

**PHASE I
REQUEST FOR QUALIFICATIONS/REQUEST FOR
PROPOSALS**

**PROPOSED MEDICAL MARIJUANA TREATMENT CENTER DEVELOPMENT
FOR
THE CITY OF SPRINGFIELD, MASSACHUSETTS**

BID NO. 13-_____

October 25, 2013

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Section 1. Introduction.

A. Overview and Description of Opportunity

Through this Phase I Request for Qualifications/Request for Proposals (“**Phase I-RFQ/P**”), the City of Springfield, Massachusetts (the “**City**”) seeks to obtain information and pre-qualify enterprises desirous of participating in the City’s Phase II-RFQ/P process, the purpose of which will be to select one or more enterprises with whom the City will negotiate and execute a Host Community Agreement (“HCA”) agreement for the development, construction and operation of a Medical Marijuana Treatment Center project (the “**Project**”) within the City in accordance with applicable laws and regulations. This RFQ/RFP is intended to provide a public selection process but is not issued pursuant to Mass. Gen. Laws ch. 30B. Pursuant to Chapter 369 of the Acts of 2012- November 6, 2012, Ballot Question 3, “*An Initiative Petition for a Law for Humanitarian Medical Use of Marijuana*” and any regulations promulgated thereunder (See the regulations promulgated by the Commonwealth Department of Public Health (“DPH”) to implement the medical use of marijuana - 105 CMR 725.000) (collectively, the “**Act**”), Massachusetts became the 18th state in the nation in addition to the District of Columbia to approve the use of marijuana for medical purposes.

The Act eliminates state criminal and civil penalties for the medical use of marijuana by qualifying patients. In order to qualify, a patient must have been diagnosed with a “debilitating medical condition” which is defined in the statute as “...cancer, glaucoma, AIDS or HIV, Hepatitis C, ALS, Crohn’s disease, Parkinson’s disease, Multiple Sclerosis, and other conditions as determined in writing by a qualifying patient’s physician.” Patients must have obtained a written certification from a physician with whom the patient has a *bona fide* physician-patient relationship. This certification must state the patient’s specific debilitating medical condition and symptoms, as well as that the potential benefits of the medical use of marijuana outweighing any associated health risks for the patient.

The Act allows Medical Marijuana Treatment Centers (MMTCs) to cultivate, process and provide medical marijuana to patients or their caregivers. A treatment center must be a non-profit and apply for a DPH registration by complying with several mandates that include paying a fee, identifying a location with up to one additional location, and submitting operating procedures to DPH that include cultivation and storage of marijuana only in enclosed and locked facilities. A treatment center’s personnel, known as “dispensary agents,” must be registered with DPH prior to working or volunteering at a center. Dispensary agents must be at least 21 years of age and have no prior felony drug convictions. Per the Act, a CORI check of these employees must be done.

In calendar year 2013, DPH may register up to 35 treatment centers statewide, with a minimum of one but no more than five centers per county. This number can be modified by DPH in later years. DPH is utilizing a two phased process. The DPH required completed Phase 1 application forms for Registered Marijuana Dispensaries be hand-delivered on August 22, 2013. The list of applicants includes the name of the non-profit corporation, a contact person (if provided) and the first county of preference for the RMD location. The total number of applications received by the Department was 181.

Under the DPH Phase 1 process, dispensary applicants were reviewed for, among other things, non-profit status and financial viability. Applicants were required to report whether any member of their proposed organization has a felony drug conviction.

Applicants who met the DPH qualifications in Phase 1 are eligible to proceed to the DPH Phase 2 process where a selection committee will conduct an in-depth review and select dispensaries through a competitive process. The DPH Phase II application is due to be filed with DPH on November 21, 2013. The DPH committee will evaluate and score DPH Phase 2 applications based on such factors as appropriateness of the site, geographical distribution of dispensaries, local support, and the applicant's ability to meet the overall health needs of registered patients, while ensuring public safety. As part of the DPH process, 105 CMR 725.100(B)(2) a DPH Applicant who receives notice from DPH that it may proceed to the DPH Phase 2 application process, must notify a City in which an RMD would be sited of its intent to submit a Phase 2 application.

To date, only two DPH applicants have complied with this regulation with regard to the City of Springfield. The DPH applicants are: Debilitating Medical Condition Treatment Centers, Inc. and Baystate Compassion Center, Inc. Copies of the Notices received by these applicants are attached to this RFP/Q as Exhibit E. As such, the City is inviting these applicants to participate in the City's Phase I process. The City's Phased application process is designed to help it coordinate its planning process and facilitate the implementation of the Act within the City of Springfield in accordance with the current regulations and the development of local regulations within the City. The City's intent in carrying out this process is to implement, at the local regulatory level, a careful balance of promoting appropriate access for patients with identified need, while mitigating secondary effects as to security and community impacts, including the inappropriate use and subsequent potential for diversion, as well as fiscal impacts.

B. City Background

Settled in 1636, the City has several historic and distinct neighborhoods, which earned it the nickname of the “City of Homes”. The City is also known as the “City of Firsts”. The first gasoline powered automobile was built in Springfield by J. Frank and Charles E. Duryea in 1891. The City is the birthplace of basketball. The Basketball Hall of Fame borders I-91 and is adjacent to the Connecticut River, which separates Springfield and West Springfield.

The City has approximately 150,000 residents. The Springfield Metropolitan Statistical Area has approximately 698,000 residents. The City is the third largest city in Massachusetts with only Boston and Worcester being larger. It is located along the Connecticut River about 25 miles north of Hartford, Connecticut; 50 miles west of Worcester, Massachusetts; 80 miles east of Albany, NY; 85 miles northwest of Providence, RI; 90 miles west of Boston, Massachusetts; and 140 miles northeast of New York City. The City’s 2012 median household income is just under \$40,000.

Leading employers in the City include Baystate Health System and Baystate Medical Center (over 12,400 employees combined), Massachusetts Mutual Financial Group (5,000 employees), Mercy Medical Center (3,000 employees) and Weldon Rehabilitation Hospital (3,000 employees). Two major highways, I-291 and I-391, promote travel within the metropolitan region.

C. Potential Project Sites

The Phase I DPH process is not site specific. As part of the RFQ/P process, the City does expect to impose location restrictions on the Project. The City expects that any proposed Project will take into account potential impacts on and compatibility with the area surrounding the Project. Currently, the City’s Planning Board has proposed interim zoning as discussed in this Section of this RFP/Q. A copy of the proposed interim zoning is attached as Exhibit D

No DPH applicant has provided notice as to any potential sites at this time. The notices provided to the City pursuant to DPH regulations are not site specific. As part of the City’s Phase I process, any enterprises interested in qualifying for the City’s Phase II will not be required to identify a specific site until it has submitted its Phase II application to the DPH.

The Pioneer Valley Planning Commission (PVPC) is working with Cities and Towns in the Region to prepare a Model Zoning Bylaw/Ordinance. The City has participated in meetings with the PVPC and a draft of a model Zoning Bylaw/Ordinance that is currently under discussion with the City’s Planning Staff and Medical Marijuana Internal Working Group is attached as Exhibit C to the RFQ/P. It is anticipated that the final regulations will include a “buffer zone” whereby no MMTC use or cultivation activities shall be located within a specified distance of a property line, the exact distance or distances to be determined) where activities or uses occur such as a school, child care, or other places where minors frequent, (e.g. a library, ball field, family recreation facility, religious facility or the like); other MMTC’s, drug or alcohol treatment facility, correctional facility, half-way house or similar facility, or any establishment licensed under the provisions of General Laws, Chapter 138 or other land uses which are potentially incompatible with MMTC facilities.

