

PALLIA TECH

Advancing The Science of Palliative Care

EXECUTIVE SUMMARY

As a New York-based company, we respectfully submit this application to document our ability to meet the Department's standards and criteria for the Medical Marijuana Program (MMP).

Most importantly, we have validated PalliaTech products and processes¹ for New York at a cGMP² production laboratory in Pennsauken, New Jersey operated by our Vice President of Manufacturing, Robert Winnicki.

- Our standard operating procedures are proven by their current use in manufacturing THC-free, CBD-based products from 99 percent pure monocannabinoids, in contrast to industry-standard blended formulations.
- We have submitted laboratory test results to verify that our five New York brands consist solely of pure THC and CBD in milligram amounts within the +/-5 percent quality control standard in §1004.11(b)(3).³

PalliaTech products would serve the interests of public health and safety in terms of product purity, formulation and consistency. Our Palliaceutical™ product line is New York compliant, Generally Recognized as Safe (GRAS)¹ by FDA standards and manufactured to pharmaceutical standards:

- Pure THC and CBD monocannabinoids in precise brand ratios
- Consistent active and inactive ingredients across all forms
- Nano-emulsion and nanoparticle formulations
- Validated continually by in-house QA/QC lab and stability program
- The only "green" process using no harmful solvents e.g., chloroform

We also believe that PalliaTech offers the best team in the industry in terms of operational excellence and regulatory compliance

- Our tested industry leaders have designed, built and operated cultivation, manufacturing, laboratory and dispensary facilities in Colorado, New Jersey, Illinois, Montana and Vancouver, Canada.
- We also have combined team experience of 15 years with cannabinoid fractionation, the only method of producing pharmaceutically pure monocannabinoids for the New York program.

PalliaTech New York Team

- Robert Winnicki, *Vice President, Manufacturing & Lab Testing Operations*. A biochemist with unparalleled expertise in manufacturing and laboratory systems for the production of pharma-grade cannabinoid medicines.
- John O'Brien, *Chief Compliance Officer*. [REDACTED] and a 26-year veteran of the New Jersey State Police with expertise in designing and managing state and federal compliance programs.

¹ PalliaTech holds the exclusive license to these processes for New York

² U.S. Food and Drug Administration's Current Good Manufacturing Practice regulation for human pharmaceuticals

³ Please see sample test results in Attachment D, Section 1 - Manufacturing

- Michael Nelson, *Chief Operating Officer*. A medical *Cannabis* operations expert with direct experience in building and managing cultivation, production and dispensary facilities in Colorado, Illinois, New Jersey, Montana; and across the country as a operations consultant.
- William Buecheler, *Vice President, Quality Control Advisor*. An expert in Quality First Manufacturing with over 30 years of experience in pharmaceutical and biotech manufacturing, compliance, quality assurance and Good Manufacturing Practices.
- Forrest Sawlaw, *Vice President, Horticulture Operations*. Over 30 years experience managing state and federal regulatory compliance, quality assurance and Good Agricultural Practices for the largest U.S. greenhouse and food production companies.
- Dr. Steven Patierno, *Director and Chairman of the Science Advisory Board*. [REDACTED] and a PhD in pharmacology with extensive experience with FDA- and state-regulations.
- Andrew O'Connell, *Advisory Board Member*. A leading security advisor and attorney who served as a federal prosecutor in the Southern District of New York, a litigation attorney and U.S. Secret Service agent.
- Jason Lilien, *Legal Advisor*. [REDACTED] and an expert in compliance and corporate governance matters, internal investigations, enforcement actions, regulatory issues and corporate transactions.

Our security provider is Guidepost Solutions, a global leader in compliance, monitoring, international investigations and risk management led by Bart Schwartz, the former Chief of the Criminal Division of the Southern District of New York. Guidepost oversees security for our cultivation, manufacturing and dispensing operations and delivers; and provides compliance and business integrity services.

PalliaTech is exceptionally well positioned to serve the public interest by launching manufacturing operations rapidly to meet the needs of New York patients by January 2016:

- If chosen for the MMP, our task would be to replicate proven SOPs, systems and brand formulations – not to attempt a new approach.
- Our world-class manufacturing facility – housed in a fully modernized, 386,000 square-foot former Pfizer pharmaceutical facility – requires virtually no modifications and can be up and running quickly.
- Critically, the layout of the facility accommodates manufacturing and cultivation process flows with no build-out or remodeling.
- Installed, turnkey infrastructure includes: FDA-approved QA/QC labs; HVAC system performing 22 air exchanges/hour; climate controls with back-up; industrial power, back-up generators and water; and RO⁴ water purification system.

Our proven manufacturing processes and pharma-standard facility enables us to deliver a steady supply of medicine to meet growing patient demand:

- After a first run in January 2016, we will be able to serve the needs of 1,200 patients and double our output every 2-3 months as necessary.
- Current manufacturing capacity allows us to serve 14,000 patients and we are pre-approved to expand from 65,000 to 150,000 square-feet of space.

⁴ Reverse osmosis water purification

PalliaTech is also well-equipped for excellence in QA-QC compliance, with our standard operating procedures documented and controlled as schematic workflows generated by TaskMap® -- a robust process management tool used by Pfizer, Bristol-Myers Squibb, the Mayo Clinic and other leading companies.

We use our SOP tool with the InstantGMP™ electronic batch record and compliance software for precise verification, documentation and enforcement of over 130 quality assurance and quality control checkpoints throughout our manufacturing process.

- Quality Assurance Check Points require laboratory-testing procedures for potency, quality and safety purposes, including microbial, pesticide and heavy metal screening.
- Critical Control Check Points require inventory, weighing, labeling and other procedures for regulatory compliance, data collection and tracking traceability purposes.

If chosen for the program, PalliaTech will operate an in-house QA/QC lab for day-to-day operational quality control. We will reconcile our internal results at key points with the New York State Public Health Laboratory at the Wadsworth Center.

- *However, the State lab will be the final QC check point in our process and its results alone will clear finished product lots for release from our manufacturing facility for distribution to the public.*

Our SOPs also enforce stringent inventory controls, which will be adapted to the State-mandated supply-chain controls being developed by BioTrack.

- We are very familiar with this system as an early adopter of their powerful inventory management software in our cultivation, production and dispensary operations in New Jersey and Illinois.

The geographic distribution of our leased dispensaries in Brooklyn, Newburgh, Utica and Rochester will serve the public interest by offering excellent public access and at least one store within a two-hour drive of 52 New York counties with 96% of the State's population.

Finally, PalliaTech has the financial resources necessary to meet the Department's operational and regulatory requirements for registered organizations within the MMP.

Our shareholder base has financed our operations in New Jersey, Colorado and Illinois; and we hope to have the privilege of funding world-class operations to provide exceptional service to patients in our home state of New York.

On behalf of PalliaTech NY

A handwritten signature in black ink, appearing to read 'Richard Taney', written in a cursive style.

Richard Taney
Chief Executive Officer



Section A: Business Entity Information
1. Business Name: PalliaTech NY, LLC
2. Organization Type (choose one): [X] For-profit [] Non-profit
3. Business Type (choose one): [] Corporation [X] Limited Liability Company [] Sole Proprietorship [] General Partnership [] Limited Partnership [] Other:
4. Phone: (516) 304-5130 5. Fax: (516) 232-9029 6. Email: rtaney@palliatech.com
7. Business Address: 1111 Marcus Avenue, Suite 107
8. City: Lake Success 9. State: NY 10. ZIP Code: 11042
11. Mailing Address (if different than Business Address): 252 Sea Cliff Ave
12. City: Sea Cliff 13. State: NY 14. ZIP Code: 11579
Section B: Primary Contact Information
15. Name: Richard Taney 16. Title: CEO
17. Phone: (516) 304-5130 18. Fax: 19. Email: rtaney@palliatech.com
20. Mailing Address:
21. City: 22. State: 23. ZIP Code:
Section C: Proposed Manufacturing Facility Information
24. Proposed Facility Name: PalliaTech NY, LLC
25. Proposed Facility Address: 641 Ridge Road
26. City: Chazy 27. State: NY 28. ZIP Code: 12921
29. County: Clinton
30. Property Status (choose one): [] Owned by the applicant [X] Leased by the applicant [] Other:
If you checked "Other" above, describe the property status in the field provided.
31. Proposed Hours of Operation:
Monday: 7 am to 7am Friday: 7 am to 7am
Tuesday: 7 am to 7am Saturday: 7 am to 7am
Wednesday: 7 am to 7am Sunday: 7 am to 7am
Thursday: 7 am to 7am
An additional entry is included below for applicants who are proposing to use more than one manufacturing facility (responsible for cultivation, harvesting, extraction or other processing, packaging and labeling).



32. Proposed Facility Name:		
33. Proposed Facility Address:		
34. City:	35. State: NY	36. ZIP Code:
37. County:	38. Property Status (choose one): <input type="checkbox"/> Owned by the applicant <input checked="" type="checkbox"/> Leased by the applicant <input type="checkbox"/> Other: If you checked "Other" above, describe the property status in the field provided.	
39. Proposed Hours of Operation:		
Monday:	to	Friday: to
Tuesday:	to	Saturday: to
Wednesday:	to	Sunday: to
Thursday:	to	
Section D: Proposed Dispensing Facility #1 Information		
40. Proposed Facility Name: PalliaTech Relief Centers		
41. Proposed Facility Address: 350 Leland Avenue		
42. City: Utica	43. State: NY	44. ZIP Code: 13502
45. County: Oneida County	46. Property Status (choose one): <input type="checkbox"/> Owned by the applicant <input checked="" type="checkbox"/> Leased by the applicant <input type="checkbox"/> Other: If you checked "Other" above, describe the property status in the field provided.	
47. Proposed Hours of Operation:		
Monday:	10 am to 8 pm	Friday: 10 am to 8 pm
Tuesday:	10 am to 8 pm	Saturday: 10 am to 6 pm
Wednesday:	10 am to 8 pm	Sunday: 12 pm to 6 pm
Thursday:	10 am to 8 pm	
Section E: Proposed Dispensing Facility #2 Information		
48. Proposed Facility Name: PalliaTech Relief Centers		
49. Proposed Facility Address: 215 Alexander Street		
50. City: Rochester	51. State: NY	52. ZIP Code: 14607
53. County: Monroe County	54. Property Status (choose one): <input type="checkbox"/> Owned by the applicant <input checked="" type="checkbox"/> Leased by the applicant <input type="checkbox"/> Other: If you checked "Other" above, describe the property status in the field provided.	



55. Proposed Hours of Operation:
Monday: 10 am to 8 pm
Tuesday: 10 am to 8 pm
Wednesday: 10 am to 8 pm
Thursday: 10 am to 8 pm
Friday: 10 am to 8 pm
Saturday: 10 am to 6 pm
Sunday: 12 pm to 6 pm

Section F: Proposed Dispensing Facility #3 Information

56. Proposed Facility Name: PalliaTech Relief Centers

57. Proposed Facility Address: 38 South Plank Road

58. City: Newburgh

59. State: NY

60. ZIP Code: 12550

61. County:
Orange County

62. Property Status (choose one):

- Owned by the applicant
Leased by the applicant
Other:

If you checked "Other" above, describe the property status in the field provided.

63. Proposed Hours of Operation:
Monday: 10 am to 8 pm
Tuesday: 10 am to 8 pm
Wednesday: 10 am to 8 pm
Thursday: 10 am to 8 pm
Friday: 10 am to 8 pm
Saturday: 10 am to 6 pm
Sunday: 12 pm to 6 pm

Section G: Proposed Dispensing Facility #4 Information

64. Proposed Facility Name: PalliaTech Relief Centers

65. Proposed Facility Address: 425 Fulton Street

66. City: Brooklyn

67. State: NY

68. ZIP Code: 11201

69. County:
Kings County

70. Property Status (choose one):

- Owned by the applicant
Leased by the applicant
Other:

If you checked "Other" above, describe the property status in the field provided.

71. Proposed Hours of Operation:
Monday: 10 am to 8 pm
Tuesday: 10 am to 8 pm
Wednesday: 10 am to 8 pm
Thursday: 10 am to 8 pm
Friday: 10 am to 8 pm
Saturday: 10 am to 6 pm
Sunday: 12 pm to 6 pm



Section H: Legal Disclosures

72. Has the applicant, any controlling person of the applicant, any manager, any principal stakeholder, any sole proprietor applicant, any general partner of a partnership applicant, any officer or member of the board of directors of a corporate applicant, or corporate general partner had a prior discharge in bankruptcy or been found insolvent in any court action? Yes* No *Please see affidavits for [redacted] and [redacted] for full explanatory statements.

If the answer to this question is “Yes,” a statement providing details of such bankruptcy or insolvency must be included with this application.*

73. Does any controlling person of the applicant, any manager, any principal stakeholder, any sole proprietor applicant, any general partner of a partnership applicant, any officer or member of the board of directors of a corporate applicant, or corporate general partner, or a combination of such persons collectively, maintain a ten percent interest or greater in any firm, association, foundation, trust, partnership, corporation or other entity, and such entity will or may provide goods, leases, or services to the registered organization, the value of which is or would be five hundred dollars or more within any one year?

OR

Does any entity maintain a ten percent interest or greater in the applicant, and such entity will or may provide goods, leases, or services to the registered organization, the value of which is or would be five hundred dollars or more within any one year?

Yes No

If the answer to either of these questions is “Yes,” a statement with the name and address of the entity together with a description of the goods, leases, or services and the probable or anticipated cost to the registered organization, must be included with this application.

74.

A. Is the applicant a corporate subsidiary or affiliate of another corporation? Yes No

If the answer to this question is “Yes,” a statement setting forth the name and address of the parent or affiliate, the primary activities of the parent or affiliate, the interest in the applicant held by the parent or affiliate, and the extent to which the parent will be involved in the activities of the applicant, and responsible for the financial and contractual obligations of the subsidiary must be included with this application. The organizational and operational documents of the corporate subsidiary or affiliate must also be submitted, including but not limited to, as applicable: the certificate of incorporation, bylaws, articles of organization, partnership agreement, operating agreement, and all amendments thereto, and other applicable documents and agreements including in relation to the subsidiary or affiliate’s financial or contractual obligations with respect to the applicant.

B. Is any owner, partner or member of the applicant not a natural person? Yes No

If the answer to this question is “Yes,” a statement must be included with this application setting forth the name and address of the entity, the primary activities of the entity, the interest in the applicant held by the entity, and the extent to which the entity will be involved in the activities of the applicant, and responsible for the financial and contractual obligations of the applicant. The organizational and operational documents of the entity must also be submitted, including but not limited to, as applicable: the certificate of incorporation, bylaws, articles of organization, partnership agreement, operating agreement, and all amendments thereto, and other applicable documents and agreements including in relation to the entity’s financial or contractual obligations with respect to the applicant, and the identification of all those holding an interest or ownership in the entity and the percentage of interest or ownership held in the entity. If an interest or ownership in the entity is not held by a natural person, the information and documentation requested herein must be provided going back to the level of ownership by a natural person (Principal Stakeholder).



75. Has construction, lease, rental, or purchase of the manufacturing facility been completed? [X]Yes []No

If the answer to this question is "No," a statement indicating the anticipated source and application of the funds to be used in such purchase, lease, rental or construction, as well as anticipated date that construction, lease, rental or purchase will be completed must be included with this application.

76. Has construction, lease, rental, or purchase of the dispensing facilities been completed? [X]Yes []No

If the answer to this question is "No," a statement indicating the anticipated source and application of the funds to be used in such purchase, lease, rental or construction, as well as anticipated date that construction, lease, rental or purchase will be completed must be included with this application.

Section I: Required Attachments

Applications received without the required attachments will not be eligible for consideration until the required attachments are received. All such attachments must be postmarked by the Deadline for Submission of Applications.

77. [X] The applicant has enclosed a non-refundable application fee in the amount of \$10,000.

Applications received without the \$10,000 application fee will not be considered.

78. [X] The applicant has enclosed a conditionally refundable registration fee in the amount of \$200,000.

Applications received without the \$200,000 registration fee will not be considered.

The \$200,000 registration fee will be refunded to applicants that are not selected as registered organizations.

79. [X] The applicant has attached all required statements from Section H: Legal Disclosures, if applicable.

80. [X] The applicant has attached identification of all real property, buildings, and facilities that will be used in manufacturing and dispensing activities, pursuant to PHL § 3365 and 10 NYCRR § 1004.5(b)(2), and labeled this attachment as "Attachment A."

81. [X] The applicant has attached identification of all equipment that will be used to carry out the manufacturing, processing, transportation, distributing, sale, and dispensing activities described in the application and operating plan, pursuant to PHL § 3365 and 10 NYCRR § 1004.5(b)(3), and labeled this attachment as "Attachment B."

82. [X] The applicant has attached copies of all applicable executed and proposed deeds, leases, and rental agreements or executed option contracts related to the organization's real property interests, showing that the applicant possesses or has the right to use sufficient land, buildings, other premises, and equipment, and contains the language required in 10 NYCRR § 1004.5(b)(9), if applicable, or, in the alternative, the applicant attached proof that it has posted a bond of not less than \$2,000,000, pursuant to PHL § 3365 and 10 NYCRR § 1004.5(b)(9), and labeled this attachment as "Attachment C."



83. The applicant has attached an operating plan that includes a detailed description of the applicant's manufacturing processes, transporting, distributing, sale and dispensing policies or procedures, and contains the components set forth in 10 NYCRR § 1004.5(b)(4), and labeled the operating plan as "**Attachment D – Operating Plan**" with the information clearly labeled and divided into the following sections:
- Section 1 - Manufacturing (§ 1004.5(b)(4))
 - Section 2 - Transport and Distribution (§ 1004.5(b)(4))
 - Section 3 - Dispensing and Sale (§ 1004.5(b)(4))
 - Section 4 - Devices (§ 1004.5(b)(4)(i))
 - Section 5 - Security and Control (§ 1004.5(b)(4)(ii))
 - Section 6 - Standard Operating Procedure (§ 1004.5(b)(4)(iii))
 - Section 7 - Quality Assurance Plans (§ 1004.5(b)(4)(iv))
 - Section 8 - Returns, Complaints, Adverse Events and Recalls (§ 1004.5(b)(4)(v))
 - Section 9 - Product Quality Assurance (§ 1004.5(b)(4)(vi))
 - Section 10- Recordkeeping (§ 1004.5(b)(4)(vii))
84. The applicant has attached copies of the organizational and operational documents of the applicant, pursuant to 10 NYCRR § 1004.5(b)(5), which must include the identification of all those holding an interest or ownership in the applicant and the percentage of interest or ownership held, and labeled this attachment as "**Attachment E.**"
85. "**Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members**" has been completed for each of the board members, officers, managers, owners, partners, principal stakeholders, directors, and any person or entity that is a member of the applicant setting forth the information required in PHL § 3365(1)(a)(iv) and 10 NYCRR § 1004.5(b)(6).
86. The applicant has attached documentation that the applicant has entered into a labor peace agreement with a bona fide labor organization that is actively engaged in representing or attempting to represent the applicant's employees, pursuant to PHL § 3365(1)(a)(iii) and 10 NYCRR § 1004.5(b)(7), and labeled this attachment as "**Attachment F.**"
87. The applicant has attached a financial statement setting forth all elements and details of any business transactions connected with the application, including but not limited to all agreements and contracts for consultation and/or arranging for the assistance in preparing the application, pursuant to 10 NYCRR § 1004.5(b)(10), and labeled this attachment as "**Attachment G.**"
88. The applicant has completed "**Appendix B – Architectural Program**" and included the components set forth in 10 NYCRR § 1004.5(b)(11) and -(12).
89. The applicant has attached the security plan of the applicant's proposed manufacturing and dispensing facilities indicating how the applicant will comply with the requirements of Article 33 of the Public Health Law, 10 NYCRR Part 1004, and any other applicable state or local law, rule, or regulation, and labeled this attachment as "**Attachment H.**"
90. The applicant has attached the most recent financial statement of the applicant prepared in accordance with generally accepted accounting principles (GAAP) applied on a consistent basis and certified by an independent certified public accountant, in accordance with the requirements of 10 NYCRR § 1004.5(b)(16), and labeled this attachment as "**Attachment I.**"
91. The applicant has attached a staffing plan for staff to be involved in activities related to the cultivation of marijuana, the manufacturing and/or dispensing of approved medical marijuana products, and/or staff with oversight responsibilities for such activities that includes the requirements set forth in 10 NYCRR § 1004.5(b)(18) of the regulations and labeled this attachment as "**Attachment J.**"



- 92. [X] The applicant has attached proof from the local internet service provider(s) that all of the applicant's manufacturing and dispensing facilities are located in an area with internet connectivity and labeled this attachment as "Attachment K."
93. [X] The applicant has attached a timeline demonstrating the estimated timeframe from growing marijuana to production of a final approved product, and labeled this attachment as "Attachment L."
94. [X] The applicant has attached a statement and/or documentation showing that the applicant is able to comply with all applicable state and local laws and regulations relating to the activities in which it intends to engage under the registration, pursuant to 10 NYCRR § 1004.5(b)(8), and labeled this attachment as "Attachment M."

Section J: Attestation and Signature

As the chief executive officer duly authorized by the board of a corporate applicant, or a general partner or owner of a proprietary applicant, I hereby authorize the release of any and all applicant information of a confidential or privileged nature to the Department and its agents. If granted a registration, I hereby agree to ensure the registered organization uses the Seed-to-Sale Solution approved by the Department to record the registered organization's permitted activities. I hereby certify that the information provided in this application, including in any statement or attachments submitted herewith, is truthful and accurate. I understand that any material omissions, material errors, false statements, misrepresentations, or failure to provide any requested information may result in the denial of the application or other action as may be allowed by law.

95. Signature:

96. Date Signed:



97. Print Name:

The application must include a handwritten signature by the chief executive officer duly authorized by the board of a corporate applicant, or a general partner or owner of a proprietary applicant, and must be notarized.

Table with 2 columns: Notary Name, Notary Registration Number, Notary (Notary Must Affix Stamp or Seal), Date.

Answer to Question 72

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Answer to Question 74A

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Answer to Question 74B

Redacted pursuant to N.Y. Public Officers Law, Art. 6

William W. Todd
Richard Taney
MedTech International Group LLC (Boris Jordan)
Andrei Bogolubov
Dimitry Schidlovsky
Juliana Taney
Marisa Taney
George Schidlovsky
Jack Burkholder
Kirill Gromov
Sheila O. Todd
Webster B. Todd, Jr.
Judson Traphagen
Clarence Limited Partnership (Daniel Tierney)
Ivan and Lisa Kaufman Family Trust (Ivan Kaufman)
Peter L. Bloom
Karen Liebers
E. Craig Asche
Steven Patierno
Christopher J. Denmark
F. Clayton and Karen Hunt
Gary Bronheim
Gould LLC
Joseph Mishkin
Mark Friedman
Scott Sheldon
Paula Rimer
Reuben Askowitz
Robert Matthews
Startop (Richard Scanlon)
Steven Mishkin
Susan E. Denmark
Timur Nasardinov
Michael Nelson
Taylor G. Thomas
Michael Nimaroff
Amy B. Taney
Michele Blair
Anthony Savino
Arthur Caruso Jr.
Bernard Meldrum
NussBloom Partners (Scott Nussbaum, Jon Bloom)
Susan Denner Horowitz

John and Kelly Shuhda
Christopher Todd
Thomas L. Pulling
Jeffery Beaver
John Prufeta
Christopher M. Scott
Michael Schidlovsky



Redacted pursuant to N.Y. Public Officers Law, Art. 6

Ayman Soliman
Betsy Malik
Robert Abrams
Carolyn Reinach Wolf
Douglas Stern
Ellen Flowers
Ellyn Kravitz
Frank Carone
Greg Stoller
Howard Fensterman
John Belesi
Keith Singer
Lorraine Takesky
Matthew Didora
Nancy Levitin
Patrick Formato
Samuel J. Ferrara
Sharon Stiller
Steven J. Eisman





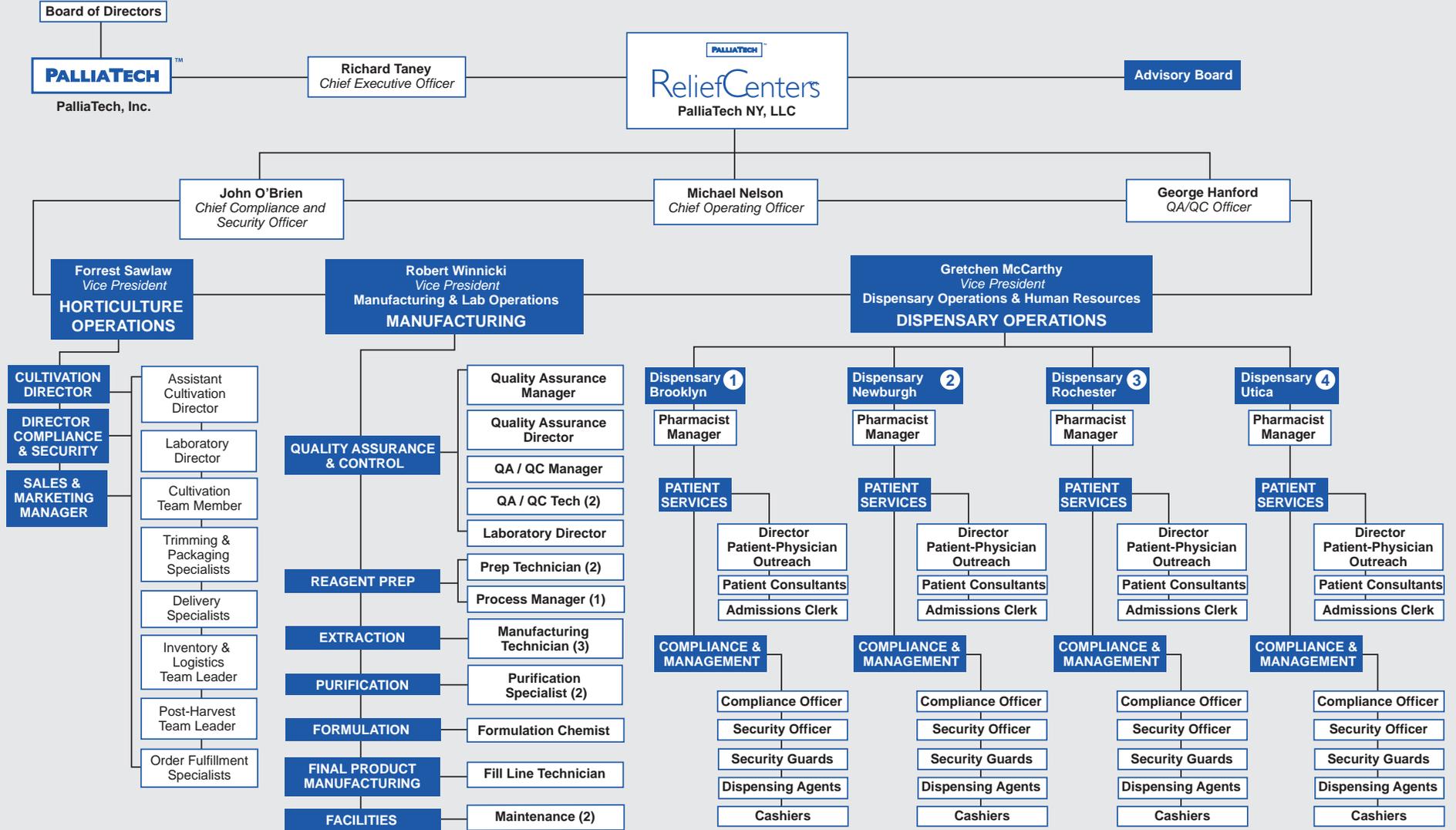
Appendix A: Affidavit for Board Members, Officers, Owners

Registered Organization Applicant Ownership Structure

PalliaTech NY, LLC



Registered Organization Applicant Ownership Structure - PalliaTech NY, LLC



Mr. Boris Jordan, [REDACTED]

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Mr. Jordan received his BA from New York University majoring in Russian-American Economic Relations. Mr. Jordan is a Member of the Council on Foreign Relations (US) and a Member of the Board at Trustees of New York University. At New York University Mr. Jordan endowed the Jordan Center for Russian Studies. Boris Jordan was named among 100 Global Leaders for Tomorrow by the World Economic Forum.

Advisory Board Members

Thomas Alfano is a distinguished lawyer and former member of the New York State Assembly who currently serves as the deputy general counsel at a top-rated state hospitals.

Bruce Blakeman is a leader in business, government, and the legal profession, having served as Speaker of the Nassau County Legislature and as a Commissioner of the Port Authority of New York and New Jersey.

Roderick C. Covington is a former major in the New York State Police Department who oversaw a 275-member team responsible for coordinating all facets of the governor's security with local, state, and federal agencies, including the FBI and the Office of Homeland Security.

Andrew J. O'Connell, a security advisor and attorney who served as a federal prosecutor in the Southern District of New York and a U.S. Secret Service agent, is currently [REDACTED].

Noel Palmer, Ph.D. is an experienced analytical chemist with extensive expertise in plant and soil chemistry, who oversaw research, testing and operations as the [REDACTED].

Steven Patierno, Ph.D., a professor at the [REDACTED], [REDACTED], is recognized worldwide as a leading expert in cancer causation and molecular oncology.

William Slatter is Chairman of the [REDACTED], [REDACTED].

Appendix A - Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

<u>Name</u>	<u>Affiliation</u>
Abrams, Robert	Member, PalliaTech NY, LLC
Alfano, Thomas W.	Member, PalliaTech NY, LLC
Asche, E. Craig	[REDACTED]
Askowitz, Reuban	[REDACTED]
Beaver, Jeffrey	[REDACTED]
Belesi, John	Member, PalliaTech NY, LLC
Blair, Michele	[REDACTED]
Blakeman, Bruce	Member, PalliaTech NY, LLC
Bloom, Jon	[REDACTED]
Bloom, Peter	[REDACTED]
Bogolubov, Andrei	[REDACTED]
Bronheim, Gary	[REDACTED]
Burkholder, Jr., John	[REDACTED]
Carone, Frank	Lawyer - Government Relations
Caruso, Jr., Arthur	[REDACTED]
Denmark, Christopher	[REDACTED]
Denmark, Susan	[REDACTED]
Denner Horowitz, Sharon	[REDACTED]
Didora, Matthew	Member, PalliaTech NY, LLC
Eiseman, Steven	Member, PalliaTech NY, LLC
Fensterman, Howard	Member, PalliaTech NY, LLC
Ferrara, Samuel J.	Member, PalliaTech NY, LLC
Flowers, Ellen L.	Member, PalliaTech NY, LLC
Formato, Carol	Member, PalliaTech NY, LLC
Friedman, Mark	[REDACTED]
Gould, William	[REDACTED]
Gromov, Kiril	[REDACTED]
Hanford, George	VP - Quality Control & Quality Assurance
Hunt, F. Clayton	[REDACTED]
Jordan, Boris Alexis	[REDACTED]
Kaufman, Ivan	[REDACTED]
King, Sarah	Pharmacist - Utica
Kravitz, Ellyn S.	Member, PalliaTech NY, LLC
Liebers, Karen	[REDACTED]
Levitin, Nancy	Member, PalliaTech NY, LLC
Lyons, Rachel	Pharmacist - Newburgh
Malik, Betsy	Member, PalliaTech NY, LLC
Matthews, Robert	[REDACTED]
McCarthy, Gretchen	VP HR & Dispensary Op ^o
Meldrum, Bernard	Shareholder - PalliaTech
Mishkin, Joseph	Shareholder - PalliaTech

"FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87 (2)) – Exemption from Disclosure Requested"

Name

Affiliation

Mishkin, Steven
Nasardinov, Timur
Nelson, Michael
Nimaroff, Michael
Nussbaum, Scott
O'Brien, Jr., John
Patierno, Steven
Prufeta, John
Pulling, Thomas
Reinach Wolf, Carolyn
Rimer, Paula
Savino, Anthony
Sawlaw, Forrest
Scanlon, Richard
Sheldon, Scott
Schidlovsky, Dimitry
Schidlovsky, George
Schidlovsky, Michael
Scott, Christopher
Scott, Sheldon
Shuhda, John
Singer, Keith J.
Soliman, Ayman
Stern, Douglas K.
Stiller, Sharon
Stoller, Greg
Takesky, Lorraine
Taney, Amy
Taney, Juliana
Taney, Marisa
Taney, Richard
Thomas, Taylor
Tierney, Daniel
Todd, Christopher
Todd, Sheila
Todd, Webster B.
Todd, William
Traphagen, Judson
Winnicki, Robert

[Redacted]
General Manager
[Redacted]
Chief Compliance Officer
Director & Chair, Scientific Advisory Board
[Redacted]
Member, PalliaTech NY, LLC

VP of Horticultural Operations
Redacted pursuant to N.Y.
Public Officers Law, Art. 6

VP - Manufacturing

"FOIL Confidential – Personal Privacy
(NY Pub. Off. L. 87 (2)) – Exemption
from Disclosure Requested"



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Robert Abrams 3. Title: Member-PalliaTech NY, LLC
4. Briefly describe the role of this person or entity in the proposed registered organization:
Robert Abrams will have a financial interest in the applicant, but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: [redacted]

10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include New York Law School, New York University, and Brooklyn College.



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1: JD, 2163715, New York State Office for Court Administration, January 1988.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Name of Employer:
Type of Business:



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business. The form is repeated for multiple individuals.



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including: Type of Business, Street Address, City/State/Zip, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, Type of Business, Street Address, City/State/Zip, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, 18. Offices Held or Ownership Interest in Other Businesses, Have you owned or operated a business or had any affiliations with the operations of a business in New York, in the USA, or in other countries?, From: 11-13-12, To: Present, Name and Address of Business: PalliaTech NY, LLC 1111 Marcus Ave., Ste. 107 Lake Success, NY 11042, Business Type: Medical Marijuana, Office Held/Nature of Interest: Member of LLC, [X] open [] closed [] proposed, Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: From, To, Business Type, Name and Address of Business, Office Held/Nature of Interest, Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable. Includes checkboxes for open, closed, proposed.



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/29/2015
Notary Name: [Handwritten Name] Notary Registration Number: 02MC6310863
Notary (Notary Must Affix Stamp or Seal) Date: May 29, 2015
BRIAN THOMAS MCCARTHY
NOTARY PUBLIC-STATE OF NEW YORK
No. 02MC6310863
Qualified in Suffolk County
My Commission Expires September 02, 2018



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Thomas W. Alfano 3. Title: Member-PalliaTech NY, LLC
4. Briefly describe the role of this person or entity in the proposed registered organization:
Thomas W. Alfano is a Member of PalliaTech NY, LLC, the Registered Organization applicant. Thomas W. Alfano will have a financial interest in the applicant, but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc.
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: [redacted]

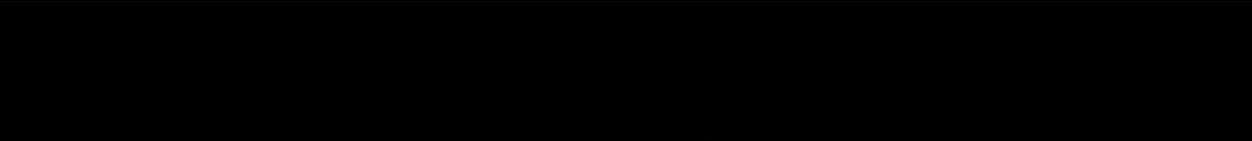
10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

15. Formal Education Dates Attended Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Contains two rows of education data for Fordham University.



Empty table rows below the redaction.

Empty table rows at the bottom of the form.

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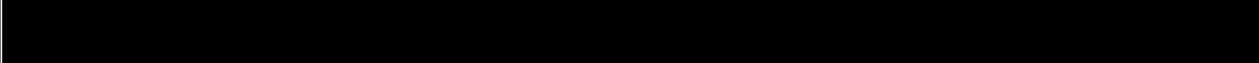
**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

Type of Professional License	License Number	Institution Granting License (Mailing Address, Phone, Email)	Effective Date	Expiration Date
Juris Doctor		Fordham Law School 33 W 60th St, New York NY 10023	1985	N/A

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Name of Employer: Nassau University Medical Center
 Type of Business: Public Hospital
 Street Address: 2201 Hempstead Tpke
 City: East Meadow State: NY Zip Code: 11554
 Starting Date of Employment: June 2014 Ending Date of Employment: Present



Position/Responsibilities:
 Legal Affairs, Attorney, Employee Relations. Prepare RFPs, contracts, subpoena responses, FOIL responses.

Reason For Departure: N/A



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**Department
of Health**

Medical Marijuana Program
Application for Registration as
a Registered Organization

Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**
Redacted pursuant to N.Y. Public Officers Law, Art. 6

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections: Type of Business, Street Address, City/State/Zip, Starting/Ending Date of Employment, Name of Supervisor, Position/Responsibilities, Reason For Departure, 18. Offices Held or Ownership Interest in Other Businesses, and Business Type/Office Held.



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with three identical sections for individuals. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: May 28, 2015

Notary Name: [Handwritten Signature]

Notary Registration Number: 02RY6142488

Notary (Notary Must Affix Stamp or Seal)

Date: May 28, 2015

MEGAN C. RYAN
Notary Public, State of New York
No. 02RY6142488
Qualified in Nassau County
Commission Expires Mar. 20, 2018
May 28, 2018



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: E. Craig Asche 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: [redacted]

10. Email [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Row 1: Trinity College, 300 Summit Street, Hartford, CT, 1073, 1978, BA, 1978.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer and supervisor information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor, and Position/Responsibilities.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

From: june 2003	Name and Address of Business:	
To: Dec 2010	CAIA Association 100 University Drive, Amherst, MA 01002	
Business Type: prof. certification program	Office Held/Nature of Interest: Board Member (as well as CEO)	<input type="checkbox"/> open <input checked="" type="checkbox"/> closed <input type="checkbox"/> proposed
Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:		
From: Jan 2015	Name and Address of Business:	
To: present	Bishop Gadsden 1873 Camp Road, Charleston, SC 29412	
Business Type: Retirement Community	Office Held/Nature of Interest: Board Member	<input checked="" type="checkbox"/> open <input type="checkbox"/> closed <input type="checkbox"/> proposed
Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:		
From:	Name and Address of Business:	
To:		
Business Type:	Office Held/Nature of Interest:	<input type="checkbox"/> open <input type="checkbox"/> closed <input type="checkbox"/> proposed
Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:		

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/26/15
Notary Name: Jordan N. Johnson Notary Registration Number: N/A is South Carolina
Notary (Notary Must Affix Stamp or Seal) Date: 5/26/15
JORDAN JOHNSON
Notary Public - State of South Carolina
My Commission Expires March 26, 2025

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Reuben Askowitz 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [X] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

Form with fields for 8. Phone, 9. Fax, 10. Email, 11. Residence Address, 12. City, 13. State, 14. ZIP Code, and 15. Formal Education table.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License, Effective Date, Expiration Date. Contains two rows of license information.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 2 if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and a section for other businesses (18. Offices Held or Ownership Interest in Other Businesses).

