

CB2 CLC Applicant Questionnaire

NY Marijuana Company Inc./ Jason Friedman d.b.a. NY Cannabis Company

OCMCAURD-2022-000616/OCMCAURDP-2025-000007

11 West 8th Street 10011

Cross Streets: 5th Avenue & MacDougal Street

<u>This application will be reviewed on Mon. April 14, 2025</u>
Register to attend, submit questions/comments: https://bit.ly/ask-clc

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RSVP for April 14, 2025 CB2 CLC Hearing Name of all individuals who will present application to CB2 as well as the names of all parties that will be in attendance on behalf of this business, their role(s)/relationship to the business (i.e. applicant/self, partner, investor, manager, attorney, consultant, lobbyist)	Jason Friedman applicant / owner
LEGAL BUSINESS NAME The corporate entity (i.e. LLC, Inc, Corp), for which you have applied for licensure with, or been granted licensure by the NYS CCB/OCM for which you are submitting this questionnaire. Include previous corporate entity name if it has changed since applying and DBA, if applicable.	Ny Marijuana Company inc.
OCM APPLICATION NUMBER The application number issued to this business by the NYS Office of Cannabis Management at the time of submission to the state: (example: OCMRETL-202X-000XXX, OCMCAURD-202X-000XXX)	OCMCAURD-2022-000616
OCM LICENSE NUMBER & ISSUE DATE If a license number has been issued to this business by the NYS Office of Cannabis Management, please write it below, along with the date of licensure. If unlicensed, write n/a: (example: OCM-RETL-2X-000XXX, OCM-CAURD-2X-000XXX - or n/a)	OCMCAURDP-2025-000007
PROPOSED PREMISES The address, floor, zip code and cross-streets of the premises that the business hopes to operate.	11 w8th st Ny ny 10011
NYS APPLICATION TYPE Type of NYS cannabis license for which this business applied.	CAURD Licensee - Licensed Conditional Adult-Use Dispensary

BUSINESS CATEGORY/FEATURES Check all that apply.	Retail		
OPENING DATE What is your projected opening date?	August 2025		
CB2 INTEREST Does any individual, group, advisor, employee, or entity with financial or operational interest in your business have a connection to Community District 2?	No connection to CB2		
NOTICES Have you, or any party with direct or indirect interest in this business, previously submitted a Notification to Municipality OCM-06009 (NTM) Form CB2 for any entity?	No		
WITHDRAWAL Do you wish to, for any reason, withdraw your Notification to Municipality from consideration by CB2 Manhattan? No • I want to appear before			
YOUR NAME Name, email address & phone number of individual completing this questionnaire Jason Friedman			
REPRESENTATIVE Name & Contact information of Applicant's Legal Representative/Agent for Service of Process (if different than above)			
PRINCIPAL Principal owner's name, email address, home address, and phone number.	Jason Friedman Bayside Ny 11364		
INTERESTED PARTIES Full name of every individual with financial interest in this business, and percentage of ownership for each person that has membership rights in the applicant or licensee in accordance with the provisions of any articles of incorporation, bylaws, limited liability corporation agreements, partnership agreements or operating agreements.	Jason Friedman		
FUTURE OWNERSHIP Have you, or do you have plans to transfer or sell any ownership or voting stake in your business to any individual or entity, now or in the future?	No		
FINANCING Full name of any person or entity that will/may provide(s) capital as a gift, a grant, or lends capital pursuant to a secured or unsecured financing agreement for this business.			
AGREEMENTS Is this business engaged in a Goods and Services, Branding or Management Services Agreement, or in negotiations to engage in such?	No		

