TULSA COUNTY ASSESSOR

APPLICATION FOR AGRICULTURE EXEMPTION PERMIT FOR MARIJUANA GROW FACILITY

918.596.5147

218 W. Sixth St, 5th Floor Tulsa, OK 74119 assrmh072@tulsacounty.org

Legal Name of Applicant –	Corporation, Partnership or Individual	Preferred	Phone Number
2			
Mailing Address (street an	d number. P.O. Box)		
City		State	Zip Code
4			
DBA – Trade Name			
_			
Grow location (street and	number or directions – DO NOT use P.O.	. Box or rural route)	<u> </u>
·		·	
6	fication Number (FEIN/SSN)		
Contact Name		Contact Ema	ail
OMMA License #: Growing Start Date: _ Principal Product solo	l for profit:		
OMMA License #: Growing Start Date: _ Principal Product solo			
OMMA License #: Growing Start Date: _ Principal Product solo Number of Acres:	l for profit:		
OMMA License #: Growing Start Date: _ Principal Product solo Number of Acres: Building Square Foota	I for profit:		
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OMMA License #: Growing Start Date: _ Principal Product solo Number of Acres: Building Square Foota Estimated Number of ***** MUST ATTACH OMM I, the undersigned, do hereby	l for profit:age:	COMPLETED OTC FO	RM 901 WITH ASSET LISTING
OMMA License #: Growing Start Date: _ Principal Product solo Number of Acres: Building Square Foota Estimated Number of	I for profit:	COMPLETED OTC FO	RM 901 WITH ASSET LISTING
OMMA License #: Growing Start Date: _ Principal Product solo Number of Acres: Building Square Foota Estimated Number of ***** MUST ATTACH OMN I, the undersigned, do hereby true and correct. Signature of Owner	I for profit:age:	COMPLETED OTC FO	RM 901 WITH ASSET LISTING
OMMA License #: Growing Start Date: _ Principal Product sold Number of Acres: Building Square Foota Estimated Number of ***** MUST ATTACH OMN I, the undersigned, do hereby true and correct. Signature of Owner FOR TULSA COUNTY TREASU	I for profit:age:	completed of the	PRM 901 WITH ASSET LISTING