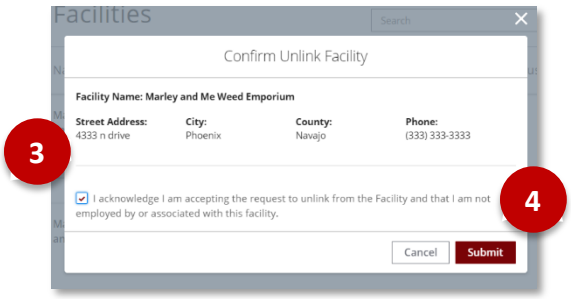
Access: Facility Agent

Overview: Facility Agents are required by the program to confirm an unlink by a facility within the facility agent portal

1. After an unlink was initiated by the facility, FA is able to go to the Facilities tab
2. Select the **Confirm Facility Unlink**



3. Confirm the pop-up and select the acknowledgement checkbox
4. Select **Submit** to complete the process or **Cancel** to exit

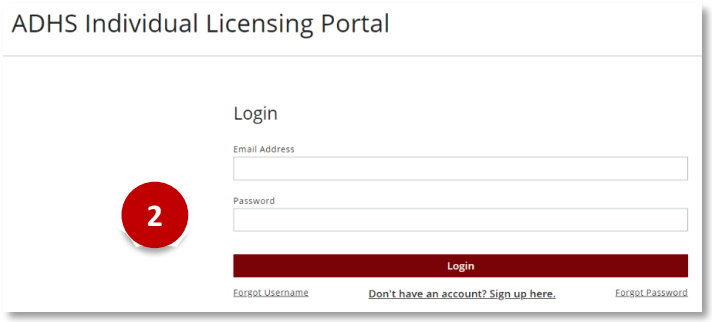


Enforcements: Individual Licensing Portal

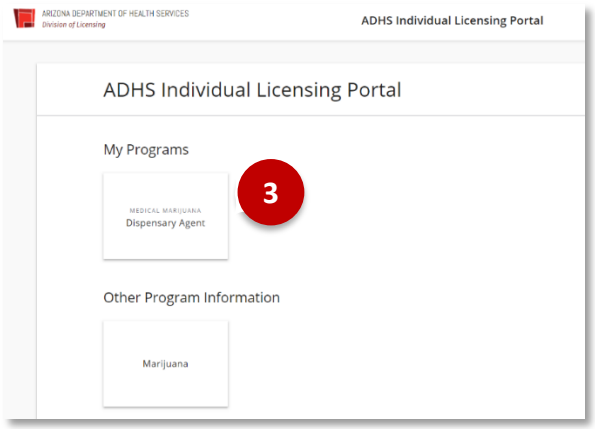
Agents are responsible for any enforcement action taken against them as an Individual. Use the Individual Licensing Portal to access enforcement information.

NOTE: Facility Agents will see all enforcements related to them as an Individual in their Individual Licensing Portal. Dispensary Agents will only see enforcements that are NOT related to an application in their Individual Licensing Portal (PO/BMs for the related applications will be able to view specific application enforcements).

1. An enforcement has been issued against an Agent – an appropriate Action Letter will be sent stating that there is an enforcement against the cardholder
2. Once the Action Letter is sent, the enforcement will appear in the Individual Licensing Portal where the Agent may take action if desired - Log in to the **Individual Licensing Portal** using the same credentials as the Facility Licensing Portal

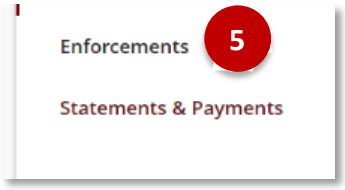


3. Click on the applicable **Dispensary Agent tile** to access the portal

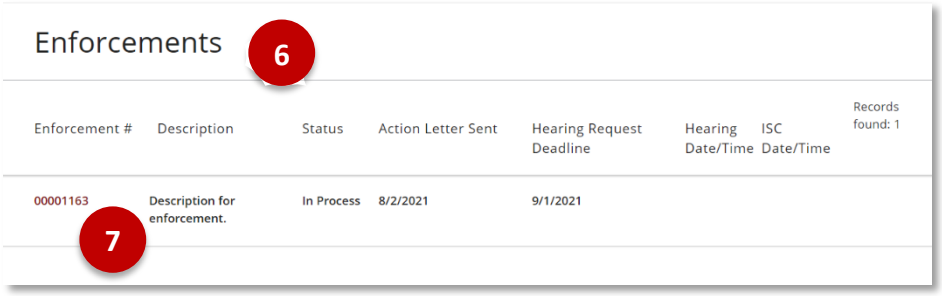


4. The appropriate tabs will appear based on agent card type

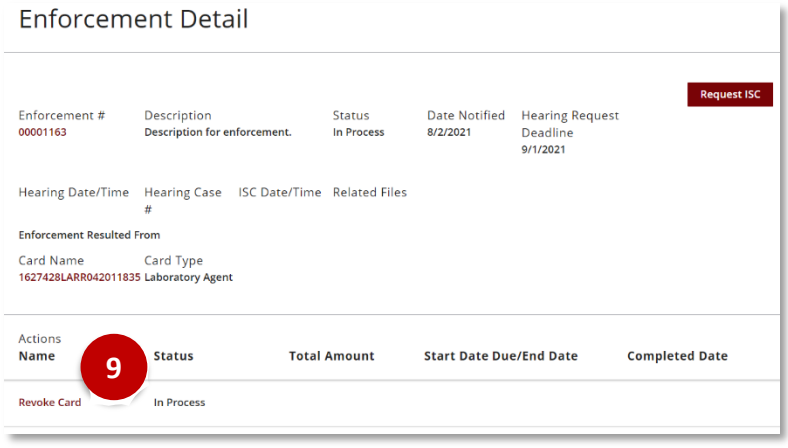
5. To view an enforcement, click on the **Enforcements** tab



6. The **Enforcements page** will appear with all relevant enforcement information
7. Click on the **Enforcement # link** to open the enforcement details

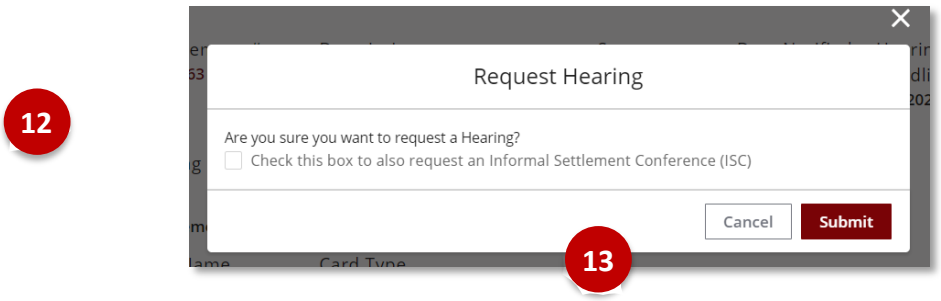


8. The **Enforcement Detail page** appears with all information related to the enforcement
9. Related Action items will be listed in the Actions section below, click the **Action Name link** to view additional details on an Action Detail page
10. The Hearing Request Deadline will show that the Individual will have 30 calendar days to request a hearing, the **Request Hearing** button will appear for that time
11. Click **Request Hearing** button to Request Hearing or Informal Settlement Conference

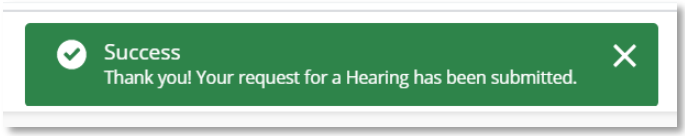


12. On the Request Hearing pop-out, check the **box to also request an Informal Settlement Conference (ISC)**

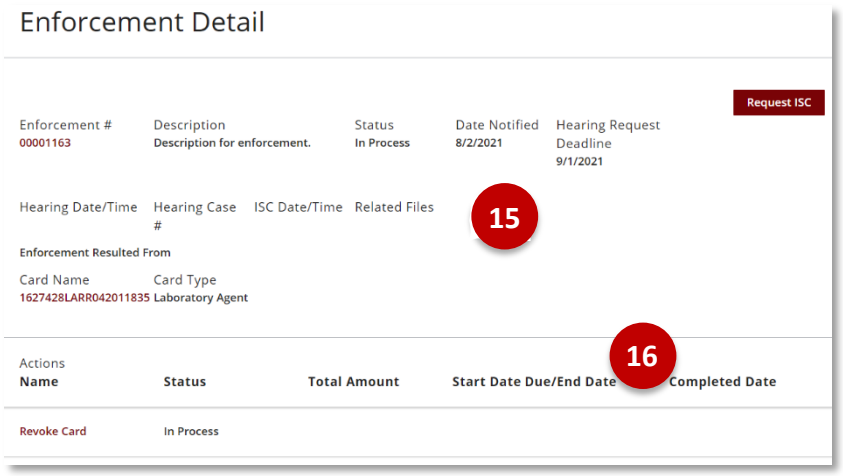
13. Click **Submit**



14. The **Success message** will appear once you have successfully submitted the request for Hearing and/or ISC



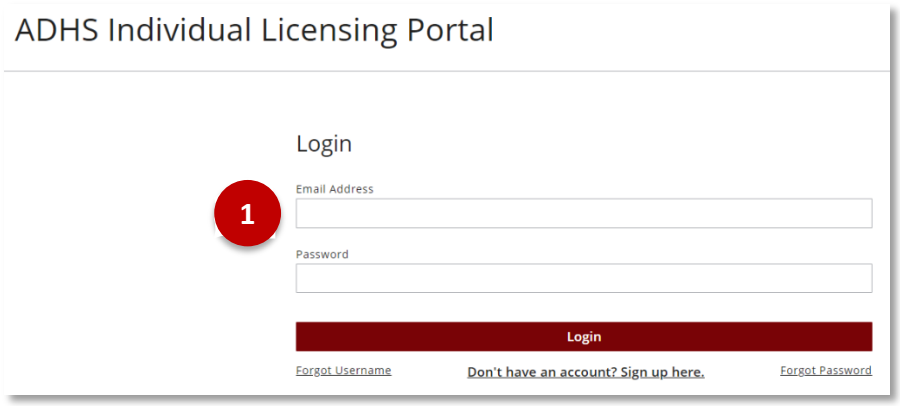
15. Once ADHS reviews the request and has scheduled a Hearing Date/Time, the **Hearing Date/Time section** will be filled in
16. All additional enforcement information following the hearing can be viewed on the **Enforcement Detail page** – email notifications will be sent throughout the enforcement process for reminders and status changes (i.e. something is past due, something is due soon, or the status of the case has changed)



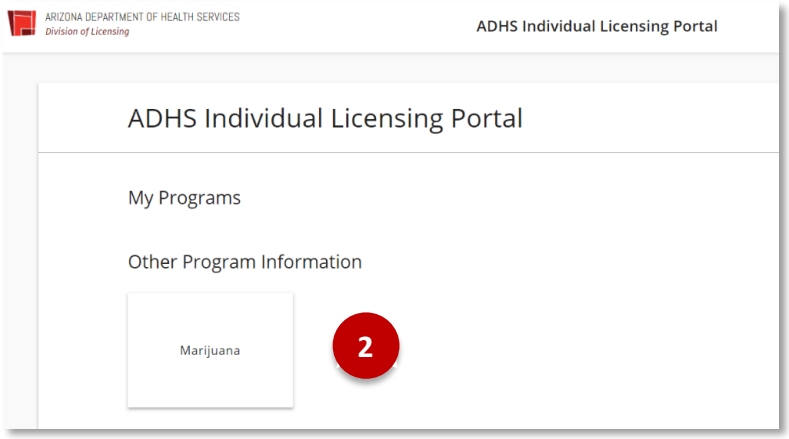
Enforcements: New User without Prior Portal Access

For new users who have not previously had access to the Facility or Individual Licensing portal as an Agent, the appropriate Agent tile will not appear until an approved card has been issued. If an enforcement is issued for an individual in this circumstance, portal access will be needed to view the enforcement.