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with three identical sections for business information, including fields for From, To, Business Type, Office Held/Nature of Interest, and Licensing/Regulatory Agency.



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: 5/29/15

Notary Name: Kathleen Ford

Notary Registration Number: 01FO6316121

Notary (Notary Must Affix Stamp or Seal)
KATHLEEN FORD
NOTARY PUBLIC, State of New York
No. 01FO6316121
Qualified in Nassau County
Commission Expires December 08, 2018

Date: 5/29/15



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Jeffrey Beaver 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
Mr. Beaver is the Non-Executive Chairman of the Board of PalliaTech, Inc., the Sole Managing Member of PalliaTech NY, LLC, the Registered Organization applicant. In his role as non-executive Chairman of the Board and a member of all Board committees of PalliaTech, Inc., he conducts Board meetings, follows the activities of the Company, consulting, commenting and advising PalliaTech, Inc. management as required.
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
Yes No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? Yes No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: none

10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include Princeton University and New York University school of Business.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Name of Employer:
Type of Business:

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.

"FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested"



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and 18. Offices Held or Ownership Interest in Other Businesses.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with three identical sections for business information, including fields for From, To, Business Type, Office Held/Nature of Interest, and Licensing/Regulatory Agency.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

I have had extensive experience in business and investment banking over the last 53 years, principally with the [redacted] --- just not in the past 10 years, other than [redacted] and my PalliaTech Board membership.

I am a CFA (Chartered Financial analyst), as of 1965.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: Jeffrey Brown Date: May 12, 2015
Notary Name: Adiz Fernandez Notary Registration Number: 01FE0255463
Notary (Notary Must Affix Stamp or Seal) Date: 5/12/2015
ADIZ FERNANDEZ
Notary Public - State of New York
NO. 01FE6255463
Qualified in Kings County
My Commission Expires 07/06/16

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: John Belesi 3. Title: Member-PalliaTech NY, LLC
4. Briefly describe the role of this person or entity in the proposed registered organization:
[Redacted] John Belesi will have a financial interest in the applicant, but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: [redacted]

10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

15. Formal Education Dates Attended Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include St Johns University, New York Chiropractic College, and Touro Law School.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Contains two rows of license data: Attorney (2897775, New York State Unified Court, 1997, 2016) and Doctor of Chiropractic (X4264, Department of Education, 1985).

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities.

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Appendix A:
**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		Type of Business:
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
18. Offices Held or Ownership Interest in Other Businesses List any affiliations you have been associated with in the past 10 years. Affiliation, for the purpose of this section, includes serving as either a board member, officer, manager, owner, partner, principal stakeholder, director or member of the organization. Organizations outside of New York State must also be disclosed.		
Have you owned or operated a business or had any affiliations with the operations of a business in New York, in the USA, or in other countries? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
From: 11-13-12	Name and Address of Business:	
To: Present	PalliaTech NY, LLC 1111 Marcus Ave. , Ste. 107 Lake Success, NY 11042	
Business Type: Medical Marijuana	Office Held/Nature of Interest: Member of LLC	<input checked="" type="checkbox"/> open <input type="checkbox"/> closed <input type="checkbox"/> proposed
Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:		

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: 5/29/15

Notary Name: Lorraine Takesky

Notary Registration Number: 01TA5040564

Notary (Notary Must Affix Stamp or Seal)
LORRAINE TAKESKY
Notary Public, State of New York
No. 01TA5040564
Qualified in Nassau County
Commission Expires March 13, 20 19

Date: 5-29-15



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Michele Blair 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: n/a
10. Email: [redacted]
11. Residence Address: [redacted]
12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]
15. Formal Education
Institution Address Dates Attended Degree
Ithaca College 953 Danby Rd Ithaca,NY 1980 1984 BS 1984

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.
Type of Business:
Street Address:
City: State: Zip Code:
Starting Date of Employment: Ending Date of Employment:
Name of Supervisor for Reference: Supervisor Phone Number:
Position/Responsibilities:
Reason For Departure:
Name of Employer:
Type of Business:

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including Type of Business, Street Address, City/State/Zip, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field contains checkboxes for 'open', 'closed', and 'proposed'.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications
For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: Michele Main Date: 6/27/15
Notary Name: KENNETH REED Notary Registration Number:
Notary (Notary Must Affix Stamp or Seal) Date: MAY 27, 2015
SUBSCRIBED AND SWORN TO BEFORE ME
THIS 27 DAY OF May 20 15
NOTARY PUBLIC
KENNETH REED
NOTARY PUBLIC
My Commission Expires 11/30/2018
State of Connecticut
County of Fairfield

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Bruce Blakeman 3. Title: PalliaTech NY, LLC
4. Briefly describe the role of this person or entity in the proposed registered organization: Bruce Balkeman is a Member of PalliaTech NY, LLC, the Registered Organization applicant. Bruce Blakeman will have a financial interest in the applicant, but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products? [] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: 9. Fax:

10. Email:

11. Residence Address:

12. City: 13. State: 14. ZIP Code:

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include California Western School of Law, Arizona State University, College Of The Desert, New York Institute of Technology, and Long Island University.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Contains two rows of license data.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Name of Employer: Town of Hempstead
Type of Business: Government

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including address, employment dates, supervisor details, and reasons for departure.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor, and Position/Responsibilities.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with fields: From: 11-13-12, To: Present, Business Type: Medical Marijuana, Name and Address of Business: PalliaTach NY, LLC, Office Held/Nature of Interest: Member, and a redacted section for Licensing/Regulatory Agency.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: Name, Address and Phone Number of Licensing/Regulatory Agency, From, To, Business Type, Name and Address of Business, Office Held/Nature of Interest, and a redacted section for Licensing/Regulatory Agency.

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/28/2015
Notary Name: Kevin J. Denning Notary Registration Number: 01DE6122462
Notary (Notary Must Affix Stamp or Seal) Date: May 28, 2015
KEVIN J. DENNING
NOTARY PUBLIC-STATE OF NEW YORK
No. 01DE6122462
Qualified in Nassau County
My Commission Expires February 14, 2017
Kevin J. Denning NOTARY



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Jon Bloom 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax N/A

10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Row 1: UNIV OF PA., 3400 SPRUCE ST PHILA. PA 19104, 1977, 1981, B.S. ECONOMICS, 6/81

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for From, To, Business Type, Office Held/Nature of Interest, and Name, Address and Phone Number of Licensing/Regulatory Agency. Includes checkboxes for open, closed, and proposed.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

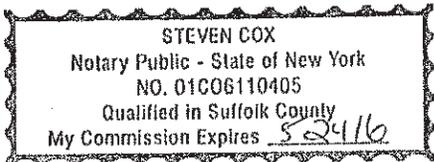
For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 6.4.15

Notary Name: [Handwritten Signature] Notary Registration Number: 01C06110405

Notary (Notary Must Affix Stamp or Seal) Date: 6/4/15



[Handwritten Signature]



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Peter L. Bloom 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [X] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [X] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: 9. Fax:

10. Email:

11. Residence Address:

12. City: 13. State: 14. ZIP Code:

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Row 1: Northwestern University, 633 Clark Street, Evanston, IL 60208, 9/75, 5/78, B.A., 5/78.



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

Type of Professional License	License Number	Institution Granting License (Mailing Address, Phone, Email)	Effective Date	Expiration Date

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and a section for other businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**
Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**
Redacted pursuant to N.Y. Public Officers Law, Art. 6

From: 2002	Name and Address of Business: DonorsChoose	
To: Present	134 West 37 St New York, NY 10018	
Business Type: Education non-profit	Office Held/Nature of Interest: Chairman of the Board	<input checked="" type="checkbox"/> open <input type="checkbox"/> closed <input type="checkbox"/> proposed
Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:		

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: From: 2002, To: Present, Business Type: Public Safety non-profit, Name and Address of Business: Peak Rescue Institute, Office Held/Nature of Interest: Chairman of the Board, and Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

[Redacted] and will have no responsibility for any managerial or operations responsibility at the company.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: 5/27/15

Notary Name: MARY D. MALAVASE

Notary Registration Number: N/A

Notary (Notary Must Affix Stamp or Seal)

Date: 5/27/15
MARY D. MALAVASE
Notary Public
Commonwealth of Massachusetts
My Commission Expires Jan. 20, 2017





Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Andrei Bogolubov 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
the Registered Organization applicant. He has no direct management position in the applicant organization.
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
Yes No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? Yes No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [Redacted] 9. Fax: [Redacted]

10. Email: [Redacted]

11. Residence Address: [Redacted]

12. City: [Redacted] 13. State: [Redacted] 14. ZIP Code: [Redacted]

15. Formal Education
Institution Address Dates Attended Degree
From To Degree Received Date Received

[Redacted Education Record]

University of Connecticut Storrs, CT 1976 1980 Bachelor of Arts Political Science 1980

[Redacted Education Record]

[Redacted Education Record]

[Redacted Education Record]



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1 contains 'Not applicable'.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities.



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and a section for other businesses (18. Offices Held or Ownership Interest in Other Businesses).

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for From, To, Business Type, Office Held/Nature of Interest (with checkboxes for open, closed, proposed), and Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

Not applicable

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature:

[Handwritten signature]

Date:

6-1-2015

Notary Name:

Notary Registration Number:

Notary (Notary Must Affix Stamp or Seal)

Date:

**NEW YORK 'ALL-PURPOSE' ACKNOWLEDGMENT
REAL PROPERTY LAW §309-a**

State of New York
County of Westchester } ss.

On the 1st day of June in the year 2015 before me,
Day Month Year

the undersigned personally appeared Andrei Bogolubov
Name of Signer

(and _____) personally known to me or
Name of Additional Signer, if Any

proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which, the individual(s) acted, executed the instrument.

Shelley Mariaca
Signature of Notary Public
Notary Public — State of New York

Place Seal Below OR Complete Lines Below



Name of Notary

Name of County in Which Originally Qualified

Commission Expiration Date

Name of County in Which Certificate of Official Character Filed (if required)

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Application for Registration as Registered Org.

Document Date: _____ Number of Pages: 7

Signer(s) Other Than Named Above: _____



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Gary Bronheim 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: Fax

10. Email:

11. Residence Address:

12. City: 13. State: 14. ZIP Code:

15. Formal Education Dates Attended Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Row 1: Carnegie-Mellon Univ, Pittsburgh PA, 1970, 1974, Bachelors of Public Relations, 5/74

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

Type of Professional License	License Number	Institution Granting License (Mailing Address, Phone, Email)	Effective Date	Expiration Date
FINRA Series 7	CRD # 1121778	FINRA		
INSURANCE	LA 690365	NY state INS		

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities. Includes a section for Reason For Departure and a section for 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: Day Brand

Date: 5/27/15

Notary Name: Clorise Beasley

Notary Registration Number: 01BF6125044

Notary (Notary Must Affix Stamp or Seal)

Date: 5/27/2015





Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: John J Burkholder Jr 3. Title: Board Member PalliaTech, Inc
4. Briefly describe the role of this person or entity in the proposed registered organization:
Member of the Board of Directors of PalliaTech, Inc., which is an owner in PalliaTech NY, LLC
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [x] Yes [] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: na

10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

15. Formal Education Dates Attended Degree

Institution Address From To Degree Received Date Received

[redacted]

Cornell University Ithaca NY 8/1962 12/1967 B.S. Agricultural Economics 12/1967

Fordham University New York, NY 8/1970 6/1972 M.B.A. - Finance & Economics 6/1972

[redacted]

[redacted]

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

Type of Professional License	License Number	Institution Granting License (Mailing Address, Phone, Email)	Effective Date	Expiration Date
Colorado Real Estate Broker - Inactive Status	FA703705	Colorado Real Estate Commission 1900 Grant St, Suite 600 Denver CO 80203	July 1978	5/31/2018
Colorado Driver License	[REDACTED]	State of Colorado	5/7/2010	7/11/2015

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Name of Employer: PalliaTech, Inc.

Type of Business: Medical cannabis cultivation, extraction, dispensing, scientific research & laboratory testing

Street Address: 252 Sea Cliff Avenue

City: Sea Cliff State: NY Zip Code: 11579

Starting Date of Employment: 10/2010 Ending Date of Employment: 6/2014

Name of Supervisor for Reference: [REDACTED] Supervisor Phone Number: [REDACTED]

Position/Responsibilities:
Chief Financial Officer

[REDACTED]

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested" [Signature]



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer.

Handwritten signature or initials



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, Type of Business, and a section for other businesses (18. Offices Held or Ownership Interest in Other Businesses).

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: From: 12/2005, To: 3/2011, Business Type: logistics container shipping, Name and Address of Business: A Smart Move, Inc., 5990 Greenwood Plaza Blvd, Greenwood Village, CO 80111, Office Held/Nature of Interest: Mbr Board of Directors, Audit & Gov Cmte, checkboxes for open, closed, proposed.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Handwritten signature or initials



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

n/a

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature:

[Handwritten signature]

Date:

5/15/2015

Notary Name:

Yohannes Hailemariam

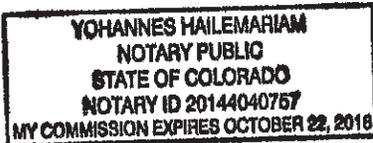
Notary Registration Number:

20144040757

Notary (Notary Must Affix Stamp or Seal)

Date:

5/15/2015





Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name:
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Frank V. Carone Partner
4. Briefly describe the role of this person or entity in the proposed registered organization: Lawyer handling Government Relations, Article 78 Proceedings, Commercial Litigation, Criminal Defense and Regulatory Compliance.
5. Will this person or entity come into contact with medical marijuana or medical marijuana products? [X] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [X] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
 Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [REDACTED]		9. Fax: [REDACTED]			
10. Email: [REDACTED]					
11. Residence Address: [REDACTED]					
12. City: [REDACTED]		13. State: [REDACTED]	14. ZIP Code: [REDACTED]		
15. Formal Education		Dates Attended		Degree	
Institution	Address	From	To	Degree Received	Date Received
Kingsborough Community College	2001 Oriental Boulevard Brooklyn, New York 11235	09/87	06/89	AAS	06/89
St. John's University	8000 Utopia Parkway Jamaica, New York 11439	09/89	06/91	BS	06/91
Brooklyn School of Law	250 Joralemon Street Brooklyn, New York 11201	09/91	06/94	JD	06/94

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1: Firearm, [Redacted], New York City Police Department, 04/09/14, 10/29/17.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**
Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

18. Offices Held or Ownership Interest in Other Businesses

List any affiliations you have been associated with in the past 10 years. Affiliation, for the purpose of this section, includes serving as either a board member, officer, manager, owner, partner, principal stakeholder, director or member of the organization. Organizations outside of New York State must also be disclosed. (See attached addendum)

Have you owned or operated a business or had any affiliations with the operations of a business in New York, in the USA, or in other countries? X Yes [] No

Table with 3 columns: From, To, Business Type, Name and Address of Business, Office Held/Nature of Interest, and Name, Address and Phone Number of Licensing/Regulatory Agency.



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with three identical sections for business information, including fields for From, To, Business Type, Office Held/Nature of Interest, and Agency Name.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: May 29, 2015

Notary Name: Susan Mauro (Susan Mauro)

Notary Registration Number: 01MA4984842

Notary (Notary Must Affix Stamp or Seal)

Date: 5/29/15

SUSAN MAURO
Notary Public, State of New York
No. 01MA4984842
Qualified in Nassau County
Commission Expires March 20, 2018

AFFILIATION

ROLE

Redacted pursuant to N.Y. Public Officers Law, Art. 6

**Catholic Foundation for Booklyn
& Queens**

Board of Directors

Hanover Community Bank

Board of Directors

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Arthur Caruso Jr. 3. Title
4. Briefly describe the role of this person or entity in the proposed registered organization.
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
 Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [Redacted] 9. Fax: [Redacted]

10. Email: [Redacted]

11. Residence Address: [Redacted]

12. City: [Redacted] 13. State: [Redacted] 14. ZIP Code: [Redacted]

16. Formal Education		Dates Attended		Degree	
Institution	Address	From	To	Degree Received	Date Received
University of Delaware	University of Delaware Newark, DE 19716	08/1983	05/1987	BS in Business Administration	05/1987

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Rows include Series 65, Series 63, Series 7, Life & Variable Insurance, and CT, NJ, PA Insurance.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and a section for other businesses with a Yes/No checkbox.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with three identical sections for business information, including fields for From, To, Business Type, Office Held/Nature of Interest, and Licensing/Regulatory Agency.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

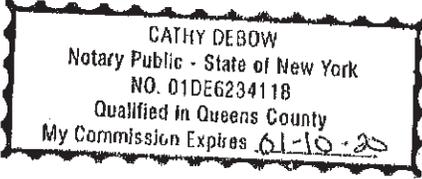
Date: 5-27-2015

Notary Name: Cathy DeBow

Notary Registration Number: 01DE 6234118

Notary (Notary Must Affix Stamp or Seal)

Date: 5/27/15



[Handwritten Signature]



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Christopher J. Denmark 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone:

9. Fax:

10. Email:

11. Residence Address:

12. City:

13. State:

14. ZIP Code:

15. Formal Education

Dates Attended

Degree

Institution	Address	From	To	Degree Received	Date Received

"FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested"



**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.				
Type of Professional License	License Number	Institution Granting License (Mailing Address, Phone, Email)	Effective Date	Expiration Date
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.				
Name of Employer:				
Type of Business:				
Street Address:				
City:		State:		Zip Code:
Starting Date of Employment:			Ending Date of Employment:	
Name of Supervisor for Reference:			Supervisor Phone Number:	
Position/Responsibilities:				
Reason For Departure:				
Name of Employer:				
Type of Business:				

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.

"FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested"



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and a section for other businesses (18. Offices Held or Ownership Interest in Other Businesses).

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 6/1/15
Notary Name: Amber Tatro Notary Registration Number:
Notary (Notary Must Affix Stamp or Seal) Date: 06/01/2015
AMBER R. TATRO
Notary Public
Massachusetts
Commission Expires Mar 2, 2018



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Susan E. Denmark 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [X] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: 9. Fax:

10. Email:

11. Residence Address:

12. City: 13. State: 14. ZIP Code:

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Row 15: Formal Education



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.
Name of Employer:
Type of Business:
Street Address:
City: State: Zip Code:
Starting Date of Employment: Ending Date of Employment:
Name of Supervisor for Reference: Supervisor Phone Number:
Position/Responsibilities:
Reason For Departure:
Name of Employer:
Type of Business:



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and a section for 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. Radio buttons are provided for 'open', 'closed', and 'proposed'.



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

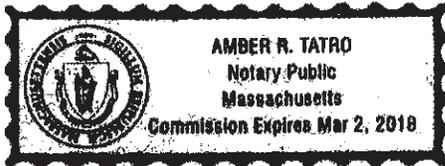
Date: 6/1/15

Notary Name: Amber R. Tatro

Notary Registration Number:

Notary (Notary Must Affix Stamp or Seal)

Date: 06/01/2015





Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Sharon Denner Horowitz 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [Redacted] 9. Fax: [Redacted]

10. Email: [Redacted]

11. Residence Address: [Redacted]

12. City: [Redacted] 13. State: [Redacted] 14. ZIP Code: [Redacted]

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Row 1: UCLA, Westwood, CA, 1968, 1972, BFA, June 1972.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1 contains 'NONE'.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Name of Employer:

Type of Business:

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. Radio buttons are provided for 'open', 'closed', and 'proposed' business types.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: Sharon Den Horowitz Date: May 28, 2015
Notary Name: Jane Dissin Notary Registration Number: 01D14659573
Notary (Notary Must Affix Stamp or Seal) JANE DISSIN Notary Public, State of New York No. 01D14659573 Qualified in New York County Commission Expires 6.31.18 Date: 5/28/15



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: MATTHEW F. DIDORA 3. Title: Member-PalliaTech NY, LLC
4. Briefly describe the role of this person or entity in the proposed registered organization:
MATTHEW F. DIDORA will have a financial interest in the applicant, but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

Form with fields for 8. Phone, 9. Fax, 10. Email, 11. Residence Address, 12. City, 13. State, 14. ZIP Code, and 15. Formal Education table.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections: Type of Business, Street Address, City/State/Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, Type of Business, Street Address, City/State/Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, 18. Offices Held or Ownership Interest in Other Businesses, List any affiliations you have been associated with in the past 10 years. Have you owned or operated a business or had any affiliations with the operations of a business in New York, in the USA, or in other countries? From: 11-13-12 To: Present Name and Address of Business: PalliaTech NY, LLC 1111 Marcus Ave. , Ste. 107 Lake Success, NY 11042 Business Type: Medical Marijuana Office Held/Nature of Interest: Member of LLC [x]open []closed []proposed Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including 'From', 'To', 'Business Type', 'Office Held/Nature of Interest', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable'. Includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: May 28, 2015
Notary Name: Lorraine Takesky Notary Registration Number: 01TA5040564
Notary (Notary Must Affix Stamp or Seal) Date: 5-28-15
LORRAINE TAKESKY
Notary Public, State of New York
No. 01TA5040564
Qualified in Nassau County
Commission Expires March 13, 20 19



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: STEVEN J. EISMAN 3. Title: Member-PalliaTech NY, LLC
4. Briefly describe the role of this person or entity in the proposed registered organization:
[Redacted] Steven J. Eisman will have a financial interest in the applicant, but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc.
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: [redacted]

10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

15. Formal Education: Dates Attended Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Contains handwritten entries for L.I. University CW Post and St. John's University School of Law.

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Rows include Attorney, Individual Broker, and Notary Public.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities.

"FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested"



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including: Type of Business, Street Address, City/State/Zip, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, Type of Business, Street Address, City/State/Zip, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, 18. Offices Held or Ownership Interest in Other Businesses, List any affiliations you have been associated with in the past 10 years, Have you owned or operated a business or had any affiliations with the operations of a business in New York, in the USA, or in other countries?, From: 11-13-12, To: Present, Business Type: Medical Marijuana, Office Held/Nature of Interest: Member of LLC, Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with two identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: 5/28/2015

Notary Name:

Notary Registration Number:

Notary (Notary Must Affix Stamp or Seal)
[Handwritten Signature]
SAMUEL J. FERRARA
Notary Public, State of New York
No. 02FE5077698
Qualified in Nassau County
Commission Expires 6/16/19

Date: 5/29/2015



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Howard Fensterman 3. Title: Member-PalliaTech NY, LLC
4. Briefly describe the role of this person or entity in the proposed registered organization:
Howard Fensterman will have a financial interest in the applicant, but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [Redacted] 9. Fax: [Redacted]

10. Email: [Redacted]

11. Residence Address: [Redacted]

12. City: [Redacted] 13. State: [Redacted] 14. ZIP Code: [Redacted]

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include American University (Bachelor of Arts, May 1975) and Georgetown University Law Center (Juris Doctor, May 1978).



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Contains two rows of license information.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including address, dates of employment, supervisor details, and reasons for departure.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including Type of Business, Street Address, City/State/Zip, Starting/Ending Date of Employment, Name of Supervisor, Position/Responsibilities, Reason For Departure, and 18. Offices Held or Ownership Interest in Other Businesses.



Appendix A:

See attached

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field has checkboxes for 'open', 'closed', and 'proposed'.



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: Date: 5/29/15
Notary Name: Notary Registration Number:
Notary (Notary Must Affix Stamp or Seal) Date:

Business Name

DATE

Business Type

Office Held

Licensing Agency

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature

[Handwritten signature]

Date:

5-28-15

Notary Name:

Lorraine Takesky

Notary Registration Number:

01TA5040564

Notary (Notary Must Affix Stamp or Seal)

Date:

5-28-15

LORRAINE TAKESKY
Notary Public, State of New York
No. 01TA5040564
Qualified in Nassau County
Commission Expires March 13, 20 19



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

Form with fields for Business Name (PalliaTech NY, LLC), Name (Samuel J Ferrara), Title (Member-PalliaTech NY, LLC), and questions regarding contact with medical marijuana and other businesses.

FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: 9. Fax:

10. Email:

11. Residence Address:

12. City: 13. State: 14. ZIP Code:

15. Formal Education Dates Attended Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include Hofstra University School of Law and Boston University.



Empty table row

Empty table row

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Includes rows for 'License to Practice Law - NY' and 'Law License - MA'.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including address, employment dates, supervisor details, and position responsibilities.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		Type of Business:
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
18. Offices Held or Ownership Interest in Other Businesses List any affiliations you have been associated with in the past 10 years. Affiliation, for the purpose of this section, includes serving as either a board member, officer, manager, owner, partner, principal stakeholder, director or member of the organization. Organizations outside of New York State must also be disclosed.		
Have you owned or operated a business or had any affiliations with the operations of a business in New York, in the USA, or in other countries? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
From: 11-13-12	Name and Address of Business:	
To: Present	PalliaTech NY, LLC 1111 Marcus Ave. , Ste. 107 Lake Success, NY 11042	
Business Type: Medical Marijuana	Office Held/Nature of Interest: Member of LLC	<input checked="" type="checkbox"/> open <input type="checkbox"/> closed <input type="checkbox"/> proposed
Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:		



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/29/2015
Notary Name: Lorraine Takesky Notary Registration Number: 01TA5040564
Notary (Notary Must Affix Stamp or Seal) Date: 5/29/15
LORRAINE TAKESKY
Notary Public, State of New York
No. 01TA5040564
Qualified in Nassau County
Commission Expires March 13, 20 19



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Ellen L. Flowers 3. Title: Member-PalliaTech NY, LLC
4. Briefly describe the role of this person or entity in the proposed registered organization:
[Redacted] Ellen L, Flowers will have a financial interest in the applicant, but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: [redacted]

10. Email: [redacted]

11. Residence Address [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Contains handwritten entries for Adelphi University and Hofstra Law School.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
Row 1: Attorney, 2517092, NYS Office of Court Administration, Feb. 3, 1993, May '16

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including Type of Business, Street Address, City/State/Zip, Starting/Ending Dates of Employment, Name of Supervisor, Position/Responsibilities, Reason For Departure, and 18. Offices Held or Ownership Interest in Other Businesses.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: 5/29/15

Notary Name: DEBRA L. FALSONE

Notary Registration Number: 01FA4603745

Notary (Notary Must Affix Stamp or Seal)

Date: 5/29/15

[Handwritten Signature: Debra L Falsone]
DEBRA L FALSONE
Notary Public, State of New York
No. 01FA4603745
Qualified in Nassau County
Commission Expires June 30, 2018



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Carol Formato 3. Title: Member-PalliaTech NY, LLC
4. Briefly describe the role of this person or entity in the proposed registered organization:
Carol Formato will have a financial interest in the applicant, but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come into contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: N/A

10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

15. Formal Education Dates Attended Degree

Institution Address From To Degree Received Date Received

[redacted]

Siena College 515 Loudon Road Loudonville, NY 12211 9/88 5/92 Bachelor of Arts 5/92

[redacted]

[redacted]

[redacted]

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.				
Type of Professional License	License Number	Institution Granting License (Mailing Address, Phone, Email)	Effective Date	Expiration Date
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.				
Name of Employer: N/A				
Type of Business:				
Street Address:				
City:		State:		Zip Code:
Starting Date of Employment:			Ending Date of Employment:	
Name of Supervisor for Reference:			Supervisor Phone Number:	
Position/Responsibilities:				
Reason For Departure:				
Name of Employer:				
Type of Business:				

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.

“FOIL Confidential – Trade Secrets (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		Type of Business:
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
18. Offices Held or Ownership Interest in Other Businesses List any affiliations you have been associated with in the past 10 years. Affiliation, for the purpose of this section, includes serving as either a board member, officer, manager, owner, partner, principal stakeholder, director or member of the organization. Organizations outside of New York State must also be disclosed.		
Have you owned or operated a business or had any affiliations with the operations of a business in New York, in the USA, or in other countries? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
From: 11-13-12	Name and Address of Business:	
To: Present	PalliaTech NY, LLC 1111 Marcus Ave. , Ste. 107 Lake Success, NY 11042	
Business Type: Medical Marijuana	Office Held/Nature of Interest: Member of LLC	<input checked="" type="checkbox"/> open <input type="checkbox"/> closed <input type="checkbox"/> proposed
Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:		

“FOIL Confidential – Trade Secrets (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields for From, To, Business Type, Office Held/Nature of Interest, and Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable. Includes checkboxes for open, closed, and proposed.

“FOIL Confidential – Trade Secrets (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

I will not have a role in the management or operation of the business

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: Carol Tomato Date: 5-28-15
Notary Name: Lorraine Takesky Notary Registration Number: 01TA5040564
Notary (Notary Must Affix Stamp or Seal) Date: 5-28-15
LORRAINE TAKESKY
Notary Public, State of New York
No. 01TA5040564
Qualified in Nassau County
Commission Expires March 13, 2019



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Mark Friedman 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
Yes No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?
Yes No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone:

9. Fax:

10. Email:

11. Residence Address:

12. City:

13. State:

14. ZIP Code:

15. Formal Education

Dates Attended

Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Row 1: University of Toledo, Toledo, Ohio, 9/1960, 6/1964, BBA, 6/1964.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Rows include series 7, 65, and 63 with handwritten license numbers and dates.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities.

"FOIL Confidential - Trade Secrets (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, 18. Offices Held or Ownership Interest in Other Businesses. Includes a question about business ownership with Yes/No checkboxes.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**
Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
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19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/27/2015

Notary Name: Danielle Miller Notary Registration Number: 01M16088663

Notary (Notary Must Affix Stamp or Seal) Date:

[Handwritten Signature]
DANIELLE MILLER
NOTARY PUBLIC-STATE OF NEW YORK
No. 01M16088663
Qualified in New York County
My Commission Expires March 10, 2019

5/27/2015



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization
2. Name: William Gould 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [Redacted] 9. Fax: [Redacted]
10. Email: [Redacted]
11. Residence Address: [Redacted]
12. City: [Redacted] 13. State: [Redacted] 14. ZIP Code: [Redacted]

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Row 1: CW Post Long Island University, 720 Northern Blvd Brookville NY 11548, 1971, 1975, B.A., 10/1975.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field contains checkboxes for 'open', 'closed', and 'proposed'.



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications
For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.
20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.
Signature: William Gould Date: 5/26/2015
Notary Name: Glorise Beasley Notary Registration Number: 01BE6125044
Notary (Notary Must Affix Stamp or Seal) Date: 5/26/2015
Glorise Beasley
GLORISE BEASLEY
Notary Public - State of New York
NO. 01BE6125044
Qualified in Bronx County
My Commission Expires 04/04/2017



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Kiril Gromov 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No
If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: [redacted]

10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Row 1: Moscow Power Engineering Univ, Moscow, Krasnokazarmennaya, 14, 1988, 1993, ingeneer, 1993.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1: Russian Broker dealer licence, Federal Securities Commission, 2001, unlimited.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor, and Position/Responsibilities.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with two identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field contains checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: May 28th 2015

Notary Name: Elena Augustine Vice Consul Notary Registration Number: [Blank]

Notary (Notary Must Affix Stamp or Seal) Date: 28 MAY 2015

Russian Federation United States of America
City of Moscow Commission Indefinite
Embassy of the United States of America
Consular Section [Handwritten Signature]



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: George Hanford 3. Title: VP - QA/QC
4. Briefly describe the role of this person or entity in the proposed registered organization:
Goerge Hanford is Vice President - Quality Control and Quality Assurance for PalliaTech NY, LLC, the Registered Organization applicant. He will report to the General Manager and will have line item oversight responsibilities for the quality control and quality assurance of the Registered Organization applicants medical marijuana brands. In his role he will have overall responsibility for measuring and assuring the consistency and quality of the medicinal marijuana products and for making sure that the medicinal marijuana products consistently meet brand compositions and patient expectations.
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[X] Yes [] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [X] Yes [] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: 9. Fax:

10. Email:

11. Residence Address:

12. City: 13. State: 14. ZIP Code:

15. Formal Education Dates Attended Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include American University and Syracuse University.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including address, employment dates, supervisor details, and position responsibilities.

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**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		Type of Business:
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
18. Offices Held or Ownership Interest in Other Businesses List any affiliations you have been associated with in the past 10 years. Affiliation, for the purpose of this section, includes serving as either a board member, officer, manager, owner, partner, principal stakeholder, director or member of the organization. Organizations outside of New York State must also be disclosed.		
Have you owned or operated a business or had any affiliations with the operations of a business in New York, in the USA, or in other countries? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
From: 2004	Name and Address of Business:	
To: Present	G.C. Hanford Mfg 304 Onieda St PO box 1017 Syracuse NY 13201	
Business Type: Pharmaceutical finisher	Office Held/Nature of Interest: stockholder and Board member, CEO	<input checked="" type="checkbox"/> open <input type="checkbox"/> closed <input type="checkbox"/> proposed
Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:		



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business registration details. Each section includes fields for 'From', 'To', 'Business Type', 'Name and Address of Business', 'Office Held/Nature of Interest', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable'. Radio buttons are provided for 'open', 'closed', and 'proposed' status.



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/28/15
Notary Name: Wendy L House Notary Registration Number: see below
Notary (Notary Must Affix Stamp or Seal) Date: 5/28/15
Wendy L. House
Notary Public, State of New York
Reg. No. 01HO6010717
Qualified in Cayuga County
Commission Expires 07/20/18



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: F. Clayton Hunt 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
Yes No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? Yes No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Contains two rows of data for Series 7 and Series 63 licenses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and a section for 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: J. C. Hunt Jr Date: 5.27.15

Notary Name: MARIA MEYER Notary Registration Number: 01ME6105194

Notary (Notary Must Affix Stamp or Seal) Date: 5-27-15

MARIA J. MEYER
Notary Public, State of New York
No. 01ME6105194
Qualified in Kings County
Commission Expires February 2, 2016



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Boris Alexis Jordan 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization: Redacted pursuant to N.Y. Public Officers Law, Art. 6
5. Will this person or entity come into contact with medical marijuana or medical marijuana products? [] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
8. Phone: 9. Fax:
10. Email:
11. Residence Address:
12. City: 13. State: 14. ZIP Code:
15. Formal Education
Institution Address Dates Attended Degree Received Date Received



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1 contains 'N/A'.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



**Department
of Health**

Medical Marijuana Program
Application for Registration as
a Registered Organization

Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**
Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, 18. Offices Held or Ownership Interest in Other Businesses. Includes checkboxes for Yes/No.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**
Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields for Name, Address and Phone Number of Licensing/Regulatory Agency, From, To, Business Type, Office Held/Nature of Interest, and checkboxes for open, closed, proposed.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications
For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.
N/A

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 3/15/15

Notary Name: [Handwritten Name] Notary Registration Number: 01FL6308385

Notary (Notary Must Affix Stamp or Seal) Date: May 15, 2015
JENNIFER FLORES
NOTARY PUBLIC-STATE OF NEW YORK
No. 01FL6308385
Qualified in Nassau County
My Commission Expires July 21, 2018



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Ivan Kaufman 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: 9. Fax:

10. Email:

11. Residence Address:

12. City: 13. State: 14. ZIP Code:

15. Formal Education Dates Attended Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include Boston University and Hofstra University.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Name of Employer:
Type of Business:

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and a section for 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.

From

To

Name & Address

Business Type

Office Held

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/28/15
Notary Name: SUSANNE SKREPEK Notary Registration Number: 01SK6052478
Notary (Notary Must Affix Stamp or Seal) Date: 5/28/15
SUSANNE SKREPEK
Notary Public, State of New York
No. 01SK6052478
Qualified in Suffolk County
Commission Expires Dec. 18, 2018
[Handwritten Signature]



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Sarah King 3. Title: Pharmacist
4. Briefly describe the role of this person or entity in the proposed registered organization:
Sarah King is a New York State licensed pharmacist who will be the pharmacist and manager of our Utica New York dispensary location if PalliaTech NY, LLC, the Registered Organization applicant, is awarded a RO license. In this role, she will report to the Vice President of Dispensary Operations and will be responsible for all aspects of the operations of the dispensary including, but not limited to, systems, patient verification, inventory control, personnel and the dispensing of medical marijuana products to New York state registered patients.
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[X] Yes [] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [X] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: [redacted]
10. Email: [redacted]
11. Residence Address: [redacted]
12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]
15. Formal Education
Institution Address Dates Attended Degree Received Date Received
Albany College of Pharmacy and Health Sciences 106 New Scotland Ave Albany NY 12208 2005 2011 Doctor of Pharmacy May 14th, 2011



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1: Pharmacy, 055774, NYS Office of the Professions, 7/26/11, 9/30/16.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, supervisor details, and a section titled '18. Offices Held or Ownership Interest in Other Businesses' with a 'Yes/No' checkbox.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: 5/29/15

Notary Name: Stacey L Kay

Notary Registration Number: 01KA6207422

Notary (Notary Must Affix Stamp or Seal) [Handwritten Signature]

Date: 5/29/15

STACEY L. KAY
Notary Public, State of New York
Residing in Schenectady County
My Commission Expires 6/15/2017
No. 01KA6207422



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Ellyn S. Kravitz 3. Title: Member-PalliaTech NY, LLC
4. Briefly describe the role of this person or entity in the proposed registered organization:
Ellyn S. Kravitz will have a financial interest in the applicant, but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: 9. Fax:

10. Email:

11. Residence Address:

12. City: 13. State: 14. ZIP Code:

15. Formal Education Dates Attended Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include University of Michigan, New England School of Law, and University of Miami School of Law.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1: Law, 2517803, New York State Office of Court Administration - Court of Appeals, March 1993.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including Type of Business, Street Address, City/State/Zip, Starting/Ending Dates of Employment, Name of Supervisor, Position/Responsibilities, Reason For Departure, and 18. Offices Held or Ownership Interest in Other Businesses.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field has checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/29/2015
Notary Name: [Handwritten Signature] Notary Registration Number: 01CL6133235
Notary (Notary Must Affix Stamp or Seal) Date: 5/29/2015
SARA M. CLARK
NOTARY PUBLIC-STATE OF NEW YORK
No. 01CL6133235
Qualified in New York County
My Commission Expires September 12, 2017



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Nancy Levitin 3. Title: Member-PalliaTech NY, LLC
4. Briefly describe the role of this person or entity in the proposed registered organization:
Nancy Levitin will have a financial interest in the applicant, but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone:

9. Fax:

10. Email:

11. Residence Address:

12. City:

13. State:

14. ZIP Code:

15. Formal Education

Dates Attended

Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Contains data for Tufts University and New York University School of Law.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1: Attorney, 2025716, New York University School of Law, 1986, N/A.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.

