

**Town of Scarborough
Office of the Town Clerk
259 US Route One
Scarborough, ME 04074**

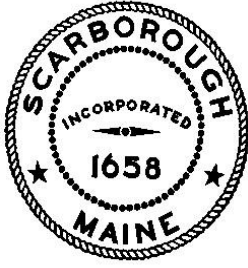
207-730-4020

Marijuana Cultivation Facility or Marijuana Products Manufacturing Facility

Waiver of Confidentiality

Chapter 1018 – Marijuana Establishment Licensing Ordinance – Section 5.R.:

Medical marijuana registered caregivers and other applicants submitting applications and supporting information that is confidential under 22 M.R.S.A. §2425-A(12), as may be amended, and the Maine Freedom of Access Act, 1 M.R.S.A. §402(3)(F), shall mark such information as confidential.



**Town of Scarborough
Office of the Town Clerk
259 US Route One
Scarborough, ME 04074**

207-730-4020

**Medical Marijuana Cultivation Facility or
Medical Marijuana Products Manufacturing Facility**

Waiver of Confidentiality

I understand that my application and supporting information are confidential under State law. By my signature below, I agree to waive my right to the confidentiality of my application and supporting information under 22 M.R.S.A. § 2425. I understand that signature of this form is voluntary and may not be retroactively revoked.

Signature of Applicant

Date

Printed Name

State of _____

County of _____, ss.

Subscribed and sworn to before me this _____ day of _____, 20_____.

Notary Public or Attorney

Date Notary Commission expires: _____