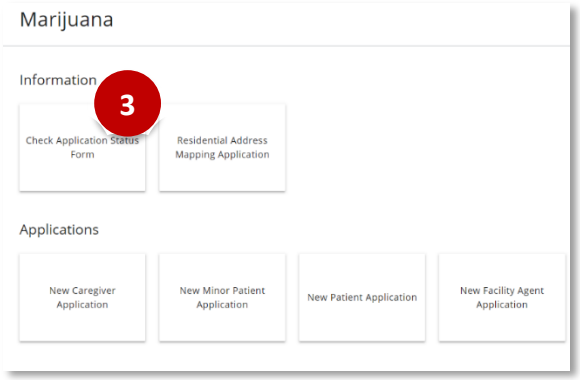
1. An **email** is sent to the Individual stating that an enforcement has been issued and action has been taken – to view additional information, **login to the Individual Licensing Portal** using the credentials used to create the account



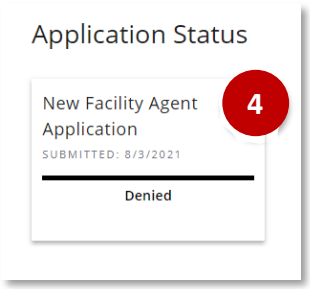
2. Click on the **Marijuana** tile in the **Other Program Information** section



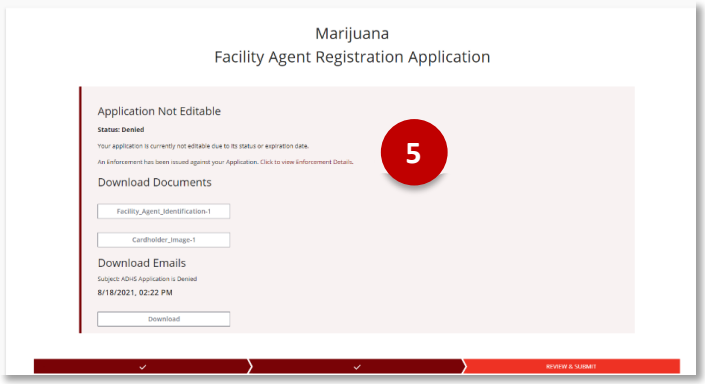
3. Click on the **Check Application Status Form** tile



4. Click on the tile related to the **application** with the enforcement



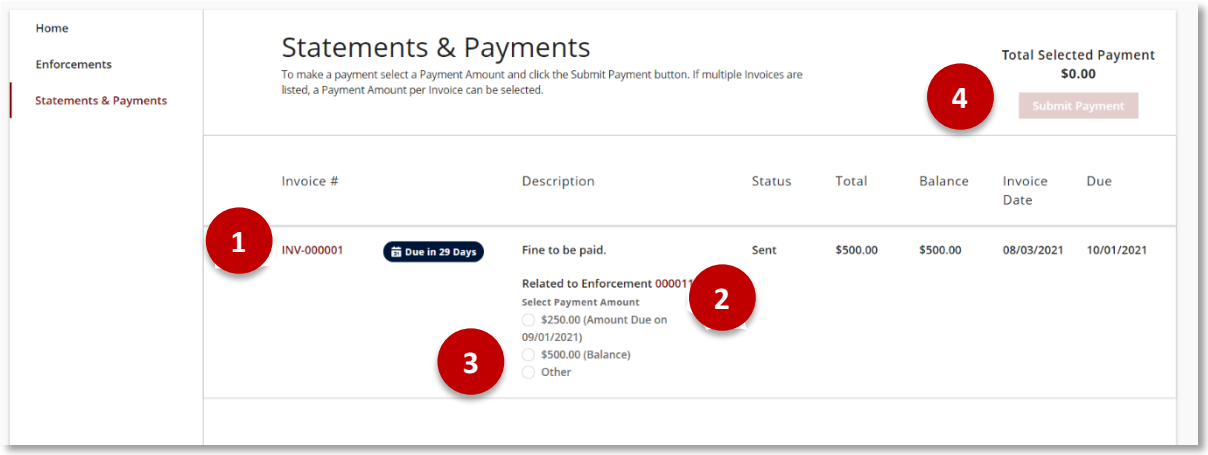
5. The **application will appear** – a link will be listed on the application that reads: An Enforcement has been issued against your Application. Click to view Enforcement Details.



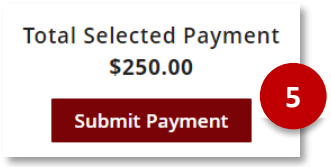
Statements & Payments

If an enforcement results in a monetary fine, the information can be found in the Statements & Payments tab.

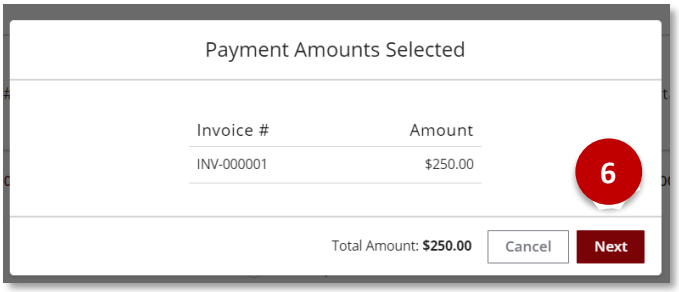
1. To view an Invoice, select the **Statements & Payments** tab
2. View the **invoice details** listed
3. Select a **radio button** for the appropriate amount to make a payment
4. Once the radio button has been selected, the **Submit Payment** button will turn from grey to red with the **Total Selected Payment listed**



5. Click **Submit Payment** to submit the payment

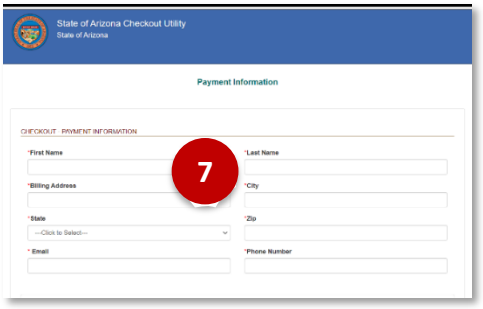


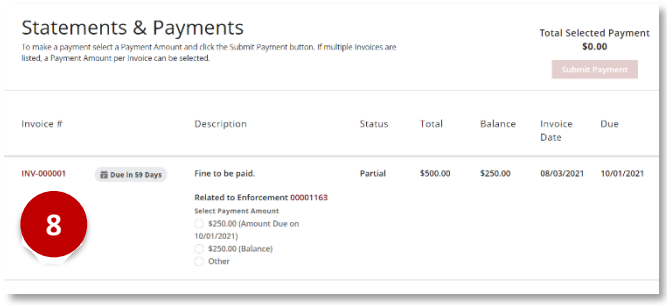
6. The Payment Amounts Selected pop-out appears, click **Next**



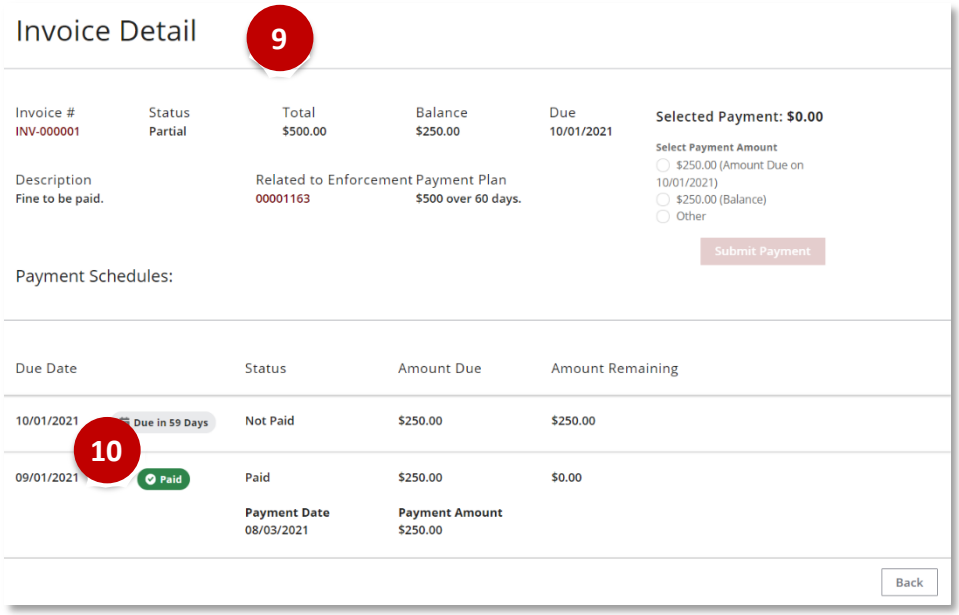
7. Proceed through the **payment checkout**

8. Return to the **Statements & Payments** tab – click the **Invoice # link** to see additional information related to the invoice





9. The **Invoice Detail page** will show the status of each payment associated with the payment plan
10. Repeat payments as necessary – the invoice will show as **Paid** once complete