In addition, the City is aware that General Laws Chapter 40A, Section 3 extends certain protections to agricultural uses and that General Laws Chapter 128, Section 1A defines agriculture.

The City is also aware that under 105 CMR 725.100 (A)(4) a MMTC may not have more than two locations in Massachusetts at which marijuana is cultivated, Marijuana-Infused Product's ("MIP's") are prepared, and marijuana is dispensed. Each of these activities may occur at only one such location, which may be either the MMTC principal place of business or one DPH approved alternate Massachusetts location, but not both.

While the City's Zoning Ordinance is still in the Planning Process, the Submissions Obtained in Phase I and II will be used by the City in the Planning Process in the development of the City's Zoning Ordinance. A number of other aspects that will be considered in this process include:

- Only a qualified non-profit can apply for a Registered Marijuana Dispensary (RMD), which includes cultivation, processing and dispensing.
 - The RMD can cultivate, process and dispense on a single site, or can cultivate it on one site and sell it on another site. However, the City has security concerns about cultivating on one site and processing or dispensing on another.
 - One qualified non-profit can apply for up to 3 separate RMDs which can share cultivation facilities or each can have its own cultivation site.
 - An RMD can either cultivate and sell, or just sell but must provide its Medical Marijuana (MM) from another RMD that cultivates which is owned by the same non-profit.
 - One non-profit RMD may not buy cultivated MM from another non-profit's RMD except in emergencies as specified DPH regulations.
- DPH will be approving RMDs geographically (i.e. spread across the state to provide them within easy access to all communities (reducing hardship cultivation) rather than demographically (i.e. where the population concentrations are).
 - RMDs will likely have smaller facilities in areas serving areas with smaller populations and larger facilities when serving the areas of concentrated populations
- Production of medical marijuana is an industrialized process that must take place in highly secured, climate controlled structures 24 hours/day, 7 days/week, 52 weeks/year. Production is not just cultivating the plants but also processing of the marijuana into various forms for application (smoked, eaten, rubbed on, vaporized, etc.).
 - Production facilities should be directed to areas where the City has large (perhaps already vacant) buildings, likely an Industrial or Heavy Business Zone.
- Because Medical Marijuana Dispensaries serve an extremely limited clientele (must be a Qualifying Patient registered with the Massachusetts Department of Public Health) and not the general public, they don't need to be located on a main street or even necessarily in a neighborhood commercial district. They are a specific destination for a specific limited clientele and do not need exposure for attracting impulse shoppers.
- Dispensaries will have to have the same high level of security as production facilities (cameras, fencing, secured windows, etc.) and may not be in character with downtowns and other

neighborhood commercial districts. It is anticipated that the DPH will provide Guidance Documents for use by City officials to implement these provisions of the Act.

- It is anticipated that local regulations will include provisions to address health related standards for MIP's as well as the proper disposal of any wastes, and public safety related issues as to fire and security. These concerns will likely be addressed in an HCA or other local regulations that may be deemed reasonable and necessary as well as appropriate monitoring of operations for compliance with such terms or regulations.
- The Act and regulations provide for "hardship cultivation" at home can occur under certain circumstances, and that physical incapacity to access transportation, or the lack of a MMTC within a reasonable distance of a patient's residence, as well as financial hardship will part of the criteria for allowing hardship cultivation. Such cultivation is likely to present one of the greatest challenges with regard to the necessity to properly balance access with security and community impacts. The DPH regulations require MMTC's to have a program to provide reduced cost or free marijuana with documented verified financial hardship. It is anticipated that the DPH will provide Guidance Documents for use by City officials to implement these provisions of the Act.
- Whether Home Delivery is going to be part of the Business Model:
 - Requiring Qualified Patients to take public transit to dispensaries could put them at risk (riding on the bus (or even walking) with large amounts of cash/marijuana).
 - Home Delivery may reduce the need for hardship cultivation
 - What security measures will be undertaken to guard against the dangers associated with Home Delivery.

D. Selection Criteria

Phase I-RFQ/P

The purpose of the Phase I-RFQ/P is to pre-qualify enterprises desirous of participating in the City's Phase II-RFQ/P selection process. Each proposal submitted in response to the Phase I-RFQ/P will be evaluated by the City's Internal Review Group as determined by the Mayor and no qualified applicants in Phase I will be disqualified from participating in Phase II. The information provided will be used in the City's Planning Process to develop local land use, health and public safety regulations as necessary.

The City does not intend on entering into any HCA with an enterprise desirous of locating an MMTC in the City that has not complied with the DPH regulation notification requirements and has not participated in the City's two-phased process. Any HCA that is negotiated after completion of the City's Phase II RFQ/P process will be utilized in the City's planning process and incorporated into any Site Plan Review or other local permitting Conditions or Requirements.

Phase I will require a proposer's response to address the following criteria (such criteria are not necessarily listed in order of importance) with respect to the Project the proposer offers to develop:

- Background, reputation and expertise of the proposer in designing, developing and operating MMTC's or complexes similar to the Project proposed to be located in the City;
- A summary of anticipated fiscal impacts of the proposal on the City of Springfield; and
- Initial concept of proposer's Project

In addition, the City may consider any and all relevant information about the proposer known to the City.

Phase II-RFQ/P

The purpose of the Phase II-RFQ/P process will be to select from qualified responders to the Phase I-RFQ/P process, one or more enterprises with whom the City will negotiate, and if such negotiations are successful, execute an agreement for the Project. Each proposal submitted in response to the Phase II-RFQ/P is expected to be evaluated based on the quality of the response to criteria to be established in the Phase II-RFQ/P. It currently is anticipated that each applicant will be asked to submit a complete copy of its filing with the DPH Phase II process as part of the City's review and negotiation of an HCA, as well as a narrative proposal addressing, at a minimum, the following criteria:

- Background, reputation and expertise of the proposer in designing, developing and operating complexes similar to the Project proposed to be located in the City;
- Refined concept and design of, and construction budget for, the Project, setting forth
 - Components of proposed operation, including square footage estimates planned to be used for cultivation, dispensary, and other components of the Project;
 - Conceptual Site Plan (indicating proposed customer and employee parking, dumpster locations, security fencing, lighting, signage, etc.)
 - Accessibility of the proposer's Project to highways and major thoroughfares;
- Proposer's plans for mitigating adverse impacts of the Project on the City, its citizenry and on the City's infrastructure and services including, without limitation, plans for mitigating traffic, increased demands on the City's services including but not limited to increased demands on the City's police, fire, emergency and health related services;
- Security measures proposed to address the City's law enforcement priorities with regard to :
 - Preventing the distribution of marijuana to minors other than as allowed by state law and regulations;

- Preventing revenue from the sale of marijuana from going to criminal enterprises, gangs, and cartels;
 - Preventing the diversion of marijuana from states where it is legal under state law in some form to other states;
 - Preventing state-authorized marijuana activity from being used as a cover or pretext for the trafficking of other illegal drugs or other illegal activity;
 - Preventing violence and the use of firearms in the cultivation and distribution of marijuana;
 - Preventing drugged driving and the exacerbation of other adverse public health consequences associated with marijuana use;
 - Preventing growing or use of marijuana on public lands and the attendant public safety and environmental dangers posed by marijuana production or use on public lands; and Preventing marijuana possession on City property.
- A detailed report concerning the estimated fiscal impacts of the proposal on the City of Springfield, including, the types of, and the duration of, such costs or benefits;
- Ability of the proposer to meet or exceed the criteria and objectives for obtaining a DPH license under the Act;
- Proposer’s willingness to offer inducements, incentives or other benefits to the City to mitigate any secondary effects associated with the Project;
- Proposer’s plan for marketing the Project;
- Compatibility of the proposer’s Project with potential adjacent and neighboring businesses or residential neighborhoods, including odor related issues;
- Proposer’s plans for mitigating social issues associated with the Project; and
- Estimates of revenues, expenses and income from the operation of the Project;

However, the City is contemplating the use of a consultant to provide expert assistance is consideration of the Phase II applications and negotiation of agreements to assure that the criteria used and terms of any agreement are consistent with best practices within the industry insofar as addressing the City’s concerns about land use regulation, public health, safety, and monitoring of operations for compliance with local regulations. As such, the City will be requesting that any applicant agree to cover the costs of retaining such an expert. It is also anticipated that any agreement, or regulations imposed, will include an annual fee to cover the costs of monitoring. In addition, the City may consider any and all relevant information about the proposer known to the City and any other criteria that may be set forth in the City's Phase II-RFQ/P.