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**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		Type of Business:
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
18. Offices Held or Ownership Interest in Other Businesses List any affiliations you have been associated with in the past 10 years. Affiliation, for the purpose of this section, includes serving as either a board member, officer, manager, owner, partner, principal stakeholder, director or member of the organization. Organizations outside of New York State must also be disclosed.		
Have you owned or operated a business or had any affiliations with the operations of a business in New York, in the USA, or in other countries? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
From: 11-13-12	Name and Address of Business:	
To: Present	PalliaTech NY, LLC 1111 Marcus Ave. , Ste. 107 Lake Success, NY 11042	
Business Type: Medical Marijuana	Office Held/Nature of Interest: Member of LLC	<input checked="" type="checkbox"/> open <input type="checkbox"/> closed <input type="checkbox"/> proposed
Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:		

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for 'From', 'To', 'Business Type', 'Office Held/Nature of Interest', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable'. Includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: 5/29/15

Notary Name: Katie A. Barbieri

Notary Registration Number: 02BA6273789

Notary (Notary Must Affix Stamp or Seal)

Date: 5/29/15

[Handwritten Notary Signature]

KATIE A. BARBIERI
Notary Public, State of New York
No. 02BA6273789
Qualified in Nassau County
Commission Expires December 24, 2018



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Karen Liebers 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: [redacted]

10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

15. Formal Education Dates Attended Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include Temple University and Vassar College.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer.

FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities. Includes a section for 'Reason For Departure' and a section for '18. Offices Held or Ownership Interest in Other Businesses' with a checkbox for 'Yes' and 'No'.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business registration details. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: May 26, 2015

Notary Name: [Handwritten Signature]

Notary Registration Number:

Notary (Notary Must Affix Stamp or Seal)

Date: 5/26/15

EDDY SALCEDO
Notary Public, State Of New York
No. 02SA6040524
Qualified In Queens County
Commission Expires 04/24/2017

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Rachel Lyons 3. Title: Pharmacist
4. Briefly describe the role of this person or entity in the proposed registered organization:
Rachel Lyons is a New York State licensed pharmacist who will be the pharmacist and manager of our Newburgh New York dispensary location if PalliaTech NY, LLC, the Registered Organization applicant, is awarded a RO license. In this role, she will report to the Vice President of Dispensary Operations and will be responsible for all aspects of the operations of the dispensary including, but not limited to, systems, patient verification, inventory control, personnel and the dispensing of medical marijuana products to New York state registered patients.
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[checked] Yes [] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [checked] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone:

9. Fax:

10. Email:

11. Residence Address:

12. City:

13. State:

14. ZIP Code:

15. Formal Education

Dates Attended

Degree

Institution

Address

From

To

Degree Received

Date Received

Northeastern University

360 Huntington Avenue, Boston, MA 02115

9/2006

5/2012

Doctorate of Pharmacy

May 2012

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Contains two rows of pharmacist license data.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: From, To, Business Type, Name and Address of Business, Office Held/Nature of Interest, Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable. Includes checkboxes for open, closed, proposed.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 6/1/15
Notary Name: [Handwritten Signature] Notary Registration Number: 01B06276681
Notary (Notary Must Affix Stamp or Seal) Date: 6/1/15
YOUR JOSEPH BONHEUR
Notary Public, State of New York
No. 01B06276681
Qualified In Rockland County
Commission Expires Feb. 19, 2017



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Betsy Malik 3. Title: Member-PalliaTech NY, LLC
4. Briefly describe the role of this person or entity in the proposed registered organization:
Betsy Malik will have a financial interest in the applicant, but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: [redacted]

10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

Table with 6 columns: Institution, Address, Dates Attended (From, To), Degree Received, Date Received. Rows include Binghamton University and Hofstra University School of Law.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Contains two rows of license information for New York State Bar and New Jersey State Bar.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		Type of Business:
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
<p>18. Offices Held or Ownership Interest in Other Businesses List any affiliations you have been associated with in the past 10 years. Affiliation, for the purpose of this section, includes serving as either a board member, officer, manager, owner, partner, principal stakeholder, director or member of the organization. Organizations outside of New York State must also be disclosed.</p> <p>Have you owned or operated a business or had any affiliations with the operations of a business in New York, in the USA, or in other countries? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>		
From: 11-13-12	Name and Address of Business:	
To: Present	PalliaTech NY, LLC 1111 Marcus Ave. , Ste. 107 Lake Success, NY 11042	
Business Type: Medical Marijuana	Office Held/Nature of Interest: Member of LLC	<input checked="" type="checkbox"/> open <input type="checkbox"/> closed <input type="checkbox"/> proposed
Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:		

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/29/15
Notary Name: Suzanne M. Schwarz Notary Registration Number: 01SC6237657
Notary (Notary Must Affix Stamp or Seal) Date: 5/29/15
SUZANNE M. SCHWARZ
Notary Public, State of New York
No. 01SC6237657
Qualified in Nassau County
Commission Expires March 28, 2019



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization
2. Name: Robert Matthews 3. Title: [Redacted]
4. Briefly describe the role of this person or entity in the proposed registered organization:
[Redacted] but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: 9. Fax: 10. Email: 11. Residence Address: 12. City: 13. State: 14. ZIP Code: 15. Formal Education table with columns: Institution, Address, Dates Attended (From, To), Degree Received, Date Received. Rows include Iowa Wesleyan, CW Post College, and Brooklyn Law School.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1: CPA, 027808, NYS EDUCATION DEPT 89 WASHINGTON AVE ALBANY, NY 12234, 1971, 9/30/2017.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including address, employment dates, supervisor details, and position responsibilities.

"FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested"



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

“FOIL Confidential – Trade Secrets (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with two identical sections. Each section contains fields for 'From:', 'To:', 'Business Type:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

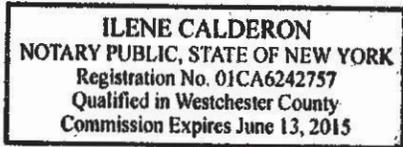
[Redacted] I AM NOT PART OF THE MANAGEMENT OF THIS BUSINESS.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: Robert Matthew Date: 5/26/2015

Notary Name: Ilene Calderon Notary Registration Number: 01 CA 6242757

Notary (Notary Must Affix Stamp or Seal) Date: 5/26/2015





Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

Form with 6 numbered sections: 1. Business Name: PalliaTech NY, LLC; 2. Name: Gretchen McCarthy; 3. Title: VP HR & Dispensary Ops; 4. Briefly describe the role of this person or entity in the proposed registered organization; 5. Will this person or entity come into contact with medical marijuana or medical marijuana products?; 6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [Redacted] 9. Fax:

10. Email: [Redacted]

11. Residence Address [Redacted]

12. City: [Redacted] 13. State: [Redacted] 14. ZIP Code: [Redacted]

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Row 1: Capella University, 225 South 6th Street Minneapolis, MN 55402, 1/2010, 12/2014, Bachelor of Science Specialization in Human Resource Management, 12/31/14.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**
Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with fields for From, To, Business Type, Name and Address of Business, Office Held/Nature of Interest, and Licensing/Regulatory Agency information. Includes checkboxes for open, closed, and proposed.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/20/15
Notary Name: Chelsea Jo Sullivan Notary Registration Number: 2430474
Notary (Notary Must Affix Stamp or Seal) Date: 5/20/2015
CHELSEY JO SULLIVAN
Notary Public
State of New Jersey
My Commission Expires Jul 19, 2018



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization
2. Name: Bernard Meldrum
3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
Yes No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?
Yes No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: [redacted]

10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

15. Formal Education Dates Attended Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include University of Dayton and Western Michigan University.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Rows include Series 7/66, Insurance (LA1041615), Insurance (2331529), and Insurance (8980191).

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Name of Employer:

Type of Business:



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including address, employment dates, supervisor details, and position responsibilities.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, Type of Business, and 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

I own a small amount of shares in the private company listed above and have no position other than as a share holder. I am a passive investor only, with no management responsibilities.

I believe in Medical Marijuana for the treatment of certain medical pain management. I support a number of the hospitals and care facilities such as Memorial Sloan Kettering, NYU Langone Medical Center Hospital, Karmanos Cancer Center among others.

I and believe careful administration of the Medical Marijuana Program will be helpful.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/27/2015

Notary Name: Danielle Miller Notary Registration Number: 01M16088663

Notary (Notary Must Affix Stamp or Seal) Date:

[Handwritten Signature]
DANIELLE MILLER
NOTARY PUBLIC-STATE OF NEW YORK
No. 01M16088663
Qualified in New York County
My Commission Expires March 10, 2019

5/27/2015



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Joseph Mishkin 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: 9. Fax: 10. Email: 11. Residence Address 12. City: 13. State: 14. ZIP Code: 15. Formal Education

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include Universidad Catolica Andres Bello and Instituto de Estudios Superiores de Administracion.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and Name of Employer.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. The table contains 5 empty rows.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities. Includes a section for Reason For Departure and a section for 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields for From, To, Business Type, Office Held/Nature of Interest, and Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable. Includes checkboxes for open, closed, and proposed.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

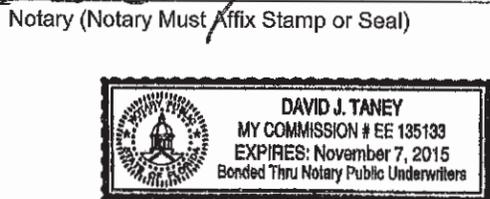
20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: MAY 27th, 2015

Notary Name: [Handwritten Signature] David Taney

Notary Registration Number: EE135133



Date: 5/31/15



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization
2. Name: Steven Mishkin 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: 9. Fax:

10. Email:

11. Residence Address:

12. City: 13. State: 14. ZIP Code:

15. Formal Education Dates Attended Degree

Institution Address From To Degree Received Date Received

[Redacted Education Record]

Farleigh Dickinson University Teaneck, New Jersey 1980 1984 Business Degree June 1984

[Empty Education Record Row]

[Empty Education Record Row]

[Empty Education Record Row]

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1: 16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and Name of Employer.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields for From, To, Business Type, Office Held/Nature of Interest, and Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable. Includes checkboxes for open, closed, and proposed.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: Date:
Notary Name: Notary Registration Number:
Notary (Notary Must Affix Stamp or Seal) Date:



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 26 of May 2015
Notary Name: David Taney Notary Registration Number: EE135133
Notary (Notary Must Affix Stamp or Seal) Date: 5/31/15
[Notary Seal: DAVID J. TANEY, MY COMMISSION # EE 135133, EXPIRES: November 7, 2015, Bonded Thru Notary Public Underwriters]



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Timur Nasardinov 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: 9. Fax:
10. Email:
11. Residence Address:
12. City: 13. State: 14. ZIP Code:
15. Formal Education
Institution Address Dates Attended Degree Received Date Received
Moscow Institute of Physics and Technology Russia, Dolgoprudny, Institutsky pereulok, 9 1990 1997 Master of science in applied mathematics, financ 1997



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Contains two rows of license information: Russian broker/dealer licence from Central Bank of Russia (1995, unlimited) and Moscow Exchange certificate from MOEX (1996, unlimited).

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and a section for other businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with two identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications
For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.
20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.
Signature: [Handwritten Signature] Date: 28 May 2015
Notary Name: Elena Augustine Vice Consul United States of America Commission Indefinite
Notary (Notary Must Affix Stamp or Seal) Russian Federation City of Moscow Embassy of the United States of America Consular Section Date: 28 MAY 2015



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Michael Nelson 3. Title: General Manager
4. Briefly describe the role of this person or entity in the proposed registered organization:
The General Manager of PalliaTech NY, LLC will be responsible for managing the overall operations of the RO applicant. All department heads will report to the general manager and all cultivation, extraction and manufacturing processes will be the ultimate responsibility of the General Manager.
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[X] Yes [] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [X] Yes [] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone [redacted] 9. Fax: NA

10. Email [redacted]

11. Residence Address [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include Montana State University, University of Colorado, and Bellevue Community College.



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

Type of Professional License	License Number	Institution Granting License (Mailing Address, Phone, Email)	Effective Date	Expiration Date
Medical Marijuana Caregiver License	1276	Montana Department of Health	3/2009	1/2015
Series 7 License - General Securities Representative	NA	Financial Industry Regulatory Authority	11/87 ?	NA

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members Redacted pursuant to N.Y. Public Officers Law, Art. 6

Name of Employer:		
Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		

"FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested"



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and a section for other businesses with a Yes/No question.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**
Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

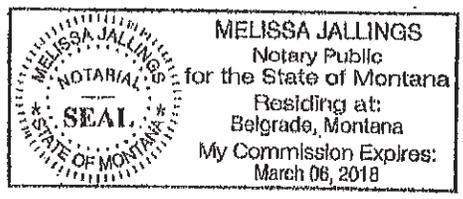
For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/15/15

Notary Name: Melissa Jallings Notary Registration Number:

Notary (Notary Must Affix Stamp or Seal) [Handwritten Signature] Date: 5.15.15



Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Michael Nimaroff 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: 9. Fax: 10. Email: 11. Residence Address: 12. City: 13. State: 14. ZIP Code: 15. Formal Education table with columns: Institution, Address, Dates Attended (From, To), Degree Received, Date Received. Includes entries for Johns Hopkins University and New Jersey Med School.



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Contains handwritten entries for Medical and DEA licenses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, and Reason For Departure.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities. Includes a section for Reason For Departure and a section for 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

[Redacted]
and will not be involved with the
"day to day" operations.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/27/15
Notary Name: Dianne Huang Notary Registration Number: 01HU6211347
Notary (Notary Must Affix Stamp or Seal) Date: 5/27/15
DIANNE HUANG
Notary Public - State of New York
No. 01HU6211347
Qualified in Nassau County
My Commission Expires September 14, 2017

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Scott Nussbaum 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [Redacted] 9. Fax: N/A

10. Email: [Redacted]

11. Residence Address [Redacted]

12. City: [Redacted] 13. State: [Redacted] 14. ZIP Code: [Redacted]

15. Formal Education

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Row 1: Tufts University, Tufts University Medford, MA 02155, 1995, 1999, Bachelor of Arts, May 1999.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1 contains 'N/A'.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3 if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities. Includes a section for Reason For Departure and a section for 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. Checkboxes for 'open', 'closed', and 'proposed' are provided for the Office Held/Nature of Interest field.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: 5/26/15

Notary Name: MARIA PAZ ARAFILES

Notary Registration Number:

Notary (Notary Must Affix Stamp or Seal)
MARIA PAZ ARAFILES
Notary Public, State of New York
No. 01AR6195949
Qualified in Queens County
Commission Expires Nov. 03, 2016

Date: 5/26/15

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: John Higgins O'Brien Jr. 3. Title: Chief Compliance Officer
4. Briefly describe the role of this person or entity in the proposed registered organization:
The Chief Compliance Officer (CCO) is responsible for assuring full regulatory compliance of all PalliaTech NY, LLC facilities, systems and personnel with applicable New York law, regulation and procedure related to the Medical Use of Marijuana.
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[checked] Yes [] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee.
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [checked] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
 Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [REDACTED] 9. Fax N/A

10. Email: [REDACTED]

11. Residence Address: [REDACTED]

12. City: [REDACTED] 13. State: [REDACTED] 14. ZIP Code: [REDACTED]

15. Formal Education		Dates Attended		Degree	
Institution	Address	From	To	Degree Received	Date Received
College of New Jersey (Formerly Trenton State Collge)	2000 Pennington Rd, Ewing Township, NJ 08618 (609) 771-2131	9/1978	5/1979	None	N/A
Mercer County Community College	1200 Old Trenton Rd, West Windsor Township, NJ 08550 (609) 586-4800	9/1980	5/1981	None	N/A
New Jersey State Police Academy (Accredited through Seton Hall University)	Governors Dr Sea Girt NJ 08750 (732) 449-5200	1/1985	6/1985	None	N/A

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity. Table with columns: Type of Professional License, License Number, Institution Granting License, Effective Date, Expiration Date. Includes entries for 'Permit to Carry a Handgun' and 'Security Officer License'.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and Name of Employer.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		Type of Business:
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
18. Offices Held or Ownership Interest in Other Businesses List any affiliations you have been associated with in the past 10 years. Affiliation, for the purpose of this section, includes serving as either a board member, officer, manager, owner, partner, principal stakeholder, director or member of the organization. Organizations outside of New York State must also be disclosed.		
Have you owned or operated a business or had any affiliations with the operations of a business in New York, in the USA, or in other countries? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
From: N/A	Name and Address of Business: N/A	
To: N/A		
Business Type: N/A	Office Held/Nature of Interest: N/A	<input type="checkbox"/> open <input type="checkbox"/> closed <input type="checkbox"/> proposed
Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable: N/A		



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field contains checkboxes for 'open', 'closed', and 'proposed'.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

I am an experience profession in the areas of regulatory compliance, program development and law enforcement. Prior to joining the PalliaTech New York team, I was the first Executive Director of the New Jersey Medicinal Marijuana Program (NJMMP). I successfully developed and implemented a medically based program focusing on safe patient access and regulatory compliance of the states registered organizations. This program is viewed as the benchmark for state medical cannabis programs desiring integrity and accountability.

Prior to my work with the New Jersey Department of Health, I served for 26 years as an enlisted member of the New Jersey State Police where I retired at the rank of Lieutenant / Assistant Bureau Chief. I was responsible to the Bureau Chief for the overall command of nine units, ten enlisted and 110 civilian personnel that comprise the State Bureau of Identification. I utilized my regulatory and compliance skills in the development of various programs brought about by state and federal law and regulation. Most notably I developed and managed the New Jersey National Instant Criminal Background Check System, a federally mandated instant suitability check of a prospective firearms purchaser conducted at the point of sale. I also implemented and managed the Applicant Live Scan Program, a first in the nation, vendor driven, electronic capture, transmission and delivery of fingerprint based criminal history record information for state regulatory agencies.

I served as the state representative and an elected member of the National Crime Prevention and Privacy Compact Council, a national steering and policy committee providing guidance on the use of state and federal criminal history records. I also served as the New Jersey representative to the National Instant Criminal Background Check System. I have provided testimony before committees of the New Jersey Legislature as an expert on criminal history use and regulatory compliance.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

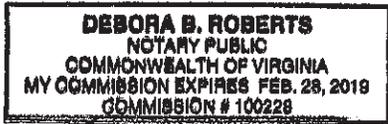
Date: 5/18/15

Notary Name: Debora B. Roberts

Notary Registration Number: 100228

Notary (Notary Must Affix Stamp or Seal)

Date: 5/18/2015



“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Steven R. Patierno, PhD 3. Title: Director and Chair SAB
4. Briefly describe the role of this person or entity in the proposed registered organization:
Dr. Patierno is a member of the board of directors of PalliaTech, Inc., the Sole Managing Member of the Registered Organization applicant. He also serves as the chairman of the Company's Scientific Advisory Board (SAB).
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: 9. Fax:

10. Email:

11. Residence Address:

12. City 13. State 14. ZIP Code:

15. Formal Education Dates Attended Degree

Institution Address From To Degree Received Date Received

[Redacted Education Table]

University of Connecticut Storrs, Connecticut 1976 1981 BS Pharmacy 1981

University of Texas Health Science Center Houston TX 1981 1985 PhD Pharmacology 1985

University of Southern California Los Angeles, CA 1985 1988 Postdoctoral Fellowship 1988

[Empty Education Table Row]



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1: Pharmacist (never practiced), 26276, Board of Pharmacy State of Texas, 1982, 1990.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, and Reason For Departure.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and a section for other businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications
For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.
I will not be involved in direct operations of the proposed facility. I serve only in the capacity as Chair of the Scientific Advisory Board of the Company.
I have extensive scientific and managerial experience, having served as [redacted] with direct involvement in cancer patient care and cancer research. I have been a professor of pharmacology since 1988 with longstanding interests in cancer drug development and palliative care. I have been independently funded by the U.S. National Institutes of Health for more than 20 years to conduct cancer research. I have published more than 120 original scientific research papers in peer reviewed scientific journals.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/22/15

Notary Name: Vanessa V Sellars Notary Registration Number:

Notary (Notary Must Affix Stamp or Seal) Date: 5/22/15
expired 11/4/15
[Notary Seal: VANESSA V. SELLARS, NOTARY PUBLIC, STATE OF NEW YORK]

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: John Prufeta 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: 9. Fax: 10. Email: 11. Residence Address: 12. City: 13. State: 14. ZIP Code: 15. Formal Education table with columns: Institution, Address, Dates Attended (From, To), Degree Received, Date Received. Includes handwritten entries for Harvard Business School and St. John's.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 16: Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor, and Position/Responsibilities.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with handwritten entries: From: July 2011, To: Present, Business Type: CHARITY 501(C)3, Office Held/Nature of Interest: Board Member, Name and Address of Business: VETERANS MOVING FORWARD. Includes checkboxes for open, closed, and proposed.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.



of HEALTH CARE EXPERIENCE

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 29 May 2015
Notary Name: [Handwritten Signature] Notary Registration Number:
Notary (Notary Must Affix Stamp or Seal) Date: 5/29/15
THOMAS LOOKSTEIN
Notary Public, State of New York
No. 02LO6069868
Qualified in Kings County
Commission Expires August 15, 2018

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization
2. Name: Thomas L. Pulling 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [Redacted] 9. Fax: [Redacted]

10. Email: [Redacted]

11. Residence Address: [Redacted]

12. City: [Redacted] 13. State: [Redacted] 14. ZIP Code: [Redacted]

15. Formal Education Dates Attended Degree

Institution Address From To Degree Received Date Received

[Redacted Education Table]

Princeton Univ. Princeton, N.J. 1957 1961 B.A. Cum Laude June '61

[Empty Education Table Row]

[Empty Education Table Row]

[Empty Education Table Row]

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. The table contains 6 empty rows for data entry.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor, and Position/Responsibilities.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**
Redacted pursuant to N.Y. Public Officers Law, Art. 6

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: Thomas L Pulling, Date: 27 July 2015, Notary Name: THOMAS J SCHILLING, Notary Registration Number: 01SC6308620, Notary (Notary Must Affix Stamp or Seal) THOMAS J. SCHILLING No. 01SC6308620 Notary Public, State of New York Qualified in Nassau County My Commission Expires 07/28/2018, Date: 5/27/2015



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: CAROLYN REINACH WOLF 3. Title: Member-PalliaTech NY, LLC
4. Briefly describe the role of this person or entity in the proposed registered organization:
[Redacted] Carolyn Reinach Wolf will have a financial interest in the applicant, but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: [redacted]

10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

15. Formal Education Dates From To Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include: Univ. of Maryland (College Park, Md., 9/1971-12/1974, B.A., 12/1974), Hofstra University School of Business (Hempstead, NY, 9/1975-6/1979, MBA, 6/1979), Harvard School of Public Health (Boston, Ma., 9/1979-6/1980, MS, 6/1980), Hofstra Univ. School of Law (Hempstead, N.Y., 9/1984-8/1986, J.D., 8/1986)

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

Type of Professional License	License Number	Institution Granting License (Mailing Address, Phone, Email)	Effective Date	Expiration Date
J.D.	2196202	Office of Court Administration P.O. Box 3171, Church St.	1988	none
		N.Y., N.Y. Station (212) 428-2818		
		attreg@courts.state.ny.us		

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and Name of Employer.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		Type of Business:
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
18. Offices Held or Ownership Interest in Other Businesses List any affiliations you have been associated with in the past 10 years. Affiliation, for the purpose of this section, includes serving as either a board member, officer, manager, owner, partner, principal stakeholder, director or member of the organization. Organizations outside of New York State must also be disclosed.		
Have you owned or operated a business or had any affiliations with the operations of a business in New York, in the USA, or in other countries? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
From: 11-13-12	Name and Address of Business:	
To: Present	PalliaTech NY, LLC 1111 Marcus Ave. , Ste. 107 Lake Success, NY 11042	
Business Type: Medical Marijuana	Office Held/Nature of Interest: Member of LLC	<input checked="" type="checkbox"/> open <input type="checkbox"/> closed <input type="checkbox"/> proposed
Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:		

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: Carolyn Reinach Wolf

Date: 5/29/15

Notary Name: Lorraine Takesky

Notary Registration Number: 01TA5040564

Notary (Notary Must Affix Stamp or Seal)
LORRAINE TAKESKY
Notary Public, State of New York
No. 01TA5040564
Qualified in Nassau County
Commission Expires March 13, 20 19

Date: 5-29-15



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: Carolyn Reinach Wolff

Date: 5/29/15

Notary Name: Lorraine Takesky

Notary Registration Number: 01TA5040564

Notary (Notary Must Affix Stamp or Seal)
LORRAINE TAKESKY
Notary Public, State of New York
No. 01TA5040564
Qualified in Nassau County
Commission Expires March 13, 20 19

Date: 5-29-15



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Paula Rimer 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
[Redacted] but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [X] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [X] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [Redacted] 9. Fax: [Redacted]

10. Email: [Redacted]

11. Residence Address: [Redacted]

12. City: [Redacted] 13. State: FL 14. ZIP Code: [Redacted]

15. Formal Education

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Row 1: University of Southern Connecticut, 501 Crescent St New Haven, CT 06515, 1970, 1974, B.S. Education, May 1974.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities. Includes a section for Reason For Departure and a section for 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications
For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/28/15
Notary Name: Notary Registration Number:
Notary (Notary Must Affix Stamp or Seal) Date: MAY 28, 2015
my commission expires 9-2-16
Paul P. Hemen



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization
2. Name: Anthony Savino 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone 9. Fax: N/A

10. Email

11. Residence Address:

12. City: 13. State: 14. ZIP Code:

15. Formal Education Dates Attended Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Contains two rows of education data: NYU-Schack Institute of R.E. (2008-2011, Masters - Real Estate) and NYU - Stern School of Business (1993-1997, BS - Finance & marketing).



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Contains two rows of license data and a section for employment history.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and a section for other businesses (18. Offices Held or Ownership Interest in Other Businesses).

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: From, To, Business Type, Name and Address of Business, Office Held/Nature of Interest, Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable. Includes checkboxes for open, closed, proposed.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

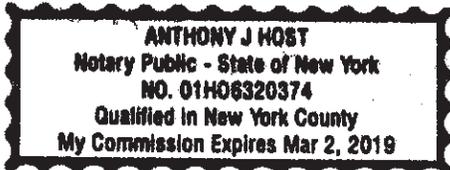
Date: 5/27/15

Notary Name: Anthony Host

Notary Registration Number: 01406320374

Notary (Notary Must Affix Stamp or Seal)

Date: 05/27/15





Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Forrest Sawlaw 3. Title: VP Horticultural Operations
4. Briefly describe the role of this person or entity in the proposed registered organization:
The VP of Horticultural Operations (VP-HO) is responsible for all aspects of the cultivation, harvesting and curing of the Cannabis plant raw material that will be used in the extraction, purification, formulation and manufacturing process by the RO Applicant. The VP-HO has extensive experience in, and will insure strict compliance with, good agricultural practice (GAP) in all facets of the cultivation process and will manage the cultivation team personnel. The VP-HO will work closely with the Quality Control manager and Chief Compliance Officer to insure strict regulatory compliance and the sustainable growing of high quality plant material.
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[Checked] Yes [] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [Checked] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: 9. Fax:

10. Email:

11. Residence Address:

12. City 13. State: 14. ZIP Code:

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Row 1: University of Illinois, Urbana, IL, 9/82, 5/84, Bachelor of Science, May 1984.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**
Redacted pursuant to N.Y. Public Officers Law, Art. 6

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**
Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. Radio buttons are provided for 'open', 'closed', and 'proposed' status.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: 5-16-15

Notary Name: Heather Lawhead

Notary Registration Number: exp. 10/03/16

Notary (Notary Must Affix Stamp or Seal)

Date: 5-16-15



[Handwritten Signature: Heather Lawhead]



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization
2. Name: Richard Scanlon as the Sole Member of Startup I LLC 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: [redacted]

10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

15. Formal Education Dates Attended Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Row 1: Middlebury College, 14 Old Chapel Road Middlebury, VT 05753, 1987, 1993, B.A., June 1993.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1: 16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and Name of Employer.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities. Includes a section for 'Reason For Departure' and '18. Offices Held or Ownership Interest in Other Businesses'.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**
Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with two entries. Entry 1: From: 11/2012, To: Present, Business Type: Extended Automobile Warranty, Office Held/Nature of Interest: Board Member, Status: open. Entry 2: From: 6/2012, To: Present, Business Type: Clothing Manufacture, Office Held/Nature of Interest: Board Member, Status: open.

Mr. Scanlon is also a Board Member of Various Fund Portfolio Companies which changes from time to time as investments are made and mature, including: Beamr Imaging Ltd., Dynamic Yield Inc., Entangled Media Corp., Eyeview, Inc., Screenz Cross Media Ltd., Vadio, Inc., Vertical Knowledge L.L.C., and Violet Grey, Inc.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: MAY 27, 2015

Notary Name: MARGARET FLOYD JONES

Notary Registration Number: 01FL6302081

Notary (Notary Must Affix Stamp or Seal)
Margaret Floyd Jones
Notary Public, State of New York
Registration No. 01FL6302081
Qualified in Nassau County
My Commission Expires April 28, 2018

Date: MAY 27, 2015



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Dimitry Schidlovsky 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone:

9. Fax:

10. Email:

11. Residence Address:

12. City:

13. State:

14. ZIP Code:

15. Formal Education

Dates Attended

Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Contains 5 empty rows for data entry.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including address, employment dates, supervisor details, and position responsibilities. Includes redacted areas.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including Type of Business, Street Address, City/State/Zip, Starting/Ending Dates of Employment, Name of Supervisor, Position/Responsibilities, Reason For Departure, and 18. Offices Held or Ownership Interest in Other Businesses.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications
For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.
Dimitry Schidlovsky Illustration services PalliaTech, Inc. in the capacity of Graphic Design, Branding and Corporate communications.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5.26.2015

Notary Name: Jennifer Flores Notary Registration Number: 01FL6308385

Notary (Notary Must Affix Stamp or Seal) Date: 5/26/2015
JENNIFER FLORES
NOTARY PUBLIC-STATE OF NEW YORK
No. 01FL6308385
Qualified in Nassau County
My Commission Expires July 21, 2018



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: George Schidlovsky
3. Title: [Redacted]
4. Briefly describe the role of this person or entity in the proposed registered organization: [Redacted]
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [Redacted] 9. Fax: NA

10. Email: [Redacted]

11. Residence Address: [Redacted]

12. City: [Redacted] 13. State: [Redacted] 14. ZIP Code: [Redacted]

15. Formal Education
Institution Address Dates Attended Degree
From To Degree Received Date Received

[Redacted Education Record]

Hofstra University Union Turnpike Hempstead NY 11549-1000 1983 1987 BBA, International Business 5/1987

[Redacted Education Record]

[Redacted Education Record]

[Redacted Education Record]



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1: 16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**
Redacted pursuant to N.Y. Public Officers Law, Art. 6

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, 18. Offices Held or Ownership Interest in Other Businesses. Includes checkboxes for Yes/No.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields for From, To, Business Type, Office Held/Nature of Interest, and Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable. Includes checkboxes for open, closed, and proposed.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications
For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.
20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.
Signature: [Handwritten Signature] Date: 5/29/15
Notary Name: Patricia Guy Notary Registration Number:
Notary (Notary Must Affix Stamp or Seal) Date: 5/29/15
PATRICIA GUY
Notary Public, State of New York
No. 01GU5029016
Qualified in Nassau County
Commission Expires June 13, 2018



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization
2. Name: Michael Schidlovsky 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

Form with fields for 8. Phone, 9. Fax, 10. Email, 11. Residence Address, 12. City, 13. State, 14. ZIP Code, and 15. Formal Education table.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and a section for other businesses with checkboxes for Yes/No.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with two identical sections. Each section contains fields for 'From:', 'To:', 'Business Type:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, If applicable:'. Includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

N/A

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: May 29, 2015

Notary Name: Sheri Riffle

Notary Registration Number:

Notary (Notary Must Affix Stamp or Seal)
[Handwritten Signature]

Date: May 29, 2015





Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Christopher M. Scott 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
Yes No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? Yes No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone:

9. Fax:

10. Email:

11. Residence Address:

12. City:

13. State:

14. ZIP Code:

15. Formal Education

Dates Attended

Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Contains 5 empty rows for data entry.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and a section for other businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: 5/28/15

Notary Name:

Notary Registration Number:

Notary (Notary Must Affix Stamp or Seal)

Date:

LILLIAN SCOTT
NOTARY PUBLIC, State of New York
No. 01SC5062683
Qualified in Nassau County
Commission Expires July 1, 2018

[Handwritten Signature]

Appendix A - Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

<u>Name</u>	<u>Affiliation</u>
Abrams, Robert	Member, PalliaTech NY, LLC
Alfano, Thomas W.	Member, PalliaTech NY, LLC
Asche, E. Craig	[REDACTED]
Askowitz, Reuban	[REDACTED]
Beaver, Jeffrey	[REDACTED]
Belesi, John	Member, PalliaTech NY, LLC
Blair, Michele	[REDACTED]
Blakeman, Bruce	Member, PalliaTech NY, LLC
Bloom, Jon	[REDACTED]
Bloom, Peter	[REDACTED]
Bogolubov, Andrei	[REDACTED]
Bronheim, Gary	[REDACTED]
Burkholder, Jr., John	[REDACTED]
Carone, Frank	Lawyer - Government Relations
Caruso, Jr., Arthur	[REDACTED]
Denmark, Christopher	[REDACTED]
Denmark, Susan	[REDACTED]
Denner Horowitz, Sharon	[REDACTED]
Didora, Matthew	Member, PalliaTech NY, LLC
Eiseman, Steven	Member, PalliaTech NY, LLC
Fensterman, Howard	Member, PalliaTech NY, LLC
Ferrara, Samuel J.	Member, PalliaTech NY, LLC
Flowers, Ellen L.	Member, PalliaTech NY, LLC
Formato, Carol	Member, PalliaTech NY, LLC
Friedman, Mark	[REDACTED]
Gould, William	[REDACTED]
Gromov, Kiril	[REDACTED]
Hanford, George	VP - Quality Control & Quality Assurance
Hunt, F. Clayton	[REDACTED]
Jordan, Boris Alexis	[REDACTED]
Kaufman, Ivan	[REDACTED]
King, Sarah	Pharmacist - Utica
Kravitz, Ellyn S.	Member, PalliaTech NY, LLC
Liebers, Karen	[REDACTED]
Levitin, Nancy	Member, PalliaTech NY, LLC
Lyons, Rachel	Pharmacist - Newburgh
Malik, Betsy	Member, PalliaTech NY, LLC
Matthews, Robert	[REDACTED]
McCarthy, Gretchen	VP HR & Dispensary Ops
Meldrum, Bernard	[REDACTED]
Mishkin, Joseph	[REDACTED]

Name

Affiliation

Mishkin, Steven
Nasardinov, Timur
Nelson, Michael
Nimaroff, Michael
Nussbaum, Scott
O'Brien, Jr., John
Patierno, Steven
Prufeta, John
Pulling, Thomas
Reinach Wolf, Carolyn
Rimer, Paula
Savino, Anthony
Sawlaw, Forrest
Scanlon, Richard
Sheldon, Scott
Schidlovsky, Dimitry
Schidlovsky, George
Schidlovsky, Michael
Scott, Christopher
Scott, Sheldon
Shuhda, John
Singer, Keith J.
Soliman, Ayman
Stern, Douglas K.
Stiller, Sharon
Stoller, Greg
Takesky, Lorraine
Taney, Amy
Taney, Juliana
Taney, Marisa
Taney, Richard
Thomas, Taylor
Tierney, Daniel
Todd, Christopher
Todd, Sheila
Todd, Webster B.
Todd, William
Traphagen, Judson
Winnicki, Robert

[Redacted]

General Manager

[Redacted]

Chief Compliance Officer

Director & Chair, Scientific Advisory Board

[Redacted]

Member, PalliaTech NY, LLC

[Redacted]

VP of Horticultural Operations

Redacted pursuant to N.Y. Public
Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization
2. Name: Scott Sheldon 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone:

9. Fax:

10. Email:

11. Residence Address:

12. City:

13. State:

14. ZIP Code:

15. Formal Education

Dates Attended

Degree

Institution

Address

From

To

Degree Received

Date Received



**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.				
Type of Professional License	License Number	Institution Granting License (Mailing Address, Phone, Email)	Effective Date	Expiration Date
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.				
Name of Employer:				
Type of Business:				
Street Address:				
City:		State:		Zip Code:
Starting Date of Employment:			Ending Date of Employment:	
Name of Supervisor for Reference:			Supervisor Phone Number:	
Position/Responsibilities:				
Reason For Departure:				
Name of Employer:				
Type of Business:				

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and a section for 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business registration details. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 6-1-2015
Notary Name: [Handwritten Name] Notary Registration Number:
Notary (Notary Must Affix Stamp or Seal) Date: 06/01/2015
[Notary Seal: AMBER N. TATRO, Notary Public, Massachusetts, Commission Expires Mar 2, 2018]



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: John Shuhda 3. Title: [Redacted]
4. Briefly describe the role of this person or entity in the proposed registered organization: [Redacted] but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products? [X] Yes [] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [X] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		Type of Business:
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
18. Offices Held or Ownership Interest in Other Businesses List any affiliations you have been associated with in the past 10 years. Affiliation, for the purpose of this section, includes serving as either a board member, officer, manager, owner, partner, principal stakeholder, director or member of the organization. Organizations outside of New York State must also be disclosed.		
Have you owned or operated a business or had any affiliations with the operations of a business in New York, in the USA, or in other countries? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
From: 2012	Name and Address of Business:	
To: Present	PalliaTech, Inc. 252 Sea Cliff Avenue Sea Cliff, NY 11579	
Business Type: Medical Marijuana/Devices	Office Held/Nature of Interest: Shareholder	<input checked="" type="checkbox"/> open <input type="checkbox"/> closed <input type="checkbox"/> proposed
Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:		

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

I am solely an investor in Palliatech, and am not involved in the management of the company.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/27/15
Notary Name: Tiffany M. Simi Notary Registration Number: 2030419
Notary (Notary Must Affix Stamp or Seal) Date: 5/27/15
TIFFANY M. SIMI COMM. # 2030419 NOTARY PUBLIC - CALIFORNIA SAN FRANCISCO COUNTY My Commission Expires June 22, 2017
Tiffany M. Simi

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California All-Purpose Certificate of Acknowledgment

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California }
 County of SAN FRANCISCO } s.s.

