

Checklist: Applying for a sale for medical purposes without possession of cannabis licence

Tip: For document naming convention, your application number (APP #) is available after you've created a licence application in the CTLS.

Section 1: Before you apply

- [Determine which licence types to apply for](#)
- [Familiarize yourself with the legislation](#)
- If you intend to [self-identify as an Indigenous or Indigenous-affiliated applicant](#), you may want to contact the Indigenous Navigator Service at navigator-navigateur@hc-sc.gc.ca for additional guidance on the application process
- [Know your fees](#)
 - application-screening fee
 - security clearance application fees
 - annual regulatory fee
- [Prepare your site](#)
- Identify the following people
 - [key site personnel](#)
 - [people with direct control](#), if applicable
 - [associated individuals](#), if applicable
- All identified people need to [create their own CTLS account](#) and give you their CTLS account ID

Section 2: Information to prepare

Part A: Information to prepare to submit into the CTLS

1. [For corporations, cooperatives or partnerships](#)

- If you're a corporation:

Document type	Document naming convention
<input type="checkbox"/> Certificate of incorporation, amalgamation or amendment	<ul style="list-style-type: none"> • "CompanyName_Certificate-of-Incorporation_YYYY-MM-DD.PDF" • "CompanyName_Certificate-of-Amalgamation_YYYY-MM-DD.PDF" • "CompanyName_Certificate-of-Amendment_YYYY-MM-DD.PDF"

- If you're a cooperative or a partnership:

Document type	Document naming convention
<input type="checkbox"/> Business name registration	"CompanyName_BusinessNameRegistration_YYYY-MM-DD.PDF"
<input type="checkbox"/> Partnership agreement	"CompanyName_PartnershipAgreement_YYYY-MM-DD.PDF"

2. [Site details](#)

Document type	Document naming convention
<input type="checkbox"/> Health Canada licences, registrations and authorizations	"LicencesRegistrationsAuthorizations_APP-#_YYYY-MM-DD.PDF"
<input type="checkbox"/> Aerial view	"AerialView_APP-#_YYYY-MM-DD.PDF"

- If your site has multiple addresses:

Document type	Document naming convention
<input type="checkbox"/> Document listing all addresses	"SiteAddresses_APP-#_YYYY-MM-DD.PDF"

3. [Identified people](#)

Associated individuals, if applicable:

Document type	Document naming convention
<input type="checkbox"/> For associated individuals requiring security clearances	"People_APP-#_AssociatedIndividuals_YYYY-MM-DD.PDF"

4. [Organizational security plan](#)

Document type	Document naming convention
<input type="checkbox"/> Business overview	"OSP_APP-#_BusinessOverview_YYYY-MM-DD-PDF"
<input type="checkbox"/> Template or primary document	"OSP_APP-#_YYYY-MM-DD.PDF"
<input type="checkbox"/> People requiring a security clearance	"OSP_APP-#_PeopleSC_YYYY-MM-DD.PDF"
<input type="checkbox"/> Head of security	"OSP_APP-#_HeadOfSecurity_YYYY-MM-DD.PDF"
<input type="checkbox"/> Organizational chart	"OSP_APP-#_OrganizationalChart_YYYY-MM-DD.PDF"
<input type="checkbox"/> Descriptions of roles and responsibilities	"OSP_APP-#_DescriptionsRoles_YYYY-MM-DD.PDF"
<input type="checkbox"/> Descriptions of standard operating procedures (SOPs)	"OSP_APP-#_SOPs_YYYY-MM-DD.PDF"
<input type="checkbox"/> Attestation	"OSP_APP-#_Attestation_YYYY-MM-DD.PDF"

5. [Site plan](#)

Document type	Document naming convention
<input type="checkbox"/> Site plan	"SitePlan_APP-#_YYYY-MM-DD.PDF"

Checklist: Applying for a sale for medical purposes
without possession of cannabis licence

6. [Floor plan](#)

Document type	Document naming convention
<input type="checkbox"/> Floor plan	"FloorPlan_APP-#_YYYY-MM-DD.PDF"

7. [Record keeping](#)

- Record keeping attestation

Document type	Document naming convention
<input type="checkbox"/> Record keeping attestation	"RK_APP-#_Attestation_YYYY-MM-DD.PDF"

- Proposed record keeping methods

Document type	Document naming convention
<input type="checkbox"/> Record keeping methods	"RK_APP-#_SmpMethods_YYYY-MM-DD.PDF"
<input type="checkbox"/> Medical document verification	"RK_APP-#_SmpVerification_YYYY-MM-DD.PDF"
<input type="checkbox"/> Example of your registration document	"RK_APP-#_SmpRegistration_YYYY-MM-DD.PDF"
<input type="checkbox"/> Client's orders and refusal to fill client's order example	"RK_APP-#_SmpOrders_YYYY-MM-DD.PDF"
<input type="checkbox"/> Process to limit quantities of 150 g of dried cannabis (or its equivalent amount) per order	"RK_APP-#_Smp150g_YYYY-MM-DD.PDF"

8. [Key investor report](#) (choose 1 of the 2 options)

Document type	Document naming convention
<input type="checkbox"/> Key investor report	"KeyInvestor_APP-#_Report_YYYY-MM-DD.PDF"
<input type="checkbox"/> Key investor attestation	"KeyInvestor_APP-#_Attestation_YYYY-MM-DD.PDF"

Checklist: Applying for a sale for medical purposes
without possession of cannabis licence

Section 3: Create a licence application

- [Create an account in the CTLS](#), if you don't have one already
- [If you're applying as a part of a corporation, a cooperative, or a partnership](#), create a corporate profile, if you don't have one already
- [Create a new licence application in the CTLS](#)

Section 4: Submit your information

Part A: [Submit your security clearance applications in the CTLS](#)

- Submit your security clearance applications, if applicable, **no more than 1 month before** submitting your licence application

Part B: [Submit your information in the CTLS](#)

- Submit your information into the CTLS

Section 5: [After you've submitted your licence application](#)

- Pay fees (licence application-screening fee, security clearance application fees, if applicable)