E. Timetable

Unless otherwise specified, the time of day for the following events shall be between 9:00 a.m. and 4:00 p.m. Eastern Standard Time. All other times specified in this Phase I-RFQ/P are Eastern Standard Time.

The City may adjust this scheduled as it deems necessary. Notification of any adjustment to the timetable will be posted on Comm-PASS (see Section 4.B. below).

| October 2013 | | | | | | | November 2013 | | | | | | |
|--------------|----|----|-----------|----|----|----|---------------|-----------|-----------|----|----|----------|----|
| S | M | T | W | T | F | S | S | M | T | W | T | F | S |
| | | 1 | 2 | 3 | 4 | 5 | | | | | | 1 | 2 |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 | 17 | 18 | 19 | 20 | 21 | 22 | 23 |
| 27 | 28 | 29 | 30 | 31 | | | 24 | 25 | 26 | 27 | 28 | 29 | 30 |

| December 2013 | | | | | | | January 2014 | | | | | | |
|---------------|----|----|-----------|----|-----------|----|--------------|----|-----------|----|----|----|----|
| S | M | T | W | T | F | S | S | M | T | W | T | F | S |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | | | | 1 | 2 | 3 | 4 |
| 8 | 9 | 10 | 11 | 12 | 13 | 14 | 5 | 6 | 7 | 8 | 9 | 10 | 11 |
| 15 | 16 | 17 | 18 | 19 | 20 | 21 | 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| 22 | 23 | 24 | 25 | 26 | 27 | 28 | 19 | 20 | 21 | 22 | 23 | 24 | 25 |
| 29 | 30 | 31 | | | | | 26 | 27 | 28 | 29 | 30 | 31 | |

| February 2014 | | | | | | | March 2014 | | | | | | |
|---------------|-----------|----|----|----|----|----|------------|----------|-----------|----|----|----|----|
| S | M | T | W | T | F | S | S | M | T | W | T | F | S |
| | | | | | | 1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 | 15 | 16 | 17 | 18 | 19 | 20 | 21 |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 | 22 | 23 | 24 | 25 | 26 | 27 | 28 |
| 23 | 24 | 25 | 26 | 27 | 28 | | 29 | 30 | 31 | | | | |

| Action | Date |
|---|-------------------|
| 1. Phase I-RFQ/P issued | October 25, 2013 |
| 2. Written questions from interested proposers concerning Phase I- RFQ/P | November 5, 2013 |
| 3. Written responses from City to questions posted on City website | November 12, 2013 |
| 4. Phase I-RFQ/P Responses due by 5:00 p.m. | December 4, 2013 |
| 5. City reviews responses and issues Phase II – RFQ/P to qualified responders | December 18, 2013 |
| 6. City holds information meeting for participants in Phase II- RFQ/P | December 20, 2012 |

| Action | Date |
|--|--|
| 7. Public Presentations by Applicants | January 7, 2014 |
| 8. Responses to Phase II-RFQ/P due by 4:00 p.m. | January 21, 2014 |
| 9. City announces name of proposer qualifying for right to negotiate agreement | February 17, 2014 |
| 10. City negotiates terms of agreement with proposer | February 17, 2013 to March 17, 2014 |
| 11. City enters into agreement with proposer | March 31, 2014 |

Section 2. Response Requirements.

A. Specific Submittal Requirements

Each response to the Phase I-RFQ/P must address, in detail, each of the items listed below. To the extent the proposer is a newly formed or to-be-formed entity, the responses should be provided from the main operating entity and/or its significant business units:

1. The name of the proposer, the contact person and the contact person’s business address, telephone and facsimile numbers and e-mail address.
2. A brief description of proposer and its business including names and biographies of its officers, directors, and key personnel, or persons serving in similar capacities.
3. A description of proposer’s experience during the last ten (10) years in developing MMTC’s or similar projects. For each such project, include the name and location, the total dollar investment, components of each facility, including square footage, security measures, total revenues for the last three (3) years, number of full-time employees, and approximate size of the site on which the project is located.
4. A brief description of any MMTC projects which proposer has publicly announced that proposer is in the process of acquiring, developing or proposing to acquire or develop. Include the same information being requested in item 3, above, to the extent applicable.
5. An indication as to whether proposer or its representatives have visited the City at any time during the last six (6) months for the purpose of determining whether the City would be suitable for the development of the Project, and a description of any findings as to the City’s as to suitability.
6. An indication of the minimum amount of land proposer reasonably believes it will require for the Project.
7. An indication of the amount of land the proposer currently has under control in the City for the Project and/or proposer reasonably will be able to have under control within the next ninety (90) days. If proposer

reasonably believes it will require the assistance of the City or one of its instrumentalities in order to obtain title to such land, please so indicate. Do not indicate the location or description of any site proposer controls, is attempting to control or will attempt to control until such site has been disclosed to the DPH.

8. A description of proposer's currently available sources of financing for all or a portion of the total costs of the Project, the dollar amount of any such currently available financing and the extent to which proposer reasonably believes such currently available financing will be committed to projects other than the Project over the next twenty-four (24) months.
9. An organizational chart for the proposer listing all principal entities and business units. For any non-public companies, a list of the names of the ultimate individual owners, their business backgrounds and a description of their role in the enterprise. For publicly traded companies, a list of stockholders owning 5% or more of the publicly traded company. If proposer currently has or expects to have local partners who will have an ownership in the entity developing the Project, that same information must be provided.
10. If the entity developing the Project or its affiliate will not be managing the Project, indicate the name of the management company and key personnel and a description of its experience in managing MMTC's. Such description must include the name and location of all projects managed, the components as to cultivation, processing and dispensing, total revenues for the last three (3) years, and number of full-time and part time employees.

With respect to: (i) the entity proposing to develop the Project; (ii) the management company who will be managing the Project (if not an affiliate of the developer); and (iii) their respective affiliates, list the jurisdictions where each are currently or have been licensed. For each such jurisdiction please indicate whether any license has been suspended, revoked or terminated. A description of proposer's experience in negotiating host community agreements and the types and amounts of fees, arrangements and other contributions made to each such community.¹³ A brief description of proposer's concept of the Project including major components, including site plans and renderings (if available) to the extent already made public. A summary of anticipated fiscal impacts of the proposal on the City of Springfield, including anticipated tax payments.

B. General Submission Instructions

Complete responses must be submitted by the date listed in the Timetable, Section 1.F., no later than 4:00 p.m., Eastern Standard Time. Responses may not be e-mailed or faxed to the City. Responses must be submitted by mail, courier or hand-delivered to:

City of Springfield Office of Procurement
Attn: Lauren Stabilo, CPO
36 Court Street, Room 307
Springfield, MA 01103

The proposer must submit:

- ten (10) hard copies of its complete response assembled in three-ring binders of a type which may be opened and individual pages may be removed. Each separate page must clearly set forth the proposer’s name and date of submission in case the pages are separated from the binders;
- one (1) electronic copy of its complete response on a CD-ROM or flash drive;
- a fully executed release in the form attached hereto as Exhibit B; and
- a cashier’s check made payable to the “City of Springfield” in the amount of One Thousand Two Hundred and no/100 dollars (\$1,250.00). To cover the estimated cost of the City’s Phase I evaluation.