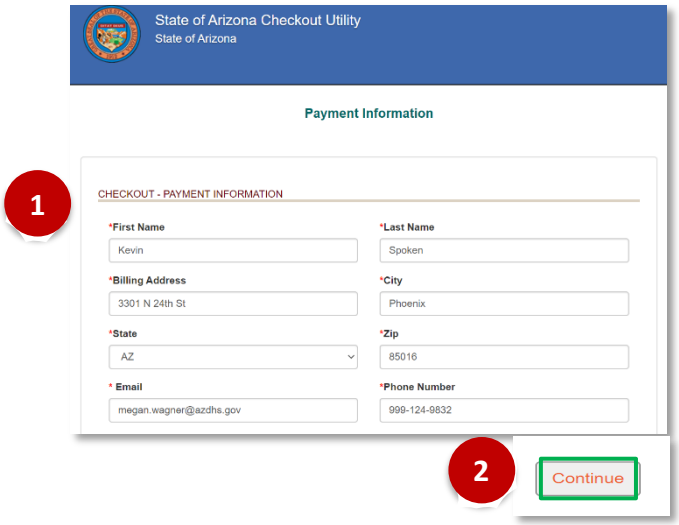
MISCELLANEOUS FUNCTIONS AND FEATURES

Submit Online Payment

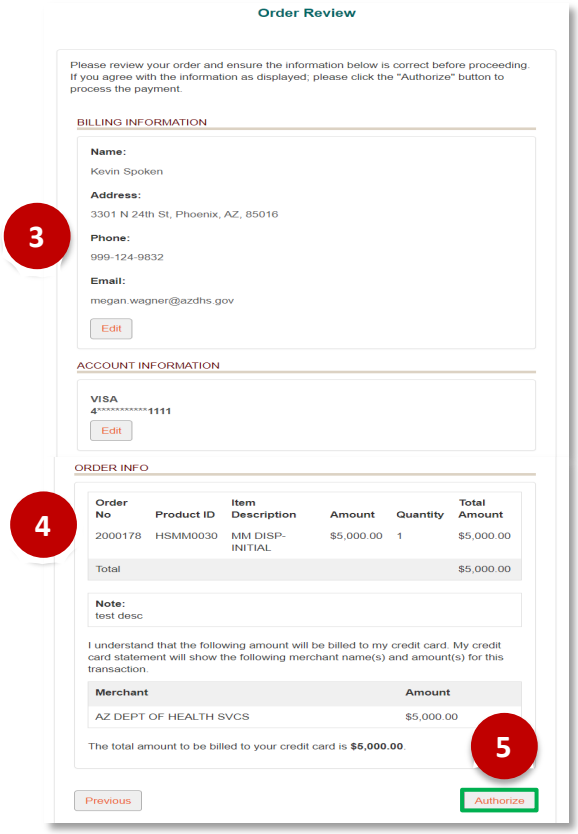
Access: PO/BM and FA only

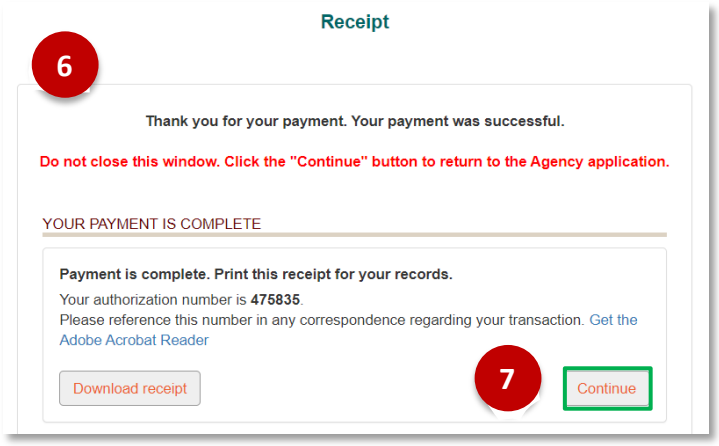
Overview: Online payment is processed through ADHS for all applications requiring a fee

1. Once on checkout screen, enter payment information
2. Click **Continue** to proceed



3. Review billing and order information
4. View payment amount
5. Click **Authorize** to submit payment and application
6. View Receipt – print receipt to keep for records
7. Click **Continue** to return to portal





APPENDIX

Glossary

- ADHS Facility Licensing Portal: An online portal to manage Arizona's Medical Marijuana program.

- ADHS Licensing Portal User**:** Anyone who has created an account in the online ADHS Licensing Management system with a unique email address. Any principal officer, board member, employee or volunteer of a dispensary can log into the ADHS Licensing Management system. Anyone can register to become a user by providing a verifiable email address. All users have access to their profile and can change their username and password. Access to a portal account does not automatically provide access to the Facility Licensing functions. A dispensary PO/BM must apply for and ADHS approve a dispensary agent application.

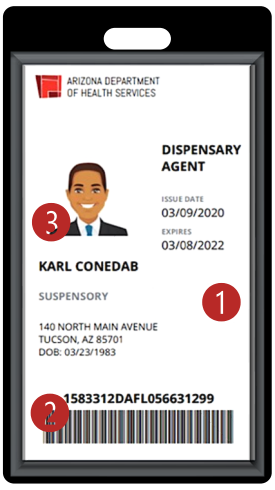
- Card: A Medical Marijuana Registry Identification Card is issued to all approved patients, caregivers, laboratory agents (laboratory owners, employees, volunteers), and dispensary agents (board members, principal officers, employees, volunteers).
  - Possession of a medical marijuana registry identification card is a legal requirement to handle, transport, cultivate, sell, test, or consume medical marijuana.
  - Each card will share similar format but may differ based upon the privileges it conveys.
  - As of December 1, 2019, cardholders were issued an electronic Medical Marijuana Registry Identification Card. All applications after December 1, 2019 (including a Lost/Stolen application, Change application, or Renewal application), are issued as an electronic card and remaining physical cards are valid until they expire or are replaced. A printed format of the electronic card is acceptable. See *Figure 1 –Cards*

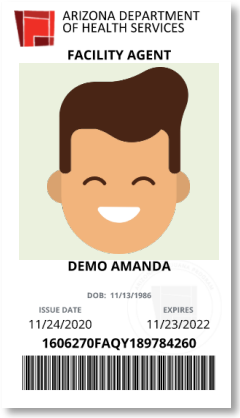
- Card Search & Sales product definitions:
  - Medical Marijuana: The dried flower of the marijuana plant
  - Edibles: Any items sold for consumption that contain medical marijuana. The amount of medical marijuana in the edible must be labeled and entered in the system during a transaction
  - Non-edibles: Any non-edible items, such as concentrates, sold that contain medical marijuana. The amount of medical marijuana in the non-edible must be labeled and entered in the system during a transaction

Medical Marijuana Registry Identification Card Sample for a DA

1. Security Stamp
2. Scannable Barcode to input cardholder ID number into Card Search & Sales Verification System
3. For a period, some photos may appear distorted; however, they are still valid

New Electronic card (both electronic and printed versions are acceptable)





- Designated Caregiver: A person who (as defined in: A.R.S § 36-2801(5)(a-e)):
  - Is at least twenty-one years of age
  - Has agreed to assist with a patient's medical use of marijuana
  - Has not been convicted of an excluded felony offense
  - Assists not more than five qualifying patients with the medical use of marijuana
  - May receive reimbursement for actual costs incurred in assisting a registered qualifying patient's medical use of marijuana if the registered designated caregiver is connected to the registered qualifying patient through the department's registration process. The designated caregiver may not be paid any fee or compensation for service as a caregiver. Payment for costs under this subdivision does not constitute an offense under title 13, chapter 34 or under title 36, chapter 27, article 4
    - Submit a Medical Marijuana qualifying patient new, renewal, change, and void application
    - Able to assist the patient's medical use of marijuana
    - View and print their Medical Marijuana electronic registry identification card(s)Check application statuses
- Dispensary: Means the same as "[n]onprofit medical marijuana dispensary" in A.R.S. § 36-2801, "... a not-for-profit entity that acquires, possesses, cultivates, manufactures, delivers, transfers, transports, supplies, sells or dispenses marijuana or related supplies and educational materials to cardholders. A nonprofit medical marijuana dispensary may receive payment for all expenses incurred in its operation."

- Dispensary Agent (DA): Means the same as "[n]onprofit medical marijuana dispensary agent" in A.R.S. § 36-1901. A dispensary agent is a principal officer, board member, employee or volunteer of a nonprofit medical marijuana dispensary who is at least 21 years of age and has not been convicted of an excluded felony offense.
  - A Dispensary Agent (DA), may:
    - View Portal Messages from ADHS
    - Send messages to ADHS
    - View DA-specific Notifications
    - View and print their DA Card *****
    - Verify qualifying patient and caregiver cardholders *****
    - Register new sales transactions *****

      ****** *Access granted by Dispensary PO/BM*

- Dispensary PO/BM (Principal Officer/Board Member): A PO/BM, and only a PO/BM, is authorized to:
  - Grant access to DAs to view:
    - Their DA card
    - Card Search & Sales Verification System
  - Review the sales transactions of all agents and void or correct transactions
  - Renew:
    - Dispensary Registration Certificate
    - Agent cards
  - Terminate agent cards
  - Apply for a dispensary:
    - Agent card
    - Approval to operate
    - Location change
    - Facility modification
  - Update dispensary information:
    - Hours of operation
    - Add or remove a PO/BM or Medical Director
    - Revise the name of the dispensary or the DBA name

- Update DA card information
- Apply for dispensary approval to:
  - Dispense
  - Prepare, sell, or dispense edibles
  - Cultivate, either onsite or offsite
  - Change the designated person
  - Change the dispensary email address, phone number, mailing address

* Additionally, a PO/BM may perform the duties of a dispensary agent

Due to the confidentiality requirements of the Arizona Medical Marijuana Act (AMMA), the matters listed above may only be discussed with the dispensary PO/BM.

- Dual: A marijuana facility that is able to provide medical marijuana to qualified patients and their caregivers as well as adult-use marijuana to persons 21 years of age or older.

- Facility Licensing Portal: A PO/BM must submit a dispensary agent application in order to grant access to the Facility Licensing Portal and the functionality for a specific dispensary. A person who is an agent for two or more dispensaries, has one Portal User Account. The user will be able to access each dispensary through their one account. Access to each dispensary is initiated by the PO/BM and approved by ADHS within the ADHS Licensing Management system

- Facility Agent: Means the same as in A.R.S. § 36-2850, "... a principal officer, board member or employee of a marijuana establishment or marijuana testing facility who is at least twenty-one years of age and has not been convicted of an excluded felony offense."

- Marijuana Facility Agent License (Card): Is the card received by the marijuana facility agent that when linked with a marijuana establishment provides employee protections to the holder and employer as prescribed by law.

- Individual Licensing Portal: Online system managing facility agents, patients and caregivers participating in either the AMMA or SASAA programs

- Marijuana Establishment: Means the same as in A.R.S. § 36-2850:
  ... an entity licensed by the department to operate all of the following:
  (a) A single retail location at which the licensee may sell marijuana and marijuana products to consumers, cultivate marijuana and manufacture marijuana products.
  (b) A single off-site cultivation location at which the licensee may cultivate marijuana, process marijuana and manufacture marijuana products, but from which marijuana and marijuana products may not be transferred or sold to consumers.
  (c) A single off-site location at which the licensee may manufacture marijuana products and package and store marijuana and marijuana products, but from which marijuana and marijuana products may not be transferred or sold to consumers.