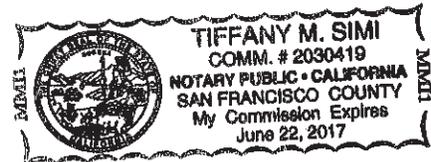
On May 27, 2015 before me, Tiffany M. Simi, Notary Public
Name of Notary Public, Title

personally appeared John Shuhda
Name of Signer (1)

n/a
Name of Signer (2)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that ~~he/she/they~~ executed the same in ~~his/her/their~~ authorized capacity(ies), and that by ~~his/her/their~~ signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.



WITNESS my hand and official seal.

Tiffany M. Simi
Signature of Notary Public

Seal

OPTIONAL INFORMATION

Although the information in this section is not required by law, it could prevent fraudulent removal and reattachment of this acknowledgment to an unauthorized document and may prove useful to persons relying on the attached document.

Description of Attached Document

The preceding Certificate of Acknowledgment is attached to a document titled/for the purpose of _____

containing _____ pages, and dated _____.

The signer(s) capacity or authority is/are as:

- Individual(s)
- Attorney-in-fact
- Corporate Officer(s) _____
Title(s)

- Guardian/Conservator
- Partner - Limited/General
- Trustee(s)
- Other: _____

representing: _____
Name(s) of Person(s) Entity(ies) Signer is Representing

Additional Information	
Method of Signer Identification	
Proved to me on the basis of satisfactory evidence:	
<input type="checkbox"/> form(s) of identification	<input type="checkbox"/> credible witness(es)
Notarial event is detailed in notary journal on:	
Page # _____	Entry # _____
Notary contact: _____	
Other	
<input type="checkbox"/> Additional Signer	<input type="checkbox"/> Signer(s) Thumbprints(s)
<input type="checkbox"/> _____	



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Keith J. Singer
3. Title: Member-PalliaTech NY, LLC
4. Briefly describe the role of this person or entity in the proposed registered organization:
Keith J. Singer will have a financial interest in the applicant, but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [Redacted] 9. Fax: [Redacted]

10. Email: [Redacted]

11. Residence Address: [Redacted]

12. City: [Redacted] 13. State: [Redacted] 14. ZIP Code: [Redacted]

15. Formal Education Dates Attended Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include SUNY Oswego and Hofstra Univ. School of Law.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1 contains handwritten entry: Law license, Atty Reg # 2316537, State of New York Appellate Division - 2nd Dept., 12/89, -

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.

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**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		Type of Business:
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
18. Offices Held or Ownership Interest in Other Businesses List any affiliations you have been associated with in the past 10 years. Affiliation, for the purpose of this section, includes serving as either a board member, officer, manager, owner, partner, principal stakeholder, director or member of the organization. Organizations outside of New York State must also be disclosed.		
Have you owned or operated a business or had any affiliations with the operations of a business in New York, in the USA, or in other countries? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
From: 11-13-12	Name and Address of Business:	
To: Present	PalliaTech NY, LLC 1111 Marcus Ave. , Ste. 107 Lake Success, NY 11042	
Business Type: Medical Marijuana	Office Held/Nature of Interest: Member of LLC	<input checked="" type="checkbox"/> open <input type="checkbox"/> closed <input type="checkbox"/> proposed
Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:		

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business registration details. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: 5/28/15

Notary Name: Lorraine Takesky

Notary Registration Number: 01TA5040564

Notary (Notary Must Affix Stamp or Seal)
LORRAINE TAKESKY
Notary Public, State of New York
No. 01TA5040564
Qualified in Nassau County
Commission Expires March 13, 2019

Date: 5-28-15



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

Form with 6 numbered sections: 1. Business Name: PalliaTech NY, LLC; 2. Name: Ayman Soliman; 3. Title: Member-PalliaTech NY, LLC; 4. Briefly describe the role...; 5. Will this person or entity come into contact with medical marijuana...; 6. Has this person or entity held any position of management or ownership during the preceding ten years...

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone [redacted] 9. Fax [redacted]

10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include New York Law School and SUNY at Stony Brook.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, and Reason For Departure.

"FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested"



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor, and Position/Responsibilities. Includes a section for '18. Offices Held or Ownership Interest in Other Businesses' with a 'Yes/No' checkbox.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: Hyman Soliman

Date: 5/29/2015

Notary Name: Joetta Kloepping

Notary Registration Number:

Notary (Notary Must Affix Stamp or Seal)

Date:

JOETTA KLOEPPING
Notary Public, State of New York
No. 30-4764188
Qualified in Nassau County
Commission Expires March 30, 2016

5/29/2015



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: DOUGLAS K. STERN 3. Title: Member-PalliaTech NY, LLC
4. Briefly describe the role of this person or entity in the proposed registered organization:
[Redacted] will have a financial interest in the applicant, but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: [redacted]

10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

15. Formal Education Dates Attended Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Contains handwritten entries for Hofstra Univ and New York Law School.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities. The form is repeated for multiple entries.

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**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		Type of Business:
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
18. Offices Held or Ownership Interest in Other Businesses List any affiliations you have been associated with in the past 10 years. Affiliation, for the purpose of this section, includes serving as either a board member, officer, manager, owner, partner, principal stakeholder, director or member of the organization. Organizations outside of New York State must also be disclosed.		
Have you owned or operated a business or had any affiliations with the operations of a business in New York, in the USA, or in other countries? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
From: 11-13-12	Name and Address of Business:	
To: Present	PalliaTech NY, LLC 1111 Marcus Ave. , Ste. 107 Lake Success, NY 11042	
Business Type: Medical Marijuana	Office Held/Nature of Interest: Member of LLC	<input checked="" type="checkbox"/> open <input type="checkbox"/> closed <input type="checkbox"/> proposed
Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:		

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with three identical sections for business information, including fields for From, To, Business Type, Office Held/Nature of Interest, and Licensing/Regulatory Agency details.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/29/15
Notary Name: Suzanne F. Almela Notary Registration Number: 01AL6051883
Notary (Notary Must Affix Stamp or Seal) Date: 5/29/15
SUZANNE F. ALMELA
Notary Public, State of New York
No. 01AL6051883
Qualified in Nassau County
Commission Expires December 4, 2018



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

Form with fields for Business Name (PalliaTech NY, LLC), Name (Sharon P. Stiller), Title (Member-PalliaTech NY, LLC), and questions regarding contact with medical marijuana and other business interests.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [Redacted] 9. Fax [Redacted]

10. Email: [Redacted]

11. Residence Address: [Redacted]

12. City: [Redacted] 13. State: [Redacted] 14. ZIP Code: [Redacted]

15. Formal Education Dates Attended Degree

Institution Address From To Degree Received Date Received

SUNY Albany 1400 Washington Ave, Albany, NY 12222 1969 1972 B.A. 8 / 72

Albany Law School 80 New Scotland Ave, Albany, NY 12208 1972 1975 J.D. 5 / 75

[Empty row for education entry]

[Empty row for education entry]

[Empty row for education entry]

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

Type of Professional License	License Number	Institution Granting License (Mailing Address, Phone, Email)	Effective Date	Expiration Date
Juris Doctor	1116292	Albany Law School 80 New Scotland Avenue Albany, NY 12208 (518) 445-2311	1976	

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: Name of Employer: Monroe Community College, Type of Business: Higher Education, Street Address: 1000 E. Henrietta Road, City: Rochester, State: New York, Zip Code: 14623, Starting Date of Employment: 1985, Ending Date of Employment: 2014, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities: Adjunct Professor

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including Type of Business, Street Address, City/State/Zip, Starting/Ending Dates of Employment, Name of Supervisor, Position/Responsibilities, Reason For Departure, and 18. Offices Held or Ownership Interest in Other Businesses.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: May 29, 2015
Notary Name: Sherry L. Gallatin Notary Registration Number: NY 01GA6016222
Notary (Notary Must Affix Stamp or Seal) Date: May 29, 2015
SHERRY L. GALLATIN
Notary Public, State of New York
Registration #: 01GA6016222
Qualified in Monroe County
Certificate Filed in Monroe County
Commission Expires 11/16/2018



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Greg Stoller 3. Title: Member-PalliaTech NY, LLC
4. Briefly describe the role of this person or entity in the proposed registered organization:
Greg Stoller will have a financial interest in the applicant, but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: [redacted]

10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include Brown University, Maurice A. Deane School of Law at Hofstra University, and Georgetown University Law Center.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1: New York State Bar, 4193421, Appellate Division Second Judicial Department, 2004, Present. Row 2: Supreme Court, State of New York Appellate Division, Second Dept. 45 Monroe Pl., Brooklyn, NY 11201. Row 3: (tel) (718) 722-6335 (fax) (646) 963-6587 AD2-ClerksOffice@nycourts.gov

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer.

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**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		Type of Business:
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
<p>18. Offices Held or Ownership Interest in Other Businesses List any affiliations you have been associated with in the past 10 years. Affiliation, for the purpose of this section, includes serving as either a board member, officer, manager, owner, partner, principal stakeholder, director or member of the organization. Organizations outside of New York State must also be disclosed.</p> <p>Have you owned or operated a business or had any affiliations with the operations of a business in New York, in the USA, or in other countries? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>		
From: 11-13-12	Name and Address of Business:	
To: Present	PalliaTech NY, LLC 1111 Marcus Ave. , Ste. 107 Lake Success, NY 11042	
Business Type: Medical Marijuana	Office Held/Nature of Interest: Member of LLC	<input checked="" type="checkbox"/> open <input type="checkbox"/> closed <input type="checkbox"/> proposed
Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:		



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with three sections for business information, including fields for 'From', 'To', 'Business Type', 'Office Held/Nature of Interest', and 'Name, Address and Phone Number of Licensing/Regulatory Agency'. The first section is filled with 'Yogi Beans, LLC' and 'Board Member'.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications
For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.
20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.
Signature: [Handwritten Signature] Date: 5/28/15
Notary Name: Suzanne M. Schwarz Notary Registration Number: 01SC6237657
Notary (Notary Must Affix Stamp or Seal) Date: 5/28/15
SUZANNE M. SCHWARZ
Notary Public, State of New York
No. 01SC6237657
Qualified in Nassau County
Commission Expires March 28, 2019

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Lorraine Takesky 3. Title: Member-PalliaTech NY, LLC
4. Briefly describe the role of this person or entity in the proposed registered organization:
Lorraine Takesky will have a financial interest in the applicant, but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: 9. Fax:

10. Email:

11. Residence Address:

12. City: 13. State: 14. ZIP Code:

15. Formal Education Dates Attended Degree

Institution Address From To Degree Received Date Received

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. The table contains one row of redacted data and four empty rows below it.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.

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**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		Type of Business:
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
18. Offices Held or Ownership Interest in Other Businesses List any affiliations you have been associated with in the past 10 years. Affiliation, for the purpose of this section, includes serving as either a board member, officer, manager, owner, partner, principal stakeholder, director or member of the organization. Organizations outside of New York State must also be disclosed.		
Have you owned or operated a business or had any affiliations with the operations of a business in New York, in the USA, or in other countries? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
From: 11-13-12	Name and Address of Business:	
To: Present	PalliaTech NY, LLC 1111 Marcus Ave. , Ste. 107 Lake Success, NY 11042	
Business Type: Medical Marijuana	Office Held/Nature of Interest: Member of LLC	<input checked="" type="checkbox"/> open <input type="checkbox"/> closed <input type="checkbox"/> proposed
Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:		

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field has checkboxes for 'open', 'closed', and 'proposed'.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5-29-15

Notary Name: [Handwritten Name] Notary Registration Number: 01AL6051883

Notary (Notary Must Affix Stamp or Seal) Date: 5/29/15

SUZANNE F. ALMELA
Notary Public, State of New York
No. 01AL6051883
Qualified in Nassau County
Commission Expires December 4, 2018



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
AMY B. TANEY
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Amy B. Taney 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [Redacted] 9. Fax: [Redacted]

10. Email: [Redacted]

11. Residence Address: [Redacted]

12. City: [Redacted] 13. State: [Redacted] 14. ZIP Code: [Redacted]

15. Formal Education (Institution, Address, Dates Attended, Degree)

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Contains entries for NYU School of Social Work and George Washington University.

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**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

Type of Professional License	License Number	Institution Granting License (Mailing Address, Phone, Email)	Effective Date	Expiration Date

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Name of Employer: N/A

Type of Business: N/A

Street Address: N/A

City: N/A State: N/A Zip Code: N/A

Starting Date of Employment: N/A Ending Date of Employment: N/A

Name of Supervisor for Reference: N/A Supervisor Phone Number: N/A

Position/Responsibilities:
N/A

Reason For Departure: N/A

Name of Employer: _____

Type of Business: _____

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with fields for Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field contains checkboxes for 'open', 'closed', and 'proposed'.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: Amy B Taney Date: 05/27/15

Notary Name: Tolasike Oyinade Notary Registration Number:

Notary (Notary Must Affix Stamp or Seal) Date: 5/27/15

[Handwritten signature of notary]



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Juliana Taney 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [Redacted] 9. Fax: [Redacted]

10. Email: [Redacted]

11. Residence Address: [Redacted]

12. City: [Redacted] 13. State: [Redacted] 14. ZIP Code: [Redacted]

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include Brown University and Icahn School of Medicine at Mount Sinai.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"



**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.				
Type of Professional License	License Number	Institution Granting License (Mailing Address, Phone, Email)	Effective Date	Expiration Date
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.				
Name of Employer:				
Type of Business:				
Street Address:				
City:		State:		Zip Code:
Starting Date of Employment:			Ending Date of Employment:	
Name of Supervisor for Reference:			Supervisor Phone Number:	
Position/Responsibilities:				
Reason For Departure:				
Name of Employer:				
Type of Business:				

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.

“FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested”



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and a section for other businesses with a Yes/No checkbox.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications
For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/28/15
Notary Name: Jean O. Hermele Notary Registration Number: 01HE6048050
Notary (Notary Must Affix Stamp or Seal) Date: May 28, 2015
[Notary Stamp: JEAN O. HERMELE, NOTARY PUBLIC-STATE OF NEW YORK, No. 01HE6048050, Qualified in New York County, My Commission Expires Sept 18, 2018]



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Marisa Taney 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone 9. Fax:

10. Email

11. Residence Address:

12. City: 13. State: 14. ZIP Code:

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include Dartmouth College and Harvard law School.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1: New York State Bar Association, 5205992, NYS Bar Association, 2-2014, N/A.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including fields for Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, and Type of Business.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including: Type of Business, Street Address, City/State/Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5-27-2015
Notary Name: [Handwritten Signature] Notary Registration Number:
Notary (Notary Must Affix Stamp or Seal) Date: 5/27/2015
GINA VON EIFF
Notary Public, State of New York
No. 01VO4820171
Qualified in Westchester County
Certificate Filed in New York County
Commission Expires 2/28/18



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Richard Taney
3. Title: [Redacted]
4. Briefly describe the role of this person or entity in the proposed registered organization:
Redacted pursuant to N.Y. Public Officers Law, Art. 6

5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[checked] Yes [] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?
[checked] Yes [] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.
Redacted pursuant to N.Y. Public Officers Law, Art. 6

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [x] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: [redacted]
10. Email: [redacted]
11. Residence Address: [redacted]
12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]
15. Formal Education
Institution Address Dates Attended Degree Received Date Received
Tufts University 419 Boston Avenue Medford, MA 02155 9-1973 5-1977 Bachelor of Arts May 1977
Temple University School of Law 1719 N. Broad Street Philadelphia, PA 19122 9-1977 5-1979 Juris Doctor May 1980
Boston University School of Law 765 Commonwealth Avenue Boston, MA 02215 9-1979 5-1980 N/A

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Contains two rows of license data: Series 7 license (General Securities Representative Examination) and Series 63 (Uniform Securities Agent State Law Examination).

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**
Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor, and Position/Responsibilities.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with fields: From, To, Business Type, Name and Address of Business, Office Held/Nature of Interest, and checkboxes for open, closed, proposed.



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications
For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/27/15
Notary Name: Doreen Pando Notary Registration Number: 01PA5083699
Notary (Notary Must Affix Stamp or Seal) Date: 5/27/15
Doreen Pando
Notary Public, State of New York
No. 01PA5083699
Qualified in New York County
Commission Expires August 18, 2017



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization
2. Name: Taylor G. Thomas 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [X] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [redacted] 9. Fax: [redacted]

10. Email: [redacted]

11. Residence Address: [redacted]

12. City: [redacted] 13. State: [redacted] 14. ZIP Code: [redacted]

15. Formal Education Dates Attended Degree

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Contains two rows of education data: Dartmouth College (B.A. History, June 1988) and Dartmouth College Amos Tuck School of Business (M.B.A., June 1994).



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, and Position/Responsibilities. Includes a section for Reason For Departure and a section for 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with two identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest' field includes checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/26/2015
Notary Name: Sean C Cunningham Notary Registration Number:
Notary (Notary Must Affix Stamp or Seal) Date: 5/26/2015
SEAN C CUNNING Notary Public COMMONWEALTH OF MASSACHUSETTS My Commission Expires January 29, 2021
[Handwritten Signature]



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Clarence LP 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization: Daniel V. Tierney is the ... which is an investment holding company. He also is the ... but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products? [X] Yes [] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [X] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.



**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
 Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone:

9. Fax:

10. Email:

11. Residence Address:

12. City:

13. State:

14. ZIP Code:

15. Formal Education

Dates Attended

Degree

Institution	Address	From	To	Degree Received	Date Received



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.
Name of Employer:
Type of Business:
Street Address:
City: State: Zip Code:
Starting Date of Employment: Ending Date of Employment:
Name of Supervisor for Reference: Supervisor Phone Number:
Position/Responsibilities:
Reason For Departure:
Name of Employer:
Type of Business:

"FOIL Confidential – Personal Privacy (NY Pub. Off. L. 87(2)) – Exemption from Disclosure Requested"



**Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		
Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		
Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**
Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

Not applicable - only an indirect owner with no operational involvement in the applicant.

"FOIL Confidential - Personal Privacy (NY Pub. Off. L. 87(2)) - Exemption from Disclosure Requested"

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Daniel V. Tierney

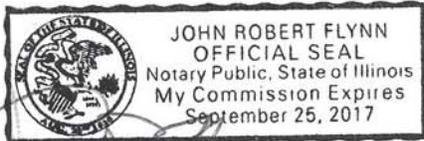
Date: May 29, 2015

Notary Name: John R. Flynn

Notary Registration Number: 721 452

Notary (Notary Must Affix Stamp or Seal)

Date: May 29, 2015





Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Christopher Todd
3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [X] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [Redacted] 9. Fax: [Redacted]

10. Email: [Redacted]

11. Residence Address: [Redacted]

12. City: [Redacted] 13. State: [Redacted] 14. ZIP Code: [Redacted]

Table with 6 columns: Institution, Address, Dates Attended (From, To), Degree Received, Date Received. Row 1: Wilkeson College, Norton, MASS, 94' 98', Fine Arts, 1998.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. The table contains 6 empty rows.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3 if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		
Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		
Type of Business:		
Street Address:		
City:	State:	Zip Code:
Starting Date of Employment:		Ending Date of Employment:
Name of Supervisor for Reference:		Supervisor Phone Number:
Position/Responsibilities:		
Reason For Departure:		
Name of Employer:		



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor, and Position/Responsibilities.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with three identical sections for business information, including fields for From, To, Business Type, Office Held/Nature of Interest, and Licensing/Regulatory Agency details.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature]

Date: 6-1-2015

Notary Name: [Handwritten Name]

Notary Registration Number: 2431193

Notary (Notary Must Affix Stamp or Seal)
ASHLEY ELIZABETH VROOM
NOTARY PUBLIC OF NEW JERSEY
COMMISSION EXPIRES MARCH 13, 2018
ID #2431193

Date: June 1st, 2015



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization
2. Name: Sheila Todd
3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A:

**Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members**

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
 Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [REDACTED] 9. Fax: None

10. Email: [REDACTED]

11. Residence Address: [REDACTED]

12. City: [REDACTED] 13. State: [REDACTED] 14. ZIP Code: [REDACTED]

15. Formal Education		Dates Attended		Degree	
Institution	Address	From	To	Degree Received	Date Received
Bradford Jr. College	Haverhill, MA	1961	1962	Associates Degree	1962
University of Colorado	Boulder, CO	1962 1980	1963 1981	BA	1981



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Row 1: Notary Public, 19894007592, Dept. of State, State of Colorado, 06/24/2013, 07/23/2017.

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Form with fields: Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, Type of Business.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including address, employment dates, supervisor details, and reasons for departure.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, Type of Business, and a section for other businesses (18. Offices Held or Ownership Interest in Other Businesses).

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Name and Address of Business:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field contains checkboxes for 'open', 'closed', and 'proposed'.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

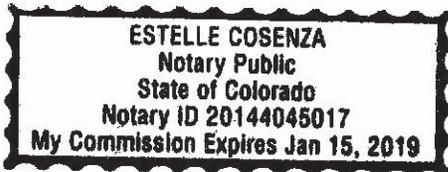
Signature: [Handwritten Signature]

Date: 5/27/15

Notary Name: [Handwritten Signature]
Notary (Notary Must Affix Stamp or Seal)
Estelle M. Cosenza

Notary Registration Number: # 20144045017

Date: May 27, 2015





Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC

This is the name that was entered in Section A of the Application for Registration as a Registered Organization.

2. Name: Webster, B. Todd, Jr.

3. Title:

4. Briefly describe the role of this person or entity in the proposed registered organization:

but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..

5. Will this person or entity come into contact with medical marijuana or medical marijuana products?

Yes No

Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."

6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? Yes No

If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
[] Yes [X] No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: [Redacted] 9. Fax: [Redacted]

10. Email: [Redacted]

11. Residence Address: [Redacted]

12. City: [Redacted] 13. State: [Redacted] 14. ZIP Code: [Redacted]

15. Formal Education: Institution, Address, Dates Attended (From, To), Degree Received, Date Received

[Redacted Education Record]

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Row 1: Princeton University, Princeton, N>J>, 1957, 1961, AB Geology, 6/61



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.

Type of Professional License	License Number	Institution Granting License (Mailing Address, Phone, Email)	Effective Date	Expiration Date
Commercial Pilot with ratings	1458006	Federal Aviation Admin	9'59	N/A
Captain	1093311	U.S.Coast Guard		1998
Firefighter	172313	State of New Jersey	2009	N/A

17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, and Reason For Departure.

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with fields for Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and a section for 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for 'From', 'To', 'Business Type', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable'. Includes checkboxes for 'open', 'closed', and 'proposed'.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 6/1/2015

Notary Name: [Handwritten Signature] Notary Registration Number: 2354073

Notary (Notary Must Affix Stamp or Seal)
TONI JAY-CHOYNAKE
NOTARY PUBLIC OF NEW JERSEY
MY COMMISSION EXPIRES DEC. 29, 2016
Date: June 1st 2015



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: William Todd 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs?

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?
Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

Form fields for contact information (Phone, Fax, Email, Residence Address, City, State, ZIP Code) and a table for Formal Education with columns for Institution, Address, Dates Attended, and Degree.



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date. Rows include Series 7, 63, 65, 66 licenses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members
Redacted pursuant to N.Y. Public Officers Law, Art. 6

Form with multiple sections for employer information, including fields for Name of Employer, Type of Business, Street Address, City, State, Zip Code, Starting Date of Employment, Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, and Reason For Departure.



Appendix A:
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Form with multiple sections for business information, including Type of Business, Street Address, City/State/Zip, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and 18. Offices Held or Ownership Interest in Other Businesses.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
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19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

[Redacted]

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5-20-2015

Notary Name: Danielle Miller Notary Registration Number: 01M16088663

Notary (Notary Must Affix Stamp or Seal) Date: 5/20/15
DANIELLE MILLER
NOTARY PUBLIC-STATE OF NEW YORK
No. 01M16088663
Qualified in New York County
My Commission Expires March 10, 2019

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Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Appendix A must be completed for all board members, officers, managers, owners, partners, principal stakeholders, directors, and members. For board members, officers, managers, owners, partners, directors, and members of the applicant that are not natural persons, Appendix A must be completed by each board member, officer, manager, owner, partner, director and member of that entity, going back to the level of ownership by a natural person. An Organizational Chart documenting your organizational structure must be included with this application.

1. Business Name: PalliaTech NY, LLC
This is the name that was entered in Section A of the Application for Registration as a Registered Organization.
2. Name: Judson Traphagen 3. Title:
4. Briefly describe the role of this person or entity in the proposed registered organization:
but will not have a role in the management of PalliaTech NY, LLC. That role resides with the Sole Managing Member of the LLC, PalliaTech, Inc..
5. Will this person or entity come into contact with medical marijuana or medical marijuana products?
[] Yes [x] No
Any managers who may come in contact with or handle medical marijuana, including medical marijuana products, shall be subject to a fingerprinting process as part of a criminal history background check in compliance with the procedures established by Division of Criminal Justice Services and submission of the applicable fee. Criminal history background checks must be done through Identogo at http://www.identogo.com/FP/NewYork.aspx using the ORI number NY0412500 and the Fingerprint Reason "Control Substance License."
6. Has this person or entity held any position of management or ownership during the preceding ten years of a 10% or greater interest in any other business which manufactured or distributed drugs? [] Yes [x] No
If the answer to this question is yes, provide the name of the business, a statement defining the position of management or ownership held in such business, and any finding of violations of law or regulation by a governmental agency against the business or person or entity.

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Appendix A:

Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

7. Has this person or entity been convicted of a felony or had any type of registration or license suspended or revoked in any administrative or judicial proceeding?

Yes No

If the answer to either of these questions is "Yes," a statement explaining the circumstances of the felony, suspension or revocation must be provided below.

8. Phone: 9. Fax:

10. Email:

11. Residence Address:

12. City: 13. State: 14. ZIP Code:

Table with 6 columns: Institution, Address, From, To, Degree Received, Date Received. Rows include Denison University (BA) and Columbia Business School (MBA).



Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

16. Licenses Held: List any and all licenses issued by a governmental or other regulatory entity.
Table with 5 columns: Type of Professional License, License Number, Institution Granting License (Mailing Address, Phone, Email), Effective Date, Expiration Date.
17. Employment History for the Past 10 Years: Start with MOST RECENT employment and include employment during the last 10 years. Attach additional copies of page 3, if necessary.

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A: Affidavit for Board Members, Officers, Managers, Owners, Partners, Principal Stakeholders, Directors, and Members

Form with multiple sections for personal and professional information, including address, employment dates, supervisor details, and reasons for departure.

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Appendix A:
Affidavit for Board Members, Officers, Managers, Owners, Partners,
Principal Stakeholders, Directors, and Members

Form with multiple sections for business information, including fields for Type of Business, Street Address, City, State, Zip Code, Starting/Ending Date of Employment, Name of Supervisor for Reference, Supervisor Phone Number, Position/Responsibilities, Reason For Departure, and a section for other businesses (18. Offices Held or Ownership Interest in Other Businesses).

Redacted pursuant to N.Y. Public Officers Law, Art. 6



Appendix A:
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Form with three identical sections for business information. Each section includes fields for 'From:', 'To:', 'Business Type:', 'Office Held/Nature of Interest:', and 'Name, Address and Phone Number of Licensing/Regulatory Agency, if applicable:'. The 'Office Held/Nature of Interest:' field includes checkboxes for 'open', 'closed', and 'proposed'.

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19. Affirmative Statement of Qualifications

For individuals who have not previously served as a director/officer nor have had managerial experience, please include a statement below explaining how you are qualified to operate the proposed facility. This statement should include, but not be limited to, any relevant community/volunteer background and experience.

20. The undersigned certifies, under penalty of perjury, that the information contained herein or attached hereto is accurate, true, and complete in all material respects.

Signature: [Handwritten Signature] Date: 5/26/15
Notary Name: Yaffa Holmes Notary Registration Number: 01HO6301215
Notary (Notary Must Affix Stamp or Seal) Date: 5/26/15
YAFFAR. HOLMES
Notary Public, State of New York
No. 01HO6301215
Qualified in New York County
Commission Expires April 24, 2018

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ReliefCenters™



PART III ENERGY SOURCES AND ENGINEERING SYSTEMS



Appendix B – Dispensary #1
Part III – Energy Sources and Engineering Systems

Brooklyn Dispensary

Part III – Energy Sources & Engineering Systems (Outline and Specifications):

Energy Source:

Natural Gas

Engineering Systems:

- **Heating System:** Type: Furnace
Size: 100 kBtu/h
Efficiency: 96 AFUE
Ventilation Requirements: ASHRAE 62.1
- **Cooling System:** Type: DX
Size: 5 Tons
Efficiency: 13 SEER
Ventilation Requirements: ASHRAE 62.1
- **Ventilation & Humidification System:** Type: Exhaust F
Size: 100 CFM
Efficiency: 70
Ventilation Requirements: Exhaust fan for toilets

Water Supply:

- Municipal Water Service (New York City – Brooklyn Borough)

Sewage:

- Municipal Water Service (New York City – Brooklyn Borough)

Emergency Power System:

Type: Generator

Size: 6 kW

Efficiency: 25%





PALLIATECH

Curioso sumac

PALLIATECH RELIEF CENTER / BROOKLYN, NEW YORK
425 FULTON STREET



PALLIATECH
ReliefCenters™



Appendix B: Architectural Program

A SEPARATE "APPENDIX B" SHALL BE COMPLETED FOR EACH SEPARATE BUILDING AND/OR FACILITY INCLUDED IN THE ORGANIZATION'S BUSINESS PLAN

COMPANY INFORMATION

Business Name: Palliatech
Facility Type: Manufacturing Facility [] Dispensing Facility []
Use and Occupancy Classification: Group M - Mercantile
Building Construction Type and Classification: Type IB
Facility Address: 425 Fulton Street, Brooklyn, NY 11201
Primary Contact Telephone number:
Primary Contact Fax number:

PART I - ARCHITECTURAL PROGRAM & CONSTRUCTION TIMELINE:

Applicant shall identify planning requirements, including but not limited to:

- Checklist of construction requirements: TOWN BOARD APPROVAL, PLANNING BOARD APPROVAL, ZONING BOARD OF APPEALS APPROVAL, PREPARATION OF CONSTRUCTION DOCUMENTS, BUILDING PERMIT, BIDDING PHASE, CONTRACT AWARD PHASE PER EACH APPLICABLE CONTRACTOR (Identify all that apply), COMMENCEMENT OF CONSTRUCTION, COMPLETION OF CONSTRUCTION.



Appendix B – Architectural Program

PART II – SITE PLAN(S)

Applicant shall provide the appropriate details for each of the following by identifying the location and dimension on the Site Plan attached to the application for each building location.

- Entrance and Exits
Public Parking Spaces
Staff Parking Spaces
Accessible Parking Spaces
Accessible Route(s)
Fire Lane and/or Fire Apparatus Road
Percentage of Green Space
Location of Emergency Power Systems
Loading & Unloading
Security Gates & Fences

PART III – ENERGY SOURCES & ENGINEERING SYSTEMS:

Applicant shall provide the following minimum information to outline the specifications relating to the energy sources and engineering systems of each building included in the application.

- Energy Source: Natural Gas, Solar, Oil, Other, Electric
Engineering Systems: Heating System (Furnace, 120 kBtu/h, 96 AFUE), Cooling System (DX, 6 tons, 13 SEER), Ventilation & Humidification Systems (Exhaust f, 100 cfm, 70), Electrical Distribution Available, Water Supply (Municipal Water Service X), Sewage (Municipal Sewer System X), Emergency Power System (Generato, 6 kw, 25%)



Appendix B – Architectural Program

PART IV – BUILDING CODE COMPLIANCE: (pages 3-13)

CHECK ALL APPLICABLE CODES FOR THE FACILITY

- 2010 BUILDING CODE OF NYS
2010 FIRE CODE OF NYS
2010 PLUMBING CODE OF NYS
2010 MECHANICAL CODE OF NYS
2010 FUEL GAS CODE OF NYS
2010 PROPERTY MAINTENANCE CODE OF NYS
2010 ENERGY CONSERVATION CONSTRUCTION CODE OF NYS
2012 IECC COMMERCIAL PROVISIONS
2010 EXISTING BUILDING CODE OF NYS
NEC NATIONAL ELECTRIC CODE, (Specify Applicable Version)
2014 NY CITY CONSTRUCTION CODE
2008 NY CITY CONSTRUCTION CODE
1968 NY CITY CONSTRUCTION CODE
NFPA 101-06 LIFE SAFETY CODE
ICC/ANSI A117.1-03 ACCESSIBLE AND USABLE BUILDINGS AND FACILITIES
OTHER



Appendix B – Architectural Program

Select Project

Type:
Check all that apply.
Refer to the Existing
Building Code for
definitions.

- New Building
- Repair
- Alteration Level 1
- Alteration Level 2

- Alteration Level 3
- Change of Occupancy
- Addition
- Historic Building

- Demolition
- Chapter 3. Prescriptive Compliance Method
- Chapter 13. Performance Compliance Method

Select Work

Involved:
Check all that apply.

- General Construction
- Roofing
- Asbestos Abatement/Environmental
- Fire Alarm

- Structural
- Mechanical
- Plumbing
- Electrical

- Site Work
- Sprinkler
- Elevators
- Other: _____

CODE COMPLIANCE REVIEW

Applicant shall provide all applicable information in regards to the code topic and section listed below.

- 1 Code Compliance Review is based on the 2010 NY State Building Code for New Construction. If any other building code applies to the location or type of construction, provide applicable code and sections that most closely relates and references the code topic and information in the code sections listed below. Provide appropriate abbreviations for other applicable codes, such as: **FC: Fire Code, PC: Plumbing Code, MC: Mechanical Code, FGC: Fuel Gas Code, ECCC: Energy Conservation Code.**
- 2 Provide the Required standard for each applicable code section. (i.e.: area, quantity, classification type, materials, hourly separation, etc.). If section does not apply, indicate one of the following with explanation: **NA: Not Applicable, NR: Not Required, NP: Not Permitted**
- 3 Provide your facilities "Actual" value for each required standard as per applicable code section.

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
1	Use & Occupancy Classification	302.1 - 312	2014 NYC Construction Codes.	Use & occupancy of this facility. Identify all applicable materials, class and quantities regarding Table 307.1.	309.1 Mercantile Group M. Mercantile Group M occupancy includes, among others, the use of a building.	Group M - Mercantile



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
2	Combustible Storage	413	2014 NYC Construction Codes. New York	All combustible storage areas and rooms, as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	Group M, shall comply with 2014 NYC Construction Codes. 1-hour fire-resistance-rated	The dispensary facility will not store hazardous materials. See building life safety plan for area and room
3	Hazardous Materials	414	2014 NYC Construction Codes. New York City Fire	All hazardous materials stored or used as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	414.2.5 Hazardous material in Group M display and storage areas and in Group S storage areas. The aggregate quantity of	The dispensary facility will not store hazardous materials. See building life safety plan for area and room dimensions and exit
4	Hazardous Materials Control Areas	414.2	2014 NYC Construction	Provide additional information indicating number, size, materials stored, and quantity of each material.	414.2 Control areas. Control areas shall comply with	The dispensary facility will not store hazardous materials.
5	Building Area & Height	501-507	2014 NYC Construction Codes.	Provide the building area & height Provide all calculations and cite applicable code sections for increased Building Area & Heights allowed per building code(s).	TABLE 503 Allowable Height and Building Areas: Type I-B, S:UL, A:UL	Type I-B, S:2 A: 5533 SF. See Life Safety Plan for additional information.
6	Incidental Use Areas	508.2	2014 NYC Construction	Identify all Incidental Use Areas and required fire separation of occupancies on Building Plans.	TABLE 508.2 Incidental Use Areas - Not Applicable	The dispensary does not have incidental use areas



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
7	Mixed Occupancies	508.3	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	508.3 Mixed occupancies. Each portion of a building shall be individually	The dispensary is classified as Group M - Mercantile. See life safety plan for
8	Nonseparated Uses	508.3.2	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	508.3 Mixed occupancies. Each portion of a building shall be individually	The dispensary is classified as Group M - Mercantile. The building is enclosed with a
9	Separated Uses (Ratio < 1)	508.3.3	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	TABLE 508.3.3 - Group M - Group M: N (N = No separation requirement.)	2 HR fire wall separates the dispensary area, please see building life safety plan for
10	Construction Classification	602	2010 NYS Building Code	Provide Construction Classification per each building included in Application.	602.2 Types I and II. Type I and II construction are those	Building Type I-B Fully Sprinklered 2-HR rating
11	Fire Resistance Rating Req'm't for Building Elements	Table 601	2014 NYC Construction Codes	Provide Fire Resistance Rating per each building element as per Table 601. Identify rating & elements on Building Plans.	TABLE 601 FIRE-RESISTANCE RATING REQUIREMENTS	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
12	Exterior Wall Fire-Resistance Rating	Table 602	2014 NYC Construction Codes ⁺	Identify required fire resistance rating of exterior walls on Building Plan(s).	FIRE-RESISTANCE RATING REQUIREMENTS FOR BUILDING ⁺	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor ⁺
13	Exterior Fire Separation Distance	Table 602	2014 NYC Construction Codes ⁺	Identify required fire separation distance of exterior walls between Buildings on Plan.	TABLE 602 FIRE-RESISTANCE RATING REQUIREMENTS ⁺	Front and Rear Exterior Walls: 1HR Fire Rated Wall. Rear Building distance = ⁺
14	Fire Walls	705	2014 NYC Construction Codes ⁺	Provide code information and identify all applicable required Fire Wall(s) and fire resistance requirement on Building Plans.	Walls shall be not less than 2-hour fire-resistance rated where separating buildings ⁺	Type IB Construction - 2 HR fire wall separates the proposed dispensary area, separating buildings life safety ⁺
15	Fire Barriers	706	2014 NYC Construction Codes ⁺	Provide code information and identify all applicable required Fire Barrier(s) and fire resistance requirement on Building Plans.	706.3.8 Separation of mixed occupancies. Where the provisions of Section 508.3 ⁺	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor ⁺
16	Shaft Enclosures	707	2014 NYC Construction Codes ⁺	Provide code information and identify all applicable required Shaft Wall(s) and fire resistance requirement on Building Plans.	Not Applicable	Not Applicable
17	Fire Partitions	708	2014 NYC Construction Codes ⁺	Provide code information and identify all applicable required Fire Partition(s) and fire resistance requirement on Building Plans.	Separation of mixed occupancies. Where the provisions of Section 508.3 ⁺	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor ⁺



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
18	Horizontal Assemblies	711	2014 NYC Construction Codes ⁺	Provide code information and identify all applicable required Horizontal Assemblies and fire resistance requirement on Building Plans.	The fire-resistance rating of floor and roof assemblies shall not be less than that ⁺	Floor Construction 2-HR Roof Construction 1-HR 2HR Fire Rated wall ⁺
19	Fire Protection: Sprinkler System	903	2014 NYC Construction Codes. New York ⁺	Indicate Type of Sprinkler System: <input checked="" type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13 R <input type="checkbox"/> NFPA 13D Provide code information of all applicable requirements for Automatic Sprinkler Systems with code section cited.	903.2.6 Group M. An automatic sprinkler system shall be provided throughout buildings containing a Group ⁺	Fully Sprinklered per NFPA 13
20	Alt. Fire Extinguishing System	904	2014 NYC Construction Codes ⁺	Provide code information of all applicable requirements for Alternative Automatic Fire-Extinguishing Systems with code section(s) cited.	Automatic fire-extinguishing systems installed as an alternative to the required ⁺	Not Applicable. No Alt fire extinguishing system required ⁺
21	Standpipe System	905	2014 NYC Construction ⁺	Provide code information of all applicable requirements for Standpipe Systems with code section(s) cited.	Not Applicable	Not Applicable. No standpipe system required. ⁺
22	Fire Alarm & Detection Systems	907	2014 NYC Construction Codes.	Provide code information of all applicable requirements for Fire Alarm System(s) with code section cited. Indicate Type of Fire Alarm System <input type="checkbox"/> Addressable <input type="checkbox"/> Hardwired (zoned)	Fire protection systems shall be monitored by an approved supervising station in accordance with NFPA 72 ⁺	Automatic hardwired fire and smoke detector alarm system. Please see building life safety plan for additional ⁺



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
23	Emergency Alarm System	908	2014 NYC Constructi ⁺	Provide code information of all applicable requirements for Emergency Alarm Systems with code section cited.	908.1 Group H occupancies. Emergency alarms for the ⁺	Group M - Emergency alarm system not required.
24	Fire Department Connections	912	2014 NYC Constructi ⁺	Identify Fire Department connections in accordance with NFPA applicable standard.	912.2 Location. With respect to hydrants, driveways, ⁺	Fire department connections are located on the street side. ⁺
25	Exits	1001.1 & 2	2014 NYC Constructi ⁺ on Codes. ⁺	Identify on the Building Plans and documents, per each door, the following information: door width, door height, direction of swing, type of construction, hourly rating, and door closures.	1001.1 General. Buildings or portions thereof shall be provided with a means of ⁺	Door width: 36" per door Door Height: 80" per door Direction of swing: ⁺
26	Occupant Load	1004 & Table 1004.1.1	2014 NYC Constructi ⁺ on Codes. ⁺	Identify the use/name of each room, dimensions of each room, and Occupant Loads per each room on the Building Plans.	TABLE 1004.1.1 MAXIMUM FLOOR AREA ALLOWANCES PER ⁺	Area: 2665 SF / 60SF = 45 Occupancy Classification: Mercantile ⁺
27	Egress Width	1005	2014 NYC Constructi ⁺	Provide egress widths & cite applicable code section(s) and requirement(s) on the Building Plans	TABLE 1005.1 EGRESS WIDTH PER OCCUPANT ⁺	Total Occupancy = 45 * 0.15 Egress width required = 7" ⁺
28	Accessible Means of Egress	1007.1	2014 NYC Constructi ⁺ on Codes. ⁺	Provide accessible means of egress as per Section 1007 & cite applicable code section(s) and requirement(s) on the Building Plans.	Accessible means of egress required. Accessible means of egress shall comply with ⁺	Total number of accessible means of egress: 2 - See building life safety plan for ⁺



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
29	Doors, Gates, and Turnstiles	1008	2014 NYC	Means of egress doors shall meet the requirements of this section.	The minimum width of each	Total Occupancy = 45 * 0.15
30	Interior Stairs	1009	2014 NYC Construction Codes.	Identify the following information for each stairway on the Building Plan(s): the width of stairways; the height, width, depth and number of risers and treads; dimensions of landings; stairway construction type; and handrail height.	Stair Width: 48" Clear Height: 6'-8" Riser: 7" Tread: 11"	Stair Width: 60" Clear Height: 7'-0" Riser: 7" Tread: 11"
31	Ramps	1010.1	2014 NYC Construction Codes.	Identify the following information of each ramp, on the Building Plan(s): width; total vertical rise; length of ramp; and handrail height.	Not Applicable	Not Applicable
32	Common Path of Travel	1014.3	2014 NYC Construction Codes.	Identify on the Building Plan(s): the length of the "Common Path of Travel" per each room as per applicable building code requirements.	The exit access arrangement shall comply with Sections 1014 through	Common path of travel - Main Dispensary: 45'-0" Employee Area: 57'-6"
33	Exit Doorway Arrangement	1015	2014 NYC Construction Codes.	Identify on the Building Plan(s): applicable building code requirements for all Exits and Exit Access Doorways per each room and required exits in all buildings.	1015.1 Exit or exit access doorways required. Two exits or exit access	Egress width required = 7" Total Egress width provided = 72"
34	Corridor Fire Rating	1017.1	2014 NYC Construction	Identify, on the Building Plan(s): all corridors with required fire resistance and the applicable fire rating.	0-HR with sprinkler system	Fully sprinklered system.