	
INFO & TERMS If this business is, or plans to, engage in a Goods and Services, Branding and/or Management Services Agreement, please share the corporate entity and names of individuals providing the services. Additionally, please bring a copy of the term sheet to the hearing.	We are currently finalizing details related to any potential Goods and Services, Branding, or Management Services Agreements.
Social & Economic Equity Applicant Definitions APPLICANT CATEGORY (check all that apply):	Caurd
APPLICANT CATEGORY 2 Please share your priority status according to the ADULT-USE SOCIAL & ECONOMIC EQUITY APPLICANT OVERVIEW (Please review prior to answering as priority guidelines are specific. Check all that apply):	Was convicted of a cannabis-related offense prior to the effective date of the MRTA
CAURD: If any person or entity with direct or indirect interest in this business is a current or past participant in the Conditional Adult-Use Retail Dispensary program, please share the most recent status	No association with a CAURD license
CAURD A: If any individual(s) or entity related to this business was granted a CAURD license, or has a financial or operational interest in a CAURD license, please share the license date, CAURD number and the business entity that was licensed. If none, please write "N/A"	
CAURD B: If any individual(s) or entity related to this business was granted a CAURD license, or has operational or financial interest in a CAURD license, are you, in whole or in part, applying here under the same corporate entity, brand, marque, trademark, label, service mark, logo, stamp, emblem, imprint, or trade?	
CAURD C: If you were granted a CAURD license, please list the qualifying justice involved individual(s) that own at least fifty-one percent (51%) controlling interest in that business.	
CAURD LOCATIONS: If you were granted a CAURD license, have you obtained a lease, letter of intent or deed for a dispensary location under that license anywhere in NYS?	
PROXIMITY STATUS Has the proposed premises been granted Proximity Protection by the OCM for this business?	Yes
PROXIMITY Please list all: 1) Houses of Worship within a 200 ft. radius, 2) Schools/school grounds, drug treatment facilities, social/human service providers, shelters/transitional/congregate housing, harm reduction facilities, community facilities, parks, playgrounds and private/public	We are over the distance of all regulated proximities of Schools and places of worship

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plazas within 500 ft. of the proposed premises.	
*Please note that this question relates to <u>linear distance</u> between points - not OCM proximity guidelines. List all - whether or not the proximity is state-compliant or restricted.	
PUBLIC CONVENIENCE AND ADVANTAGE (PCA) If there are active or pending Proximity Protected cannabis businesses, of any kind, within a 1000-ft. radius of the proposed premises, how will your business obtain approval from the municipality and NYS to operate contrary to regulations? If none, write N/A.	No
PREMISES CATEGORY What type of building is the proposed location? Please check all that apply.	MULTI-STORY RETAIL BUILDING (2 OR MORE)
PREMISES SIZE a) How many floors/levels of this premises will your business utilize? b) What is the square footage of each floor? c) How will each space be utilized?	1st floor 700 sq ft plus basement will be the safe / storage rooms
PROPERTY OWNER & CONTACT Name, Phone Number, Business Address & Email Address of the entity/individual that owns the building within which your proposed premises exists.	Eight Mon LLC 6 Grace Ave suite 201 Great neck Ny 11021
LANDLORD Name, Phone Number, Business Address & Email Address of the individual, and associated legal entity who's signed the proof of control document on behalf of the building within which your proposed premises exists.	Eight Mon LLC - 6 Grace Ave suite 201 Great neck Ny 11021
PREMISES CONTROL What documents does this business possess proving control over the proposed premises?	Fully Executed Lease
PRIOR USE Do any individuals or entities with direct or indirect interest in this business currently operate, or ever operated a business at the proposed premises?	No
PRIOR USE If you answered "Yes" or "Maybe" above, please list all previous businesses, the business category, and dates of operation.	
PRIOR LICENSURE Have any of the following license/permit types ever been granted for the proposed premises?	None
RECENT USE What was the previous use/tenant of the proposed premises?	Dry Cleaners
INGRESS & EGRESS	11 w8th st front door

Please list the addresses for all exits, entrances, and alternate addresses of the proposed premises:	
HOURS OF OPERATION What are the proposed Hours of Operation for this business (each day of the week)?	9am-11pm
OUTDOOR OPERATIONS Will this business utilize any outdoor space? If so, please describe how it will use the outdoor space, including the sidewalk in front of the proposed premises.	No

SIDEWALK STEWARDSHIP

What is the anticipated increase in sidewalk traffic? How will you manage the sidewalk, crowd control, vehicular traffic? Will you use stanchions and ropes?