Section 3. Evaluation Process.

A. Response Review and Evaluation

1. Compliance with Submission Instructions

All Phase I-RFQ/P responses will be reviewed by the City to determine compliance with the response submission instructions described in Section 2 hereof. For those responses that comply with the response submission instructions, an evaluation committee designated by the Mayor will review the response. The evaluation committee may be assisted by the City’s consultants and various City departments.

2. Evaluation of Responses

The Phase I-RFQ/P responses will be evaluated based on the criteria described in Section 1.E. hereof.

3. Non-Qualifying Responses

The City reserves the right to reject a response at any time during the evaluation process if the response:

- Fails to demonstrate to the City's satisfaction that it meets all Phase I-RFQ/P requirements; or
- Fails to submit all required information or otherwise satisfy all response requirements in Section 2.

4. Clarifications

The City reserves the right to contact a proposer after the submission of a response for the purpose of clarifying a response to ensure mutual understanding. This contact may include written questions, interviews, site visits, or requests for corrective pages in the response. Responses must be submitted to the City within the time specified in the request. Failure to comply with requests for additional information may result in rejection of the response as noncompliant.

Section 4. Additional Terms and Conditions.

A. Issuing Office

This Phase I-RFQ/P is issued by:

Chief Procurement Officer
City of Springfield Office of Procurement
36 Court Street, Room 307
Springfield, MA 01103

B. City Website:

Proposers are solely responsible for obtaining all information distributed for this Phase I RFQ/P by accessing the City's website at <http://www.springfieldcityhall.com/hhs/medicalmarijuana.html>.

It is each proposer's responsibility to check the City website listed above for:

- Any addenda or modifications to this RFQ/P

The City accepts no responsibility and will provide no accommodation to proposers who submit a response based on an out-of-date Solicitation or on information received from a source other than the City website.

Addenda and other documents relevant to this procurement will be available through the City website. It is the responsibility of the vendor/proposer to visit the City website in order to obtain such documents.

F. Prohibited Communications

Proposers may contact Lauren Stabilo, Chief Procurement Office with written any questions regarding this Phase I-RFQ/P, pursuant to Section 4.H below. Except as indicated in the previous sentence and in Section 4.H. below, Proposers are prohibited from communicating directly with any employee of the City regarding this Phase I-RFQ/P and no other individual City employee or representative is authorized to provide any information or respond to any question or inquiry concerning this Phase I-RFQ/P.

G. Phase I-RFQ/P Copies

Proposers may request a copy of the Phase I-RFQ/P, or any of its components, by going to the City website at <http://www.springfieldcityhall.com/hhs/medicalmarijuana.html> and searching for the solicitation number as noted on the front page of this document.

H. Phase I-RFQ/P Questions

Proposers may submit written questions concerning this Phase I-RFQ/P until no later than the date and time specified in Section 1.E., above. Written inquiries must be sent to the address listed in Section 4.A., above, by fax to 413.787.6295 or by e-mail to **lstabilo@springfieldcityhall.com**.

The City will review written questions inquiries received on or before the deadline for questions, and, at its discretion, prepare written responses to questions which the City determines to be of general interest and that help to clarify the Phase I-RFQ/P. **[Any written response will be posted on the City website.]** Only written responses will be binding on the City.

I. Amendment or Withdrawal of Phase I-RFQ/P

[If the City decides to amend or clarify any part of this Phase I-RFQ/P, a written addendum will be posted on the City website. Proposers are cautioned to check this site regularly, as this will be the sole method used for notification of changes.] The City reserves the right to amend the Phase I-RFQ/P at any time prior to the deadline for submission of responses and to terminate this procurement in whole or in part at any time before or after submission of responses.

J. Costs

The City will not be responsible for any costs or expenses incurred by proposers preparing responses to this Phase I-RFQ/P.

K. Public Records

Upon conclusion of this process, all responses and related documents submitted in response to this Phase I-RFQ/P may be considered public records and as such be subject to the Massachusetts Public Records Law, M.G.L. c. 66, § 10 and M.G.L. c. 4, § 7 subsection 26. Any statements in submitted responses that are inconsistent with these statutes will be disregarded.

Proposers are encouraged to familiarize themselves with the Massachusetts Public Records Law before submitting a response. Any request for confidential treatment of information must be included in the response. The proposer must enumerate the specific grounds in the Public Records Law which support treatment of the material as exempt from disclosure and explain why disclosure is not in the best interest of the public. The request for confidential treatment of information must also include the name, address, and telephone number of the person authorized by the proposer to respond to any inquiries by the City concerning the confidential status of the materials. The City makes no representation that requests for confidential treatment of documents will be accepted, if the documents are not exempt from the statutory definition of public records.

Any response submitted which contains confidential information must be conspicuously marked on the outside as containing confidential information, and each page upon which confidential information appears must be conspicuously marked as containing confidential information. Identification of the entire proposal as confidential may be deemed non-responsive and may disqualify the proposer. **[If the proposer designates any portion of the Phase I-RFQ/P as confidential, the proposer must submit one copy of the proposal from which the confidential information has been excised. This excised copy is in addition to the number of copies requested in the “Response Requirements – General Submission Instructions” section of this Phase I-RFQ/P. The confidential material must be excised in such a way as to allow the public to determine the general nature of the material removed and to retain as much of the proposal as possible.]**

L. Reservations

The City reserves the right to reject all responses and to waive any defects. The City may seek clarification of the response from a proposer at any time, and failure to respond may be cause for rejection. Clarification is not an opportunity to change the response. Submission of a proposal confers no rights other than a right to be considered to be selected to participate in the Phase II-RFQ/P. This process is for the City’s benefit only and is to provide the City with competitive information to assist it in its selection process. All decisions on compliance, evaluation, terms and conditions shall be made solely at the City’s discretion and made to favor the City.

M. Variances

The City reserves the right to waive or permit cure of variances in the proposal if it is in the City’s best interest to do so.

N. Verification of Responses

Responses are subject to verification. Misleading or inaccurate responses may result in disqualification.

O. Information from other Sources

The City reserves the right to obtain and consider information from other sources concerning a proposer, such as, among other sources, the proposer's capability and performance under host community agreements with other jurisdictions.

P. Criminal History and Background Investigation

The City reserves the right to conduct criminal history and other background investigation of any proposer, its officers, directors, owners, shareholders or partners and managerial and supervisory personnel retained by the proposer.

Q. Applicable Law

This Phase I-RFQ/P and the host community agreement are to be governed by the laws of the Commonwealth of Massachusetts. Changes in applicable laws and rules may affect the selection process or the host community agreement. Proposers are responsible for ascertaining pertinent legal requirements and restrictions.

R. No Guaranty

This Phase I-RFQ/P does not constitute an offer of any nature or kind whatsoever to any proposer or its agents. The selection of a proposer whether in the Phase I-RFQ/P or the Phase II-RFQ/P does not constitute a binding agreement and the selection of a proposer does not mean that its responses are totally acceptable to the City in every respect or in the form submitted. After completion of the Phase II-RFQ/P selection, the City has the right to negotiate with the successful proposer and, as part of that process, to negotiate changes, amendments or modifications to any of the successful proposer's responses without offering any other proposer the right to amend their response.

S. Duty to Disclose Changes in Information included in a Response

Each proposer is under a continuing duty to disclose promptly any changes in information provided in its response or any related materials submitted in connection therewith.