- Medical Marijuana Registry Identification Card: A document issued by the department that identifies a person as a registered qualifying patient, a registered designated caregiver, a registered nonprofit medical marijuana dispensary agent or a registered independent third-party laboratory agent. Card statuses are:
  - **ACTIVE card:** Card not yet expired and is valid for all intended purposes depending on its type

- **EXPIRED card:** Card that is expired and invalid for all intended purposes
- **INACTIVE card:** Card that is invalid for all intended purposes
- **REVOKED card:** Card that is revoked by ADHS that is invalid for all intended purposes
- **VOID card:** Card that is invalid for all intended purposes

- Minor Patient: A qualifying patient who is under 18 years of age and required to have a caregiver to obtain and assist with the patient's medical use of marijuana

- NOD (Notice of Deficiency): An ADHS document, listing one or more reasons for which a Dispensary Agent Card Application was found deficient during the administrative phase of the review process, and requires the PO/BM to resolve them
  - For example: The DA fingerprint card was not received by ADHS. The ADHS Licensing Management System notifies a PO/BM to address the issue(s)

- Qualifying patient: A person who has been diagnosed by a physician as having a debilitating medical condition (as defined in: A.R.S. § 36-2801(15))
  - Submit a Medical Marijuana qualifying patient new, renewal, card change, and void application
  - View and print their Medical Marijuana electronic registry identification card(s)
  - Can check allotment remaining on their qualifying patient's Medical Marijuana card(s)

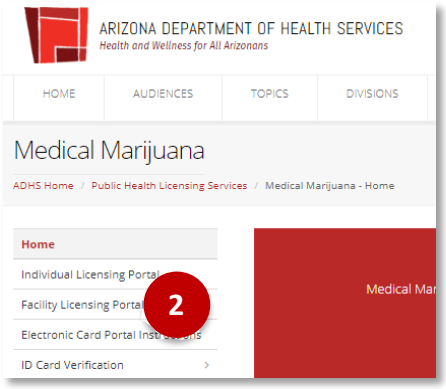
- RFI (Request for Information): An ADHS document, listing one or more reasons the submitted Dispensary Agent Card Application was identified as requiring additional information, and requires the PO/BM to resolve them.
  - For example: Birthdate on the driver’s license does not match the birthdate entered on the DA application. The ADHS Licensing Management System allows a PO/BM to address the issue(s) and resubmit the application for approval

Accessing ADHS Licensing System

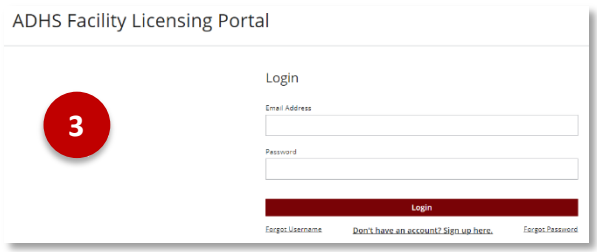
ADHS Licensing Management System: Login functions

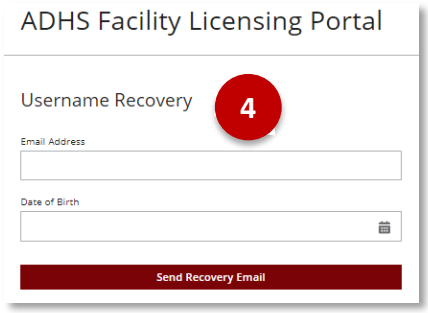
All Facility Licensing Portal users access the portal in the following manner:

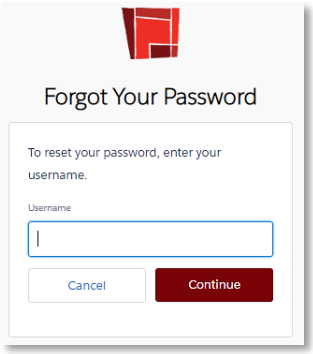
1. Login Link: Navigate to the ADHS Medical Marijuana Home page : www.azdhs.gov/licensing/medical-marijuana
2. Click **Facility Licensing Portal** link

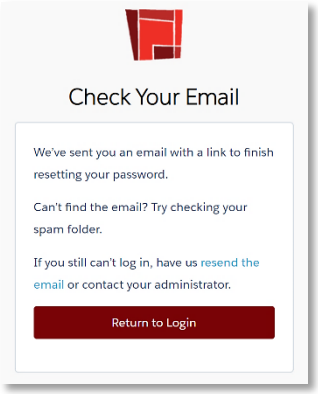


3. Login Options: Enter credentials to **login** to portal
4. **OR** click (as appropriate)
   a. **Forgot Username:** Enter credentials (Email Address and Date of Birth) to recover Username
   b. **Forgot Password:** Enter credentials (Username) to reset Password
   c. Follow instructions in email to reset password
   d. **Don't have an account? Sign Up here**: to create an ADHS Licensing System Portal user account
5.





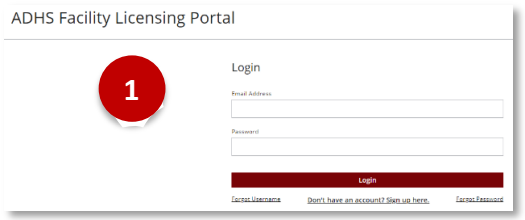


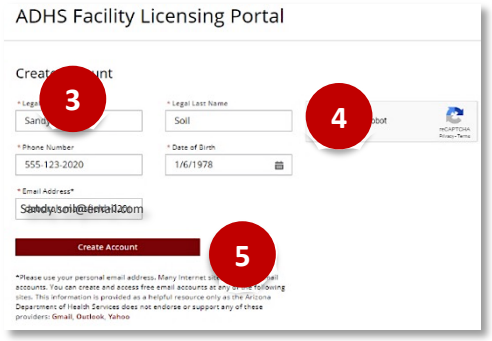


ADHS Portal Account Registration

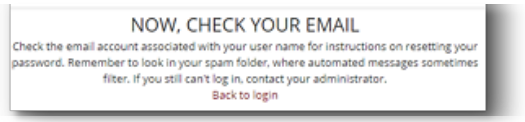
For access to the ADHS Licensing Portal, a person only needs to create one account. *Within* the ADHS Licensing Portal, a person can have access to many licensing functions. Access to licensing functions is requested by licensing facility owners and granted through approved applications by ADHS. The email entered in the account creation process will be the portal username. This email must be a UNIQUE email address, one that is not shared with or in use by another person.

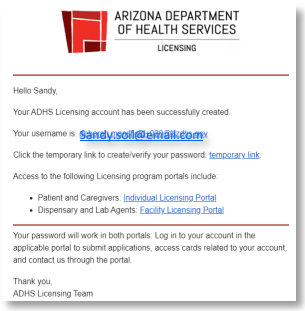
1. Navigate to a Licensing Portal Login screen
2. Click **Don't have an account? Sign Up here:** to create ADHS Licensing System Portal account
3. **Enter required information:** Legal First Name, Legal Last Name, Phone Number, Date of Birth, Email Address
   NOTE: Must be a UNIQUE email address, one not shared with another person
   NOTE: For DA account, if a person has a patient or caregiver account, use the same email address/portal account. The dispensary will not have access to the patient information
4. Click re**Captcha box "I'm not a robot"**
5. Click **Create Account**
   NOTE: Ensure legal name and date of birth are accurate. Once account is created, name and date of birth can only be changed through a change application submittal





6. View message to check email
7. View email from ADHS and click **temporary link** to create the account password which will direct you to the Individual Licensing Portal. Close out and provide portal account email address to PO/BM to complete application
   NOTE: An account does not provide access to ADHS Licensing System functionality. ADHS program must approve access

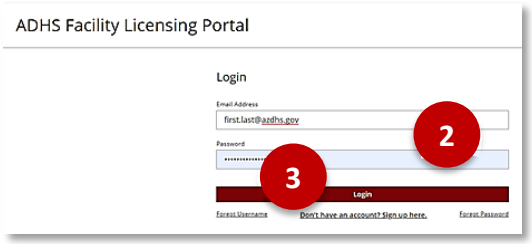


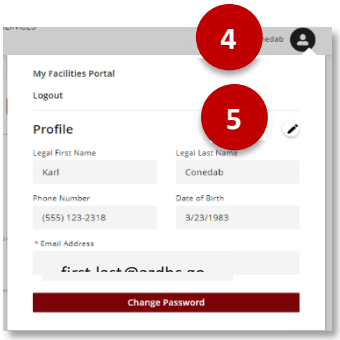


Access and Update Portal Information

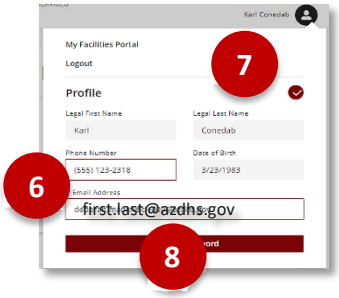
Login to the ADHS Facility Licensing Portal with the portal account information previously created. The profile section of the account has the account holder's personal information. The phone number, email address, and password can be edited from the portal. Remaining profile data (first name, last name, and date of birth) must be changed through a change application.

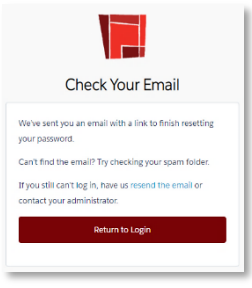
1. Access login page (link from AZDHS website)
2. Enter **Email Address** and **Password**
3. Click **Login**
4. To View Portal Account Profile, click <**Name>** located in top right corner
5. Click **pencil** icon to edit fields in Profile section
   NOTE: Profile is accessible from all tabs in portal
   NOTE: To return to portal Navigation, click **My Facilities Portal**
   NOTE: **Logout** available from profile





6. Editable fields appear with red outline (Phone number and Email address)
   NOTE: Email address is the Portal Account username and, once verified, will change the login for all portal account access
7. Click **check mark** to save any changes made to the account
8. Click **Change Password** to change/reset the portal account password
9. View **Check Your Email** message and follow instructions to finish resetting password
10. Within the body of the email, click **temporary link** and follow instructions to complete the password change/reset process
    NOTE: Important to protect the email address (username) and password in order to maintain security of dispensary and persona l information







Additional Information: Fingerprint Instructions

For more information and the latest version of this form:
https://www.azdhs.gov/documents/licensing/medical-marijuana/fingerprinting-instructions.pdf

ARIZONA DEPARTMENT OF HEALTH SERVICES
LICENSING

Marijuana Program
Fingerprinting Instructions

Please note that fingerprinting instructions and other instructions may change. Please refer back to the Arizona Department of Health Services (ADHS) website for the most current information. Please **read these entire instructions carefully** before you begin the fingerprinting process.