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
35	Corridor Width	1017.2	2014 NYC Construction Codes	Identify on the Building Plan(s); the width of all corridors. Provide applicable code section(s) and requirement(s).	The minimum corridor width shall be as determined in accordance with the New	Not Applicable - No corridors
36	Dead End Corridor	1017.3	2014 NYC Construction Codes	Corridors shall not exceed the maximum dead end corridor length as per applicable code.	Where more than one exit or exit access doorway is required. the exit access	Not Applicable - No dead end corridors provided.
37	Number of Exits and Continuity	1019	2014 NYC Construction Codes	Identify on the Building Plan(s); required number of exits, continuity and arrangement as per the applicable code requirements.	Minimum number of exits. All rooms and spaces within each story shall be provided	OCCUPANT LOAD (persons per story) = 45 MINIMUM NUMBER OF
38	Vertical Exit Enclosures	1020	2014 NYC Construction Codes	Identify on the Building Plan(s); all applicable code requirements for each Vertical Exit Enclosure.	Not Applicable - 1.1. The stairway is open to not more than one story above the	Not Applicable - No vertical exit enclosures provided
39	Exit Passageways	1021	2014 NYC Construction Codes	Identify on the Building Plan(s); all applicable code requirements for each Exit Passageway.	The width of exit passageways shall be determined as specified in	Egress width required = 7" Total Egress width provided = 72"
40	Horizontal Exits	1022	2014 NYC Construction Codes	Identify on the Building Plan(s); all applicable code requirements for each Horizontal Exit.	Horizontal exits serving as an exit in a means of egress system shall comply with the	Egress width required = 7" Total Egress width provided = 72"



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
41	Exterior Exit Ramps & Stairways	1023	2014 NYC Construction Codes ⁺	Identify on the Building Plan(s): all applicable code requirements for each exterior exit ramps and stairways.	Exterior exit ramps and stairways shall not be used ⁺	Not Applicable - No ramps or stairways required to exit ⁺
42	Exit Discharge	1024	2014 NYC Construction Codes ⁺	Identify on the Building Plan(s): all applicable code requirements for each Exit Discharge.	Exits shall discharge directly to the exterior of the building ⁺	All exits discharge directly to the exterior of the building. ⁺
43	Accessibility	1101.1 - 1110 & ICC/A117.1(03)	2014 NYC Construction Codes ⁺	Identify on the Building Plan(s): all applicable code requirements such that the design and construction of each building/facility provides accessibility to physically disabled persons.	Buildings and facilities shall be designed and constructed to be accessible in accordance with this code ⁺	The dispensary is designed and constructed to be accessible. See life safety plans for more information. ⁺
44	Energy Conservation	2010 NYS ECCC & IECC 2012	2014 NYC Construction Codes ⁺	Identify the R-Value and U-Value of each construction component and assembly of the building envelope as required in the applicable energy and building code(s).	The commercial building project shall comply with the requirements in Sections 909.1.1 through 909.1.10 ⁺	The dispensary complies with the requirements of ASHRAE/IESNA 90.1 ⁺
45	Emergency & Standby Power	2702.1	2014 NYC Construction Codes ⁺	Identify emergency & Standby Power locations and specifications of the system to be provided.	2702.1 Installation. Emergency and standby power systems shall be installed in accordance with 2702.1.1 through 2702.1.10 ⁺	Emergency and standby power generators will be installed in accordance with 2702.1.1 through 2702.1.10 ⁺
46	Smoke Control Systems	2702.2.2	2014 NYC Construction Codes ⁺	Identify the Standby power for smoke control systems in accordance with Section 909.11 of NYS Building Code.	Not Applicable	Not Applicable



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
47	Plumbing Fixture Count	2902.1	2014 NYC Construction Codes ⁺	Identify on the Building Plan(s): the minimum plumbing facilities as per applicable plumbing code(s).	2901.1 Scope. The New York City Plumbing Code shall	(1) One Unisex ADA Public Restroom and (1) Unisex
48	Available Street Water Pressure		2014 NYC Construction Codes ⁺	Provide the available street or well water pressure.	Pressure: 65 psi	Pressure: 65 psi
49	Fire Apparatus Access Road	FC503.1	2014 NYC Construction Codes ⁺	Identify on the Site Plan: Fire Apparatus Road, Fire Lane and other Fire Service requirements per applicable Building and Fire Codes.	Construction documents for proposed fire apparatus access, location of fire lane	Fulton Street: Service road and Fire Lane. Willoughby Street: Service

Brooklyn Dispensary Facility - Medical Marijuana Program

Application for Registration as a Registered Organization

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PART IV – BUILDING CODE COMPLIANCE (pages 3-13)

CHECK ALL APPLICABLE CODES FOR THE FACILITY

- 2010 ENERGY CONSERVATION CONSTRUCTION CODE OF NYS
- 2012 IECC COMMERCIAL PROVISIONS
- 2014 NY CITY CONSTRUCTION CODE
- 2008 NY CITY CONSTRUCTION CODE
- 1968 NY CITY CONSTRUCTION CODE
- NFPA 101-06 LIFE SAFETY CODE
- ICC/ANSI A117.1-03 ACCESSIBLE AND USABLE BUILDINGS AND FACILITIES
- NEW YORK CITY FIRE AND PLUMBING CODE

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CODE COMPLIANCE REVIEW

Applicant shall provide all applicable information in regards to the code topic and section listed below.

1 Code Compliance Review is based on the 2010 NY State Building Code for New Construction. If any other building code applies to the location or type of construction, provide applicable code and sections that most closely relates and references the code topic and information in the code sections listed below. Provide appropriate abbreviations for other applicable codes, such as FC: *Fire Code*, PC: *Plumbing Code*, MC: *Mechanical Code*, FGC: *Fuel Gas Code*, ECC: *Energy Conservation Code*.

2 Provide the Required standard for each applicable code section. (i.e. area, quantity, classification type, materials, hourly separation, etc.). If section does not apply, indicate one of the following with explanation: NA: *Not Applicable*, NR: *Not Required*, NP: *Not Permitted*

3 Provide your facilities "Actual" value for each required standard as per applicable code section.

No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
1	Use & Occupancy Classification	302.1 - 312	2014 NYC Construction Codes.	Use & occupancy of this facility. Identify all applicable materials, class and quantities regarding Table 307.1.	309.1 Mercantile Group M Mercantile Group M occupancy includes, among others, the use of a building or structure or a portion thereof, for the display and sale of merchandise, and involves stocks of goods, wares or merchandise incidental to such purposes and accessible to the public	Group M - Mercantile

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No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
2	Combustible Storage	413		All combustible storage areas and rooms, as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	Group M, shall comply with 2014 NYC Construction Codes 1-hour fire-resistance-rated construction for combustible storage areas and rooms	The dispensary facility will not store hazardous materials. See building life safety plan for area and room dimensions, and exit requirements.
3	Hazardous Materials	414		All hazardous materials stored or used as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	414.2.5 Hazardous material in Group M display and storage areas and in Group S storage areas. The aggregate quantity of nonflammable solid and nonflammable or noncombustible liquid hazardous materials permitted within a single control area of a Group M display and storage area, a Group S storage area or an outdoor control area is permitted to exceed the maximum allowable quantities per control area specified in Tables 307.1(1) and 307.1(2) without classifying the building or use as a Group H occupancy, provided that the materials are displayed and stored in accordance with the Fire Code of New York State and quantities do not exceed the maximum allowable specified in Table 414.2.5(1)	The dispensary facility will not store hazardous materials. See building life safety plan for area and room dimensions, and exit requirements.

4	Hazardous Materials Control Areas	414.2		Provide additional information indicating number, size, materials stored, and quantity of each material.	414.2 Control areas Control areas shall comply with Sections 414.2.1 through 414.2.5 and the New York City Fire Code.	The dispensary facility will not store hazardous materials. Referred to Palliatech's equipment list for additional information indicating the number, size, materials stored, and quantity of each material.
5	Building Area & Height	501-507		Provide the building area & height Provide all calculations and cite applicable code sections for increased Building Area & Heights allowed per building code(s).	TABLE 503 Allowable Height and Building Areas Type I-B, S UL, A UL	Type I-B, S.2 A 5533 SF. See Life Safety Plan for additional information.
6	Incidental Use Areas	508.2		Identify all Incidental Use Areas and required fire separation of occupancies on Building Plans.	TABLE 508.2 Incidental Use Areas - Not Applicable	The dispensary does not have incidental use areas within the facility. See building life safety plan for additional fire separation of occupancies.

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No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
7	Mixed Occupancies	508.3		Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	508.3 Mixed occupancies. Each portion of a building shall be individually classified in accordance with Section 302.1	The dispensary is classified as Group M - Mercantile See life safety plan for additional occupancy analysis
8	Nonseparated Uses	508.3.2		Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	508.3 Mixed occupancies. Each portion of a building shall be individually classified in accordance with Section 302.1	The dispensary is classified as Group M - Mercantile. The building is enclosed with a 2-HR fire wall separation See building life safety plan for additional information
9	Separated Uses (Ratio < 1)	508.3.3		Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	TABLE 508.3.3 - Group M - Group M: N (N = No separation requirement.)	2 HR fire wall separates the dispensary area, please see building life safety plan for additional fire resistance ratings
10	Construction Classification	602		Provide Construction Classification per each building included in Application.	602.2 Types I and II Type I and II construction are those types of construction in which the building elements listed in Table 601 are of noncombustible materials, except as permitted in Section 603 and elsewhere in this code	Building Type I-B Fully Sprinklered 2-HR rating separation wall 2-HR Floor construction 1-HR Roof construction
11	Fire Resistance Rating Req ^m for Building Elements	Table 601		Provide Fire Resistance Rating per each building element as per Table 601. Identify rating & elements on Building Plans.	TABLE 601 FIRE-RESISTANCE RATING REQUIREMENTS FOR BUILDING ELEMENTS Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor Construction 2-HR Roof Construction 1-HR * Roof supports: Fire-resistance ratings of primary structural frame and bearing walls are permitted to be reduced by 1 hour where supporting a roof only	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor Construction 2-HR Roof Construction 1-HR

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No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
12	Exterior Wall Fire-Resistance Rating	Table 602		Identify required fire resistance rating of exterior walls on Building Plan(s).	FIRE-RESISTANCE RATING REQUIREMENTS FOR BUILDING ELEMENTS Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor Construction 2-HR Roof Construction 1-HR	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor Construction 2-HR Roof Construction 1-HR

13	Exterior Fire Separation Distance	Table 602		Identify required fire separation distance of exterior walls between Buildings on Plan.	TABLE 602 FIRE-RESISTANCE RATING REQUIREMENTS FOR EXTERIOR WALLS BASED ON FIRE SEPARATION DISTANCE - OCCUPANCY GROUP F-1, M, S-1 FIRE SEPARATION DISTANCE = 10≤X< 30, IB, 1HR	Front and Rear Exterior Walls: 1HR Fire Rated Wall. Rear Building distance = Willughby Street 60'-0" Side, Adjacent Buildings = 2HR Fire Rated Structural Walls Front = Fulton Street. 80'-0"
14	Fire Walls	705		Provide code information and identify all applicable required Fire Wall(s) and fire resistance requirement on Building Plans.	Walls shall be not less than 2-hour fire-resistance rated where separating buildings of Type II or V construction.	Type IB Construction - 2 HR fire wall separates the proposed dispensary area, please see building life safety plan for additional fire resistance ratings.
15	Fire Barriers	706		Provide code information and identify all applicable required Fire Barrier(s) and fire resistance requirement on Building Plans.	706 3 8 Separation of mixed occupancies Where the provisions of Section 508.3.3 are applicable, the fire barrier separating mixed occupancies shall have a fire-resistance rating of not less than that indicated in Section 508.3.3 based on the occupancies being separated.	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor Construction 2-HR Roof Construction 1-HR - 2 HR fire wall separates the dispensary area See building life safety plan for additional fire resistance ratings.
16	Shaft Enclosures	707		Provide code information and identify all applicable required Shaft Wall(s) and fire resistance requirement on Building Plans.	Not Applicable	Not Applicable
17	Fire Partitions	708		Provide code information and identify all applicable required Fire Partition(s) and fire resistance requirement on Building Plans.	Separation of mixed occupancies Where the provisions of Section 508.3.3 are applicable, the fire barrier separating mixed occupancies shall have a fire-resistance rating of not less than that indicated in Section 508.3.3 based on the occupancies being separated	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor Construction 2-HR Roof Construction 1-HR - 2 HR fire wall separates the dispensary area See building life safety plan for additional fire resistance ratings.

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No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
18	Horizontal Assemblies	711		Provide code information and identify all applicable required Horizontal Assemblies and fire resistance requirement on Building Plans.	The fire-resistance rating of floor and roof assemblies shall not be less than that required by the building type of construction. Where the floor assembly separates mixed occupancies, the assembly shall have a fire-resistance rating of not less than that required by Section 508.4 based on the occupancies being separated. Where the floor assembly separates a single occupancy into different fire areas, the assembly shall have a fire-resistance rating of not less than that required by Section 707.3.9.	Floor Construction 2-HR Roof Construction 1-HR 2HR Fire Rated wall separates building occupancies. See building life safety plan for additional fire resistance ratings.
19	Fire Protection: Sprinkler System	903		Indicate Type of Sprinkler System: NFPA 13 X NFPA 13 R NFPA 13D Provide code information of all applicable requirements for Automatic Sprinkler Systems with code section cited.	903.2.6 Group M. An automatic sprinkler system shall be provided throughout buildings containing a Group M occupancy where one of the following conditions exists: [F] 1 Where a Group M fire area exceeds 12,000 square feet (1115 m2); 2 Where a Group M fire area is located more than three stories above grade plane, or 3 Where the combined area of all Group M fire areas on all floors, including any mezzanines, exceeds 24,000 square feet (2230 m2)	Fully Sprinklered per NFPA 13
20	Alt. Fire Extinguishing System	904		Provide code information of all applicable requirements for Alternative Automatic Fire-Extinguishing Systems with code section(s) cited.	Automatic fire-extinguishing systems installed as an alternative to the required automatic sprinkler systems of Section 903 shall be approved by the code enforcement official. Automatic fire-extinguishing systems shall not be considered alternatives for the purposes of exceptions or reductions allowed by other requirements of this code	Not Applicable No Alt fire extinguishing system required

21	Standpipe System	905		Provide code information of all applicable requirements for Standpipe Systems with code section(s) cited.	Not Applicable	Not Applicable No standpipe system required.
22	Fire Alarm & Detection Systems	907		Provide code information of all applicable requirements for Fire Alarm System(s) with code section cited. Indicate Type of Fire Alarm System Addressable Hardwired X (zoned)	Fire protection systems shall be monitored by an approved supervising station in accordance with NFPA 72 - 901 6.2 Fire alarm systems. Fire alarm systems required by the provisions of Section 907 2 of this code and Section 907 2 of the Fire Code of New York State shall be monitored by an approved supervising station in accordance with Section 907.14.	Automatic hardwired fire and smoke detector alarm system. Please see building life safety plan for additional fire resistance ratings.

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code' (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value' IAllowed Code Value	Facility's Actual Value'
23	Emergency Alarm System	908		Provide code information of all applicable requirements for Emergency Alarm Systems with code section cited.	908 1 Group H occupancies Emergency alarms for the detection and notification of an emergency condition in Group H occupancies shall be provided in accordance with Section 414 7	Group M - Emergency alarm system not required
24	Fire Department Connections	912		Identify Fire Department connections in accordance with NFPA applicable standard.	912 2 Location. With respect to hydrants, driveways, buildings and landscaping, fire department connections shall be so located that fire apparatus and hose connected to supply the system will not obstruct access to the buildings for other fire apparatus The location of fire department connections shall be approved 912 2 2 Existing buildings. On existing buildings, wherever the fire department connection is not visible to approaching fire apparatus, the fire department connection shall be indicated by an approved sign mounted on the street front or on the side of the building Such sign shall have the letters "FDC" at least 6 inches (152 mm) high and words in letters at least 2 inches (51 mm) high or an arrow to indicate the location All such signs shall be subject to the approval of the code enforcement official	Fire department connections are located on the street side of the building, fully visible and recognizable from the street or nearest point of fire department vehicle access or as otherwise approved by the code enforcement official.
25	Exits	1001.1 & 2		Identify on the Building Plans and documents, per each door, the following information: door width, door height, direction of swing, type of construction, hourly rating, and door closures.	1001 1 General. Buildings or portions thereof shall be provided with a means of egress system as required by this chapter The provisions of this chapter shall control the design, construction and arrangement of means of egress components required to provide an approved means of egress from structures and portions thereof. 1001 2 Minimum requirements. It shall be unlawful to alter a building or structure in a manner that will reduce the number of exits or the capacity of the means of egress to less than required by this code. 1001 3 Maintenance Means of egress shall be maintained in accordance with the New York City Fire Code.	Door width 36" per door Door Height 80" per door Direction of swing Exterior/Outward Type of Construction Fire rated metal frame doors and Fire rated glazing doors. Hourly rating 1HR Door Closures will be provided on all exit doors. See life safety plans for additional information
26	Occupant Load	1004 & Table 1004.1.1		Identify the use/name of each room, dimensions of each room, and Occupant Loads per each room on the Building Plans.	TABLE 1004 1.1 MAXIMUM FLOOR AREA ALLOWANCES PER OCCUPANT - Mercantile Areas on other floors - 60 gross	Area: 2665 SF / 60SF = 45 Occupancy Classification Mercantile Occupancy Load: 63 See life safety plans for additional information
27	Egress Width	1005		Provide egress widths & cite applicable code section(s) and requirement(s) on the Building Plans	TABLE 1005.1 EGRESS WIDTH PER OCCUPANT SERVED - WITH SPRINKLER SYSTEM = 0.15	Total Occupancy = 45 * 0.15 Egress width required = 7" Total Egress width provided = 72" Number of exits 2

28	Accessible Means of Egress	1007.1		Provide accessible means of egress as per Section 1007 & cite applicable code section(s) and requirement(s) on the Building Plans.	Accessible means of egress required. Accessible means of egress shall comply with this section. Accessible spaces shall be provided with not less than one accessible means of egress. Where more than one means of egress is required by Section 1015.1 or 1019.1 from any accessible space, each accessible portion of the space shall be served by not less than two accessible means of egress.	Total number of accessible means of egress = 2 - See building life safety plan for additional Accessible Means of Egress
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Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² / Allowed Code Value	Facility's Actual Value ³
29	Doors, Gates, and Turnstiles	1008		Means of egress doors shall meet the requirements of this section.	The minimum width of each door opening shall be sufficient for the occupant load thereof and shall provide a clear width of not less than 32 inches (813 mm). Clear openings of doorways with swinging doors shall be measured between the face of the door and the stop, with the door open 90 degrees (1.57 rad). Where this section requires a minimum clear width of 32 inches (813 mm) and a door opening includes two door leaves without a mullion, one leaf shall provide a clear opening width of 32 inches (813 mm). The maximum width of a swinging door leaf shall be 48 inches (1219 mm) nominal. Means of egress doors in a Group I-2 occupancy used for the movement of beds shall provide a clear width not less than 41.5 inches (1054 mm). The height of doors shall not be less than 80 inches (2032 mm). 1008.2 Gates. Gates serving the means of egress system shall comply with the requirements of this section. Gates used as a component in a means of egress shall conform to the applicable requirements for doors.	Total Occupancy = 45 * 0.15 Egress width required = 7" Total Egress width provided = 72" Number of exits: 2 Please see building life safety plan for additional information on doors and gates
30	Interior Stairs	1009		Identify the following information for each stairway on the Building Plan(s): the width of stairways; the height, width, depth and number of risers and treads; dimensions of landings; stairway construction type; and handrail height.	Stair Width: 48" Clear Height: 6'-8" Riser: 7" Tread: 11" Handrail height: 34" min - 38" max	Stair Width: 60" Clear Height: 7'-0" Riser: 7" Tread: 11" Construction Type: Concrete Handrail height: 36"
31	Ramps	1010.1		Identify the following information of each ramp, on the Building Plan(s): width; total vertical rise; length of ramp; and handrail height.	Not Applicable	Not Applicable
32	Common Path of Travel	1014.3		Identify on the Building Plan(s): the length of the "Common Path of Travel" per each room as per applicable building code requirements.	The exit access arrangement shall comply with Sections 1014 through 1017 and the applicable provisions of Sections 1003 through 1013	Common path of travel - Main Dispensary: 45'-0" Employee Area: 57'-6"
33	Exit Doorway Arrangement	1015		Identify on the Building Plan(s): applicable building code requirements for all Exits and Exit Access Doorways per each room and required exits in all buildings.	1015.1 Exit or exit access doorways required. Two exits or exit access doorways from any space shall be provided where one of the following conditions exists: 1. The occupant load of the space exceeds the values in Table 1015.1 2. The common path of egress travel exceeds the limitations of Section 1014.3. 3. Where required by Sections 1015.3, 1015.4 and 1015.5.	Egress width required = 7" Total Egress width provided = 72" Number of exits: 2 See building life safety plan for additional Accessible Means of Egress
34	Corridor Fire Rating	1017.1		Identify, on the Building Plan(s): all corridors with required fire resistance and the applicable fire rating.	0-HR with sprinkler system	Fully sprinklered system.

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² (Allowed Code Value)	Facility's Actual Value ³
35	Corridor Width	1017.2		Identify on the Building Plan(s): the width of all corridors. Provide applicable code section(s) and requirement(s).	The minimum corridor width shall be as determined in accordance with the New York City Fire Code, but not less than 44 inches (1118 mm)	Not Applicable - No corridors
36	Dead End Corridor	1017.3		Corridors shall not exceed the maximum dead end corridor length as per applicable code.	Where more than one exit or exit access doorway is required, the exit access shall be arranged such that there are no dead ends in corridors more than 20 feet (6096 mm) in length.	Not Applicable - No dead end corridors provided
37	Number of Exits and Continuity	1019		Identify on the Building Plan(s): required number of exits, continuity and arrangement as per the applicable code requirements.	Minimum number of exits: All rooms and spaces within each story shall be provided with and have access to the minimum number of approved independent exits required by Table 1021.1 (New York City Construction Codes) based on the occupant load of the story, except as modified in Section 1015.1 or 1019.2. For the purposes of this, occupied roofs shall be provided with exits as required for stories. The required number of exits from any story, basement or individual space shall be maintained until arrival at grade or the public way - OCCUPANT LOAD (persons per story) = 1/500 MINIMUM NUMBER OF EXITS (per story) = 2	OCCUPANT LOAD (persons per story) = 45 MINIMUM NUMBER OF EXITS (per story) = 2
38	Vertical Exit Enclosures	1020		Identify on the Building Plan(s): all applicable code requirements for each Vertical Exit Enclosure.	Not Applicable - 1.1. The stairway is open to not more than one story above the story at the level of exit discharge, or 1.2. The stairway is open to not more than one story below the story at the level of exit discharge	Not Applicable - No vertical exit enclosures provided
39	Exit Passageways	1021		Identify on the Building Plan(s): all applicable code requirements for each Exit Passageway.	The width of exit passageways shall be determined as specified in Section 1005.1 but such width shall not be less than 44 inches (1118 mm), except that exit passageways serving an occupant load of less than 50 shall not be less than 36 inches (914 mm) in width. The required width of exit passageways shall be unobstructed	Egress width required = 7" Total Egress width provided = 72" Number of exits: 2 See building life safety plan for additional information on Exit Passageways
40	Horizontal Exits	1022		Identify on the Building Plan(s): all applicable code requirements for each Horizontal Exit.	Horizontal exits serving as an exit in a means of egress system shall comply with the requirements of this section. A horizontal exit shall not serve as the only exit from a portion of a building, and where two or more exits are required, not more than one-half of the total number of exits or total exit width shall be horizontal exits	Egress width required = 7" Total Egress width provided = 72" Number of exits: 2 See building life safety plan for additional information on Exit Passageways

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² (Allowed Code Value)	Facility's Actual Value ³
41	Exterior Exit Ramps & Stairways	1023		Identify on the Building Plan(s): all applicable code requirements for each exterior exit ramps and stairways.	Exterior exit ramps and stairways shall not be used as an element of a required means of egress for Group I-2 occupancies. For occupancies in other than Group I-2, exterior exit ramps and stairways shall be permitted as an element of a required means of egress for buildings not exceeding six stories above grade plane or having occupied floors more than 75 feet (22 860 mm) above the lowest level of fire department vehicle access	Not Applicable - No ramps or stairways required to exit building.
42	Exit Discharge	1024		Identify on the Building Plan(s): all applicable code requirements for each Exit Discharge.	Exits shall discharge directly to the exterior of the building. The exit discharge shall be at grade or shall provide direct access to grade. The exit discharge shall not reenter a building.	All exits discharge directly to the exterior of the building. See life safety plans for additional information
43	Accessibility	1101.1 - 1110 & ICC/A117.1(03)		Identify on the Building Plan(s): all applicable code requirements such that the design and construction of each building/facility provides accessibility to physically disabled persons.	Buildings and facilities shall be designed and constructed to be accessible in accordance with this code and ICC/ANSI A117.1	The dispensary is designed and constructed to be accessible. See life safety plans for more information.

44	Energy Conservation	2010 NYS ECC & IECC 2012	Identify the R-Value and U-Value of each construction component and assembly of the building envelope as required in the applicable energy and building code(s).	<p>The commercial building project shall comply with the requirements in Sections 502 (Building envelope requirements), 503 (Building mechanical systems), 504 (Service water heating) and 505 (Electrical power and lighting systems) in its entirety. As an alternative the commercial building project shall comply with the requirements of ASHRAE/IESNA 90.1 in its entirety.</p> <p>Commercial buildings shall comply with one of the following.</p> <ol style="list-style-type: none"> 1 The requirements of ANSI/ASHRAE/IESNA 90.1 2 The requirements of Sections C402, C403, C404 and C405. In addition, commercial buildings shall comply with either Section C406.2, C406.3 or C406.4 3 The requirements of Section C407, C402.4, C403.2, C404, C405.2, C405.3, C405.4, C405.6 and C405.7. The building energy cost shall be equal to or less than 85 percent of the standard reference design building. 	<p>The dispensary complies with the requirements of ASHRAE/IESNA 90.1</p> <p>CLIMATE ZONE5 All other Group R Roofs Insulation entirely above deck U-0.048U-0.048 Metal buildings U-0.055U-0.055 Attic and other U-0.027U-0.027 Walls, Above Grade Mass U-0.090U-0.080 Metal building U-0.069U-0.069 Metal framed U-0.064U-0.064 Wood framed and other U-0.064U-0.051 Below-Grade Walls a Below-grade walls a C-0.119C-0.119 Floors Mass U-0.074U-0.064 Joist/Framing U-0.033U-0.033 Slab-on-Grade Floors Unheated slabs F-0.730F-0.540 Heated slabs F-0.860F-0.860</p>
45	Emergency & Standby Power	2702.1	Identify emergency & Standby Power locations and specifications of the system to be provided.	2702.1 Installation Emergency and standby power systems shall be installed in accordance with the New York City Electrical Code, NFPA 110 and NFPA 111.	Emergency and standby power generators will be installed in accordance section 2701.1 and with the security engineering requirements. See life safety plans for additional information.
46	Smoke Control Systems	2702.2.2	Identify the Standby power for smoke control systems in accordance with Section 909.11 of NYS Building Code.	Not Applicable	Not Applicable

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
47	Plumbing Fixture Count	2902.1		Identify on the Building Plan(s) the minimum plumbing facilities as per applicable plumbing code(s).	2901.1 Scope. The New York City Plumbing Code shall govern the construction, erection, installation, alteration, repairs, relocation, replacement, addition to, use or maintenance of plumbing equipment and systems.	(1) One Unisex ADA Public Restroom and (1) Unisex ADA Employee Restroom provided. See building plans. Separate facilities shall not be required in mercantile occupancies in which the maximum occupant load is 50 or less.
48	Available Street Water Pressure			Provide the available street or well water pressure.	Pressure: 65 psi	Pressure: 65 psi
49	Fire Apparatus Access Road	FC503.1		Identify on the Site Plan: Fire Apparatus Road, Fire Lane and other Fire Service requirements per applicable Building and Fire Codes.	Construction documents for proposed fire apparatus access, location of fire lanes and construction documents and hydraulic calculations for fire hydrant systems shall be submitted to the fire department for review and approval prior to construction.	Fulton Street: Service road and Fire Lane. Willoughby Street: Service Road and Fire Lane. See Site Plan for additional information.



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PART III ENERGY SOURCES AND ENGINEERING SYSTEMS



Appendix B – Dispensary #1
Part III – Energy Sources and Engineering Systems

Brooklyn Dispensary

Part III – Energy Sources & Engineering Systems (Outline and Specifications):

Energy Source:

Natural Gas

Engineering Systems:

- **Heating System:** Type: Furnace
Size: 100 kBtu/h
Efficiency: 96 AFUE
Ventilation Requirements: ASHRAE 62.1
- **Cooling System:** Type: DX
Size: 5 Tons
Efficiency: 13 SEER
Ventilation Requirements: ASHRAE 62.1
- **Ventilation & Humidification System:** Type: Exhaust F
Size: 100 CFM
Efficiency: 70
Ventilation Requirements: Exhaust fan for toilets

Water Supply:

- Municipal Water Service (New York City – Brooklyn Borough)

Sewage:

- Municipal Water Service (New York City – Brooklyn Borough)

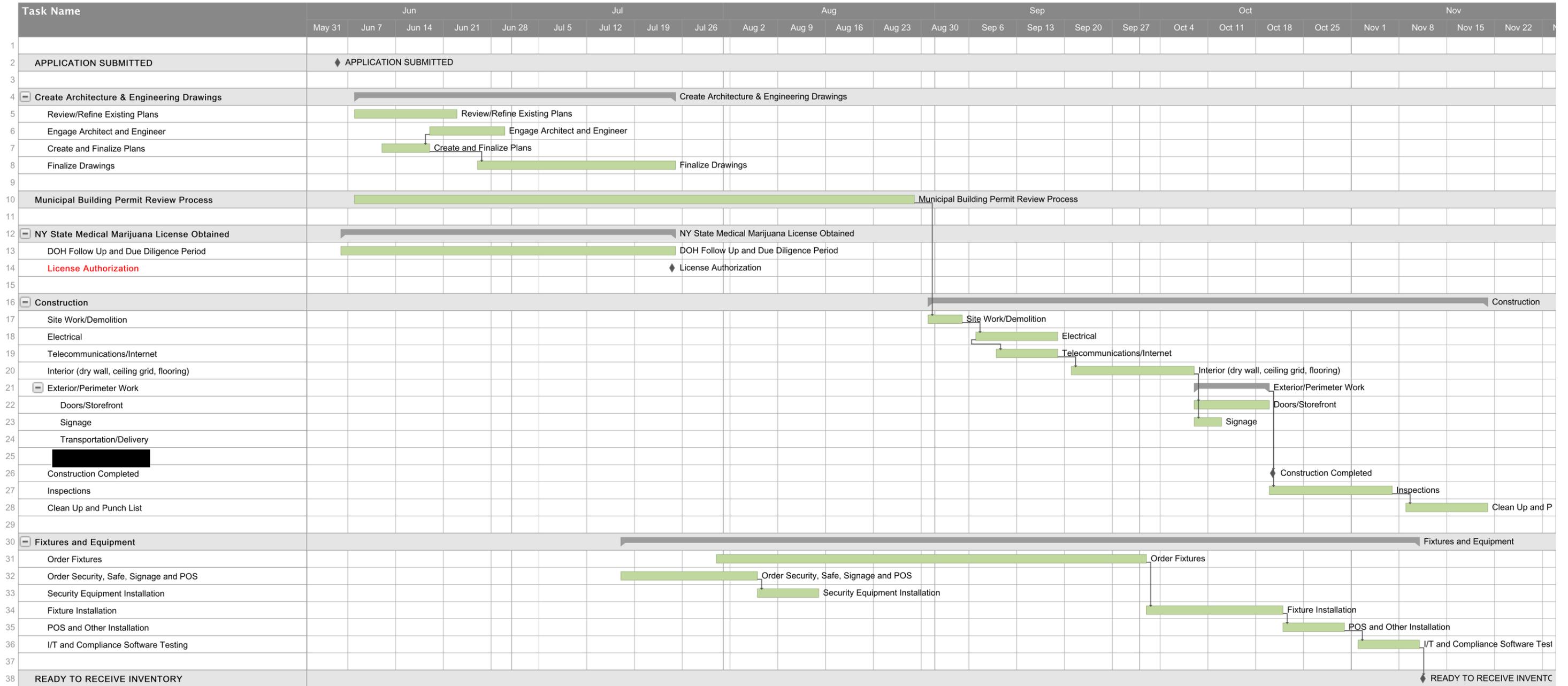
Emergency Power System:

Type: Generator

Size: 6 kW

Efficiency: 25%

425 FULTON AVE: DISPENSARY CONSTRUCTION TIMELINE





Dispensary - Brooklyn, New York : LEED v4 Rating System BD+C: Retail

What is LEED?

LEED is the most recognized international certification for green buildings and was developed in the United States by the U.S. Green Building Council.

The United States Green Building Council (USGBC) is a non-profit organization that promotes sustainability and energy efficiency in the design, construction and operation of buildings.

Benefits of LEED

Owners that opt for LEED certification improve their image and competitiveness in the market. The reduced environmental impact of building activities results in improvements for generations of occupants.

- 15% to 30% Reduction in energy consumption
- 20% to 40% reduction in water consumption
- 10% to 30% Reduction in operation costs

Project Overview

The reuse and upgrading of the existing structure into an active dispensary facility will bring renewed aesthetic appeal, activity and energy to the property and the neighborhood. New signage, low-maintenance native landscaping and improved site lighting will dramatically enhance the character of the existing property and help differentiate the dispensary from the many commercial constructions along the avenue.