T. Proposers Agree to all Terms and Conditions of this Phase I-RFQ/P

By submitting a response to the Phase I-RFQ/P, a proposer is deemed to agree to abide by all of the terms, conditions, policies and rules of this Phase I-RFQ/P.

EXHIBIT A

THE ACT

Chapter 369 of the Acts of 2012- (Question 3 ballot initiative)

Be It Enacted By The People And By Their Authority:

Section 1. Purpose and Intent.

The citizens of Massachusetts intend that there should be no punishment under state law for qualifying patients, physicians and health care professionals, personal caregivers for patients, or medical marijuana treatment center agents for the medical use of marijuana, as defined herein.

Section 2. As used in this Law, the following words shall, unless the context clearly requires otherwise, have the following meanings:

(A) “Card holder” shall mean a qualifying patient, a personal caregiver, or a dispensary agent of a medical marijuana treatment center who has been issued and possesses a valid registration card.

(B) “Cultivation registration” shall mean a registration issued to a medical marijuana treatment center for growing marijuana for medical use under the terms of this Act, or to a qualified patient or personal caregiver under the terms of Section 11.

(C) “Debilitating medical condition” shall mean:

Cancer, glaucoma, positive status for human immunodeficiency virus, acquired immune deficiency syndrome (AIDS), hepatitis C, amyotrophic lateral sclerosis (ALS), Crohn’s disease, Parkinson’s disease, multiple sclerosis and other conditions as determined in writing by a qualifying patient’s physician.

(D) “Department” shall mean the Department of Public Health of the Commonwealth of Massachusetts.

(E) “Dispensary agent” shall mean an employee, staff volunteer, officer, or board member of a non-profit medical marijuana treatment center, who shall be at least twenty-one (21) years of age.

(F) “Enclosed, locked facility” shall mean a closet, room, greenhouse, or other area equipped with locks or other security devices, accessible only to dispensary agents, patients, or personal caregivers.

(G) “Marijuana,” has the meaning given “marihuana” in Chapter 94C of the General Laws.

(H) “Medical marijuana treatment center” shall mean a not-for-profit entity, as defined by Massachusetts law only, registered under this law, that acquires, cultivates, possesses, processes (including development of related products such as food, tinctures, aerosols, oils, or ointments), transfers, transports, sells, distributes, dispenses, or administers marijuana, products containing marijuana, related supplies, or educational materials to qualifying patients or their personal caregivers.

(I) “Medical use of marijuana” shall mean the acquisition, cultivation, possession, processing, (including development of related products such as food, tinctures, aerosols, oils, or ointments), transfer, transportation, sale, distribution, dispensing, or administration of marijuana, for the benefit of qualifying patients in the treatment of debilitating medical conditions, or the symptoms thereof.

(J) “Personal caregiver” shall mean a person who is at least twenty-one (21) years old who has agreed to assist with a qualifying patient’s medical use of marijuana. Personal caregivers are prohibited from consuming marijuana obtained for the personal, medical use of the qualifying patient.

An employee of a hospice provider, nursing, or medical facility providing care to a qualifying patient may also serve as a personal caregiver.

(K) “Qualifying patient” shall mean a person who has been diagnosed by a licensed physician as having a debilitating medical condition.

(L) “Registration card” shall mean a personal identification card issued by the Department to a qualifying patient, personal caregiver, or dispensary agent. The registration card shall verify that a physician has provided a written certification to the qualifying patient, that the patient has designated the individual as a personal caregiver, or that a medical treatment center has met the terms of Section 9 and Section 10 of this law. The registration card shall identify for the Department and law enforcement those individuals who are exempt from Massachusetts criminal and civil penalties for conduct pursuant to the medical use of marijuana.

(M) “Sixty-day supply” means that amount of marijuana that a qualifying patient would reasonably be expected to need over a period of sixty days for their personal medical use.

(N) “Written certification” means a document signed by a licensed physician, stating that in the physician’s professional opinion, the potential benefits of the medical use of marijuana would likely outweigh the health risks for the qualifying patient. Such certification shall be made only in the course of a bona fide physician-patient relationship and shall specify the qualifying patient’s debilitating medical condition(s).

Section 3. Protection from State Prosecution and Penalties for Health Care Professionals

A physician, and other health care professionals under a physician’s supervision, shall not be penalized under Massachusetts law, in any manner, or denied any right or privilege, for:

- (a) Advising a qualifying patient about the risks and benefits of medical use of marijuana; or
- (b) Providing a qualifying patient with written certification, based upon a full assessment of the qualifying patient’s medical history and condition, that the medical use of marijuana may benefit a particular qualifying patient.

Section 4. Protection From State Prosecution and Penalties for Qualifying Patients and Personal Caregivers

Any person meeting the requirements under this law shall not be penalized under Massachusetts law in any manner, or denied any right or privilege, for such actions.

A qualifying patient or a personal caregiver shall not be subject to arrest or prosecution, or civil penalty, for the medical use of marijuana provided he or she:

- (a) Possesses no more marijuana than is necessary for the patient’s personal, medical use, not exceeding the amount necessary for a sixty-day supply; and
- (b) Presents his or her registration card to any law enforcement official who questions the patient or caregiver regarding use of marijuana.

Section 5. Protection From State Prosecution and Penalties for Dispensary Agents.

A dispensary agent shall not be subject to arrest, prosecution, or civil penalty, under Massachusetts law, for actions taken under the authority of a medical marijuana treatment center, provided he or she:

- (a) Presents his or her registration card to any law enforcement official who questions the agent concerning their marijuana related activities; and
- (b) Is acting in accordance with all the requirements of this law.

Section 6. Protection Against Forfeiture and Arrest

(A) The lawful possession, cultivation, transfer, transport, distribution, or manufacture of medical marijuana as authorized by this law shall not result in the forfeiture or seizure of any property.

(B) No person shall be arrested or prosecuted for any criminal offense solely for being in the presence of medical marijuana or its use as authorized by this law.

Section 7. Limitations of Law

(A) Nothing in this law allows the operation of a motor vehicle, boat, or aircraft while under the influence of marijuana.

(B) Nothing in this law requires any health insurance provider, or any government agency or authority, to reimburse any person for the expenses of the medical use of marijuana.

(C) Nothing in this law requires any health care professional to authorize the use of medical marijuana for a patient.

(D) Nothing in this law requires any accommodation of any on-site medical use of marijuana in any place of employment, school bus or on school grounds, in any youth center, in any correctional facility, or of smoking medical marijuana in any public place.

(E) Nothing in this law supersedes Massachusetts law prohibiting the possession, cultivation, transport, distribution, or sale of marijuana for nonmedical purposes.

(F) Nothing in this law requires the violation of federal law or purports to give immunity under federal law.

(G) Nothing in this law poses an obstacle to federal enforcement of federal law.

Section 8. Department to define presumptive 60-day supply for qualifying patients.

Within 120 days of the effective date of this law, the department shall issue regulations defining the quantity of marijuana that could reasonably be presumed to be a sixty-day supply for qualifying patients, based on the best available evidence. This presumption as to quantity may be overcome with evidence of a particular qualifying patient's appropriate medical use.

Section 9. Registration of nonprofit medical marijuana treatment centers.

(A) Medical marijuana treatment centers shall register with the department.

(B) Not later than ninety days after receiving an application for a nonprofit medical marijuana treatment center, the department shall register the nonprofit medical marijuana treatment center to acquire, process, possess, transfer, transport, sell, distribute, dispense, and administer marijuana for medical use, and shall also issue a cultivation registration if:

1. The prospective nonprofit medical marijuana treatment center has submitted:

(a) An application fee in an amount to be determined by the department consistent with Section 13 of this law.

(b) An application, including:

(i) The legal name and physical address of the treatment center and the physical address of one additional location, if any, where marijuana will be cultivated.