GENERAL INFORMATION

In accordance with Arizona Revised Statutes (A.R.S.) §§ 36-2819 or 36-2854, as applicable, fingerprints are required to be submitted to conduct a state and federal criminal record checks for the following individuals:

- A designated caregiver (*Arizona Administrative Code* (A.A.C.) R9-17-202(F)(6)(k));
- A custodial parent and/or legal guardian acting as a designated caregiver for a patient under 18 years of age (A.A.C.R9-17-202(G)(7));
- A dispensary agent individual (A.A.C. R9-17-311(7))who:
  - is serving as a principal officer or board member for the dispensary
  - is employed by or contracted with the dispensary
  - is providing volunteer services at or on behalf of the dispensary
- A laboratory agent individual (A.A.C. R9-17-405)who:
  - is serving as an owner for the laboratory
  - is employed by or contracted with the laboratory
  - is providing volunteer services at or on behalf of the laboratory
- A facility agent individual (A.R.S. § 36-2855(B)(2)) who:
  - is serving as a principal officer or board member for the marijuana establishment
  - is employed or contracted with the marijuana establishment
  - is providing volunteer services at or on behalf of the marijuana establishment

Please note that if fingerprint cards that were recently submitted to the Department within the previous 6 months as part of the following applications, may not need to be resubmitted:

- *Designated Caregiver Registry ID Card*
- *Dispensary Registration Certificate Application*
- *Laboratory Certificate Application*
- *Marijuana Establishment License Application*
- *Dispensary Agent Registry ID Card Application*
- *Laboratory Agent Registry ID Card Application*
- *Facility Agent Registry ID Card Application*

The Arizona Department of Public Safety (DPS) may exchange this fingerprint data with the Federal Bureau of Investigation (FBI) without disclosing that the records check is related to the Medical Marijuana Act and acts permitted by it. When the results of the state and FBI records search are no longer needed, ADHS will destroy these records and related fingerprint cards.

Updated 11.25.2020

SAMPLE

takes final administrative action based on information in the FBI criminal history record.

The procedures for obtaining a change, correction, or for updating your FBI criminal history record are set forth in Title 28, Code of Federal Regulations (CFR), Section 16.30 through 16.34. Information on how to review and challenge your FBI criminal history record can be found at www.fbi.gov under Criminal History Summary Checks or by calling (304) 625-3878.

To obtain a copy of your Arizona criminal history in order to review/update/correct the record, you can contact the DPS Criminal History Records Unit at (602) 223-2222 to obtain a fingerprint card and a Review and Challenge packet. Information on the review and challenge process can be found on the DPS website (www.azdps.gov).

WHERE TO OBTAIN FINGERPRINTING SERVICES AND FINGERPRINT VERIFICATION FORMS

Check with your local law enforcement agency to determine if they provide fingerprint cards and public fingerprinting services. You may also check for a private fingerprinting company to provide this service.

You may be charged a fee by the fingerprinting entity for the "rolling" of your fingerprints. You should have the individual rolling your fingerprints sign the card in the designated space. You must use the blue and white fingerprint card #FD-258. You should be provided with the appropriate fingerprint card by either the law enforcement agency or private company you use. *Please note that DPS will not provide the fingerprint card stock nor complete the fingerprinting.*

The Fingerprint Verification Form is to accompany the fingerprints when mailed to ADHS. This form can be found on the Forms page of the Medical Marijuana Program website. The envelope is to be properly sealed as described in this form.

HOW TO MAIL COMPLETED PACKAGE

Once you have completed your application on-line, the system will direct you to print out your application. The printed application will include a page titled "*Fingerprint Submission Information.*" Please include a copy of this page only from the application, along with the *two sets of original fingerprints* and the *Fingerprint Verification Form* into an envelope. The *fingerprint technician is to then properly seal the envelope* as described in the Fingerprint Verification Form and *sign his/her name* across the seal.

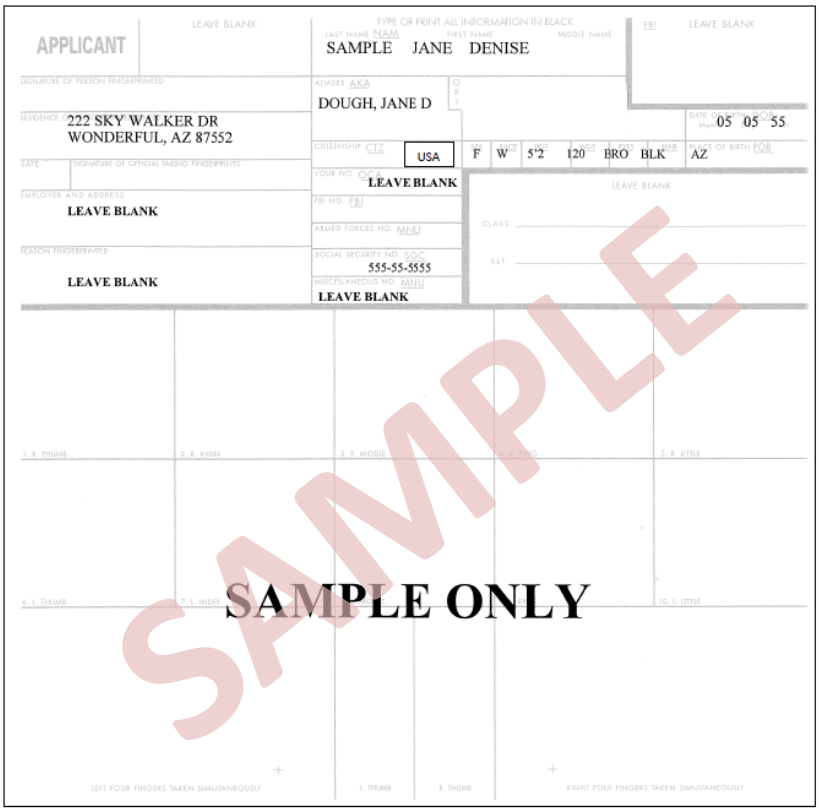
Please mail the packet to:

Arizona Department of Health Services
ATTN: Medical Marijuana Department
P.O. Box 190000
Phoenix, AZ 85005

Please mail cards in an envelope that will not cause the fingerprint card to be folded or creased.
All cards must be mailed to ADHS. DO NOT send the fingerprint cards to the DPS or the FBI.

SAMPLE

Sample Fingerprint Card and Required Information
(The information may be typed or **legibly** printed)



The following information MUST be completed on both cards:

- **Name:** The applicant's full name should be in the last name, first name, middle name sequence.
- **Date of Birth:** Date of birth should be in MM/DD/YYYY format.
- **Place of Birth:** Enter the two letter state abbreviation and if the Place of Birth is a foreign country, please spell the name out.
- The date the applicant was fingerprinted and the signature of the person taking the prints should be placed in the appropriate blocks.
- **Aliases/AKA:** Enter any known aliases, including maiden names.
- **Citizenship:** Enter the country of citizenship.

Updated 03.25.2020

- **Residence of Person Fingerprinted:** List the street address, city, state and zip code of the person being fingerprinted. Enter the residence address, not mailing address.
- **Signature of Person Fingerprinted:** Applicant to sign in ink.
- **Social Security Number:** Enter the applicant's social security number.
- **Sex:** Use M for Male and F for Female.
- **Race:** Use the following letters:
  W – White
  H – Hispanic
  B – Black
  I – American Indian or Alaskan Native
  A – Asian or Pacific Islander
  U – Unknown
- **HGT (Height):** Enter height in feet and inches such as 5'7", not 71 inches. Do not use fractions.
- **WGT (Weight):** Enter weight in pounds as a whole number. For example, 180 pounds is 180.
- **Eyes:** Your eye color. Use the following abbreviations:

  BLK –Black BLU – Blue
  BRO – Brown GRY – Grey
  GRN – Green HAZ – Hazel

- **Hair:** Your hair color. Use the following abbreviations:

  BLK – Black BRO – Brown
  GRY – Grey RED –Red
  WHI – White BLD – Bald
  BLN – Blonde XXX – Unknown

SAMPLE

Fingerprinting DOs and DON'Ts

DO	DO NOT
Type or print all information in black.	Highlight any of the fingerprint portions of the card.
Indicate any amputations or missing fingers at birth in the correct finger blocks.	DO NOT complete any "Leave Blank" fields on the card
See instructions on the reverse of the card regarding other physical problems in taking a good set of fingerprints.	
Ensure two complete sets of fully rolled and inked fingerprint impressions are submitted. Fingerprints must be rolled from side of nail to side of nail. All impressions must be within the Blue Box, no overlapping, for each print.	
Ensure all impressions are taken in the proper order and are legible.	

Updated 03.25.2020

Fingerprint Options

Fingerprint Verification Form and Cards



Application fee
$300

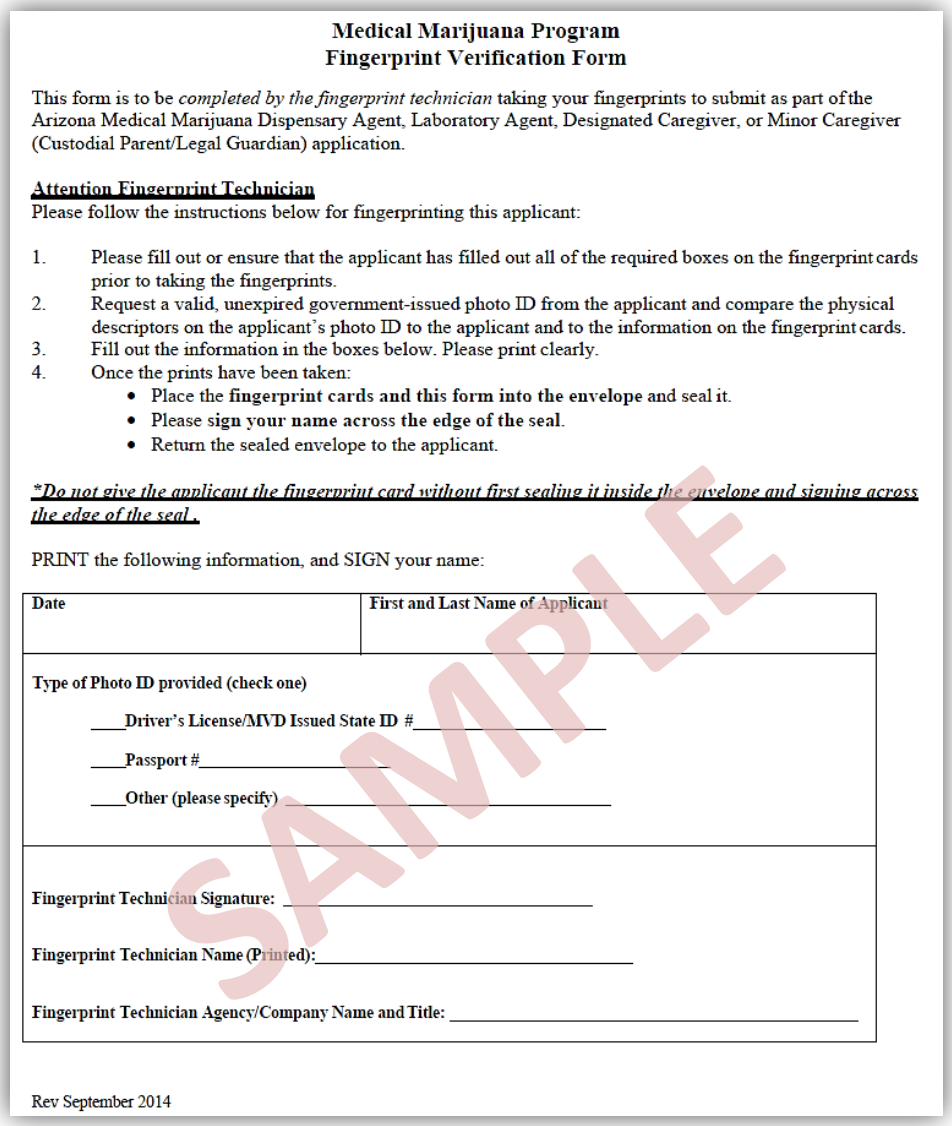
Level 1 Fingerprint Clearance Card ID



Application fee
$150

Additional Information: Fingerprint Verification Form

For more information and the latest version of this form:
https://azdhs.gov/documents/licensing/medical-marijuana/fingerprint-verification-form.pdf



Medical Marijuana Program
Fingerprint Verification Form

This form is to be *completed by the fingerprint technician* taking your fingerprints to submit as part of the Arizona Medical Marijuana Dispensary Agent, Laboratory Agent, Designated Caregiver, or Minor Caregiver (Custodial Parent/Legal Guardian) application.