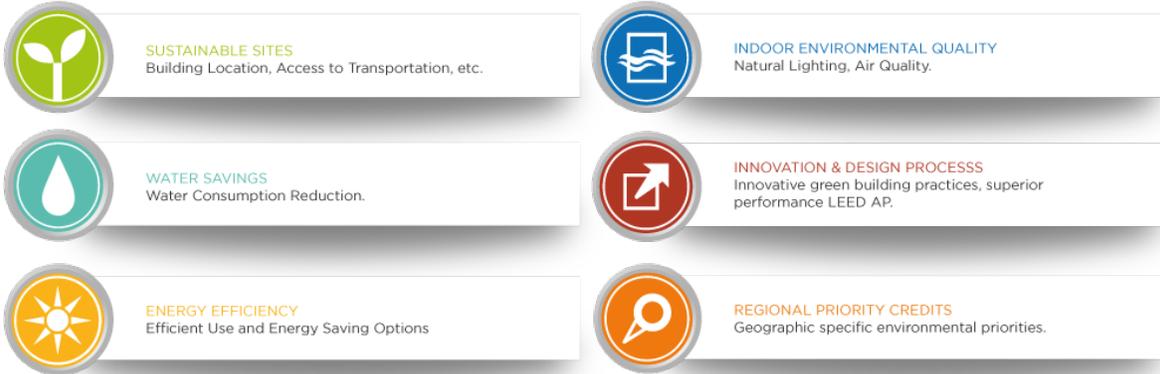
The facility will be renovated to meet or exceed all construction regulations and standards with a priority on environmental sustainability, including such features as the use of repurposed, sustainable building materials including stone, wood and metal, and re-landscaping with natural, locally indigenous plants and materials requiring minimal water and maintenance.

The re-use of this existing facility will promote the design and construction of a high performance environment pertaining to the overall sustainable goals. It will also ensure a responsible, profitable, and healthy place to work.

Upon completion of the Brooklyn, New York dispensary and installation of all "green" features, the Company intends to seek LEED (Leadership in Energy and Environmental Design) certification through the LEED BD + C (Retail), based on responsible practices in water use, conservation, building materials, energy efficiency, indoor air quality, emission control, landscaping and design.

sumac

LEED Categories



BD + C : Retail

LEED BD+C: Retail is designed for interior spaces that will be used to conduct retail sale of consumer product goods, including both direct customer service areas (showroom) and preparation or storage areas that support customer service.

Sustainability Goals

ENERGY

- Maximize energy efficiency.
- Minimize energy demand and emissions.
- Increase reliability on renewably energy sources.

WASTE REDUCTION

- Packaging
- Maximize the re-use of waste products as a resource

CLEAN AND SECURE WORK ENVIRONMENT

- Efficient space planning.
- Effective ventilation system and sanitation procedures.
- Comprehensive security system coverage.
- Visibility control
- Restricted access.



RE: Build Out Timeline - Dispensary - BROOKLYN (Kings County)

DISPENSARY LOCATION: 425 Fulton Street, Brooklyn, NY 11201-5121

PROPOSED PROJECT BUILD-OUT TIMELINE

Milestone	Timeframe
1. Authorization of License(s)	July, 2015
2. Architecture and Engineering Technical Drawings	August – September, 2015
3. Local Municipal Review Process* (*Tenant Build-out Only)	September, 2015
4. Construction Start	October, 2015
5. Construction Completion	December, 2016
6. Equipment Installation & Move-in	January, 2016

The above schedule is for preliminary review only, actual times may vary based on final design and construction scope and municipal review process.

Ronald Dean AIA, CSI, LEED AP BC+C
Vice President
Sumac Inc.
New York Licensed Architect #037858

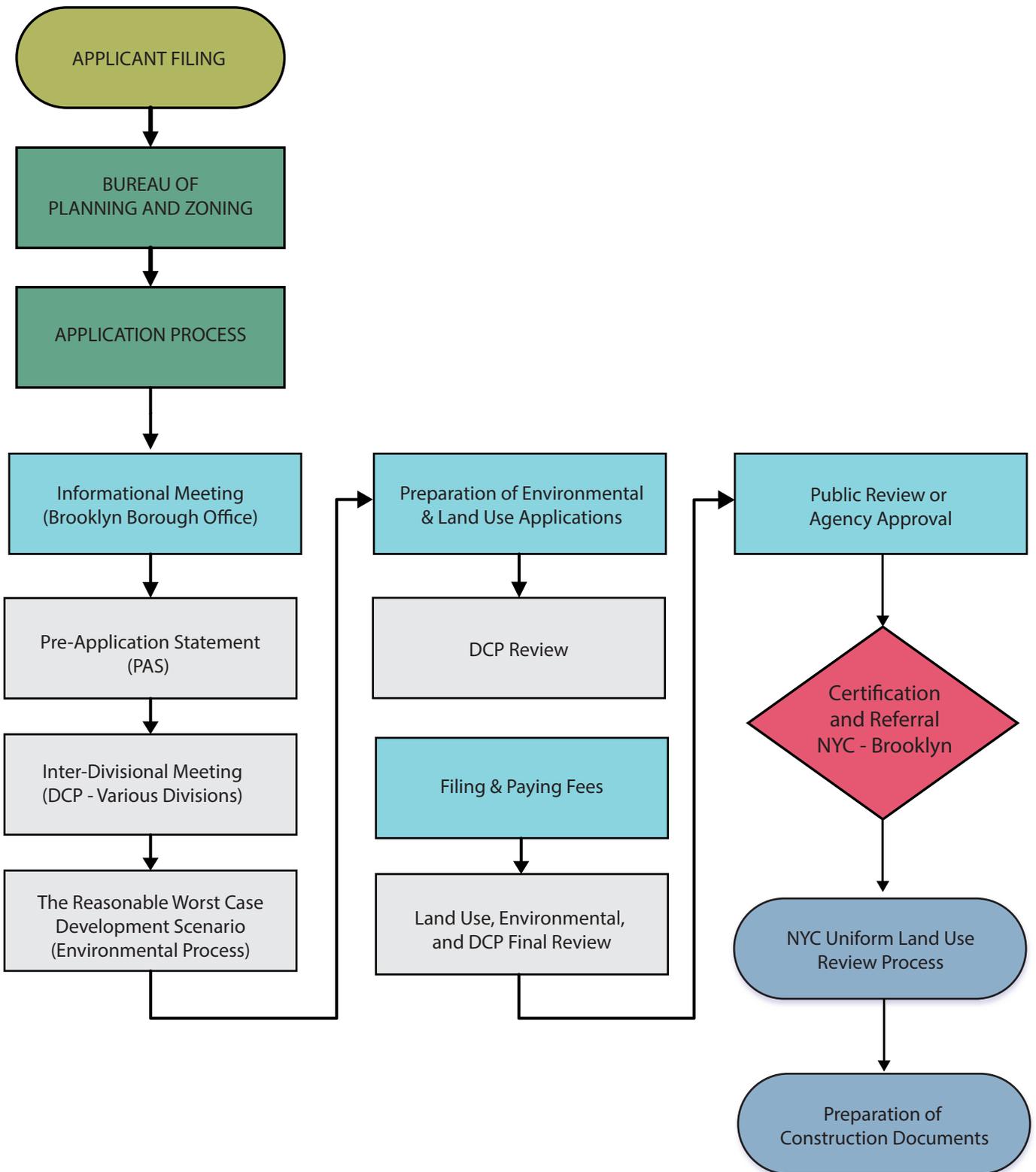


Figure A-1

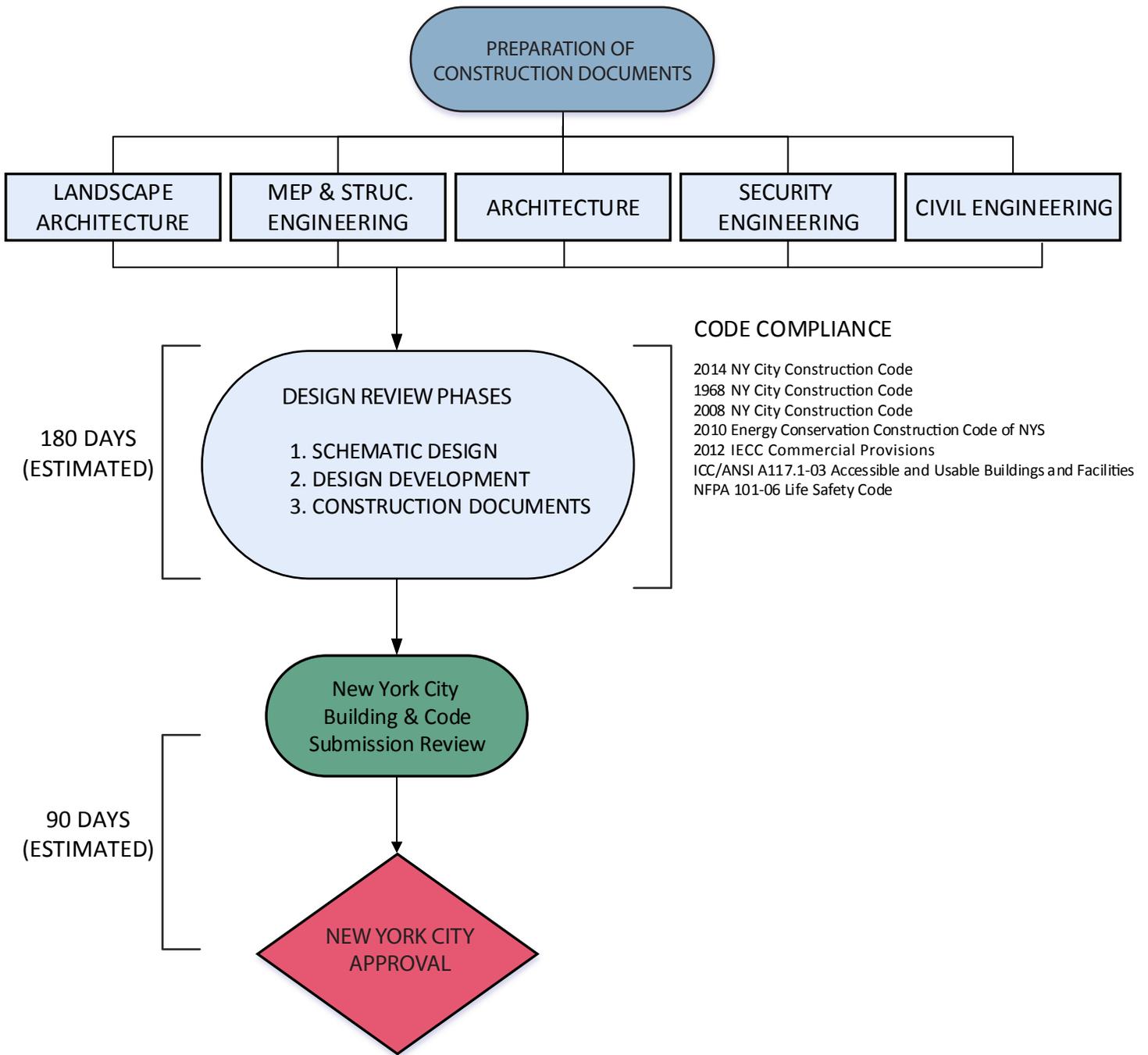
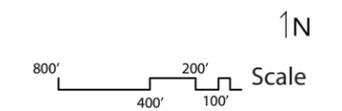
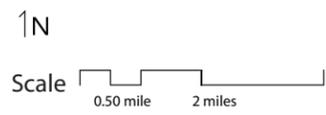
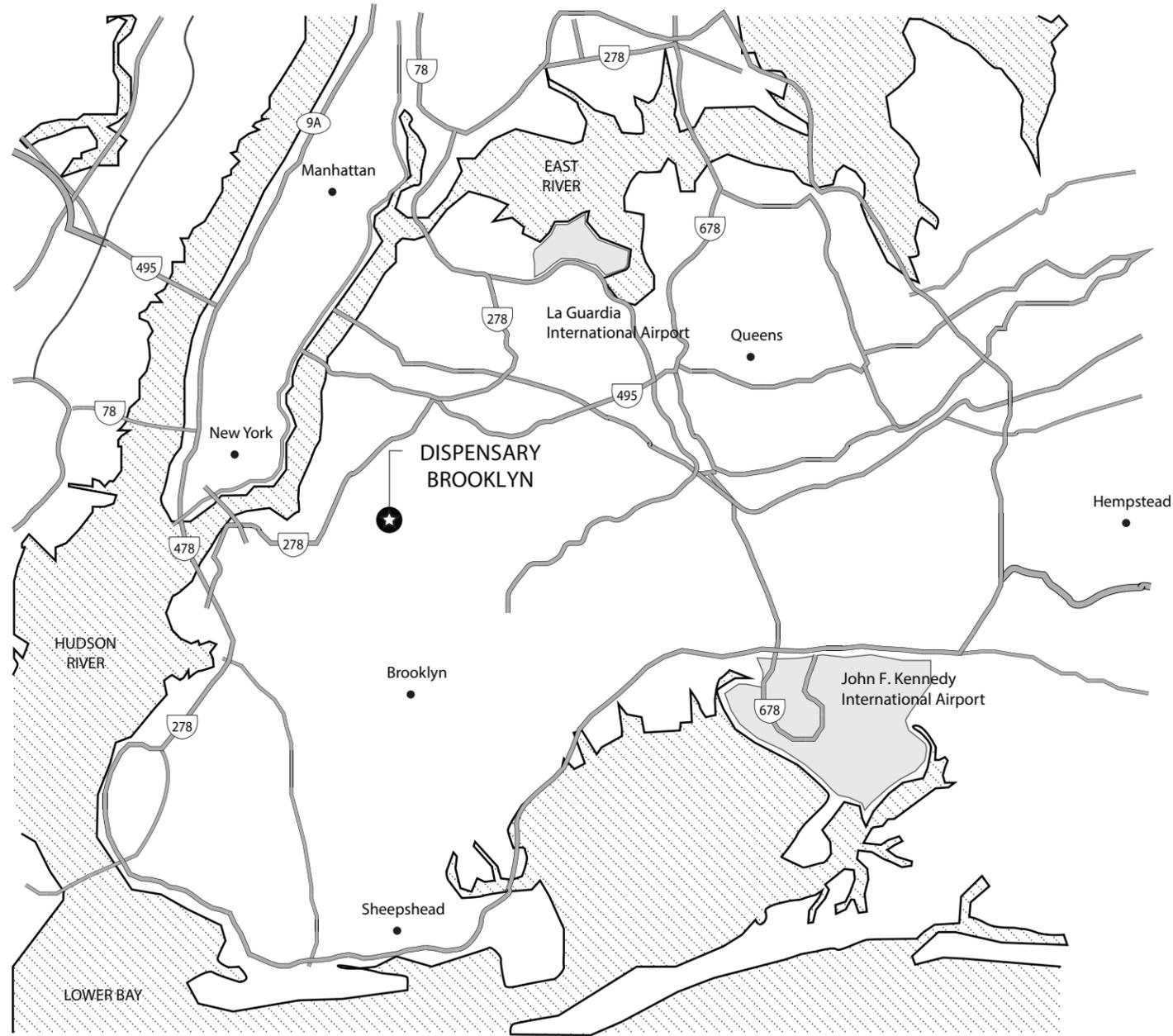


Figure A-2

REGIONAL LOCATION AREA MAP

LOCATION AREA MAP



REGIONAL LOCATION MAP KEY	LOCATION MAP KEY
Proposed Sites	Proposed Site
Railroad	Preschools (Public or Private)
Lake shore	Elementary Schools / Secondary Schools
River	Day Care Facilities
Major Highway or Expressway	Residential (Zoned exclusively for Residential Use)
Airport	



Address	
Primary address	425 Fulton St
Zip code	11201
Borough	Brooklyn
Block & lot	00150-0010
Neighborhood	
Neighborhood name	Downtown Brooklyn
Historic district	None
Community district	2
Lot	
Lot sq. ft.	3,022 SF
Lot dimensions	24.42 ft x 125 ft
Corner lot	No
Buildings on lot	1
Floor Area Ratio (FAR)	
Max far	12
FAR as built	2.01
Maximum usable floor area	36,264
Usable floor area	6,074
Building	
Building class	Diner, Franchised Type Stand (K5)
Landmark	None
Sq. ft.	6,084
Building dimensions	24.42 ft x 125 ft
Stories	2
Year built	1915
Year last altered	2010
Certificate of Occupancy	Cellar: Storage + Cellar First Floor: Restaurant Second Floor: Office
Use	
Residential units	n/a
Commercial units	1
Retail sq. ft.	6,084
Zoning	
District code	C6-4.5/DB
Property Maps	
Zoning map	16C
Tax map	30104
Sanborn map	302 022
Hazards & Environment	
Toxic site on this property	No
Neighboring toxic sites	No
E-Designation	E-124

Redacted pursuant to N.Y. Public Officers Law, Art. 6

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DISPENSARY ENLARGED PLAN



Building Information	
Construction Type	Type I-B
Sprinklers	FULLY SPRINKLERED
Building Height	Second Level: 13'-6" TOS
Building Area	2665 SF
Use and Occupancy	Group M - Mercantile
Fire Resistive Ratings	
Structural Frame	2 HR
Bearing Walls - Exterior	2 HR
Bearing Walls - Interior	1 HR
Floor Construction	2 HR
Roof Construction	1 HR
* Roof supports: Fire resistnace ratings of structural and bearing walls are permitted to be reduced by 1 HR where supporting the roof only.	

Function of Space	Area	Area Per Occupant	Occupancy Classification	Occupancy Load
Retail Dispensary	2665 SF	60 SF	Mercantile	45
Total Occupant Load				45
Sprinkler Factor				0.15
Egress width Required				7"
Total Egress Provided				72"
Total # of Exits				2

Estimate of Code required number of Plumbing Fixtures									
TABLE 403.1 MINIMUM NUMBER OF REQUIRED PLUMBING FIXTURES									
Mercantile (see Sections 403.2, 403.4, 403.4.1 and 403.4.2)	M	Retail stores, service stations, shops, salesrooms, markets and shopping centers	1 per 500	1 per 500	1 per 750	1 per 750	—	1 per 1,000	1 service sink
* Separate facilities shall not be required in mercantile occupancies in which the maximum occupant load is 50 or less.									

DOOR LEGEND	
	Main Entrance/Exit Door Width: 3'-0" Height: 6'-8" Singel Full Glass - Metal Frame 1 HR rating
	2nd Entrance/Exit Door Width: 6'-0" - (2) 3'-0" Doors Height: 6'-8" Double Flush / Metal Framing 1 HR rating
	Interior Doors Width: 3'-0" Height: 6'-8" Single Flush / Alumn. Framing 0 HR rating

LIFE SAFETY LEGEND	
	Exit Sign
	2 HR Fire Wall / BLDG Separation
	1 HR Fire Wall
	Fire Extinguisher
	5'-0" Radius
	Existing Wall
	New Wall
	10'-0" Exterior Fence
	Building Exit

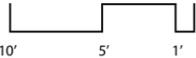
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DISPENSARY GROUND LEVEL ENTRANCE/EXIT



Scale



Appendix B: Architectural Program

A SEPARATE "APPENDIX B" SHALL BE COMPLETED FOR EACH SEPARATE BUILDING AND/OR FACILITY INCLUDED IN THE ORGANIZATION'S BUSINESS PLAN

COMPANY INFORMATION

Business Name: Palliatech
Facility Type: Manufacturing Facility [] Dispensing Facility []
Use and Occupancy Classification: Group M - Mercantile
Building Construction Type and Classification: Type IB
Facility Address: 38 South Plank Rd., Newburgh, NY 12550
Primary Contact Telephone number:
Primary Contact Fax number:

PART I - ARCHITECTURAL PROGRAM & CONSTRUCTION TIMELINE:

Applicant shall identify planning requirements, including but not limited to:

- TOWN BOARD APPROVAL [checked]
PLANNING BOARD APPROVAL [checked]
ZONING BOARD OF APPEALS APPROVAL []
PREPARATION OF CONSTRUCTION DOCUMENTS [checked]
BUILDING PERMIT [checked]
BIDDING PHASE []
CONTRACT AWARD PHASE PER EACH APPLICABLE CONTRACTOR (Identify all that apply) []
COMMENCEMENT OF CONSTRUCTION [checked]
COMPLETION OF CONSTRUCTION [checked]



Appendix B – Architectural Program

PART II – SITE PLAN(S)

Applicant shall provide the appropriate details for each of the following by identifying the location and dimension on the Site Plan attached to the application for each building location.

- Entrance and Exits
Public Parking Spaces
Staff Parking Spaces
Accessible Parking Spaces
Accessible Route(s)
Fire Lane and/or Fire Apparatus Road
Percentage of Green Space
Location of Emergency Power Systems
Loading & Unloading
Security Gates & Fences

PART III – ENERGY SOURCES & ENGINEERING SYSTEMS:

Applicant shall provide the following minimum information to outline the specifications relating to the energy sources and engineering systems of each building included in the application.

- Energy Source: Natural Gas, Oil, Electric, Solar, Other
Engineering Systems: Heating System (Furnace, 100 kBtu/h, 96 AFUE), Cooling System (DX, 4 tons, 13 SEER), Ventilation & Humidification Systems (Exhaust, 50 cfm, 70), Electrical Distribution Available, Water Supply, Sewage, Emergency Power System (Generato, 6 kW, 25%)



Appendix B – Architectural Program

PART IV – BUILDING CODE COMPLIANCE: (pages 3-13)

CHECK ALL APPLICABLE CODES FOR THE FACILITY

- 2010 BUILDING CODE OF NYS
2010 FIRE CODE OF NYS
2010 PLUMBING CODE OF NYS
2010 MECHANICAL CODE OF NYS
2010 FUEL GAS CODE OF NYS
2010 PROPERTY MAINTENANCE CODE OF NYS
2010 ENERGY CONSERVATION CONSTRUCTION CODE OF NYS
2012 IECC COMMERCIAL PROVISIONS
2010 EXISTING BUILDING CODE OF NYS
NEC NATIONAL ELECTRIC CODE, (Specify Applicable Version)
2014 NY CITY CONSTRUCTION CODE
2008 NY CITY CONSTRUCTION CODE
1968 NY CITY CONSTRUCTION CODE
NFPA 101-06 LIFE SAFETY CODE
ICC/ANSI A117.1-03 ACCESSIBLE AND USABLE BUILDINGS AND FACILITIES
OTHER



Appendix B – Architectural Program

Select Project

Type:
Check all that apply.
Refer to the Existing
Building Code for
definitions.

- New Building
- Repair
- Alteration Level 1
- Alteration Level 2

- Alteration Level 3
- Change of Occupancy
- Addition
- Historic Building

- Demolition
- Chapter 3. Prescriptive Compliance Method
- Chapter 13. Performance Compliance Method

Select Work

Involved:
Check all that apply.

- General Construction
- Roofing
- Asbestos Abatement/Environmental
- Fire Alarm

- Structural
- Mechanical
- Plumbing
- Electrical

- Site Work
- Sprinkler
- Elevators
- Other: _____

CODE COMPLIANCE REVIEW

Applicant shall provide all applicable information in regards to the code topic and section listed below.

- Code Compliance Review is based on the 2010 NY State Building Code for New Construction. If any other building code applies to the location or type of construction, provide applicable code and sections that most closely relates and references the code topic and information in the code sections listed below. Provide appropriate abbreviations for other applicable codes, such as: **FC: Fire Code, PC: Plumbing Code, MC: Mechanical Code, FGC: Fuel Gas Code, ECCC: Energy Conservation Code.**
- Provide the Required standard for each applicable code section. (i.e.: area, quantity, classification type, materials, hourly separation, etc.). If section does not apply, indicate one of the following with explanation: **NA: Not Applicable, NR: Not Required, NP: Not Permitted**
- Provide your facilities "Actual" value for each required standard as per applicable code section.

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
1	Use & Occupancy Classification	302.1 - 312	2010 NYS Building Code	Use & occupancy of this facility. Identify all applicable materials, class and quantities regarding Table 307.1.	309.1 Mercantile Group M. Mercantile Group M occupancy includes, among others buildings and	Group M - Mercantile



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
2	Combustible Storage	413	2010 NYS Building Code - 2010 Fire +	All combustible storage areas and rooms, as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	Group M, shall comply with NYS File Building Code - 1-hour fire-resistance-rated construction for combustibles +	The dispensary facility will not store hazardous materials. See building life safety plan for area and room +
3	Hazardous Materials	414	2010 NYS Building Code - 2010 Fire Code of +	All hazardous materials stored or used as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	414.2.5 Hazardous material in Group M display and storage areas and in Group S storage areas. The aggregate quantity of +	The dispensary facility will not store hazardous materials. See building life safety plan for area and room dimensions and exit +
4	Hazardous Materials Control Areas	414.2	2010 NYS Building +	Provide additional information indicating number, size, materials stored, and quantity of each material.	414.2 Control areas. Control areas shall comply with +	The dispensary facility will not store hazardous materials. +
5	Building Area & Height	501-507	2010 NYS Building Code	Provide the building area & height Provide all calculations and cite applicable code sections for increased Building Area & Heights allowed per building code(s).	TABLE 503 Allowable Height and Building Areas: Type I-B, S:11, A:UL	Type I-B, S: 1, A: 2550 SF. See Life Safety Plan for additional information.
6	Incidental Use Areas	508.2	2010 NYS Building +	Identify all Incidental Use Areas and required fire separation of occupancies on Building Plans.	TABLE 508.2 Incidental Use Areas - Not Applicable	The dispensary does not have incidental use areas +



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
7	Mixed Occupancies	508.3	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	508.3 Mixed occupancies. Each portion of a building shall be individually	The dispensary is classified as Group M - Mercantile. See life safety plan for
8	Nonseparated Uses	508.3.2	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	508.3 Mixed occupancies. Each portion of a building shall be individually	The dispensary is classified as Group M - Mercantile. The adjacent facility is classified
9	Separated Uses (Ratio < 1)	508.3.3	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	TABLE 508.3.3 - Group M - Group B : 1-HR	2 HR fire wall separates the dispensary area, please see building life safety plan for
10	Construction Classification	602	2010 NYS Building Code	Provide Construction Classification per each building included in Application.	602.2 Types I and II. Type I and II construction are those	Building Type I-B Fully Sprinklered 2-HR rating
11	Fire Resistance Rating Req'm't for Building Elements	Table 601	2010 NYS Building Code	Provide Fire Resistance Rating per each building element as per Table 601. Identify rating & elements on Building Plans.	TABLE 601 FIRE-RESISTANCE RATING REQUIREMENTS	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
12	Exterior Wall Fire-Resistance Rating	Table 602	2010 NYS Building Code	Identify required fire resistance rating of exterior walls on Building Plan(s).	FIRE-RESISTANCE RATING REQUIREMENTS FOR BUILDING	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor
13	Exterior Fire Separation Distance	Table 602	2010 NYS Building Code	Identify required fire separation distance of exterior walls between Buildings on Plan.	TABLE 602 FIRE-RESISTANCE RATING REQUIREMENTS	Rear Building = 500'-0" Side, Adjacent Buildings = 64'-0"
14	Fire Walls	705	2010 NYS Building Code	Provide code information and identify all applicable required Fire Wall(s) and fire resistance requirement on Building Plans.	Walls shall be not less than 2-hour fire-resistance rated where separating buildings	Type IB Construction - 2 HR fire wall separates the proposed dispensary area,
15	Fire Barriers	706	2010 NYS Building Code	Provide code information and identify all applicable required Fire Barrier(s) and fire resistance requirement on Building Plans.	706.3.8 Separation of mixed occupancies. Where the provisions of Section 508.3	2 HR fire wall separates the dispensary area. See building life safety plan for additional
16	Shaft Enclosures	707	2010 NYS Building Code	Provide code information and identify all applicable required Shaft Wall(s) and fire resistance requirement on Building Plans.	Not Applicable	Not Applicable
17	Fire Partitions	708	2010 NYS Building Code	Provide code information and identify all applicable required Fire Partition(s) and fire resistance requirement on Building Plans.	Separation of mixed occupancies. Where the provisions of Section 508.3	2 HR fire wall separates the dispensary area See building life safety plan for additional



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
18	Horizontal Assemblies	711	2010 NYS Building Code - <input checked="" type="checkbox"/>	Provide code information and identify all applicable required Horizontal Assemblies and fire resistance requirement on Building Plans.	The fire-resistance rating of floor and roof assemblies shall not be less than that <input checked="" type="checkbox"/>	Floor Construction 2-HR Roof Construction 1-HR 2-HR Separates <input checked="" type="checkbox"/>
19	Fire Protection: Sprinkler System	903	2010 NYS Building Code - 2010 Fire <input checked="" type="checkbox"/>	Indicate Type of Sprinkler System: <input checked="" type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13 R <input type="checkbox"/> NFPA 13D Provide code information of all applicable requirements for Automatic Sprinkler Systems with code section cited.	903.2.6 Group M. An automatic sprinkler system shall be provided throughout buildings containing a Group <input checked="" type="checkbox"/>	Fully Sprinklered per NFPA 13
20	Alt. Fire Extinguishing System	904	2010 NYS Building Code - <input checked="" type="checkbox"/>	Provide code information of all applicable requirements for Alternative Automatic Fire-Extinguishing Systems with code section(s) cited.	Automatic fire-extinguishing systems installed as an alternative to the required <input checked="" type="checkbox"/>	Not Applicable. No Alt fire extinguishing system required <input checked="" type="checkbox"/>
21	Standpipe System	905	2010 NYS Building <input checked="" type="checkbox"/>	Provide code information of all applicable requirements for Standpipe Systems with code section(s) cited.	Not Applicable	Not Applicable. No standpipe system required. <input checked="" type="checkbox"/>
22	Fire Alarm & Detection Systems	907	2010 NYS Building Code - 2010 Fire <input checked="" type="checkbox"/>	Provide code information of all applicable requirements for Fire Alarm System(s) with code section cited. Indicate Type of Fire Alarm System <input type="checkbox"/> Addressable <input type="checkbox"/> Hardwired (zoned)	Fire protection systems shall be monitored by an approved supervising station in accordance with NFPA 72 <input checked="" type="checkbox"/>	Automatic hardwired fire and smoke detector alarm system. Please see building life safety plan for additional <input checked="" type="checkbox"/>



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
23	Emergency Alarm System	908	2010 NYS Building Code +	Provide code information of all applicable requirements for Emergency Alarm Systems with code section cited.	908.1 Group H occupancies. Emergency alarms for the +	Group M - Emergency alarm system not required.
24	Fire Department Connections	912	2010 NYS Building Code +	Identify Fire Department connections in accordance with NFPA applicable standard.	912.2 Location. With respect to hydrants, driveways, +	Fire department connections are located on the street side. +
25	Exits	1001.1 & 2	2010 NYS Building Code	Identify on the Building Plans and documents, per each door, the following information: door width, door height, direction of swing, type of construction, hourly rating, and door closures.	1001.1 General. Buildings or portions thereof shall be provided with a means of +	Door width: 36" per door Door Height: 80" per door Direction of swing: +
26	Occupant Load	1004 & Table 1004.1.1	2010 NYS Building Code +	Identify the use/name of each room, dimensions of each room, and Occupant Loads per each room on the Building Plans.	TABLE 1004.1.1 MAXIMUM FLOOR AREA ALLOWANCES PER +	Area: 2550 SF / 60SF = 63 Occupancy Classification: Mercantile +
27	Egress Width	1005	2010 NYS Building Code +	Provide egress widths & cite applicable code section(s) and requirement(s) on the Building Plans	TABLE 1005.1 EGRESS WIDTH PER OCCUPANT +	Total Occupancy = 63 * 0.15 Egress width required = 9" +
28	Accessible Means of Egress	1007.1	2010 NYS Building Code	Provide accessible means of egress as per Section 1007 & cite applicable code section(s) and requirement(s) on the Building Plans.	1007.1 Accessible means of egress required. Accessible means of egress shall +	Total number of accessible means of egress: 2 - See building life safety plan for +



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
29	Doors, Gates, and Turnstiles	1008	2010 NYS Building Code	Means of egress doors shall meet the requirements of this section.	1008.1.1 Size of doors. The	Total Occupancy = 63 * 0.15
30	Interior Stairs	1009	2010 NYS Building Code	Identify the following information for each stairway on the Building Plan(s): the width of stairways; the height, width, depth and number of risers and treads; dimensions of landings; stairway construction type; and handrail height.	Not Applicable	Not Applicable
31	Ramps	1010.1	2010 NYS Building Code	Identify the following information of each ramp, on the Building Plan(s): width; total vertical rise; length of ramp; and handrail height.	Not Applicable	Not Applicable
32	Common Path of Travel	1014.3	2010 NYS Building Code	Identify on the Building Plan(s): the length of the "Common Path of Travel" per each room as per applicable building code requirements.	The exit access arrangement shall comply with Sections 1014 through	Common path of travel - Main Dispensary: 67'-0" Employee Area: 36'-0"
33	Exit Doorway Arrangement	1015	2010 NYS Building Code	Identify on the Building Plan(s): applicable building code requirements for all Exits and Exit Access Doorways per each room and required exits in all buildings.	1015.1 Exit or exit access doorways required. Two exits or exit access	Egress width required = 9" Total Egress width provided = 108"
34	Corridor Fire Rating	1017.1	2010 NYS Building Code	Identify, on the Building Plan(s): all corridors with required fire resistance and the applicable fire rating.	The corridor walls required to be fire-resistance rated	Not Applicable - No corridors provided.



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
35	Corridor Width	1017.2	2010 NYS Building Code +	Identify on the Building Plan(s): the width of all corridors. Provide applicable code section(s) and requirement(s).	1017.2 Corridor width. The minimum corridor width shall be as determined in Section +	Not Applicable - No corridors
36	Dead End Corridor	1017.3	2010 NYS Building Code +	Corridors shall not exceed the maximum dead end corridor length as per applicable code.	1017.3 Dead ends. Where more than one exit or exit access doorway is required +	Not Applicable - No dead end corridors provided.
37	Number of Exits and Continuity	1019	2010 NYS Building Code +	Identify on the Building Plan(s): required number of exits, continuity and arrangement as per the applicable code requirements.	1019.1 Minimum number of exits. All rooms and spaces within each story shall be +	OCCUPANT LOAD (persons per story) = 63 MINIMUM NUMBER OF +
38	Vertical Exit Enclosures	1020	2010 NYS Building Code +	Identify on the Building Plan(s): all applicable code requirements for each Vertical Exit Enclosure.	1020.1 Enclosures required. Interior exit stairways and interior exit ramps shall be +	Not Applicable - No vertical exit enclosures provided
39	Exit Passageways	1021	2010 NYS Building Code +	Identify on the Building Plan(s): all applicable code requirements for each Exit Passageway.	The width of exit passageways shall be determined as specified in +	Egress width required = 9" Total Egress width provided = 108" +
40	Horizontal Exits	1022	2010 NYS Building Code +	Identify on the Building Plan(s): all applicable code requirements for each Horizontal Exit.	1022.1 Horizontal exits. Horizontal exits serving as an exit in a means of egress +	Egress width required = 9" Total Egress width provided = 108" +



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
41	Exterior Exit Ramps & Stairways	1023	2010 NYS Building Code +	Identify on the Building Plan(s): all applicable code requirements for each exterior exit ramps and stairways.	Exterior exit ramps and stairways shall not be used +	Not Applicable - No ramps or stairways required to exit +
42	Exit Discharge	1024	2010 NYS Building Code +	Identify on the Building Plan(s): all applicable code requirements for each Exit Discharge.	Exits shall discharge directly to the exterior of the +	All exits discharge directly to the exterior of the building. +
43	Accessibility	1101.1 - 1110 & ICC/A117.1(03)	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements such that the design and construction of each building/facility provides accessibility to physically disabled persons.	Buildings and facilities shall be designed and constructed to be accessible in accordance with this code +	The dispensary is designed and constructed to be accessible. See life safety plans for more information. +
44	Energy Conservation	2010 NYS ECCC & IECC 2012	2010 NYS Building Code +	Identify the R-Value and U-Value of each construction component and assembly of the building envelope as required in the applicable energy and building code(s).	The commercial building project shall comply with the requirements in Sections +	The dispensary complies with the requirements of ASHRAE/IESNA 90.1 +
45	Emergency & Standby Power	2702.1	2010 NYS Building Code +	Identify emergency & Standby Power locations and specifications of the system to be provided.	2702.1 Installation. Emergency and standby power systems required by +	Emergency and standby power generators will be installed in accordance +
46	Smoke Control Systems	2702.2.2	2010 NYS Building Code +	Identify the Standby power for smoke control systems in accordance with Section 909.11 of NYS Building Code.	Not Applicable	Not Applicable



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
47	Plumbing Fixture Count	2902.1	2010 NYS Building Code	Identify on the Building Plan(s): the minimum plumbing facilities as per applicable plumbing code(s).	2901.1 Scope. The provisions of this chapter	(1) One Unisex ADA Public Restroom and (1) Unisex
48	Available Street Water Pressure		2010 NYS Building Code	Provide the available street or well water pressure.	Static Pressure: 55.8 PSI	Static Pressure: 55.8 PSI
49	Fire Apparatus Access Road	FC503.1	2010 NYS Building Code	Identify on the Site Plan: Fire Apparatus Road, Fire Lane and other Fire Service requirements per applicable Building and Fire Codes.	501.3 Construction documents. Construction documents for proposed fire	Service road and Fire Lane surrounds the facility. See Site Plan for additional

Newburgh Dispensary Facility - Medical Marijuana Program

Application for Registration as a Registered Organization

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PART IV – BUILDING CODE COMPLIANCE (pages 3-13)

CHECK ALL APPLICABLE CODES FOR THE FACILITY

- 2010 BUILDING CODE OF NYS
- 2010 FIRE CODE OF NYS
- 2010 PLUMBING CODE OF NYS
- 2010 MECHANICAL CODE OF NYS
- 2010 FUEL GAS CODE OF NYS
- 2010 ENERGY CONSERVATION CONSTRUCTION CODE OF NYS
- 2012 IECC COMMERCIAL PROVISIONS
- 2010 EXISTING BUILDING CODE OF NYS
- NFPA 101-06 LIFE SAFETY CODE
- ICC/ANSI A117.1-03 ACCESSIBLE AND USABLE BUILDINGS AND FACILITIES
- OTHER

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CODE COMPLIANCE REVIEW

Applicant shall provide all applicable information in regards to the code topic and section listed below.

Code Compliance Review is based on the 2010 NY State Building Code for New Construction. If any other building code applies to the location or type of construction, provide applicable code and sections that most closely relates and references the code topic and information in the code sections listed below. Provide appropriate abbreviations for other applicable codes, such as FC: Fire Code, PC: Plumbing Code, MC: Mechanical Code, FGC: Fuel Gas Code, ECCC: Energy Conservation Code.