(ii) The name, address and date of birth of each principal officer and board member.

(c) Operating procedures consistent with department rules for oversight, including cultivation and storage of marijuana only in enclosed, locked facilities.

2. None of the principal officers or board members has served as a principal officer or board member for a medical marijuana treatment center that has had its registration certificate revoked.

(C) In the first year after the effective date, the Department shall issue registrations for up to thirty-five non-profit medical marijuana treatment centers, provided that at least one treatment center shall be located in each county, and not more than five shall be located in any one county.

In the event the Department determines in a future year that the number of treatment centers is insufficient to meet patient needs, the Department shall have the power to increase or modify the number of registered treatment centers.

(D) A medical treatment center registered under this section, and its dispensary agents registered under Section 10, shall not be penalized or arrested under Massachusetts law for acquiring, possessing, cultivating, processing, transferring, transporting, selling, distributing, and dispensing marijuana, products containing marijuana, and related supplies and educational materials, to qualifying patients or their personal caregivers.

Section 10. Registration of medical treatment center dispensary agents.

(A) A dispensary agent shall be registered with the Department before volunteering or working at a medical marijuana treatment center.

(B) A treatment center must apply to the Department for a registration card for each affiliated dispensary agent by submitting the name, address and date of birth of the agent.

(C) A registered nonprofit medical marijuana treatment center shall notify the department within one business day if a dispensary agent ceases to be associated with the center, and the agent's registration card shall be immediately revoked.

(D) No one shall be a dispensary agent who has been convicted of a felony drug offense. The Department is authorized to conduct criminal record checks with the Department of Criminal Justice Information to enforce this provision.

Section 11. Hardship Cultivation Registrations.

The Department shall issue a cultivation registration to a qualifying patient whose access to a medical treatment center is limited by verified financial hardship, a physical incapacity to access reasonable transportation, or the lack of a treatment center within a reasonable distance of the patient's residence. The Department may deny a registration based on the provision of false information by the applicant. Such registration shall allow the patient or the patient's personal caregiver to cultivate a limited number of plants, sufficient to maintain a 60-day supply of marijuana, and shall require cultivation and storage only in an enclosed, locked facility.

The department shall issue regulations consistent with this section within 120 days of the effective date of this law. Until the department issues such final regulations, the written

recommendation of a qualifying patient's physician shall constitute a limited cultivation registration.

Section 12. Medical marijuana registration cards for qualifying patients and designated caregivers.

(A) A qualifying patient may apply to the department for a medical marijuana registration card by submitting:

1. Written certification from a physician.

2. An application, including:

(a) Name, address unless homeless, and date of birth.

(b) Name, address and date of birth of the qualifying patient's personal caregiver, if any.

Section 13. Department implementation of Regulations and Fees.

Within 120 days of the effective date of this law, the department shall issue regulations for the implementation of Sections 9 through 12 of this Law. The department shall set application fees for non-profit medical marijuana treatment centers so as to defray the administrative costs of the medical marijuana program and thereby make this law revenue neutral.

Until the approval of final regulations, written certification by a physician shall constitute a registration card for a qualifying patient. Until the approval of final regulations, a certified mail return receipt showing compliance with Section 12 (A) (2) (b) above by a qualifying patient, and a photocopy of the application, shall constitute a registration card for that patient's personal caregiver.

Section 14. Penalties for Fraudulent Acts.

(A) The department, after a hearing, may revoke any registration card issued under this law for a willful violation of this law. The standard of proof for revocation shall be a preponderance of the evidence. A revocation decision shall be reviewable in the Superior Court.

(B) The fraudulent use of a medical marijuana registration card or cultivation registration shall be a misdemeanor punishable by up to 6 months in the house of correction, or a fine up to \$500,

but if such fraudulent use is for the distribution, sale, or trafficking of marijuana for non-medical use for profit it shall be a felony punishable by up to 5 years in state prison or up to two and one half years in the house of correction.

Section 15. Confidentiality

The department shall maintain a confidential list of the persons issued medical marijuana registration cards. Individual names and other identifying information on the list shall be exempt from the provisions of Massachusetts Public Records Law, M.G.L. Chapter 66, section 10, and not subject to disclosure, except to employees of the department in the course of their official duties and to Massachusetts law enforcement officials when verifying a card holder's registration.

Section 16. Effective Date.

This law shall be effective January 1, 2013.

Section 17. Severability.

The provisions of this law are severable and if any clause, sentence, paragraph or section of this measure, or an application thereof, shall be adjudged by any court of competent jurisdiction to be invalid, such judgment shall not affect, impair, or invalidate the remainder thereof but shall be confined in its operation to the clause, sentence, paragraph, section or application adjudged invalid.

EXHIBIT B

CONSENT AND RELEASE*

RECITALS

A. The City of Springfield, Massachusetts (the “City”) is soliciting proposals and information regarding qualifications from enterprises (each, a “Proposer”) desirous of entering into an agreement with the City in connection with the development, construction and operation of a Medical Marijuana Treatment Center project (a “Community Agreement”) as set forth in a certain Phase I-RFQ/P dated October , 2013 issued by the City, together with all alterations, supplements or amendments thereto (collectively, the “RFQ/P”).

B. To evaluate the personal, business and financial qualifications and professional capabilities and standing of each Proposer and its affiliates (each, a “Releasor” and collectively, the “Releasors”), the City requires certain information about each Releasor which could be considered confidential and/or proprietary (“Information”).

C. The collection of Information by the City is essential to select the highest quality proposal for the City.

D. Some of the Information may be collected directly or indirectly from the Releasor and/or other Releasors.

E. Other Information will be collected directly or indirectly from others such as law enforcement agencies, courts, gaming and other regulatory bodies, former employees, and financial sources.

NOW, THEREFORE, the Releasor, in consideration of the City’s accepting for review a proposal in which Releasor has an economic interest and other valuable consideration the sufficiency of which is hereby acknowledged, agree as follows:

1. The definitions contained in the RFQ/P are incorporated herein by reference.

2. The Releasor hereby consents and agrees to abide by all of the City’s terms, conditions, ordinances, rules, regulations and policies concerning the RFQ/P.

3. The Releasor agrees that the City does not acknowledge or agree that any of the Information is confidential and/or proprietary.

4. Information collected may be used in at least the following ways:

* To be signed by any parent company of proposer on behalf of itself and its affiliates, if any.

- a. To evaluate Releasor's personal, financial and business history;
- b. To evaluate Releasor's personal, financial and business integrity, and criminal history, if any;
- c. To evaluate Releasor's professional qualifications and capabilities and demonstrated past performance; and
- d. Such other uses as the City reasonably believes are necessary to evaluate the Proposer and its response to the RFQ/P.

5. The City may or may not use the Information in any decision with respect to the Massachusetts Department of Public Health (DPH) and may provide this Information to the DPH.

6. Information may be shared with other state, local or federal government agencies, departments or advisors who may work with the City.

7. The City is subject to the federal law, the laws of the Commonwealth and City ordinances. The Releasor acknowledges that such laws and ordinances may provide access by third parties to the Information regarding the Releasor.

8. The Releasor and its successors and assigns, and on behalf of its affiliates and their successors and assigns, hereby release: (i) the City including all departments, agencies and commissions thereof; (ii) the City's consultants (if any); and (iii) their respective principals, agents, subcontractors, consultants, attorneys, advisors, employees, officers and directors (the "Releasees"), and hold each of them harmless from any damages, claims, rights, liabilities, or causes of action, which the Releasor ever had, now has, may have or claim to have, in law or in equity, against any or all of the Releasees, arising out of or directly or indirectly related to the (i) RFQ/P process and the selection and evaluation of proposals submitted in connection therewith; (ii) negotiation of a Community Agreement between the City and the Releasor or any other Proposer; (iii) release or disclosure or any Information whether intentional or unintentional; and (iv) use, investigation of, or processing of the Information.