Attention Fingerprint Technician
Please follow the instructions below for fingerprinting this applicant:

1. Please fill out or ensure that the applicant has filled out all of the required boxes on the fingerprint cards prior to taking the fingerprints.
2. Request a valid, unexpired government-issued photo ID from the applicant and compare the physical descriptors on the applicant's photo ID to the applicant and to the information on the fingerprint cards.
3. Fill out the information in the boxes below. Please print clearly.
4. Once the prints have been taken:
   - Place the **fingerprint cards and this form into the envelope** and seal it.
   - Please **sign your name across the edge of the seal**.
   - Return the sealed envelope to the applicant.

Do not give the applicant the fingerprint card without first sealing it inside the envelope and signing across the edge of the seal.

PRINT the following information, and SIGN your name:

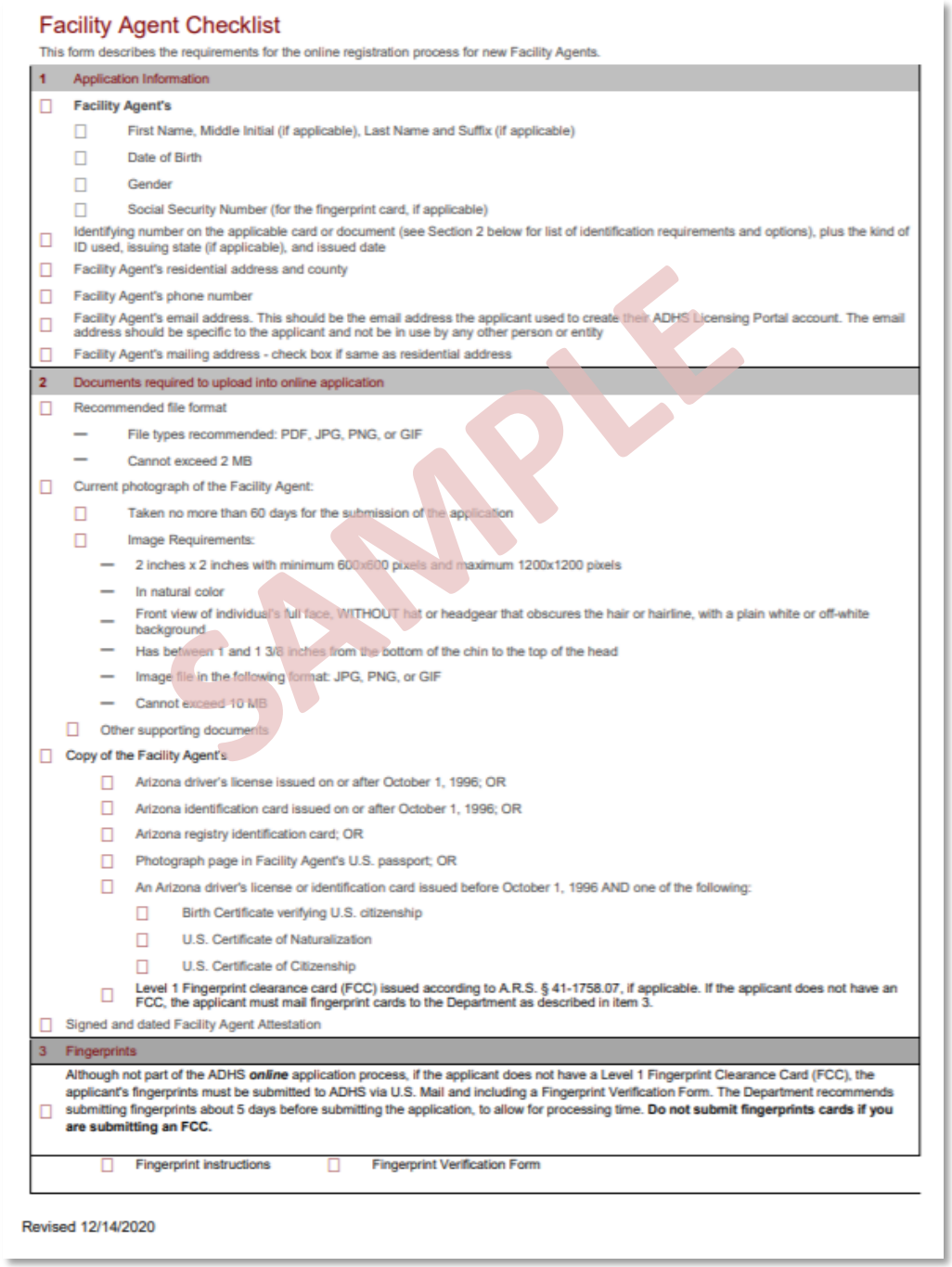
Date	**First and Last Name of Applicant**
Type of Photo ID provided (check one) **____Driver's License/MVD Issued State ID #_____** **____Passport #_____** **____Other (please specify) _____**	
Fingerprint Technician Signature: _____ **Fingerprint Technician Name (Printed):_____** **Fingerprint Technician Agency/Company Name and Title: _____**	

Rev September 2014

SAMPLE

Additional Information: Facility Agent Checklist

For more information and the latest version of this form:
https://azdhs.gov/documents/licensing/medical-marijuana/fingerprint-verification-form.pdf



Facility Agent Checklist

This form describes the requirements for the online registration process for new Facility Agents.

1 Application Information

- ☐ **Facility Agent's**
  - ☐ First Name, Middle Initial (if applicable), Last Name and Suffix (if applicable)
  - ☐ Date of Birth
  - ☐ Gender
  - ☐ Social Security Number (for the fingerprint card, if applicable)
- ☐ Identifying number on the applicable card or document (see Section 2 below for list of identification requirements and options), plus the kind of ID used, issuing state (if applicable), and issued date
- ☐ Facility Agent's residential address and county
- ☐ Facility Agent's phone number
- ☐ Facility Agent's email address. This should be the email address the applicant used to create their ADHS Licensing Portal account. The email address should be specific to the applicant and not be in use by any other person or entity
- ☐ Facility Agent's mailing address - check box if same as residential address

2 Documents required to upload into online application

- ☐ Recommended file format
  - — File types recommended: PDF, JPG, PNG, or GIF
  - — Cannot exceed 2 MB
- ☐ Current photograph of the Facility Agent:
  - ☐ Taken no more than 60 days for the submission of the application
  - ☐ Image Requirements:
    - — 2 inches x 2 inches with minimum 600x600 pixels and maximum 1200x1200 pixels
    - — In natural color
    - — Front view of individual's full face, WITHOUT hat or headgear that obscures the hair or hairline, with a plain white or off-white background
    - — Has between 1 and 1 3/8 inches from the bottom of the chin to the top of the head
    - — Image file in the following format: JPG, PNG, or GIF
    - — Cannot exceed 10 MB
  - ☐ Other supporting documents
- ☐ **Copy of the Facility Agent's**
  - ☐ Arizona driver's license issued on or after October 1, 1996; OR
  - ☐ Arizona identification card issued on or after October 1, 1996; OR
  - ☐ Arizona registry identification card; OR
  - ☐ Photograph page in Facility Agent's U.S. passport; OR
  - ☐ An Arizona driver's license or identification card issued before October 1, 1996 AND one of the following:
    - ☐ Birth Certificate verifying U.S. citizenship
    - ☐ U.S. Certificate of Naturalization
    - ☐ U.S. Certificate of Citizenship
  - ☐ **Level 1 Fingerprint clearance card (FCC) issued according to A.R.S. § 41-1758.07, if applicable. If the applicant does not have an FCC, the applicant must mail fingerprint cards to the Department as described in item 3.**
- ☐ Signed and dated Facility Agent Attestation

3 Fingerprints

☐ Although not part of the ADHS ***online*** application process, if the applicant does not have a Level 1 Fingerprint Clearance Card (FCC), the applicant's fingerprints must be submitted to ADHS via U.S. Mail and including a Fingerprint Verification Form. The Department recommends submitting fingerprints about 5 days before submitting the application, to allow for processing time. **Do not submit fingerprints cards if you are submitting an FCC.**