We anticipate a modest increase in foot traffic, particularly during peak hours. However, we are committed to maintaining a smooth and respectful flow that does not interfere with neighboring businesses or pedestrian accessibility.

To ensure a safe and orderly environment, we will have trained staff on-site during operating hours to guide customers, manage lines, and assist with any concerns. If necessary, we will implement stanchions and ropes to keep the sidewalk clear and organized.

Our location is not expected to significantly impact local vehicular traffic, as most customers will arrive by foot or public transportation. We will discourage double parking and rideshare congestion and work with local authorities if any traffic concerns arise.

We're committed to being a good neighbor and will continuously assess and adapt our sidewalk management strategy to meet community expectations.

IMPACT

Please describe how you plan to prevent noise, loitering and smoking outside your establishment and nearby.

We are committed to being a responsible and respectful business in the community. To prevent noise, loitering, and smoking outside our establishment, we will have clear signage, a no-loitering policy, and trained staff monitoring the entrance during business hours. Additionally, on-site security cameras will ensure compliance with all local regulations. Our goal is to maintain a safe, clean, and quiet environment for both our customers and neighbors.

DELIVERY METHOD

If this business will/might offer delivery, please share who it will be implemented

We plan to offer delivery in accordance with the OCM & New York State regulations. All deliveries will be handled by trained, licensed staff using secure vehicles. Orders will be placed online only, and deliveries will only be made to verified customers aged 21 and over. We'll ensure all delivery practices prioritize safety, discretion, and compliance with local laws.

ADA COMPLIANCE

ADA Compliance Guides for Small Business Owners

Is your business ADA compliant? If not, what is your plan to bring it into compliance?

Yes, our business will be fully committed to ADA compliance. The space is being designed with accessibility in

mind, including barrier-free entry and accessible service areas. We are following the ADA Compliance Guides for Small Business Owners and working closely with our contractors to ensure all requirements are met before opening. Accessibility is a top priority for us.

ADVERTISING How will you advertise your business?	We are awaiting the new set of regulations from the OCM . Before we do any marketing
EVENTS Will you close for private events? What type of events? How many times per year?	No
ON-SITE CONSUMPTION Will this business offer on-site consumption at any point?	No
CONSUMPTION FACILITY 1) Where will the consumption site be located? 2) How will this business implement and manage on-site consumption? 3) What is the capacity and square-footage of the consumption area?	No consumption at our facility
DELIVERY Will this business offer delivery?	Yes
FACADE Will you be making any changes to the building facade? If yes, please describe the changes:	Just a new signage
LANDMARKS/SPECIAL DISTRICT Is the proposed premises a landmark building, or within a historical or special district?	Yes
TONING COMPLIANCE	

ZONING COMPLIANCE

If the proposed premises or location holds any special status, what are the regulations governing its use? What considerations have been taken to comply with zoning laws and standards specific to this property?

The proposed premises at 11 W 8th St has been reviewed for zoning compliance and does not hold any special status that restricts its intended use as a dispensary. We have ensured the location meets all local zoning laws and distance requirements outlined by the OCM, including proximity to schools, houses of worship, and other sensitive sites. All necessary reviews and approvals have been or are being completed to ensure full compliance with city and state regulations.

OUTDOOR SPACE Whether or not this business will utilize outdoor space, does the proposed premises allow access to any?	No
SOUND ATTENUATION Will this business play music, or have any amplified sounds from	No