9. The undersigned (i) has read and understands this Consent and Release; (ii) authorizes the direct and indirect collection of, and consents to the use and disclosure of, the Information as described herein; and (iii) represents and warrants that it has the authority to execute and deliver this Consent and Release on behalf of itself and its affiliates.

Name of Company

Dated: _____

By: _____

Name: _____

Title: _____

EXHIBIT C

DRAFT MEDICAL MARIJUANA ZONING ORDINANCE

(8-19-13)

1. Purposes. It is recognized that the nature of the substance cultivated, processed, and/or sold by medical marijuana treatment centers and off-site medical marijuana dispensaries may have objectionable operational characteristics and may be located in such a way to pose a threat to the health, safety, and general well-being of the public as well as patients seeking treatment. Therefore, specific and separate regulation of Medical Marijuana Treatment Centers/Registered Marijuana Dispensaries (hereafter referred to as an MMTC/RMD) and Off-site Medical Marijuana Dispensary (hereafter referred to as an OMMD) facilities is necessary to ensure that adverse effects will not contribute to blight in the surrounding neighborhood or exacerbate risks to public health and safety associated with other nearby land uses, and that such facilities are not located within close proximity of minors and do not become concentrated in any one area within the Town of _____.

Subject to the provisions of this Zoning Bylaw, Chapter 40A of the Massachusetts General Laws, and 105 CMR 725.000, MMTC and OMMD will be permitted to provide medical support, security, and physician oversight that meet or exceed state regulations as established by the Massachusetts Department of Health (DPH).

DEFINITIONS

Medical Marijuana Treatment Center (MMTC): a not-for-profit entity registered and approved by the MA Department of Public Health on accordance with 105 CMR 725.000, and pursuant to all other applicable state laws and regulations, also to be known as a registered marijuana dispensary (RMD), that acquires, cultivates, possesses, processes (including development of related products such as food, tinctures, aerosols, oils, or ointments), transfers, transports, sells, distributes, dispenses, or administers marijuana, products containing marijuana, related supplies, or educational materials to registered qualifying patients or their personal caregivers. The cultivation and processing of medical marijuana in accordance with these regulations is considered to be a manufacturing use and is not agriculturally exempt from zoning.

Off-Site Medical Marijuana Dispensary (OMMD) – a Medical Marijuana Facility/Registered Marijuana Dispensary that is located off-site from the cultivation/processing facility and only distributes/dispenses the processed marijuana, related supplies and educational materials to registered Qualifying Patients or their personal caregivers.

PERMITTED DISTRICTS

Medical Marijuana Treatment Center/Registered Marijuana Dispensary:

- Industrial Districts - By-Right/Site Plan Approval
If a community doesn't have an Industrial District (like many small towns) then by Special Permit/Site Plan Approval in Commercial Districts for really small communities that don't have a Commercial District, create one.

Off-Site Medical Marijuana Dispensary:

- Industrial Districts – By-Right/Site Plan Approval
- Commercial Districts - Special Permit/Site Plan Approval

ADDITIONAL REQUIREMENTS/CONDITIONS

1) Use:

- a) MMTC and OMMD facilities may only be involved in the uses permitted by its definition and may not include other businesses or services.
- b) No marijuana shall be smoked, eaten or otherwise consumed or ingested within the premises. .
- c) The hours of operation shall be set by the Special Permit Granting Authority, but in no event shall an MMTC or OMMD facility be open to the public, and no sale or other distribution of marijuana shall occur upon the premises or via delivery from the premises, between the hours of 8:00 p.m. and 8:00 a.m.

2) Physical Requirements:

- a) All aspects of the use/facility relative to the acquisition, cultivation, possession, processing, sales, distribution, dispensing, or administration of marijuana, products containing marijuana, related supplies, or educational materials must take place at a fixed location within a fully enclosed building and shall not be visible from the exterior of the business.
- b) No outside storage is permitted.
- c) No OMMD Facility shall have a gross floor area in excess of 2,500 square feet.
- d) Ventilation – all MMTC and OMMD facilities shall be ventilated in such a manner that no:
 - i) pesticides, insecticides or other chemicals or products used in the cultivation or processing are dispersed into the outside atmosphere
 - ii) odor from marijuana cannot be detected by a person with a normal sense of smell at the exterior of the medical marijuana business or at any adjoining use or property.
- e) Signage shall be displayed on the exterior of the MMTC and OMMD facility's entrance in plain sight of clients stating that "Registration Card issued by the MA Department of Public Health required" in text two inches in height.

3) Location:

- a) No MMTC and OMMD facility shall be located on a parcel which is within three hundred (300) feet of parcel occupied by:
 - i) a public or private elementary, junior high, middle or high school or state licensed day care center
 - ii) another MMTC or OMMD facility, except that this limitation shall not apply in Industrial zones
- b) An MMTC or OMMD facility shall not be located in buildings that contain any pharmacy, medical doctor offices or the offices of any other professional practitioner authorized to prescribe the use of medical marijuana.

- c) No MMTC or OMMD facility shall be located on a lot which abuts a residential use (including commercial residential uses such as hotels, motels, lodging houses, etc.) or residential zoning district.
- d) No MMTC or OMMD facility shall be located inside a building containing residential units, including transient housing such as motels and dormitories.

4) Reporting Requirements.

- a) All Special Permit and Site Plan Approval holders for an MMTC or OMMD facility shall provide the Police Department, Fire Department, Building Commissioner/Inspector and the Special Permit Granting Authority with the names, phone numbers and email addresses of all management staff and key-holders to whom one can provide notice if there are operating problems associated with the establishment.
- b) The local Building Commissioner/Inspector, Board of Health, Police Department, Fire Department and Special Permit Granting Authority (in cases where a Special permit or Site Plan Approval was granted) shall be notified in writing by an MMTC or OMMD facility owner/operator/ manager:
 - i) a minimum of 30 days prior to any change in ownership or management of that facility
 - ii) A minimum of 12 hours following a violation or potential violation of any law or any criminal or potential criminal activities or attempts of violation of any law at the MMTC or OMMD.
- c) Permitted MMTC and OMMD facilities shall file an annual report to and appear before the Special Permit Granting Authority no later than January 31st, providing a copy of all current applicable state licenses for the facility and/or its owners and demonstrate continued compliance with the conditions of the Special Permit.
- d) The owner or manager is required to respond by phone or email within twenty-four hours of contact by a city official concerning their MMTC or OMMD at the phone number or email address provided to the City as the contact for the business. .

5) Transfer/Discontinuance of Use

- a) A Special Permit granted under this Section is non-transferable and shall have a term limited to the duration of the applicant's ownership/control of the premises as a MMTC or OMMD.
- b) An MMTC or OMMD facility shall be required to remove all material, plants equipment and other paraphernalia prior to surrendering its state Registration.

APPLICATION REQUIREMENTS

- 1) In addition to the standard application requirements for Special Permits and Site Plan Approvals, such applications for an MMTC or OMMD facility shall include the following:
 - a) the name and address of each owner of the MMTC or OMMD facility/operation;
 - b) documentation that demonstrates that said MMTC or OMMD facility, and it's owner/operators, qualify and are eligible to receive a Certificate of Registration and meet all of the requirements of a Medical Marijuana Treatment Center/Registered Marijuana Dispensary in accordance with 105 CMR 725.000 of the Massachusetts Department of Public Health.
 - c) evidence that the Applicant has site control and right to use the site for a MMTC or

- OMMD facility in the form of a deed or in the case of a lease a notarized statement from the property owner and a copy of the lease agreement;
- d) A notarized statement signed by the MMTC or OMMD organization's Chief Executive Officer and corporate attorney disclosing all of its owners, shareholders, partners, members, managers, directors, officers, or other similarly-situated individuals and entities and their addresses. If any of the above are entities rather than persons, the Applicant must disclose the identity of the owners of such entities until the disclosure contains the names of individuals;
 - e) In addition to what is normally required in a Site Plan, details showing all exterior proposed security measures for the MMTC or OMMD including lighting, fencing, gates and alarms, etc. ensuring the safety of employees and patrons and to protect the premises from theft or other criminal activity.
 - f) a traffic study to establish the MMTC or OMMD impacts at peak demand times.