☐ Fingerprint instructions ☐ Fingerprint Verification Form

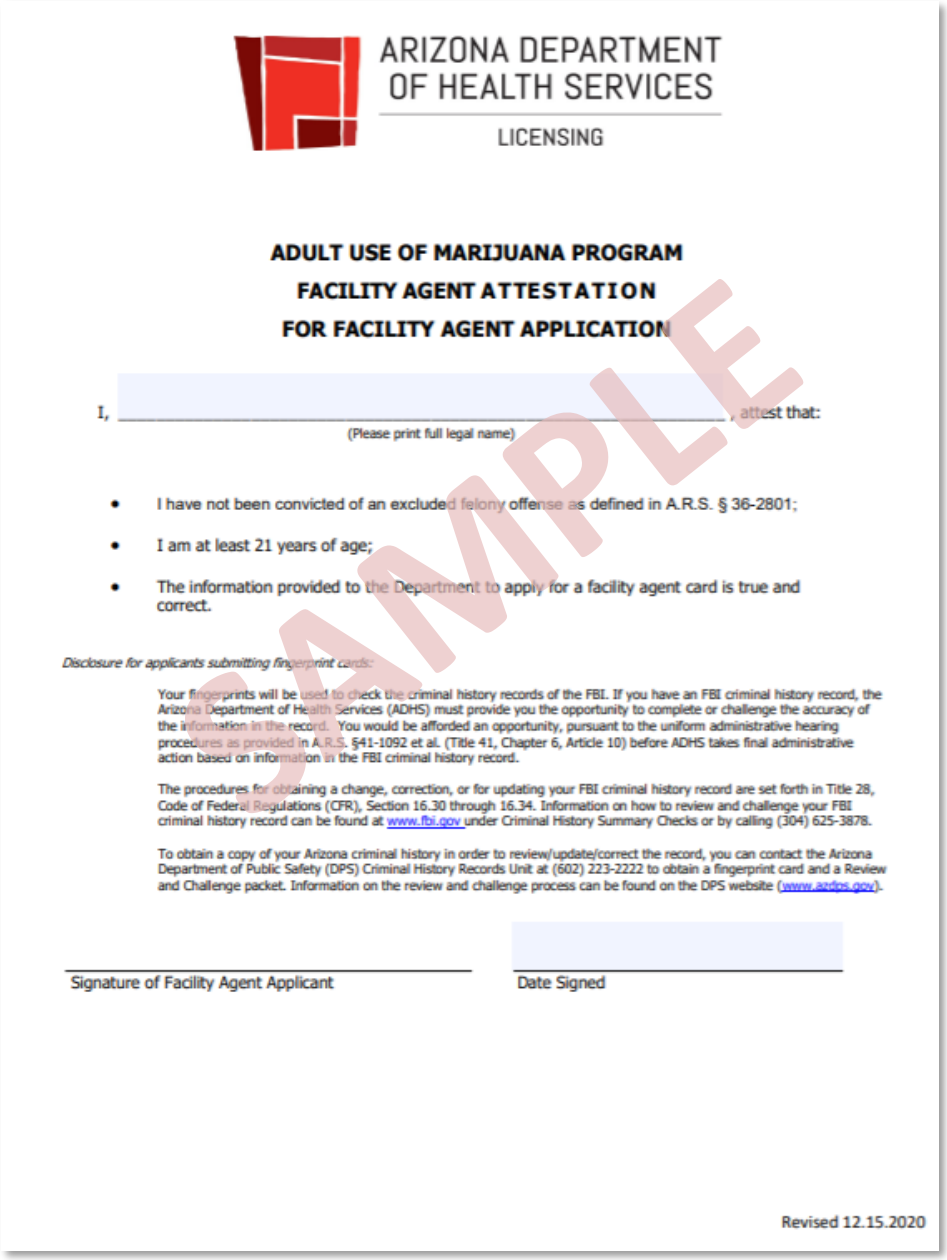
Revised 12/14/2020

SAMPLE

Additional Information: Facility Agent Attestation Form

Completed by Facility Agent applicant and then uploaded to online Facility Agent applications

For more information and the latest version of this form:
https://azdhs.gov/documents/licensing/medical-marijuana/facility-agent-attestation.pdf



ARIZONA DEPARTMENT OF HEALTH SERVICES

LICENSING

ADULT USE OF MARIJUANA PROGRAM

FACILITY AGENT ATTESTATION

FOR FACILITY AGENT APPLICATION

SAMPLE

I, _____, attest that:

(Please print full legal name)

- I have not been convicted of an excluded felony offense as defined in A.R.S. § 36-2801;
- I am at least 21 years of age;
- The information provided to the Department to apply for a facility agent card is true and correct.

Disclosure for applicants submitting fingerprint cards:

Your fingerprints will be used to check the criminal history records of the FBI. If you have an FBI criminal history record, the Arizona Department of Health Services (ADHS) must provide you the opportunity to complete or challenge the accuracy of the information in the record. You would be afforded an opportunity, pursuant to the uniform administrative hearing procedures as provided in A.R.S. §41-1092 et al. (Title 41, Chapter 6, Article 10) before ADHS takes final administrative action based on information in the FBI criminal history record.

The procedures for obtaining a change, correction, or for updating your FBI criminal history record are set forth in Title 28, Code of Federal Regulations (CFR), Section 16.30 through 16.34. Information on how to review and challenge your FBI criminal history record can be found at www.fbi.gov under Criminal History Summary Checks or by calling (304) 625-3878.

To obtain a copy of your Arizona criminal history in order to review/update/correct the record, you can contact the Arizona Department of Public Safety (DPS) Criminal History Records Unit at (602) 223-2222 to obtain a fingerprint card and a Review and Challenge packet. Information on the review and challenge process can be found on the DPS website (www.azdps.gov).

_____ _____

Signature of Facility Agent Applicant Date Signed

Revised 12.15.2020

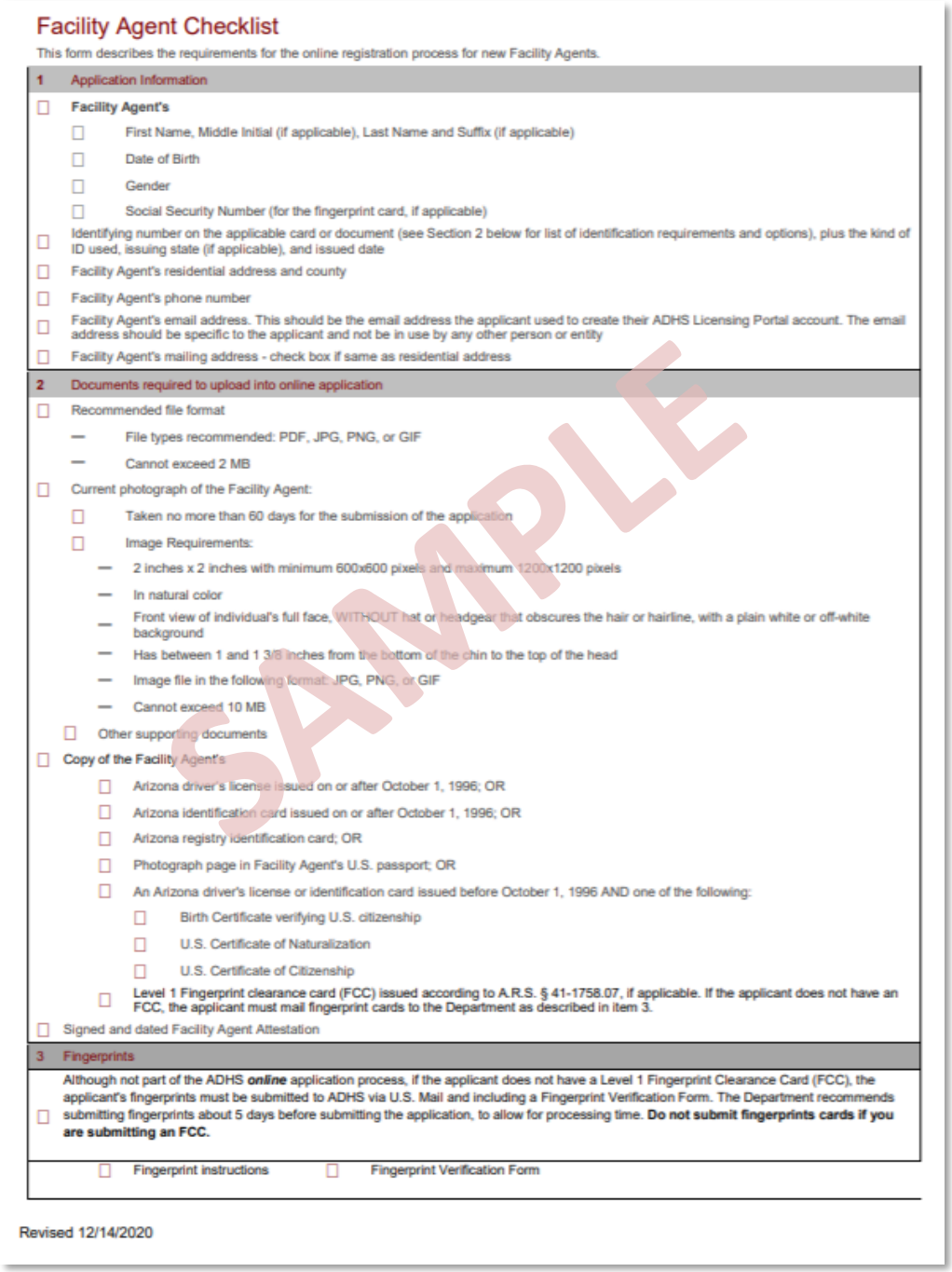
ADHS Medical Marijuana Program Contacts

ADHS Medical Marijuana Dispensary Program Information	
For issues and questions relating to dispensaries and dispensary agents	
Email	marijuana@azdhs.gov
Phone	(602) 364-0857
Website	www.azdhs.gov/licensing/medical-marijuana
Medical Marijuana Forms & Resources	https://azdhs.gov/licensing/medical-marijuana/index.php#forms-list
Adult-Use Forms & Resources	https://azdhs.gov/licensing/marijuana/adult-use-marijuana/index.php#forms
Dispensary FAQs	https://www.azdhs.gov/licensing/medical-marijuana/#faqs-dispensary
Dispensary Agent FAQs	https://www.azdhs.gov/licensing/medical-marijuana/#faqs-dispensary-agents
Outside of ADHS business hours: For dispensary agents experiencing technical difficulties with the Card Search & Sales verification system - Phone (855) 280-8109	

Supported Browsers	
Firefox	Latest Version
Google Chrome	Latest Version
Safari	Latest Version
Edge	Latest Version
Supported Mobile Operating Systems	
ADHS Licensing System Portal is not dependent on mobile phone type Portal is accessed through one of the browsers listed above	Android 4.0 or above iOS 8.0 or above

Additional Information: Facility Agent Checklist

For more information and the latest version of this form:
https://azdhs.gov/documents/licensing/medical-marijuana/facility-agent-checklist.pdf



Facility Agent Checklist

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  - ☐ First Name, Middle Initial (if applicable), Last Name and Suffix (if applicable)
  - ☐ Date of Birth
  - ☐ Gender
  - ☐ Social Security Number (for the fingerprint card, if applicable)
- ☐ Identifying number on the applicable card or document (see Section 2 below for list of identification requirements and options), plus the kind of ID used, issuing state (if applicable), and issued date
- ☐ Facility Agent's residential address and county
- ☐ Facility Agent's phone number
- ☐ Facility Agent's email address. This should be the email address the applicant used to create their ADHS Licensing Portal account. The email address should be specific to the applicant and not be in use by any other person or entity
- ☐ Facility Agent's mailing address - check box if same as residential address

2 Documents required to upload into online application

- ☐ Recommended file format
  - — File types recommended: PDF, JPG, PNG, or GIF
  - — Cannot exceed 2 MB
- ☐ Current photograph of the Facility Agent:
  - ☐ Taken no more than 60 days for the submission of the application
  - ☐ Image Requirements:
    - — 2 inches x 2 inches with minimum 600x600 pixels and maximum 1200x1200 pixels
    - — In natural color
    - — Front view of individual's full face, WITHOUT hat or headgear that obscures the hair or hairline, with a plain white or off-white background
    - — Has between 1 and 1 3/8 inches from the bottom of the chin to the top of the head
    - — Image file in the following format: JPG, PNG, or GIF
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  - ☐ Other supporting documents
- ☐ **Copy of the Facility Agent's**
  - ☐ Arizona driver's license issued on or after October 1, 1996; OR
  - ☐ Arizona identification card issued on or after October 1, 1996; OR
  - ☐ Arizona registry identification card; OR
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    - ☐ Birth Certificate verifying U.S. citizenship
    - ☐ U.S. Certificate of Naturalization
    - ☐ U.S. Certificate of Citizenship
  - ☐ Level 1 Fingerprint clearance card (FCC) issued according to A.R.S. § 41-1758.07, if applicable. If the applicant does not have an FCC, the applicant must mail fingerprint cards to the Department as described in item 3.
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3 Fingerprints