computers, monitors, televisions or speakers audible to neighboring residents, businesses or the exterior of the store?		
COMMUNITY ENGAGEMENT Please describe your community outreach efforts and include the names of community groups, neighboring businesses, nearby schools, human service providers, parks, playgrounds - and any other stakeholders you've contacted:	Community Board 2	
CO-TENANTS & NEIGHBORS If your business is located in, or congruent with a residential buildin describe your outreach efforts to residents/neighbors:	g(s) or commercial business(es), please	
Now that our location has been approved, we will begin outreach to nearby residents and businesses to introduce ourselves and share our plans. We're committed to being a respectful and transparent neighbor, and we look forward to open communication with the community. We plan to connect through in-person visits.		
PUBLIC BENEFIT How will this business be of benefit to the surrounding community?		
Our dispensary is committed to being a positive force in the community. We will create local job opportunities, support community health through safe and legal cannabis access, and contribute to neighborhood safety with trained staff and security. As a CAURD licensee, our business is rooted in social equity and second chances, and we plan to partner with local organizations and give back through community-driven initiatives. Our goal is to operate with integrity and be a responsibly.		
HEALTH & SAFETY What measures will be implemented to avoid the type of criminal activity commonly attracted by cannabis businesses, and to prevent spillover crime in the surrounding community?		
We take health and safety very seriously. Our dispensary will have 24/7 security systems, including cameras, alarms, and secure storage. Trained security staff will be present during all business hours, and we will strictly enforce age verification.		
CANNABIS SECTOR A Does any individual, group or entity with direct or indirect interest in this business have any connection with another cannabis or hospitality business operating in, or under consideration by CB2 Manhattan? (including property owner, lease signatory, broker, consultant, investor, financer, brand licensing/management services entity/individual)	No	
OUT OF DISTRICT NOTICE Has any individual or entity with direct or indirect interest in this business, ever submitted NTM form(s) to a NYS Municipal body other than CB2 Manhattan? If so, please list the name of the municipality, or number and borough for NYC Community Boards, and date submitted.	CB6 as we tried for a location there .We had the CB6 unamious in favor of decision .	
ADDITIONAL INTEREST Has any individual or entity with direct or indirect interest in this business have direct or indirect interest in or connection with any	No	

other cannabis business(es) in any other community district, village, town, hamlet, city, principality, county, province, commonwealth or country in the world? If yes, please list the business entity name(s) and address(es).	
EXPERIENCE Has the proposed premises or any individual or entity with direct or indirect interest in this business ever owned, leased, operated, managed or been employed by a shop selling cannabis, hemp, CBD, tobacco products, vapes, or ancillary paraphernalia?	No
EXPERIENCE A Please share the d/b/a, corporate entity, and address of the above-referenced business(es). If there is more than one, please list all.	New York Cannabis Company
INCORPORATION Please provide proof that you are authorized to conduct business in NYS (State Dept. Letter, Articles of Organization/Incorporation)	DOCUMENT SUBMITTED: NY Marijuana Company Inc. Certificate of Assumed Name Issued 9/1/2022
CAP TABLE As submitted to the OCM.	DOCUMENT SUBMITTED: TPI list from OCM online application naming Jason Friendman at President

COMMUNITY IMPACT PLAN

Registered Organizations are required to provide the Office with a Community Impact Plan as outlined in Section 121.4 of the regulations.

We are in the process of finalizing our Community Impact Plan in accordance with Section 121.4 of the OCM regulations. Our plan will outline how we intend to support the local community through job creation, community outreach, partnerships with local organizations, and reinvestment in areas impacted by cannabis prohibition.

DELIVERY PLAN

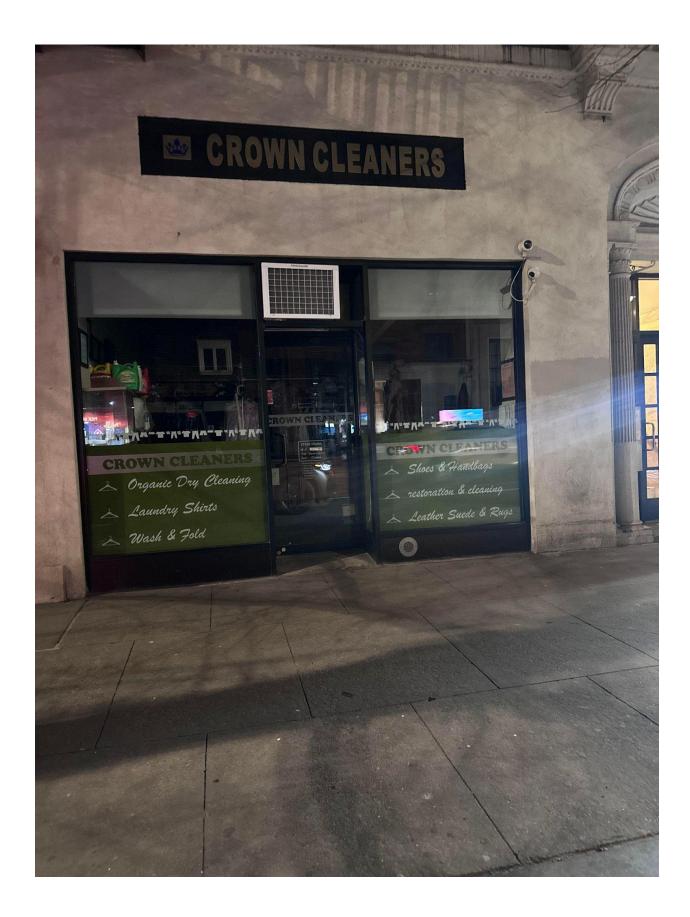
If this business will offer delivery, please describe the delivery method. Please include measures to prevent adverse impact i.e. delivery staff/messengers congregating in front of the store or parking/riding bikes on the sidewalk, vehicles idling...

