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Chairman, Zoning Board of Appeals	
City of Chicago	
City Hall, Room 905	
121 N. LaSalle Street	
Chicago, IL 60602	
zba@cityofchicago.org	
To the Chairman of the Zoning Board of Appea	ls (the "Chairman" and the "Board"):
The undersigned,	, being first duly sworn under oath, deposes
and states the following:	
That the undersigned is an authorized (the	representative of "Applicant"), which Applicant is seeking a
special use for a cannabis business establishmen	11 //
, Chicago, Illinois	s (the "Proposed Location");

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- 2. That the undersigned acknowledges and agrees that, pursuant to Section 17-14-0303-H of the Chicago Zoning Ordinance, the Applicant must provide copies of all information submitted to the State of Illinois (the "State") in application for a license to operate under the State's Cannabis Regulation and Tax Act, 410 ILCS 705/1-1 *et seq.*, (the "Adult Use Cannabis Act") or the State's Compassionate Use of Medical Cannabis Program Act, 410 ILCS 130/1 *et seq.*, (the "Medical Cannabis Act")
- 2. That the undersigned certifies that s/he has provided in conjunction with this affidavit two (2) true and correct copies all information submitted to the State as of the date hereof in application for a license to operate its proposed cannabis business establishment under the Adult Use Cannabis Act or the Medical Cannabis Act (the "State Application").
- 3. That the undersigned certifies that in the event the Applicant supplements its State Application after the date hereof but prior to the Board's ruling on the Applicant's Proposed Special Use, the Applicant shall provide two (2) true and correct copies of such supplemented State Application (the "Supplemented State Application") to the Board.
- 4. That the undersigned understands and agrees that in the event that s/he has not provided two (2) true and correct copies of the Applicant's State Application or Supplemented State Application, as applicable, the Applicant's application for special use is not complete, and, consequently, any special use granted by the Board shall be null and void.

[SIGNATURE PAGE FOLLOWS]

Signature	_
Name:	_ (Print Name)
Subscribed and sworn to me this	
day of	, 20
N. D.L.	
Notary Public	