- ☐ Although not part of the ADHS ***online*** application process, if the applicant does not have a Level 1 Fingerprint Clearance Card (FCC), the applicant's fingerprints must be submitted to ADHS via U.S. Mail and including a Fingerprint Verification Form. The Department recommends submitting fingerprints about 5 days before submitting the application, to allow for processing time. **Do not submit fingerprints cards if you are submitting an FCC.**

☐ Fingerprint instructions ☐ Fingerprint Verification Form

Revised 12/14/2020

SAMPLE

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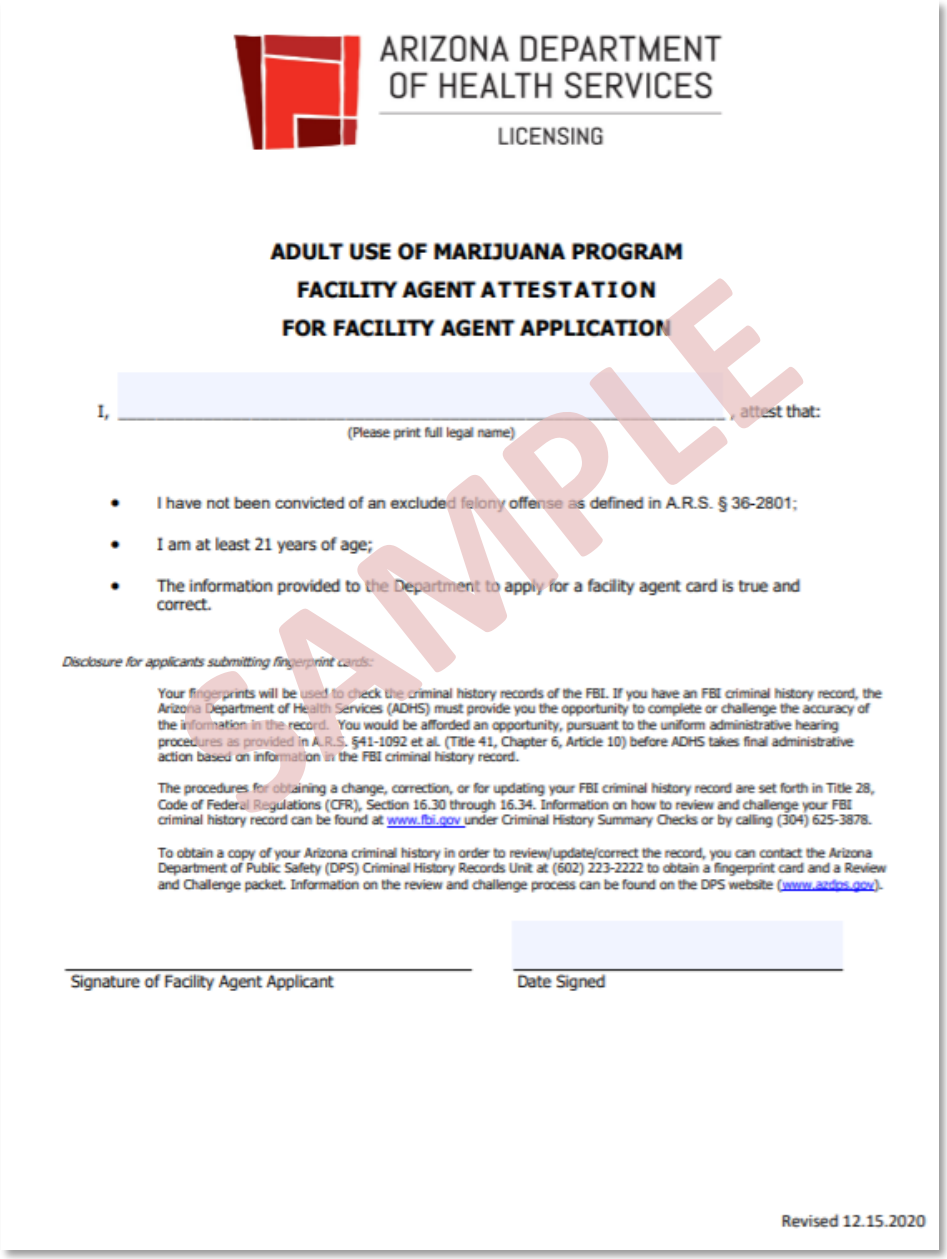

ARIZONA DEPARTMENT OF HEALTH SERVICES
LICENSING

ADULT USE OF MARIJUANA PROGRAM
FACILITY AGENT ATTESTATION
FOR FACILITY AGENT APPLICATION

SAMPLE

I, _____, attest that:
(Please print full legal name)

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- I am at least 21 years of age;
- The information provided to the Department to apply for a facility agent card is true and correct.

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Your fingerprints will be used to check the criminal history records of the FBI. If you have an FBI criminal history record, the Arizona Department of Health Services (ADHS) must provide you the opportunity to complete or challenge the accuracy of the information in the record. You would be afforded an opportunity, pursuant to the uniform administrative hearing procedures as provided in A.R.S. §41-1092 et al. (Title 41, Chapter 6, Article 10) before ADHS takes final administrative action based on information in the FBI criminal history record.

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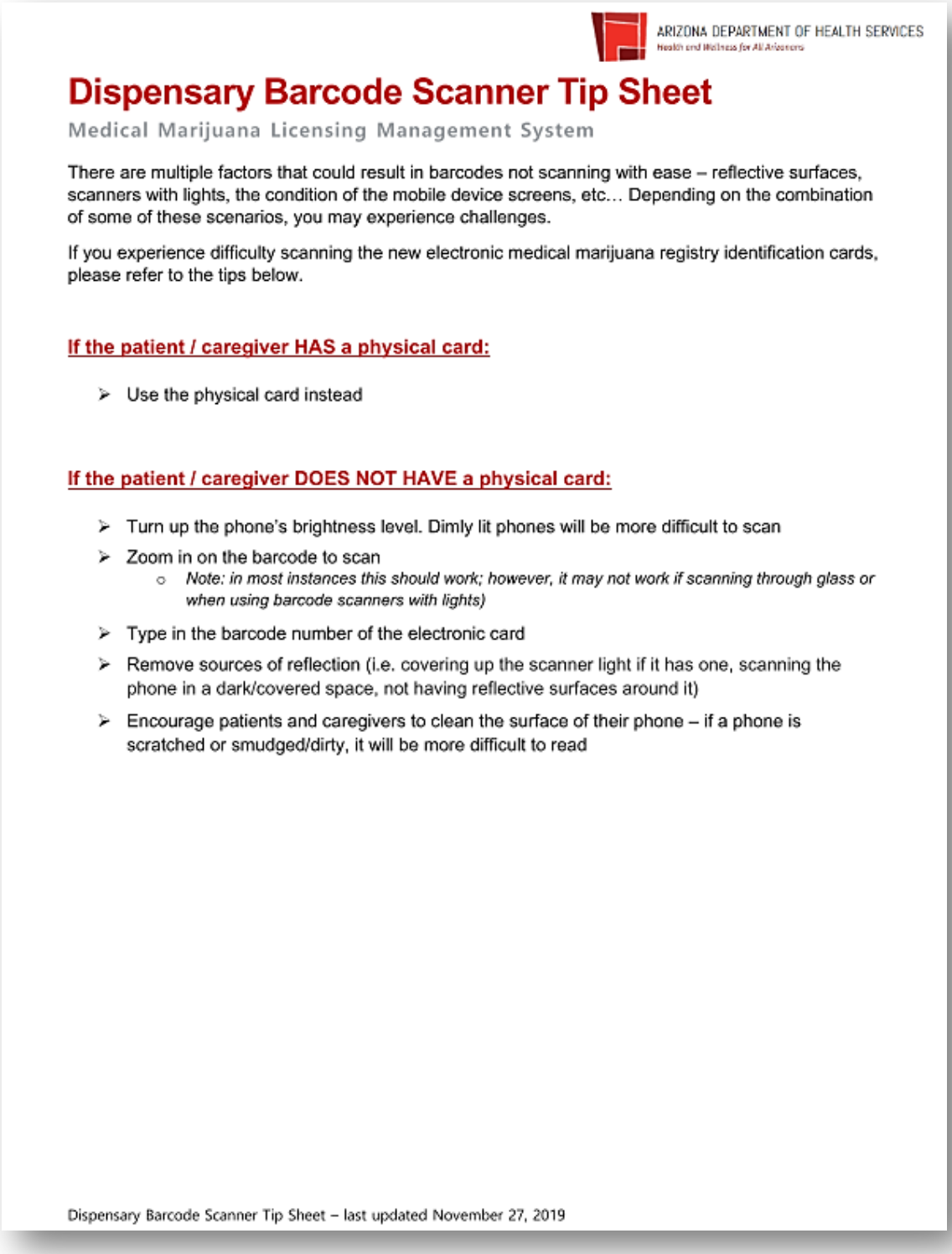
_____ _____
Signature of Facility Agent Applicant Date Signed

Revised 12.15.2020

Barcode Scanner Tip Sheet

Full size copy of the Dispensary Barcode Scanner Tip Sheet is available on the AZDHS website: https://azdhs.gov/documents/licensing/medical-marijuana/dispensaries/barcode-scanner-tip-sheet.pdf



ARIZONA DEPARTMENT OF HEALTH SERVICES
Health and Wellness for All Arizonans

Dispensary Barcode Scanner Tip Sheet

Medical Marijuana Licensing Management System

There are multiple factors that could result in barcodes not scanning with ease – reflective surfaces, scanners with lights, the condition of the mobile device screens, etc… Depending on the combination of some of these scenarios, you may experience challenges.

If you experience difficulty scanning the new electronic medical marijuana registry identification cards, please refer to the tips below.

If the patient / caregiver HAS a physical card:

- Use the physical card instead

If the patient / caregiver DOES NOT HAVE a physical card:

- Turn up the phone's brightness level. Dimly lit phones will be more difficult to scan
- Zoom in on the barcode to scan
  - *Note: in most instances this should work; however, it may not work if scanning through glass or when using barcode scanners with lights)*
- Type in the barcode number of the electronic card
- Remove sources of reflection (i.e. covering up the scanner light if it has one, scanning the phone in a dark/covered space, not having reflective surfaces around it)
- Encourage patients and caregivers to clean the surface of their phone – if a phone is scratched or smudged/dirty, it will be more difficult to read

Dispensary Barcode Scanner Tip Sheet – last updated November 27, 2019

FBI Privacy Statement Act

NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing. [1] These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12, among other authorities.

- **You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared, or retained. [2]**
- **You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.**
- **You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).**
- **If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record.**
- **If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at https://www.fbi.gov/services/cjis/identity-history-summary-checks and https://www.edo.cjis.gov.**
- **If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via https://www.edo.cjis.gov. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)**
- **You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.[3]**

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[1] Written notification includes electronic notification, but excludes oral notification.
[2] https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement
[3] See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).

Arizona Department of Health Services

Medical Marijuana Department

150 North 18th Avenue, Suite 150

Phoenix, Arizona 85007

Telephone: 602-364-0857

Website: www.AZDHS.gov/MedicalMarijuana