Yes, we plan to offer delivery in full compliance with New York State regulations. Deliveries will be handled by trained staff using registered vehicles or bicycles, depending on the order and location. To prevent disruption, delivery staff will not congregate in front of the store, and we will have clear protocols prohibiting sidewalk bike parking and vehicle idling. All deliveries will be dispatched efficiently from inside the store to minimize sidewalk activity and maintain a respectful environment for neighbors.

EMPLOYEE MANUAL Please upload the security, operating, and safety procedures guideline for workers.	As we are still in the early stages and far from opening, our full Employee Manual is currently being developed. It will include comprehensive guidelines for security, operations, and safety in accordance with OCM regulations. We're committed to creating a safe, compliant, and well-trained environment for our staff and will provide the finalized manual as we move closer to launch
PREMISES CAPACITY/AUTHORIZED USE Please upload a Certificate of Occupancy &/or Letter of No Objection showing legal capacity and authorized use of the proposed premises.	As we are still in the early stages and far from opening, our full Employee Manual is currently being developed. It will include comprehensive guidelines for security, operations, and safety in accordance with OCM regulations. We're committed to creating a safe, compliant, and well-trained environment for our staff and will provide the finalized manual as we move closer to launch
SECURITY Please upload the security plan for this business.	As we are still in the early stages and far from opening, our full Employee Manual is currently being developed. It will include comprehensive guidelines for security, operations, and safety in accordance with OCM regulations. We're committed to creating a safe, compliant, and well-trained environment for our staff and will provide the finalized manual as we move closer to launch
PREMISES CONTROL DOCS Please upload the full documentation proving control over the proposed premises. (e.g. lease, deed, Letter of Intent)	DOCUMENT SUBMITTED: Sublease signed by and unnamed individual for Eight Mon LLC at "Tenant", and Jason Friedman as "sub-tenant"
SITE PLAN AND/OR FLOOR PLAN For the proposed premises.	-ATTACHED-

Adult-Use Retail Application * Location Viable Inbox Docs noreply Mar 26 N Application #: OCMCAURDP-2025-000007 Business Entity/Legal Name: NY Marijuana Company Inc. License or Permit Type: Adult-Use Retail Dispensary License Proposed Address: 11 W 8th ST, New York, NY Dear Applicant, **APPLICATION CONFIRMATION and/or CERTIFICATE** The confirmation received from the state upon submission, and if This message serves as notification that the applicable, the official Certificate of Licensure issued to this New York State Office of Cannabis Management business by the OCM. (the Office) has reviewed the proposed location address referenced above, as submitted in your application and the location currently meets the distance and proximity requirements set forth in the Cannabis Law and its associated regulations. Approval to commence operations will be based upon your satisfactory completion of your application. This approval will be provided, in writing, from the Office after it is determined that you have met all operating requirements, including the delivery of any notification to the municipality in accordance with Section 76 of the Cannabis Law, any other municipality approvals as required by Cannabis Law and associated regulations, and the submission of **INTERIOR & EXTERIOR PHOTOS** Current photos on the inside and outside of the proposed -ATTACHEDpremises. As we are still in the early stages and far from opening, our full Employee Manual is currently being developed. It will include comprehensive guidelines for security, operations, and safety in **PRODUCT MENU & PRICE LIST** accordance with OCM regulations. We're What cannabis, and other products will this business sell? committed to creating a safe, compliant, and well-trained environment for our staff and will provide the finalized manual as we move closer to launch LETTERS OF SUPPORT Such documents must include the names, addresses and contact -NONE SUBMITTEDinformation of all signatories.