2 Provide the Required standard for each applicable code section, (i.e., area, quantity, classification type, materials, hourly separation, etc.). If section does not apply, indicate one of the following with explanation: NA: Not Applicable, NR: Not Required, NP: Not Permitted

3 Provide your facilities 'Actual' value for each required standard as per applicable code section.

No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
1	Use & Occupancy Classification	302.1 - 312	2010 NYS Building Code	Use & occupancy of this facility. Identify all applicable materials, class and quantities regarding Table 307.1.	309.1 Mercantile Group M Mercantile Group M occupancy includes, among others, buildings and structures or a portion thereof, for the display and sale of merchandise, and involves stocks of goods, wares or merchandise incidental to such purposes and accessible to the public.	Group M - Mercantile

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No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
2	Combustible Storage	413	2010 NYS Building Code	All combustible storage areas and rooms, as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	Group M, shall comply with NYS Fire Building Code - 1-hour fire-resistance-rated construction for combustible storage areas and rooms.	The dispensary facility will not store hazardous materials See building life safety plan for area and room dimensions, and exit requirements
3	Hazardous Materials	414	2010 NYS Building Code	All hazardous materials stored or used as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	414.2.5 Hazardous material in Group M display and storage areas and in Group S storage areas The aggregate quantity of nonflammable solid and nonflammable or noncombustible liquid hazardous materials permitted within a single control area of a Group M display and storage area, a Group S storage area or an outdoor control area is permitted to exceed the maximum allowable quantities per control area specified in Tables 307.1(1) and 307.1(2) without classifying the building or use as a Group H occupancy, provided that the materials are displayed and stored in accordance with the Fire Code of New York State and quantities do not exceed the maximum allowable specified in Table 414.2.5(1).	The dispensary facility will not store hazardous materials See building life safety plan for area and room dimensions, and exit requirements.

4	Hazardous Materials Control Areas	414.2	2010 NYS Building Code	Provide additional information indicating number, size, materials stored, and quantity of each material.	414.2 Control areas Control areas shall comply with Sections 414.2.1 through 414.2.5 and the Fire Code of New York State.	The dispensary facility will not store hazardous materials. Referred to Palliatech's equipment list for additional information indicating the number, size, materials stored, and quantity of each material.
5	Building Area & Height	501-507	2010 NYS Building Code	Provide the building area & height Provide all calculations and cite applicable code sections for increased Building Area & Heights allowed per building code(s).	TABLE 503 Allowable Height and Building Areas. Type I-B, S-11, A.U.L.	Type I-B, S-1, A 2550 SF See Life Safety Plan for additional information
6	Incidental Use Areas	508.2	2010 NYS Building Code	Identify all Incidental Use Areas and required fire separation of occupancies on Building Plans.	TABLE 508.2 Incidental Use Areas - Not Applicable	The dispensary does not have incidental use areas within the facility See building life safety plan for additional fire separation of occupancies

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No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
7	Mixed Occupancies	508.3	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	508.3 Mixed occupancies Each portion of a building shall be individually classified in accordance with Section 302.1	The dispensary is classified as Group M - Mercantile See life safety plan for additional occupancy analysis.
8	Nonseparated Uses	508.3.2	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	508.3 Mixed occupancies. Each portion of a building shall be individually classified in accordance with Section 302.1.	The dispensary is classified as Group M - Mercantile. The adjacent facility is classified as Group B. The proposed dispensary includes a 2-HR fire wall separation. See building life safety plan for additional information
9	Separated Uses (Ratio < 1)	508.3.3	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	TABLE 508.3.3 - Group M - Group B : 1-HR	2 HR fire wall separates the dispensary area, please see building life safety plan for additional fire resistance ratings
10	Construction Classification	602	2010 NYS Building Code	Provide Construction Classification per each building included in Application.	2 HR fire wall separates the dispensary area. please see building life safety plan for additional fire resistance ratings.	Building Type I-B Fully Sprinklered 2-HR rating separation wall 2-HR Floor construction 1-HR Roof construction
11	Fire Resistance Rating Req'm't for Building Elements	Table 601	2010 NYS Building Code, 2010 NYS Fire Code	Provide Fire Resistance Rating per each building element as per Table 601. Identify rating & elements on Building Plans.	TABLE 601 FIRE-RESISTANCE RATING REQUIREMENTS FOR BUILDING ELEMENTS: Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor Construction 2-HR Roof Construction 1-HR	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor Construction 2-HR Roof Construction 1-HR

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No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
12	Exterior Wall Fire-Resistance Rating	Table 602	2010 NYS Building Code, 2010 NYS Fire Code	Identify required fire resistance rating of exterior walls on Building Plan(s).	FIRE-RESISTANCE RATING REQUIREMENTS FOR BUILDING ELEMENTS: Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor Construction 2-HR Roof Construction 1-HR	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor Construction 2-HR Roof Construction 1-HR
13	Exterior Fire Separation Distance	Table 602	2010 NYS Building Code, 2010 NYS Fire Code	Identify required fire separation distance of exterior walls between Buildings on Plan.	TABLE 602 FIRE-RESISTANCE RATING REQUIREMENTS FOR EXTERIOR WALLS BASED ON FIRE SEPARATION DISTANCE - OCCUPANCY GROUP F-1, M, S-1 FIRE SEPARATION DISTANCE = X (feet) = X > 30	Rear Building = 500'-0" Side, Adjacent Buildings = 64'-0" Front = Plank Rd > 30 See Life Safety Plans for additional information
14	Fire Walls	705	2010 NYS Building Code, 2010 NYS Fire Code	Provide code information and identify all applicable required Fire Wall(s) and fire resistance requirement on Building Plans.	Walls shall be not less than 2-hour fire-resistance rated where separating buildings of Type II or V construction.	Type IB Construction - 2 HR fire wall separates the proposed dispensary area, please see building life safety plan for additional fire resistance ratings
15	Fire Barriers	706	2010 NYS Building Code, 2010 NYS Fire Code	Provide code information and identify all applicable required Fire Barrier(s) and fire resistance requirement on Building Plans.	706.3.8 Separation of mixed occupancies. Where the provisions of Section 508.3.3 are applicable, the fire barrier separating mixed occupancies shall have a fire-resistance rating of not less than that indicated in Section 508.3.3 based on the occupancies being separated	2 HR fire wall separates the dispensary area. See building life safety plan for additional fire resistance ratings.
16	Shaft Enclosures	707	2010 NYS Building Code	Provide code information and identify all applicable required Shaft Wall(s) and fire resistance requirement on Building Plans.	Not Applicable	Not Applicable

17	Fire Partitions	708	2010 NYS Building Code, 2010 NYS Fire Code	Provide code information and identify all applicable required Fire Partition(s) and fire resistance requirement on Building Plans.	Separation of mixed occupancies Where the provisions of Section 508.3.3 are applicable, the fire barrier separating mixed occupancies shall have a fire-resistance rating of not less than that indicated in Section 508.3.3 based on the occupancies being separated	2 HR fire wall separates the dispensary area See building life safety plan for additional fire resistance ratings
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No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
18	Horizontal Assemblies	711	2010 NYS Building Code - 2010 Fire Code of New York	Provide code information and identify all applicable required Horizontal Assemblies and fire resistance requirement on Building Plans.	The fire-resistance rating of floor and roof assemblies shall not be less than that required by the building type of construction Where the floor assembly separates mixed occupancies, the assembly shall have a fire-resistance rating of not less than that required by Section 508.3.3 based on the occupancies being separated	Floor Construction 2-HR Roof Construction 1-HR 2-HR Separates occupancies See building life safety plan for additional fire resistance ratings.
19	Fire Protection: Sprinkler System	903		Indicate Type of Sprinkler System: NFPA 13 X NFPA 13 R NFPA 13D Provide code information of all applicable requirements for Automatic Sprinkler Systems with code section cited.	903.2.6 Group M. An automatic sprinkler system shall be provided throughout buildings containing a Group M occupancy where one of the following conditions exists: [F] 1. Where a Group M fire area exceeds 12,000 square feet (1115 m2), 2. Where a Group M fire area is located more than three stories above grade plane, or 3. Where the combined area of all Group M fire areas on all floors, including any mezzanines, exceeds 24,000 square feet (2230 m2)	Fully Sprinklered per NFPA 13
20	Alt. Fire Extinguishing System	904		Provide code information of all applicable requirements for Alternative Automatic Fire-Extinguishing Systems with code section(s) cited.	Automatic fire-extinguishing systems installed as an alternative to the required automatic sprinkler systems of Section 903 shall be approved by the code enforcement official Automatic fire-extinguishing systems shall not be considered alternatives for the purposes of exceptions or reductions allowed by other requirements of this code	Not Applicable. No Alt fire extinguishing system required
21	Standpipe System	905		Provide code information of all applicable requirements for Standpipe Systems with code section(s) cited.	Not Applicable	Not Applicable. No standpipe system required.
22	Fire Alarm & Detection Systems	907		Provide code information of all applicable requirements for Fire Alarm System(s) with code section cited. Indicate Type of Fire Alarm System Addressable Hardwired X (zoned)	Fire protection systems shall be monitored by an approved supervising station in accordance with NFPA 72 - 901.6.2 Fire alarm systems. Fire alarm systems required by the provisions of Section 907.2 of this code and Section 907.2 of the Fire Code of New York State shall be monitored by an approved supervising station in accordance with Section 907.14	Automatic hardwired fire and smoke detector alarm system. Please see building life safety plan for additional fire resistance ratings

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
23	Emergency Alarm System	908		Provide code information of all applicable requirements for Emergency Alarm Systems with code section cited.	908.1 Group H occupancies. Emergency alarms for the detection and notification of an emergency condition in Group H occupancies shall be provided in accordance with Section 414.7	Emergency alarm system not required.
24	Fire Department Connections	912		Identify Fire Department connections in accordance with NFPA applicable standard.	912.2 Location. With respect to hydrants, driveways, buildings and landscaping, fire department connections shall be so located that fire apparatus and hose connected to supply the system will not obstruct access to the buildings for other fire apparatus The location of fire department connections shall be approved 912.2.2 Existing buildings On existing buildings, wherever the fire department connection is not visible to approaching fire apparatus, the fire department connection shall be indicated by an approved sign mounted on the street front or on the side of the building. Such sign shall have the letters "FDC" at least 6 inches (152 mm) high and words in letters at least 2 inches (51 mm) high or an arrow to indicate the location All such signs shall be subject to the approval of the code enforcement official.	Fire department connections are located on the street side of the building, fully visible and recognizable from the street or nearest point of fire department vehicle access or as otherwise approved by the code enforcement official.

25	Exits	1001.1 & 2		Identify on the Building Plans and documents, per each door, the following information: door width, door height, direction of swing, type of construction, hourly rating, and door closures.	1001.1 General Buildings or portions thereof shall be provided with a means of egress system as required by this chapter. The provisions of this chapter shall control the design, construction and arrangement of means of egress components required to provide an approved means of egress from structures and portions thereof 1001.2 Minimum requirements It shall be unlawful to alter a building or structure in a manner that will reduce the number of exits or the capacity of the means of egress to less than required by this code. 1001.3 Maintenance Means of egress shall be maintained in accordance with the Fire Code of New York State	Door width: 36" per door Door Height: 80" per door Direction of swing: Exterior/Outward Type of Construction: Fire rated metal frame doors and Fire rated glazing doors Hourly rating: 1HR Door Closures will be provided on all exit doors See life safety plans for additional information
26	Occupant Load	1004 & Table 1004.1.1		Identify the use/name of each room, dimensions of each room, and Occupant Loads per each room on the Building Plans.	TABLE 1004.1.1 MAXIMUM FLOOR AREA ALLOWANCES PER OCCUPANT - Mercantile Areas on other floors - 60 gross	Area 2550 SF / 60SF = 63 Occupancy Classification: Mercantile Occupancy Load: 63 See life safety plans for additional information
27	Egress Width	1005		Provide egress widths & cite applicable code section(s) and requirement(s) on the Building Plans	TABLE 1005.1 EGRESS WIDTH PER OCCUPANT SERVED - WITH SPRINKLER SYSTEM = 0.15	Total Occupancy = 63 * 0.15 Egress width required = 9" Total Egress width provided = 108" Number of exits: 2
28	Accessible Means of Egress	1007.1		Provide accessible means of egress as per Section 1007 & cite applicable code section(s) and requirement(s) on the Building Plans.	1007.1 Accessible means of egress required Accessible means of egress shall comply with this section. Accessible spaces shall be provided with not less than one accessible means of egress Where more than one means of egress is required by Section 1015.1 or 1019.1 from any accessible space, each accessible portion of the space shall be served by not less than two accessible means of egress	Total number of accessible means of egress: 2 - See building life safety plan for additional Accessible Means of Egress.

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
29	Doors, Gates, and Turnstiles	1008		Means of egress doors shall meet the requirements of this section.	1008.1.1 Size of doors The minimum width of each door opening shall be sufficient for the occupant load thereof and shall provide a clear width of not less than 32 inches (813 mm). Clear openings of doorways with swinging doors shall be measured between the face of the door and the stop, with the door open 90 degrees (1.57 rad). Where this section requires a minimum clear width of 32 inches (813 mm) and a door opening includes two door leaves without a mullion, one leaf shall provide a clear opening width of 32 inches (813 mm). The maximum width of a swinging door leaf shall be 48 inches (1219 mm) nominal. Means of egress doors in a Group I-2 occupancy used for the movement of beds shall provide a clear width not less than 41.5 inches (1054 mm). The height of doors shall not be less than 80 inches (2032 mm). 1008.2 Gates Gates serving the means of egress system shall comply with the requirements of this section. Gates used as a component in a means of egress shall conform to the applicable requirements for doors.	Total Occupancy = 63 * 0.15 Egress width required = 9" Total Egress width provided = 108" Number of exits: 2 Please see building life safety plan for additional information on doors and gates
30	Interior Stairs	1009		Identify the following information for each stairway on the Building Plan(s): the width of stairways; the height, width, depth and number of risers and treads; dimensions of landings; stairway construction type; and handrail height.	Not Applicable	Not Applicable
31	Ramps	1010.1		Identify the following information of each ramp, on the Building Plan(s): width; total vertical rise; length of ramp; and handrail height.	Not Applicable	Not Applicable
32	Common Path of Travel	1014.3		Identify on the Building Plan(s): the length of the "Common Path of Travel" per each room as per applicable building code requirements.	The exit access arrangement shall comply with Sections 1014 through 1017 and the applicable provisions of Sections 1003 through 1013	Common path of travel - Main Dispensary: 67'-0" Employee Area: 36'-0"

33	Exit Doorway Arrangement	1015		Identify on the Building Plan(s): applicable building code requirements for all Exits and Exit Access Doorways per each room and required exits in all buildings.	1015.1 Exit or exit access doorways required. Two exits or exit access doorways from any space shall be provided where one of the following conditions exists. 1 The occupant load of the space exceeds the values in Table 1015.1 2 The common path of egress travel exceeds the limitations of Section 1014.3 3 Where required by Sections 1015.3, 1015.4 and 1015.5.	Egress width required = 9" Total Egress width provided = 108" Number of exits = 2 See building life safety plan for additional Accessible Means of Egress
34	Corridor Fire Rating	1017.1		Identify, on the Building Plan(s): all corridors with required fire resistance and the applicable fire rating.	The corridor walls required to be fire-resistance rated shall comply with Section 708 for fire partitions. Occupancy: M Occupant Load served by corridor: Greater than 30 Required Fire - Resistance Rating (hrs): 1-HR without sprinkler system	Not Applicable - No corridors provided

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* (Allowed Code Value)	Facility's Actual Value*
35	Corridor Width	1017.2		Identify on the Building Plan(s): the width of all corridors. Provide applicable code section(s) and requirement(s).	1017.2 Corridor width. The minimum corridor width shall be as determined in Section 1005.1, but not less than 44 inches (1118 mm).	Not Applicable - No corridors
36	Dead End Corridor	1017.3		Corridors shall not exceed the maximum dead end corridor length as per applicable code.	1017.3 Dead ends. Where more than one exit or exit access doorway is required, the exit access shall be arranged such that there are no dead ends in corridors more than 20 feet (6096 mm) in length.	Not Applicable - No dead end corridors provided
37	Number of Exits and Continuity	1019		Identify on the Building Plan(s): required number of exits, continuity and arrangement as per the applicable code requirements.	1019.1 Minimum number of exits. All rooms and spaces within each story shall be provided with and have access to the minimum number of approved independent exits required by Table 1019.1 based on the occupant load of the story, except as modified in Section 1015.1 or 1019.2. For the purposes of this chapter, occupied roofs shall be provided with exits as required for stories. The required number of exits from any story, basement or individual space shall be maintained until arrival at grade or the public way. - OCCUPANT LOAD (persons per story) = 1/500 MINIMUM NUMBER OF EXITS (per story) = 2	OCCUPANT LOAD (persons per story) = 63 MINIMUM NUMBER OF EXITS (per story) = 2
38	Vertical Exit Enclosures	1020		Identify on the Building Plan(s): all applicable code requirements for each Vertical Exit Enclosure.	1020.1 Enclosures required. Interior exit stairways and interior exit ramps shall be enclosed with fire barriers constructed in accordance with Section 706 or horizontal assemblies constructed in accordance with Section 711, or both. Exit enclosures shall have a fire-resistance rating of not less than 2 hours where connecting four stories or more and not less than 1 hour where connecting less than four stories. The number of stories connected by the exit enclosure shall include any basements but not any mezzanines. An exit enclosure shall not be used for any purpose other than means of egress.	Not Applicable - No vertical exit enclosures provided
39	Exit Passageways	1021		Identify on the Building Plan(s): all applicable code requirements for each Exit Passageway.	The width of exit passageways shall be determined as specified in Section 1005.1 but such width shall not be less than 44 inches (1118 mm), except that exit passageways serving an occupant load of less than 50 shall not be less than 36 inches (914 mm) in width. The required width of exit passageways shall be unobstructed.	Egress width required = 9" Total Egress width provided = 108" Number of exits = 2 See building life safety plan for additional information on Exit Passageways
40	Horizontal Exits	1022		Identify on the Building Plan(s): all applicable code requirements for each Horizontal Exit.	1022.1 Horizontal exits. Horizontal exits serving as an exit in a means of egress system shall comply with the requirements of this section. A horizontal exit shall not serve as the only exit from a portion of a building, and where two or more exits are required, not more than one-half of the total number of exits or total exit width shall be horizontal exits.	Egress width required = 9" Total Egress width provided = 108" Number of exits = 2 - See building life safety plan for additional information

Appendix B – Architectural Program

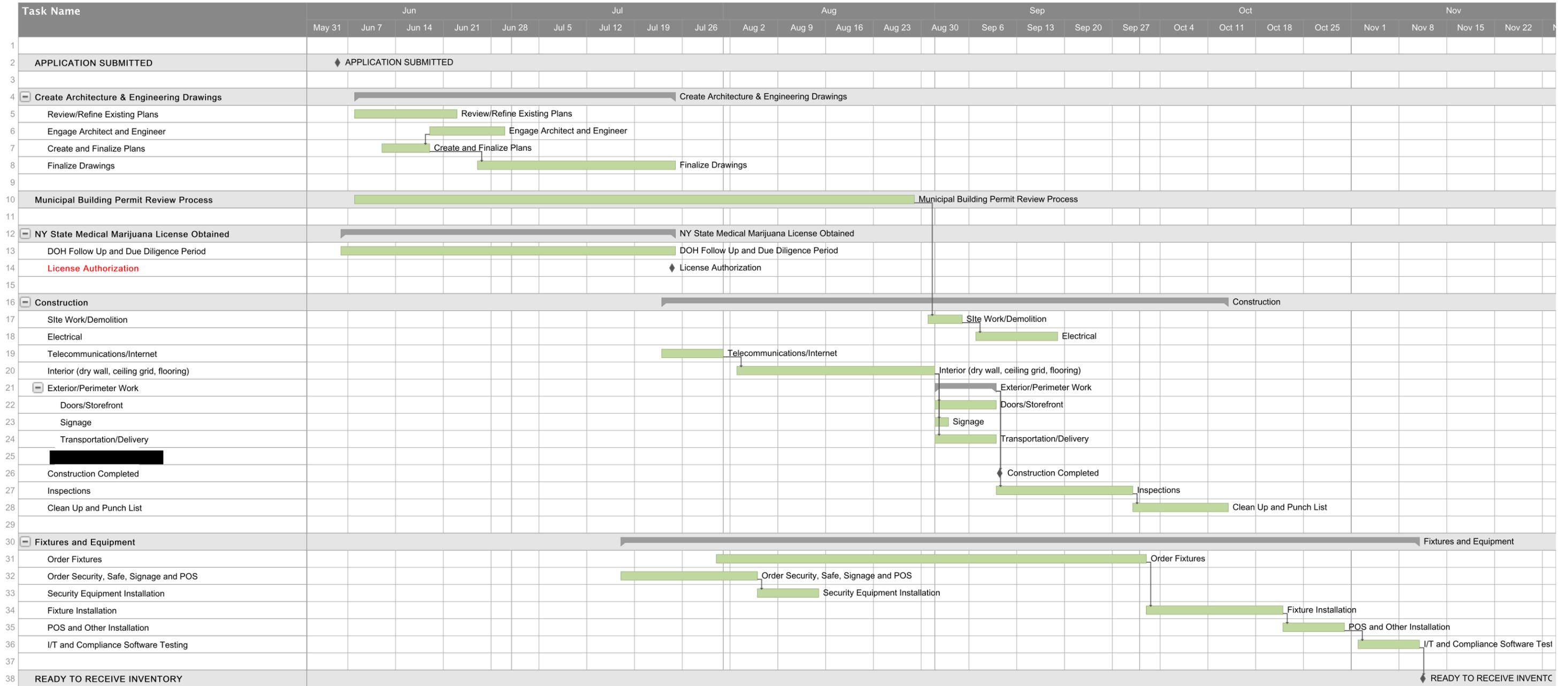
No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* (Allowed Code Value)	Facility's Actual Value*
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41	Exterior Exit Ramps & Stairways	1023		Identify on the Building Plan(s): all applicable code requirements for each exterior exit ramps and stairways.	Exterior exit ramps and stairways shall not be used as an element of a required means of egress for Group I-2 occupancies. For occupancies in other than Group I-2, exterior exit ramps and stairways shall be permitted as an element of a required means of egress for buildings not exceeding six stories above grade plane or having occupied floors more than 75 feet (22 860 mm) above the lowest level of fire department vehicle access	Not Applicable - No ramps or stairways required to exit building
42	Exit Discharge	1024		Identify on the Building Plan(s): all applicable code requirements for each Exit Discharge.	Exits shall discharge directly to the exterior of the building. The exit discharge shall be at grade or shall provide direct access to grade. The exit discharge shall not reenter a building	All exits discharge directly to the exterior of the building. See life safety plans for additional information.
43	Accessibility	1101.1 - 1110 & ICC/A117.1(03)		Identify on the Building Plan(s): all applicable code requirements such that the design and construction of each building/facility provides accessibility to physically disabled persons.	Buildings and facilities shall be designed and constructed to be accessible in accordance with this code and ICC/ANSI A117.1	The dispensary is designed and constructed to be accessible. See life safety plans for more information.
44	Energy Conservation	2010 NYS ECCC & IECC 2012		Identify the R-Value and U-Value of each construction component and assembly of the building envelope as required in the applicable energy and building code(s).	The commercial building project shall comply with the requirements in Sections 502 (Building envelope requirements), 503 (Building mechanical systems), 504 (Service water heating) and 505 (Electrical power and lighting systems) in its entirety. As an alternative the commercial building project shall comply with the requirements of ASHRAE/IESNA 90.1 in its entirety Commercial buildings shall comply with one of the following 1 The requirements of ANSI/ASHRAE/IESNA 90.1. 2 The requirements of Sections C402, C403, C404 and C405. In addition, commercial buildings shall comply with either Section C406.2, C406.3 or C406.4 3 The requirements of Section C407, C402.4, C403.2, C404, C405.2, C405.3, C405.4, C405.6 and C405.7. The building energy cost shall be equal to or less than 85 percent of the standard reference design building.	The dispensary complies with the requirements of ASHRAE/IESNA 90.1 CLIMATE ZONES All other Group R Roofs Insulation entirely above deck U-0.048U-0.048 Metal buildings U-0.055U-0.055 Attic and other U-0.027U-0.027 Walls, Above Grade Mass U-0.090U-0.080 Metal building U-0.069U-0.069 Metal framed U-0.064U-0.064 Wood framed and other U-0.064U-0.051 Below-Grade Walls a Below-grade walls a C-0.119C-0.119 Floors Mass U-0.074U-0.064 Joist/Framing U-0.033U-0.033 Slab-on-Grade Floors Unheated slabs F-0.730F-0.540 Heated slabs F-0.860F-0.860
45	Emergency & Standby Power	2702.1		Identify emergency & Standby Power locations and specifications of the system to be provided.	2702.1 Installation. Emergency and standby power systems required by this code or the Fire Code of New York State shall be installed in accordance with this code, NFPA 110 and 111	Emergency and standby power generators will be installed in accordance section 2701.1 and with the security engineering requirements. See life safety plans for additional information.
46	Smoke Control Systems	2702.2.2		Identify the Standby power for smoke control systems in accordance with Section 909.11 of NYS Building Code.	Not Applicable	Not Applicable

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
47	Plumbing Fixture Count	2902.1		Identify on the Building Plan(s): the minimum plumbing facilities as per applicable plumbing code(s).	2901.1 Scope. The provisions of this chapter and the Plumbing Code of New York State shall govern the erection, installation, alteration, repairs, relocation, replacement, addition to, use or maintenance of plumbing equipment and systems. Plumbing systems and equipment shall be constructed, installed and maintained in accordance with the Plumbing Code of New York State.	(1) One Unisex ADA Public Restroom and (1) Unisex ADA Employee Restroom provided. See building plans Separate facilities shall not be required in mercantile occupancies in which the maximum occupant load is 50 or less.
48	Available Street Water Pressure			Provide the available street or well water pressure.	Static Pressure: 55.8 PSI	Static Pressure 55.8 PSI
49	Fire Apparatus Access Road	FC503.1		Identify on the Site Plan: Fire Apparatus Road, Fire Lane and other Fire Service requirements per applicable Building and Fire Codes.	501.3 Construction documents. Construction documents for proposed fire apparatus access, location of fire lanes and construction documents and hydraulic calculations for fire hydrant systems shall be submitted to the fire department for review and approval prior to construction.	Service road and Fire Lane surrounds the facility. See Site Plan for additional information

38 SOUTH PLANK ROAD: CONSTRUCTION TIMELINE





Dispensary - Newburgh, New York : LEED v4 Rating System BD+C: Retail

What is LEED?

LEED is the most recognized international certification for green buildings and was developed in the United States by the U.S. Green Building Council.

The United States Green Building Council (USGBC) is a non-profit organization that promotes sustainability and energy efficiency in the design, construction and operation of buildings.

Benefits of LEED

Owners that opt for LEED certification improve their image and competitiveness in the market. The reduced environmental impact of building activities results in improvements for generations of occupants.

- 15% to 30% Reduction in energy consumption
- 20% to 40% reduction in water consumption
- 10% to 30% Reduction in operation costs

Project Overview

The reuse and upgrading of the existing structure into an active dispensary facility will bring renewed aesthetic appeal, activity and energy to the property and the neighborhood. New signage, low-maintenance native landscaping and improved site lighting will dramatically enhance the character of the existing property and help differentiate the dispensary from the many commercial constructions along the avenue.

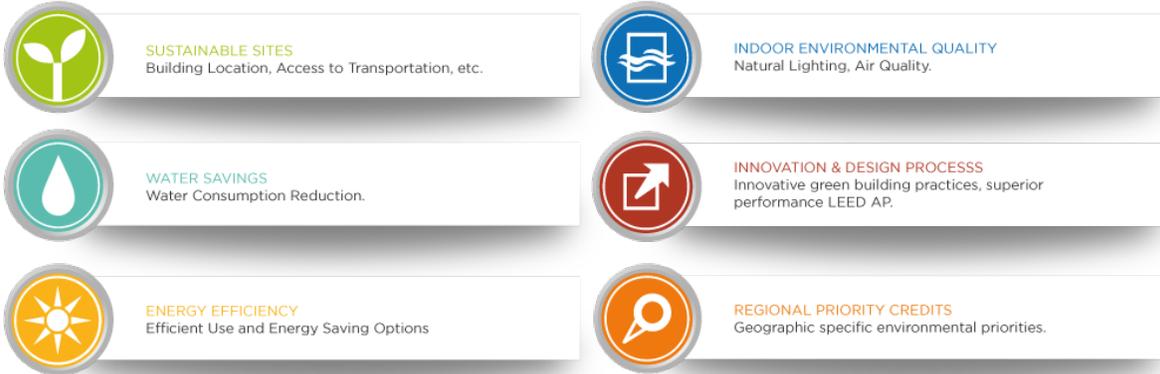
The facility will be renovated to meet or exceed all construction regulations and standards with a priority on environmental sustainability, including such features as the use of repurposed, sustainable building materials including stone, wood and metal, and re-landscaping with natural, locally indigenous plants and materials requiring minimal water and maintenance.

The re-use of this existing facility will promote the design and construction of a high performance environment pertaining to the overall sustainable goals. It will also ensure a responsible, profitable, and healthy place to work.

Upon completion of the Newburgh, New York dispensary and installation of all "green" features, the Company intends to seek LEED (Leadership in Energy and Environmental Design) certification through the LEED BD + C (Retail), based on responsible practices in water use, conservation, building materials, energy efficiency, indoor air quality, emission control, landscaping and design.

sumac

LEED Categories



BD + C : Retail

LEED BD+C: Retail is designed for interior spaces that will be used to conduct retail sale of consumer product goods, including both direct customer service areas (showroom) and preparation or storage areas that support customer service.

Sustainability Goals

ENERGY

- Maximize energy efficiency.
- Minimize energy demand and emissions.
- Increase reliability on renewably energy sources.

WASTE REDUCTION

- Packaging
- Maximize the re-use of waste products as a resource

CLEAN AND SECURE WORK ENVIRONMENT

- Efficient space planning.
- Effective ventilation system and sanitation procedures.
- Comprehensive security system coverage.
- Visibility control
- Restricted access.



RE: Build Out Timeline - Dispensary - NEWBURGH (Orange County)

DISPENSARY LOCATION: 38 South Plank Road, Newburgh, NY 12550-3927

PROPOSED PROJECT BUILD-OUT TIMELINE

Milestone	Timeframe
1. Authorization of License(s)	July, 2015
2. Architecture and Engineering Technical Drawings	August – September, 2015
3. Local Municipal Review Process* (* Tenant Build-out Only)	September, 2015
4. Construction Start	October, 2015
5. Construction Completion	December, 2016
6. Equipment Installation & Move-in	January, 2016

The above schedule is for preliminary review only, actual times may vary based on final design and construction scope and municipal review process.

Ronald Dean AIA, CSI, LEED AP BC+C
Vice President
Sumac Inc.
New York Licensed Architect #037858

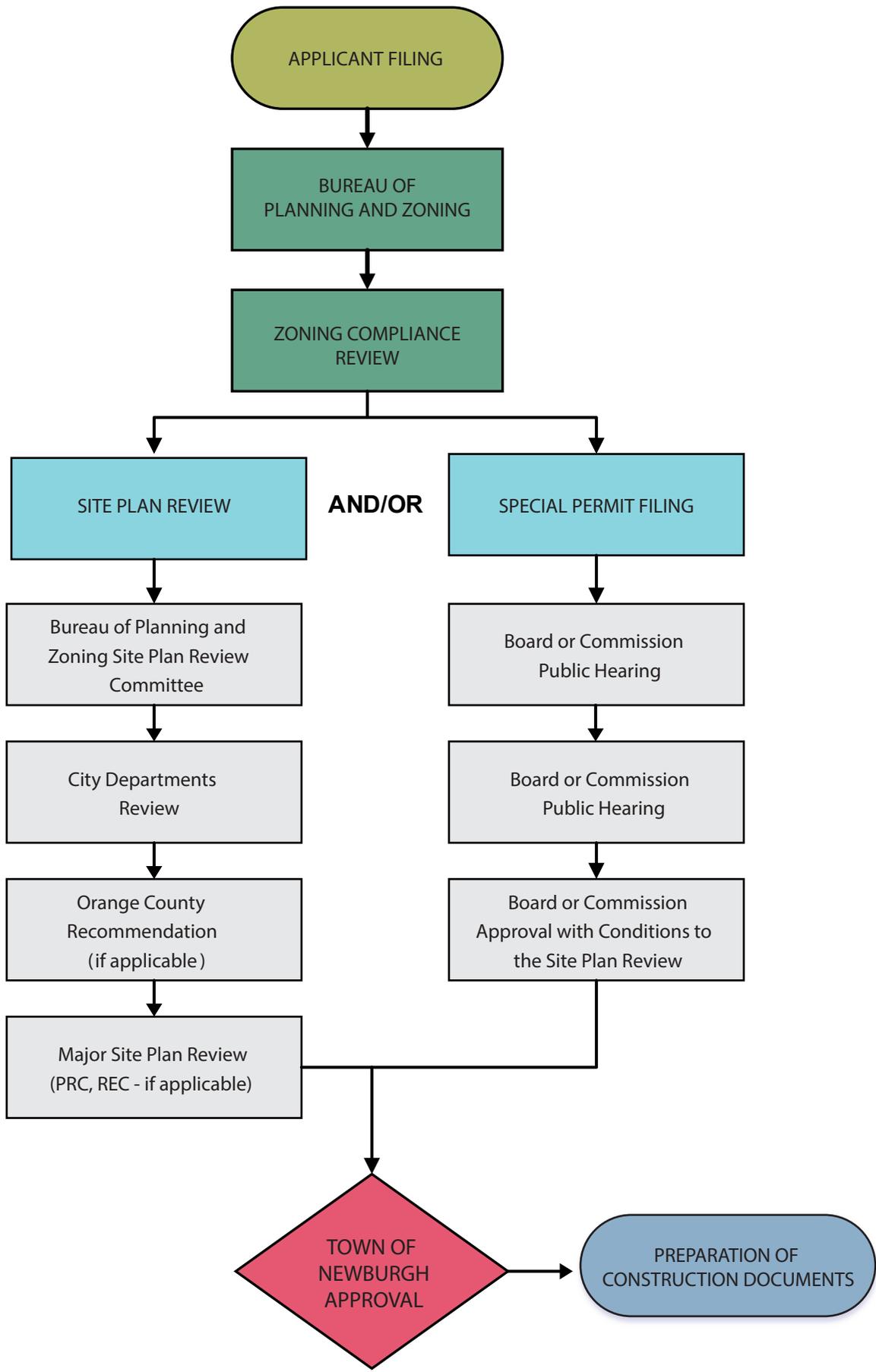


Figure A-1

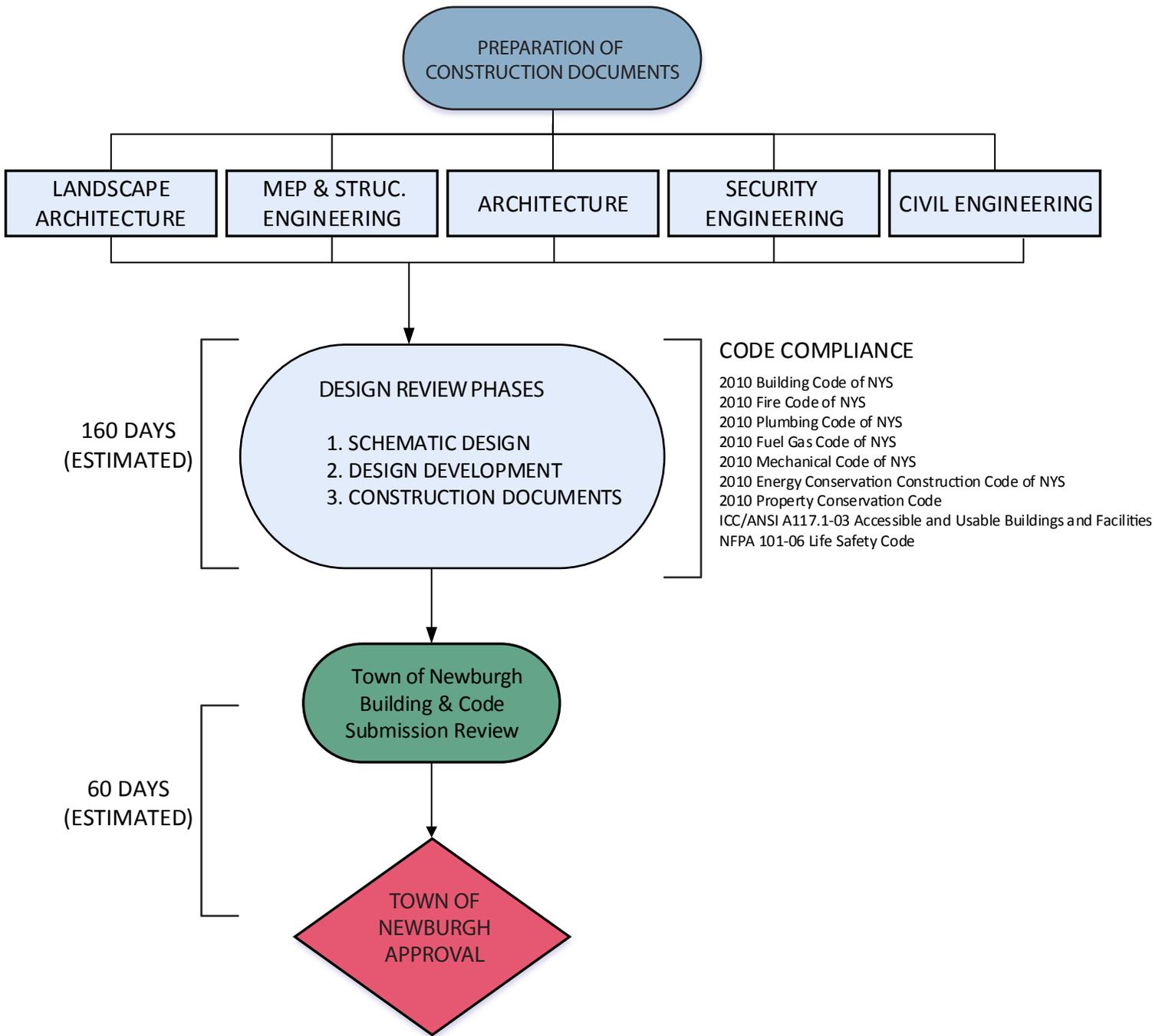
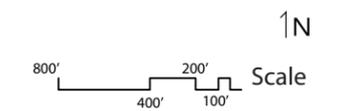
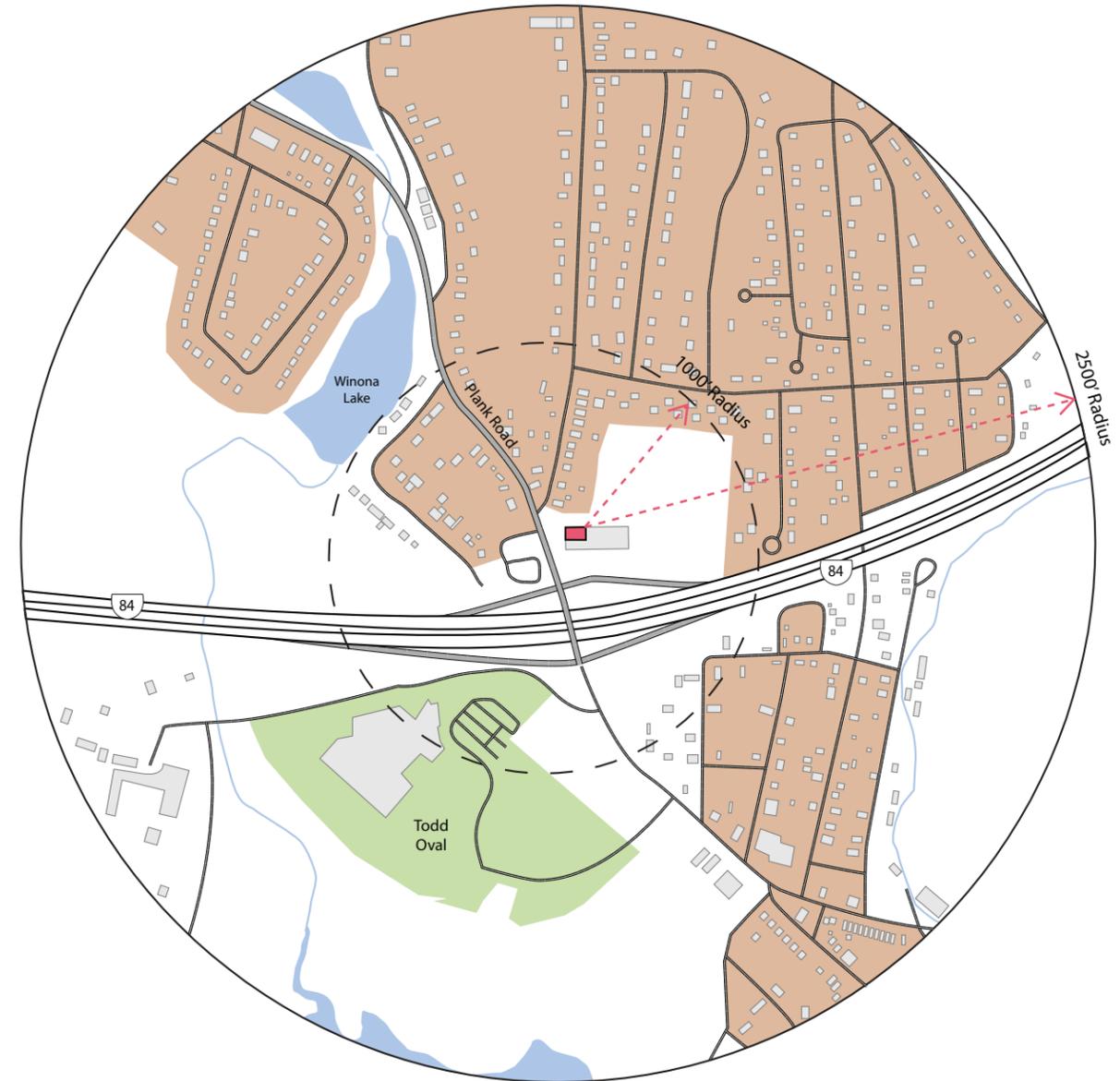