FINDINGS

- 1) In addition to the standard Findings for a Special Permit or Site Plan Approval the Special Permit Granting Authority must also find all the following:
 - a) That the MMTC or OMMD facility is designed to minimize any adverse visual or economic impacts on abutters and other parties in interest;
 - b) That the MMTC or OMMD facility demonstrates that it will meet all the permitting requirements of all applicable agencies within the Commonwealth of Massachusetts and will be in compliance with all applicable state laws and regulations; and
 - c) That the applicant has satisfied all of the conditions and requirements of this Section and other applicable Sections of this Bylaw/Ordinance;
 - d) That the MMTC or OMMD project meets a demonstrated need
 - e) that the MMTC or OMMD facility provides adequate security measures to ensure that no individual participant will pose a direct threat to the health or safety of other individuals, and that the storage and/or location of cultivation is adequately secured.
 - f) That the MMTC or OMMD facility adequately addresses issues of traffic demand, circulation flow, parking and queuing, particularly at peak periods at the facility, and its impact on neighboring uses.

EXHIBIT D

PLANNING BOARD PROPOSAL FOR INTERIM MEDICAL MARIJUANA ZONING REGULATIONS WITH STAFF ANALYSIS

APPROVED BY THE PLANNING BOARD ON SEPTEMBER 4, 2013

Proposed Amendments:

to amend the Springfield Zoning Ordinance by amending Article 2, Section 2.2 by adding the definition of a Medical Marijuana Treatment Center, to read as follows:

MEDICAL MARIJUANA TREATMENT CENTER. A MEDICAL MARIJUANA TREATMENT CENTER shall mean any medical marijuana center, as defined under state law (Chapter 369 of the Acts of 2012, enacted by the People of Massachusetts) as a Massachusetts not-for-profit entity that acquires, cultivates, possesses, processes (including but not limited to the development of related products such as food, tinctures, aerosols, oils or and/or ointments), transfers, transports, sells, distributes, dispenses and/or administers marijuana, products containing marijuana, related supplies, and/or educational materials to qualifying patients and/or their personal caregivers, which is properly licensed and registered by the Massachusetts Department of Public Health pursuant to all applicable state laws and regulations.

and; to amend the Springfield Zoning Ordinance by amending Article 4 by adding Section 4.7.100 – Interim Regulations for Medical Marijuana Treatment Centers, to read as follows:

5. Section 4.7.100 Interim Regulations for Medical Marijuana Treatment Center(s)
 - (i) 4.7.101 Purpose

This section is intended to provide restrictions that will allow the City of Springfield adequate time to consider new regulations to allow facilities associated with the medical use of marijuana, to the extent that such facilities are allowed under state laws and regulations. Given that a law permitting the medical use of marijuana in the Commonwealth of Massachusetts is in effect as of January 1, 2013 and that the Massachusetts Department of Public Health has only recently promulgated the regulations by which facilities that produce and/or dispense medical marijuana shall be registered and administered, a restriction on the establishment of such facilities in the City of Springfield shall provide the opportunity to study their potential impacts on adjacent uses and on general public health, safety and welfare, and to develop zoning and/or other applicable regulations that appropriately address these considerations consistent with statewide regulations and permitting procedures.

(ii) 4.7.102 Exclusion of Other Marijuana Uses

Any establishment that acquires, cultivates, possesses, processes (including but not limited to the development of related products such as food, tinctures, aerosols, oils or and/or ointments), transfers, transports, sells, distributes, dispenses and/or administers marijuana, products containing marijuana, related supplies and/or educational materials to qualifying patients and/or their personal caregivers shall not be permitted if such establishment has not been properly licensed and registered by the Massachusetts Department of Public Health pursuant to all applicable state laws and regulations and/or it is not operated as a not-for-profit entity and/or otherwise fails to meet the definition of a MEDICAL MARIJUANA TREATMENT CENTER.

(iii) 4.7.103 Exclusion of Accessory Uses

In no case shall the acquisition, cultivation, possession, processing, transference, sale, distribution, dispensing and/or administration of marijuana, products containing or derived from marijuana or related products be considered accessory to any use.

(iv) 4.7.104 Interim Restriction

MEDICAL MARIJUANA TREATMENT CENTERS shall not be permitted in any zoning district in the City of Springfield so long as Section 4.7.100 is in effect.

(v) 4.7.105 Expiration

This Section 4.7.100 shall be effective until June 30, 2014 or until such time that superseding regulations are adopted which addresses the impacts and operations of a MEDICAL MARIJUANA TREATMENT CENTER and related uses, whichever is sooner.

**OFFICE OF PLANNING & ECONOMIC DEVELOPMENT
ANALYSIS FOR A ZONE CHANGE**

INTERIM REGULATIONS FOR MEDICAL MARIJUANA TREATMENT CENTERS

GENERAL INFORMATION

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| Petitioner: | Planning Board |
| Request: | The proposal is to amend Article 2, Section 2.2 by adding the definition of a Medical Marijuana Treatment Center and by amending Article 4 by adding Section 4.7.100 – Interim Regulations for Medical Marijuana Treatment Centers (see attached for full language). |
| Location: | City Wide |
| Parcel Size: | N/A |
| Purpose: | Provide the city with an opportunity to review and assess the proposed impacts of the recently approved medical marijuana regulations to ensure compatibility with adjacent land uses and on the general public health, safety and welfare. |
| Surrounding Land Use and Zoning: | N/A |
| Comprehensive/ Neighborhood Plan: | N/A |
| Tax Status: | |
| Planning Board Hearing: | N/A 9-4-13 |

SPECIAL INFORMATION

| | |
|----------------------------------|-----|
| Traffic & Parking: | n/a |
| Physical Characteristics: | n/a |
| Other Notes: | n/a |

ANALYSIS

As the Planning Board/City Council is aware, the citizens of the Commonwealth of Massachusetts recently approved a state wide referendum legalizing the medical use of marijuana. The law allowing the use of medical marijuana became effective as of January 1, 2013. As such, the City of Springfield is proposing to amend the existing Zoning Ordinance to include interim regulations to address this new use.

The intent of these regulations are to provide restrictions on this new use that will then allow the City of Springfield adequate time to consider new regulations to allow facilities associated with medical marijuana, to the extent that such facilities are allowed under state laws and regulations.

Further, given that the Massachusetts Department of Public Health has only recently promulgated the regulations and applications by which facilities that produce and/or dispense medical marijuana shall be registered and administered, these proposed restrictions on the establishment of such facilities in the City of Springfield will provide the opportunity to study the potential impacts on adjacent uses and on the general public health, safety and welfare and to develop zoning and/or other applicable regulations that appropriately address these considerations consistent with statewide regulations and procedures.

The proposed regulations will include the definition of a Medical Marijuana Treatment Center while also implementing interim regulations which would restrict this use until June 30, 2014 or until such time that superseding regulations have been adopted, whichever is sooner.

RECOMMENDATION

Approve.

EXHIBIT E

NOTICES RECEIVED PURSUANT TO 105 CMR 725.100(B)(2)

(Attached)