BUSINESS PLAN / DECK Or, any other documentation that might assist the CLC in learning more about the business.	-none submitted-
PCA Statement If there are active or pending Proximity Protected cannabis businesses, have you submitted the required PCA Statement to CB2?	No
PREVIOUS EMPLOYMENT What is the principal applicant/licensee's current and/or prior profession? Please provide the name of the last two employers or businesses, and an overview of the applicant's previous business experience.	I own a fitness studio in Queens for 14 years , Also I am a landlord/property manager for 50 tenants spread out across the trip state area
SHARED SPACE Does the proposed premises allow any access to the premises of neighboring businesses or residential areas of the building?	No



THE CITY OF NEW YORK

ALT 101226521



DEPARTMENT OF BUILDINGS

CERTIFICATE OF OCCUPANCY

DATE:APR 08 1997 NO. 112410 MENDED

BOROUGH MANHATTAN DATE: APR 08 1337 NO. 112

This certificate REPRIES C.O. NO

THIS CERTIFIES that the END — altered House — building — premises located at 11 WEST 8TH STREET

Block

ZONING DISTRICT C4-5

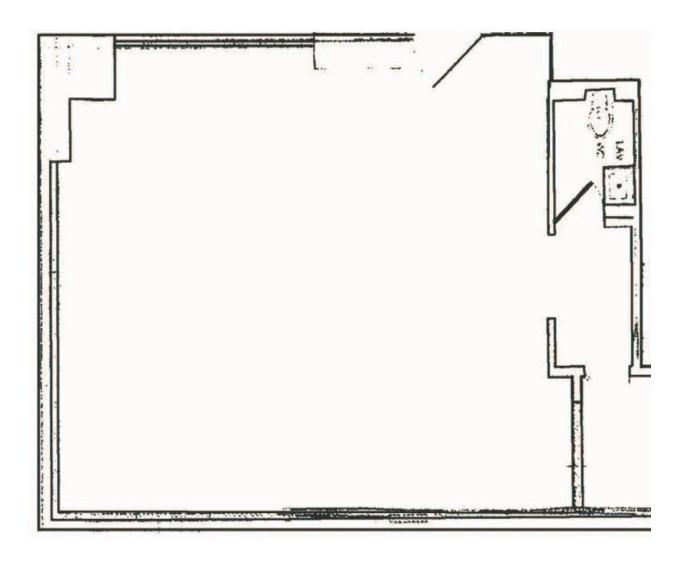
Lot 43

572

CONFORMS SUBSTANTIALLY TO THE APPROVED PLANS AND SPECIFICATIONS AND TO THE REGURDENITS OF ALL APPLICABLE LAWS. RULES, AND REGULATIONS FOR THE USES AND OCCUPANCES SPECIFIED HEREIN.

PERMISSIBLE USE AND OCCUPANCY

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CBLLAR	OG .	parts hall be	ONE (1) SUPT'S APARTMENT, BOILER ROOM AND STORAGE
1ST FLOOR	100	86	FOUR (4) STORES AND ONE (1)
2ND TO 5TH PLOORS			RESTAURANT SIX (6) APARTMENTS ON EACH PLOOR
		TEMPORARY CERTIFICATE OF TERMS: NINETY (90) DAYS	OCCUPANCY
		EXPIRES: JULY 8,1997	G
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		OF HE DEPARTMENT PAGE	



This application will be reviewed at:

CB2 CLC Meeting

Mon. April 14, 2025 6:30PM

Community Board 2
3 Washington Square Village # 1A
New York, NY 10012 (map)

Register to attend, submit questions/comments:

https://bit.ly/ask-clc