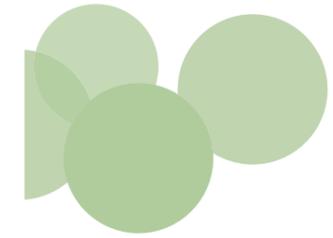
Figure A-2

REGIONAL LOCATION AREA MAP

LOCATION AREA MAP



REGIONAL LOCATION MAP KEY	LOCATION MAP KEY
Proposed Sites	Proposed Site
Railroad	Preschools (Public or Private)
Lake shore	Elementary Schools / Secondary Schools
River	Day Care Facilities
Major Highway or Expressway	Residential (Zoned exclusively for Residential Use)
Airport	



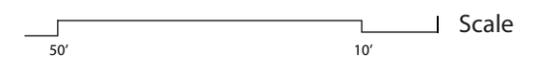
LEGEND	
	Dispensary
	Emergency Power Systems
	10'-0" Exterior Fence
	Building Entrance / Exit

SITE INFORMATION	
Address	38 South Plank Rd. Newburgh, NY 12550
County District	Orange County - Town of Newburgh
Property Class	710 Manufacture
Zoning District	B, Business
Site	COM 1
Neighborhood	40803
Total Acreage/Size	3.7
Building Area	2550 SF



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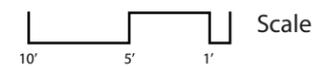
DISPENSARY SITE PLAN



Scale

/ 38 South Plank Rd., Newburgh, NY 12550

DISPENSARY ENLARGED PLAN



Building Information										
Construction Type	Type I B									
Sprinklers	Fully Sprinklered									
Building Height	One Story 12' - 0" to top of roof									
Building Area	2550 SF									
Use and Occupancy	Group M Mercantile									
Fire Resistive Ratings										
Structural Frame	2 HR									
Bearing Walls - Exterior	2 HR									
Floor Construction	2 HR									
Roof Construction	1 HR									
* Roof supports: Fire resistance ratings of structural and bearing walls are permitted to be reduced by 1 HR where supporting the roof only.										
Egress Occupancy Loads										
Room Name	Area	Area Per Occupant	Occupancy Classification	Occupancy Load						
Customer/Patient Area										
Main dispensary	630 SF	100 SF	Business areas	7						
Consultation	140 SF	100 SF	Business areas	2						
Waiting Areas	520 SF	15 SF	Assembly							
			without fixed seats	35						
Total Customer/Patient Area Occupant Load				44						
Employee Area										
Vault	245 SF	300 SF	Storage	1						
Break Room	230 SF	15 SF	Assembly							
			without fixed seats	15						
Elec. / IT	60 SF	300 SF	Accessory storage area	1						
Office	160 SF	100 SF	Business areas	2						
Total Employee Area Occupant Load				19						
Total Occupant Load				63						
				* 0.15						
Egress width Required				9"						
Total Egress Provided				108"						
Total # of Exits				2						
Estimate of Code required number of Plumbing Fixtures										
TABLE 403.1 MINIMUM NUMBER OF REQUIRED PLUMBING FIXTURES										
6	Mercantile (see Sections 403.2, 403.4, 403.4.1 and 403.4.2)	M	Retail stores, service stations, shops, salesrooms, markets and shopping centers	1 per 500	1 per 500	1 per 750	1 per 750	—	1 per 1,000	1 service sink
* Separate facilities shall not be required in mercantile occupancies in which the maximum occupant load is 50 or less.										

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DISPENSARY LIFE SAFETY PLAN



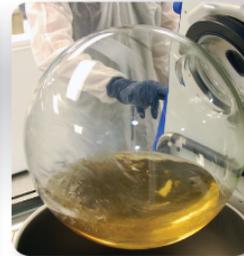


PALLIATECH™

ReliefCenters™



PART III ENERGY SOURCES AND ENGINEERING SYSTEMS



Appendix B – Dispensary #2
Part III – Energy Sources and Engineering Systems

Newburgh Dispensary

Part III – Energy Sources & Engineering Systems (Outline and Specifications):

Energy Source:

- Natural Gas

Engineering Systems:

- Heating System: Type: Furnace
 Size: 100 kBtu/h
 Efficiency: 96 AFUE
 Ventilation Requirements: ASHRAE 62.1
- Cooling System: Type: DX
 Size: 4 Tons
 Efficiency: 13 SEER
 Ventilation Requirements: ASHRAE 62.1
- Ventilation & Humidification System: Type: Exhaust
 Size: 50 CFM
 Efficiency: 70
 Ventilation Requirements: ASHRAE 62.1

Water Supply:

- Municipal Water Service (Town of Newburgh/Orange County)

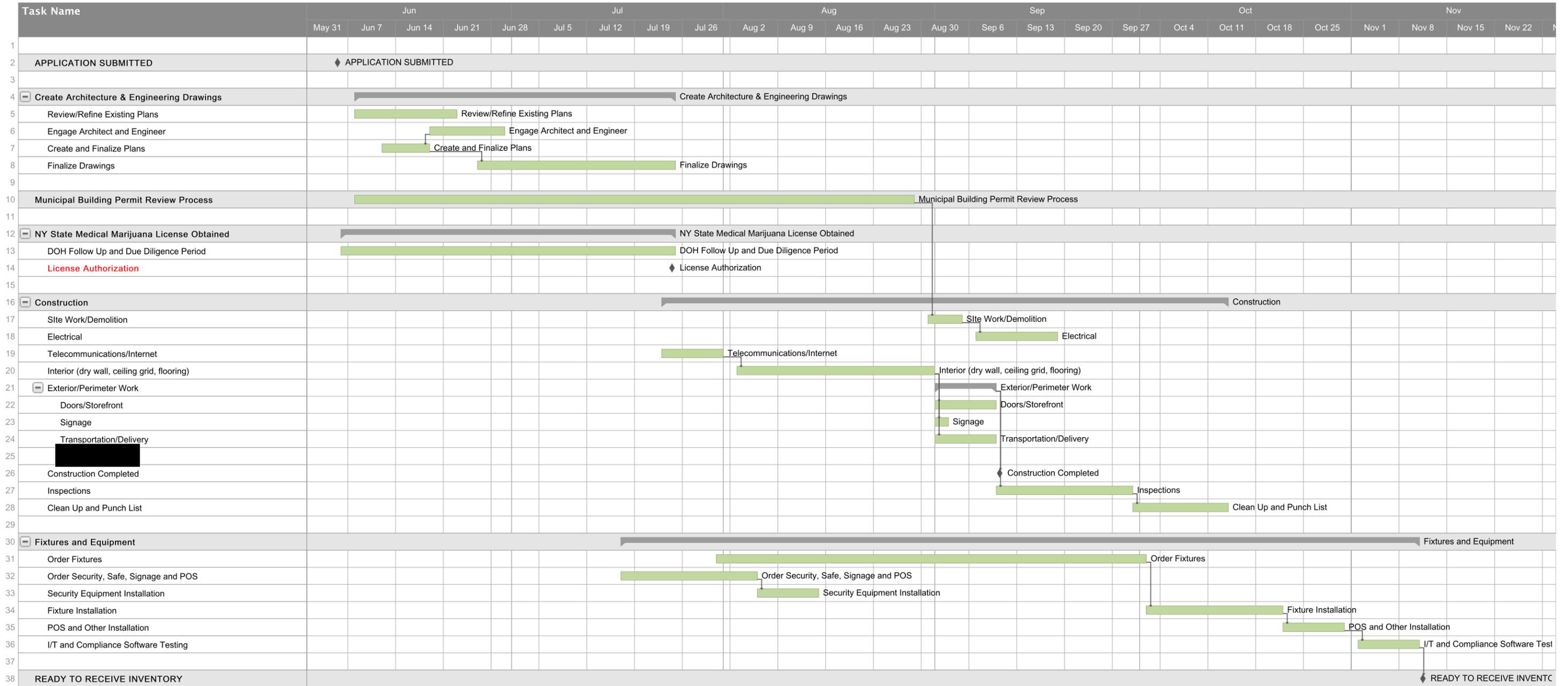
Sewage:

- Municipal Water Service (Town of Newburgh/Orange County)

Emergency Power System:

Type: Generator
Size: 6 kW
Efficiency: 25%

38 SOUTH PLANK ROAD: CONSTRUCTION TIMELINE





Appendix B: Architectural Program

A SEPARATE "APPENDIX B" SHALL BE COMPLETED FOR EACH SEPARATE BUILDING AND/OR FACILITY INCLUDED IN THE ORGANIZATION'S BUSINESS PLAN

COMPANY INFORMATION

Business Name: Palliatech
Facility Type: Manufacturing Facility [] Dispensing Facility []
Use and Occupancy Classification: Group M - Mercantile
Building Construction Type and Classification: Type V-B
Facility Address: 215 Alexander Street, Rochester, NY 14607
Primary Contact Telephone number:
Primary Contact Fax number:

PART I - ARCHITECTURAL PROGRAM & CONSTRUCTION TIMELINE:

Applicant shall identify planning requirements, including but not limited to:

- Checklist of construction requirements: TOWN BOARD APPROVAL, PLANNING BOARD APPROVAL, ZONING BOARD OF APPEALS APPROVAL, PREPARATION OF CONSTRUCTION DOCUMENTS, BUILDING PERMIT, BIDDING PHASE, CONTRACT AWARD PHASE PER EACH APPLICABLE CONTRACTOR (Identify all that apply), COMMENCEMENT OF CONSTRUCTION, COMPLETION OF CONSTRUCTION.



Appendix B – Architectural Program

PART II – SITE PLAN(S)

Applicant shall provide the appropriate details for each of the following by identifying the location and dimension on the Site Plan attached to the application for each building location.

- Entrance and Exits
Public Parking Spaces
Staff Parking Spaces
Accessible Parking Spaces
Accessible Route(s)
Fire Lane and/or Fire Apparatus Road
Percentage of Green Space
Location of Emergency Power Systems
Loading & Unloading
Security Gates & Fences

PART III – ENERGY SOURCES & ENGINEERING SYSTEMS:

Applicant shall provide the following minimum information to outline the specifications relating to the energy sources and engineering systems of each building included in the application.

Energy Source:

- Natural Gas
Solar
Oil
Other
Electric

Engineering Systems:

- Heating System: Type Furnace, Size 60 KBTU/h, Efficiency 96 AFUE, Ventilation Requirements ASHRAE 62.1
Cooling System: Type DX, Size 3 tons, Efficiency 13 SEER, Ventilation Requirements ASHRAE 62.1
Ventilation & Humidification Systems: Type Exhaust, Size 100 cfm, Efficiency 70, Ventilation Requirements ASHRAE 62.1
Electrical Distribution Available
Water Supply: Municipal Water Service X or Private Well Water
Sewage: Municipal Sewer System X or Private Septic System
Emergency Power System: Type Generator, Size 5 kW, Efficiency 25%



Appendix B – Architectural Program

PART IV – BUILDING CODE COMPLIANCE: (pages 3-13)

CHECK ALL APPLICABLE CODES FOR THE FACILITY

- 2010 BUILDING CODE OF NYS
2010 FIRE CODE OF NYS
2010 PLUMBING CODE OF NYS
2010 MECHANICAL CODE OF NYS
2010 FUEL GAS CODE OF NYS
2010 PROPERTY MAINTENANCE CODE OF NYS
2010 ENERGY CONSERVATION CONSTRUCTION CODE OF NYS
2012 IECC COMMERCIAL PROVISIONS
2010 EXISTING BUILDING CODE OF NYS
NEC NATIONAL ELECTRIC CODE, (Specify Applicable Version)
2014 NY CITY CONSTRUCTION CODE
2008 NY CITY CONSTRUCTION CODE
1968 NY CITY CONSTRUCTION CODE
NFPA 101-06 LIFE SAFETY CODE
ICC/ANSI A117.1-03 ACCESSIBLE AND USABLE BUILDINGS AND FACILITIES
OTHER



Appendix B – Architectural Program

Select Project

Type:
Check all that apply.
Refer to the Existing
Building Code for
definitions.

- New Building
- Repair
- Alteration Level 1
- Alteration Level 2

- Alteration Level 3
- Change of Occupancy
- Addition
- Historic Building

- Demolition
- Chapter 3. Prescriptive Compliance Method
- Chapter 13. Performance Compliance Method

Select Work

Involved:
Check all that apply.

- General Construction
- Roofing
- Asbestos Abatement/Environmental
- Fire Alarm

- Structural
- Mechanical
- Plumbing
- Electrical

- Site Work
- Sprinkler
- Elevators
- Other: _____

CODE COMPLIANCE REVIEW

Applicant shall provide all applicable information in regards to the code topic and section listed below.

- Code Compliance Review is based on the 2010 NY State Building Code for New Construction. If any other building code applies to the location or type of construction, provide applicable code and sections that most closely relates and references the code topic and information in the code sections listed below. Provide appropriate abbreviations for other applicable codes, such as: **FC: Fire Code, PC: Plumbing Code, MC: Mechanical Code, FGC: Fuel Gas Code, ECCC: Energy Conservation Code.**
- Provide the Required standard for each applicable code section. (i.e.: area, quantity, classification type, materials, hourly separation, etc.). If section does not apply, indicate one of the following with explanation: **NA: Not Applicable, NR: Not Required, NP: Not Permitted**
- Provide your facilities "Actual" value for each required standard as per applicable code section.

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
1	Use & Occupancy Classification	302.1 - 312	2010 NYS Building Code	Use & occupancy of this facility. Identify all applicable materials, class and quantities regarding Table 307.1.	309.1 Mercantile Group M. Mercantile Group M occupancy includes, among others buildings and	Group B - Business & Group M - Mercantile



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
2	Combustible Storage	413	2010 NYS Building Code - 2010 Fire +	All combustible storage areas and rooms, as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	Group M, shall comply with NYS File Building Code - 1-hour fire-resistance-rated construction for combustible +	The facility will not store combustible materials. 2 HR fire wall separates the retail space. please see building +
3	Hazardous Materials	414	2010 NYS Building Code - 2010 Fire Code of +	All hazardous materials stored or used as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	414.2.5 Hazardous material in Group M display and storage areas and in Group S storage areas. The aggregate quantity of +	The dispensary will not stored hazardous materials. 2 HR fire wall separates the retail space, please see building life safety plan for +
4	Hazardous Materials Control Areas	414.2	2010 NYS Building +	Provide additional information indicating number, size, materials stored, and quantity of each material.	414.2 Control areas. Control areas shall comply with +	The dispensary will not stored any hazardous +
5	Building Area & Height	501-507	2010 NYS Building Code	Provide the building area & height Provide all calculations and cite applicable code sections for increased Building Area & Heights allowed per building code(s).	TABLE 503 ALLOWABLE HEIGHT AND BUILDING AREAS - 1 Story 9000 SF	1-story 1345 SF. Referred to Life Safety Plan for additional information.
6	Incidental Use Areas	508.2	2010 NYS Building +	Identify all Incidental Use Areas and required fire separation of occupancies on Building Plans.	TABLE 508.2 INCIDENTAL USE AREAS - Not +	2 HR fire wall separates the dispensary area, please see +



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
7	Mixed Occupancies	508.3	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	508.3 Mixed occupancies. Each portion of a building shall be individually	The dispensary is classified as Group M - Mercantile. See life safety plan for
8	Nonseparated Uses	508.3.2	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	508.3 Mixed occupancies. Each portion of a building shall be individually	The dispensary is classified as Group M - Mercantile. See life safety plan for
9	Separated Uses (Ratio < 1)	508.3.3	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	TABLE 508.3.3 - Group M - Group B - NS: 2HR	2 HR fire wall separates the dispensary area, please see building life safety plan for
10	Construction Classification	602	2010 NYS Building Code	Provide Construction Classification per each building included in Application.	602.4 Type IV. Type IV construction (Heavy Timber	Building Type V-B Fire-retardant-treated wood
11	Fire Resistance Rating Req'm't for Building Elements	Table 601	2010 NYS Building Code	Provide Fire Resistance Rating per each building element as per Table 601. Identify rating & elements on Building Plans.	TABLE 601 FIRE-RESISTANCE RATING REQUIREMENTS	Structural Frame-0 HR Bearing Walls-0 HR Interior Bearing Wall-2 HR Floor



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
12	Exterior Wall Fire-Resistance Rating	Table 602	2010 NYS Building Code +	Identify required fire resistance rating of exterior walls on Building Plan(s).	FIRE-RESISTANCE RATING REQUIREMENTS FOR BUILDING +	Structural Frame-0 HR Bearing Walls-0 HR Interior Bearing Wall-2 HR Floor +
13	Exterior Fire Separation Distance	Table 602	2010 NYS Building Code +	Identify required fire separation distance of exterior walls between Buildings on Plan.	TABLE 602 FIRE-RESISTANCE RATING REQUIREMENTS +	Rear Building = 58'-0" Side, Adjacent Buildings = 18'-4" and 42'-0" +
14	Fire Walls	705	2010 NYS Building Code	Provide code information and identify all applicable required Fire Wall(s) and fire resistance requirement on Building Plans.	Walls shall be not less than 2-hour fire-resistance rated where separating buildings +	2 HR fire wall separates the dispensary area, please see building life safety plan for additional fire resistance +
15	Fire Barriers	706	2010 NYS Building Code +	Provide code information and identify all applicable required Fire Barrier(s) and fire resistance requirement on Building Plans.	706.3.8 Separation of mixed occupancies. Where the provisions of Section 508.3 +	2 HR fire wall separates the dispensary area, please see building life safety plan for +
16	Shaft Enclosures	707	2010 NYS Building Code +	Provide code information and identify all applicable required Shaft Wall(s) and fire resistance requirement on Building Plans.	Not Applicable	Not Applicable
17	Fire Partitions	708	2010 NYS Building Code +	Provide code information and identify all applicable required Fire Partition(s) and fire resistance requirement on Building Plans.	Separation of mixed occupancies. Where the provisions of Section 508.3 +	2 HR fire wall separates the dispensary area, please see building life safety plan for +



Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
18	Horizontal Assemblies	711	2010 NYS Building Code - <input checked="" type="checkbox"/>	Provide code information and identify all applicable required Horizontal Assemblies and fire resistance requirement on Building Plans.	The fire-resistance rating of floor and roof assemblies shall not be less than that <input checked="" type="checkbox"/>	Floor Construction 1-HR Roof Construction 1-HR 2-HR Separates occupancies <input checked="" type="checkbox"/>
19	Fire Protection: Sprinkler System	903	2010 NYS Building Code - 2010 Fire <input checked="" type="checkbox"/>	Indicate Type of Sprinkler System: <input type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13 R <input type="checkbox"/> NFPA 13D Provide code information of all applicable requirements for Automatic Sprinkler Systems with code section cited.	Not Applicable	Not Applicable.
20	Alt. Fire Extinguishing System	904	2010 NYS Building Code - <input checked="" type="checkbox"/>	Provide code information of all applicable requirements for Alternative Automatic Fire-Extinguishing Systems with code section(s) cited.	Automatic fire-extinguishing systems installed as an alternative to the required <input checked="" type="checkbox"/>	Not Applicable. No Alt fire extinguishing system required <input checked="" type="checkbox"/>
21	Standpipe System	905	2010 NYS Building <input checked="" type="checkbox"/>	Provide code information of all applicable requirements for Standpipe Systems with code section(s) cited.	Not Applicable	Not Applicable. No standpipe system required. <input checked="" type="checkbox"/>
22	Fire Alarm & Detection Systems	907	2010 NYS Building Code - 2010 Fire <input checked="" type="checkbox"/>	Provide code information of all applicable requirements for Fire Alarm System(s) with code section cited. Indicate Type of Fire Alarm System <input type="checkbox"/> Addressable <input type="checkbox"/> Hardwired (zoned)	Fire protection systems shall be monitored by an approved supervising station in accordance with NFPA 72 <input checked="" type="checkbox"/>	Automatic hardwired fire and smoke detector alarm system. Please see building life safety plan for additional <input checked="" type="checkbox"/>



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
23	Emergency Alarm System	908	2010 NYS Building Code +	Provide code information of all applicable requirements for Emergency Alarm Systems with code section cited.	908.1 Group H occupancies. Emergency alarms for the +	Group M - Emergency alarm system not required.
24	Fire Department Connections	912	2010 NYS Building Code +	Identify Fire Department connections in accordance with NFPA applicable standard.	912.2 Location. With respect to hydrants, driveways, +	Fire department connections are located on the street side. +
25	Exits	1001.1 & 2	2010 NYS Building Code	Identify on the Building Plans and documents, per each door, the following information: door width, door height, direction of swing, type of construction, hourly rating, and door closures.	1001.1 General. Buildings or portions thereof shall be provided with a means of +	Door width: 36" per door Door Height: 80" per door Direction of swing: +
26	Occupant Load	1004 & Table 1004.1.1	2010 NYS Building Code +	Identify the use/name of each room, dimensions of each room, and Occupant Loads per each room on the Building Plans.	TABLE 1004.1.1 MAXIMUM FLOOR AREA ALLOWANCES PER +	Area: 1345 SF / 60SF Occupancy Classification: Mercantile +
27	Egress Width	1005	2010 NYS Building Code +	Provide egress widths & cite applicable code section(s) and requirement(s) on the Building Plans	TABLE 1005.1 EGRESS WIDTH PER OCCUPANT +	Total Occupancy = 23 * 0.20 Egress width required = 5" +
28	Accessible Means of Egress	1007.1	2010 NYS Building Code	Provide accessible means of egress as per Section 1007 & cite applicable code section(s) and requirement(s) on the Building Plans.	1007.1 Accessible means of egress required. Accessible means of egress shall +	Total number of accessible means of egress: 2 - Please see building life safety plan +



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
29	Doors, Gates, and Turnstiles	1008	2010 NYS Building Code	Means of egress doors shall meet the requirements of this section.	1008.1.1 Size of doors. The	Total Occupancy = 23 * 0.20
30	Interior Stairs	1009	2010 NYS Building Code	Identify the following information for each stairway on the Building Plan(s): the width of stairways; the height, width, depth and number of risers and treads; dimensions of landings; stairway construction type; and handrail height.	Not Applicable	Not Applicable
31	Ramps	1010.1	2010 NYS Building Code	Identify the following information of each ramp, on the Building Plan(s): width; total vertical rise; length of ramp; and handrail height.	Not Applicable	Not Applicable
32	Common Path of Travel	1014.3	2010 NYS Building Code	Identify on the Building Plan(s): the length of the "Common Path of Travel" per each room as per applicable building code requirements.	The exit access arrangement shall comply with Sections 1014 through	Common path of travel - Main Dispensary: 46'-0" Employee Area: 37'-0"
33	Exit Doorway Arrangement	1015	2010 NYS Building Code	Identify on the Building Plan(s): applicable building code requirements for all Exits and Exit Access Doorways per each room and required exits in all buildings.	1015.1 Exit or exit access doorways required. Two exits or exit access	Egress width required = 5" Total Egress width provided = 72"
34	Corridor Fire Rating	1017.1	2010 NYS Building Code	Identify, on the Building Plan(s): all corridors with required fire resistance and the applicable fire rating.	The corridor walls required to be fire-resistance rated	Not Applicable - No corridors provided.



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
35	Corridor Width	1017.2	2010 NYS Building Code +	Identify on the Building Plan(s): the width of all corridors. Provide applicable code section(s) and requirement(s).	1017.2 Corridor width. The minimum corridor width shall be as determined in Section +	Not Applicable - No corridors
36	Dead End Corridor	1017.3	2010 NYS Building Code +	Corridors shall not exceed the maximum dead end corridor length as per applicable code.	1017.3 Dead ends. Where more than one exit or exit access doorway is required +	Not Applicable - No dead end corridors provided.
37	Number of Exits and Continuity	1019	2010 NYS Building Code +	Identify on the Building Plan(s): required number of exits, continuity and arrangement as per the applicable code requirements.	1019.1 Minimum number of exits. All rooms and spaces within each story shall be +	OCCUPANT LOAD (persons per story) = 23 MINIMUM NUMBER OF +
38	Vertical Exit Enclosures	1020	2010 NYS Building Code +	Identify on the Building Plan(s): all applicable code requirements for each Vertical Exit Enclosure.	1020.1 Enclosures required. Interior exit stairways and interior exit ramps shall be +	Not Applicable - No vertical exit enclosures provided
39	Exit Passageways	1021	2010 NYS Building Code +	Identify on the Building Plan(s): all applicable code requirements for each Exit Passageway.	The width of exit passageways shall be determined as specified in +	Egress width required = 5" Total Egress width provided = 72" +
40	Horizontal Exits	1022	2010 NYS Building Code +	Identify on the Building Plan(s): all applicable code requirements for each Horizontal Exit.	1022.1 Horizontal exits. Horizontal exits serving as an exit in a means of egress +	Egress width required = 5" Total Egress width provided = 72" +



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
41	Exterior Exit Ramps & Stairways	1023	2010 NYS Building Code +	Identify on the Building Plan(s); all applicable code requirements for each exterior exit ramps and stairways.	Exterior exit ramps and stairways shall not be used +	Not Applicable - No exit ramps or stairways provided.
42	Exit Discharge	1024	2010 NYS Building Code +	Identify on the Building Plan(s); all applicable code requirements for each Exit Discharge.	Exits shall discharge directly to the exterior of the +	All exits discharge directly to the exterior of the building. +
43	Accessibility	1101.1 - 1110 & ICC/A117.1(03)	2010 NYS Building Code	Identify on the Building Plan(s); all applicable code requirements such that the design and construction of each building/facility provides accessibility to physically disabled persons.	Buildings and facilities shall be designed and constructed to be accessible in accordance with this code +	The dispensary is designed and constructed to be accessible. See life safety plans for more information. +
44	Energy Conservation	2010 NYS ECCC & IECC 2012	2010 NYS Building Code +	Identify the R-Value and U-Value of each construction component and assembly of the building envelope as required in the applicable energy and building code(s).	The commercial building project shall comply with the requirements in Sections +	The dispensary complies with the requirements of ASHRAE/IESNA 90.1 +
45	Emergency & Standby Power	2702.1	2010 NYS Building Code +	Identify emergency & Standby Power locations and specifications of the system to be provided.	2702.1 Installation. Emergency and standby power systems required by +	Emergency and standby power generators will be installed in accordance with +
46	Smoke Control Systems	2702.2.2	2010 NYS Building Code +	Identify the Standby power for smoke control systems in accordance with Section 909.11 of NYS Building Code.	Not Applicable	Not Applicable



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
47	Plumbing Fixture Count	2902.1	2010 NYS Building Code ⁺	Identify on the Building Plan(s): the minimum plumbing facilities as per applicable plumbing code(s).	2901.1 Scope. The provisions of this chapter ⁺	(1) One Unisex ADA Restroom provided. See ⁺
48	Available Street Water Pressure		2010 NYS Building Code ⁺	Provide the available street or well water pressure.	Static Pressure: 45.5 PSI	Static Pressure: 45.5 PSI
49	Fire Apparatus Access Road	FC503.1	2010 NYS Building Code ⁺	Identify on the Site Plan: Fire Apparatus Road, Fire Lane and other Fire Service requirements per applicable Building and Fire Codes.	501.3 Construction documents. Construction documents for proposed fire ⁺	Fire Apparatus Road: Alexander Street

Rochester Dispensary Facility - Medical Marijuana Program

Application for Registration as a Registered Organization

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PART IV – BUILDING CODE COMPLIANCE (pages 3-13)

CHECK ALL APPLICABLE CODES FOR THE FACILITY

- 2010 BUILDING CODE OF NYS
- 2010 FIRE CODE OF NYS
- 2010 PLUMBING CODE OF NYS
- 2010 MECHANICAL CODE OF NYS
- 2010 FUEL GAS CODE OF NYS
- 2010 ENERGY CONSERVATION CONSTRUCTION CODE OF NYS
- 2012 IECC COMMERCIAL PROVISIONS
- 2010 EXISTING BUILDING CODE OF NYS
- NFPA 101-06 LIFE SAFETY CODE
- ICC/ANSI A117.1-03 ACCESSIBLE AND USABLE BUILDINGS AND FACILITIES
- OTHER

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CODE COMPLIANCE REVIEW

Applicant shall provide all applicable information in regards to the code topic and section listed below.

1. Code Compliance Review is based on the 2010 NY State Building Code for New Construction. If any other building code applies to the location or type of construction, provide applicable code and sections that most closely relates and references the code topic and information in the code sections listed below. Provide appropriate abbreviations for other applicable codes, such as FC: Fire Code, PC: Plumbing Code, MC: Mechanical Code, FGC: Fuel Gas Code, ECCC: Energy Conservation Code.

2. Provide the Required standard for each applicable code section. (i.e.: area, quantity, classification type, materials, hourly separation, etc.). If section does not apply, indicate one of the following with explanation: NA: Not Applicable, NR: Not Required, NP: Not Permitted

3. Provide your facilities "Actual" value for each required standard as per applicable code section.

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² / Allowed Code Value	Facility's Actual Value ³
1	Use & Occupancy Classification	302.1 - 312		Use & occupancy of this facility. Identify all applicable materials, class and quantities regarding Table 307.1.	309.1 Mercantile Group M Mercantile Group M occupancy includes, among others, buildings and structures or a portion thereof, for the display and sale of merchandise, and involves stocks of goods, wares or merchandise incidental to such purposes and accessible to the public	Group M - Mercantile

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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² / Allowed Code Value	Facility's Actual Value ³
2	Combustible Storage	413	2010 NYS Building Code - 2010 Fire Code of New York	All combustible storage areas and rooms, as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	Group M, shall comply with NYS Fire Building Code - 1-hour fire-resistance-rated construction for combustible storage areas and rooms	The facility will not store combustible materials. 2 HR fire wall separates the retail space, please see building life safety plan.
3	Hazardous Materials	414	2010 NYS Building Code - 2010 Fire Code of New York	All hazardous materials stored or used as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	414.2.5 Hazardous material in Group M display and storage areas and in Group S storage areas. The aggregate quantity of nonflammable solid and nonflammable or noncombustible liquid hazardous materials permitted within a single control area of a Group M display and storage area, a Group S storage area or an outdoor control area is permitted to exceed the maximum allowable quantities per control area specified in Tables 307.1(1) and 307.1(2) without classifying the building or use as a Group H occupancy, provided that the materials are displayed and stored in accordance with the Fire Code of New York State and quantities do not exceed the maximum allowable specified in Table 414.2.5(1)	The dispensary will not stored hazardous materials. 2 HR fire wall separates the retail space, please see building life safety plan for area and room dimensions, and exit requirements.

4	Hazardous Materials Control Areas	414.2	2010 NYS Building Code	Provide additional information indicating number, size, materials stored, and quantity of each material.	414.2 Control areas Control areas shall comply with Sections 414.2.1 through 414.2.5 and the Fire Code of New York State	The dispensary will not stored any hazardous materials Please referred to Palliatech's equipment list for additional information indicating the number, size, materials stored, and quantity of each material.
5	Building Area & Height	501-507	2010 NYS Building Code	Provide the building area & height Provide all calculations and cite applicable code sections for increased Building Area & Heights allowed per building code(s).	TABLE 503 ALLOWABLE HEIGHT AND BUILDING AREAS - 1 Story 900 SF	1-story 1345 SF Referred to Life Safety Plan for additional information.
6	Incidental Use Areas	508.2	2010 NYS Building Code	Identify all Incidental Use Areas and required fire separation of occupancies on Building Plans.	TABLE 508.2 INCIDENTAL USE AREAS - Not Applicable	2 HR fire wall separates the dispensary area, please see building life safety plan for additional fire resistance ratings.

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No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
7	Mixed Occupancies	508.3	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	508.3 Mixed occupancies. Each portion of a building shall be individually classified in accordance with Section 302.1	The dispensary is classified as Group M - Mercantile. See life safety plan for additional occupancy analysis
8	Nonseparated Uses	508.3.2	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	508.3 Mixed occupancies. Each portion of a building shall be individually classified in accordance with Section 302.1	The dispensary is classified as Group M - Mercantile. See life safety plan for additional occupancy analysis
9	Separated Uses (Ratio < 1)	508.3.3	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	TABLE 508.3.3 - Group M - Group B - NS 2HR	2 HR fire wall separates the dispensary area, please see building life safety plan for additional fire resistance ratings
10	Construction Classification	602	2010 NYS Building Code	Provide Construction Classification per each building included in Application.	602.4 Type IV. Type IV construction (Heavy Timber, HT) is that type of construction in which the exterior walls are of noncombustible materials and the interior building elements are of solid or laminated wood without concealed spaces. The details of Type IV construction shall comply with the provisions of this section. Fire-retardant-treated wood framing complying with Section 2303.2 shall be permitted within exterior wall assemblies with a 2-hour rating or less. Minimum solid sawn nominal dimensions are required for structures built using Type IV construction (HT). For glued-laminated members the equivalent net finished width and depths corresponding to the minimum nominal width and depths of solid sawn lumber are required as specified in Table 602.4	Building Type V-B Fire-retardant-treated wood framing 2-HR rating separation wall 1-HR Floor construction 1-HR Roof construction.
11	Fire Resistance Rating Req'm't for Building Elements	Table 601	2010 NYS Building Code, 2010 NYS Fire Code	Provide Fire Resistance Rating per each building element as per Table 601. Identify rating & elements on Building Plans.	TABLE 601 FIRE-RESISTANCE RATING REQUIREMENTS FOR BUILDING ELEMENTS Structural Frame-0 HR Bearing Walls-0 HR Interior Bearing Wall-0 HR Floor Construction 0-HR Roof Construction 0-HR	Structural Frame-0 HR Bearing Walls-0 HR Interior Bearing Wall-2 HR Floor Construction 1-HR Roof Construction 1-HR

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No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
12	Exterior Wall Fire-Resistance Rating	Table 602	2010 NYS Building Code, 2010 NYS Fire Code	Identify required fire resistance rating of exterior walls on Building Plan(s).	FIRE-RESISTANCE RATING REQUIREMENTS FOR BUILDING ELEMENTS Structural Frame-0 HR Bearing Walls-0 HR Interior Bearing Wall-0 HR Floor Construction 0-HR Roof Construction 0-HR	Structural Frame-0 HR Bearing Walls-0 HR Interior Bearing Wall-2 HR Floor Construction 1-HR Roof Construction 1-HR
13	Exterior Fire Separation Distance	Table 602	2010 NYS Building Code, 2010 NYS Fire Code	Identify required fire separation distance of exterior walls between Buildings on Plan.	TABLE 602 FIRE-RESISTANCE RATING REQUIREMENTS FOR EXTERIOR WALLS BASED ON FIRE SEPARATION DISTANCE - OCCUPANCY GROUP F-1, M, S-1 FIRE SEPARATION DISTANCE = X (feet) = X>30	Rear Building = 58'-0" Side, Adjacent Buildings = 18'-4" and 42'-0" Front = Alexander ST.

14	Fire Walls	705	2010 NYS Building Code, 2010 NYS Fire Code	Provide code information and identify all applicable required Fire Wall(s) and fire resistance requirement on Building Plans.	Walls shall be not less than 2-hour fire-resistance rated where separating buildings of Type II or V construction	2 HR fire wall separates the dispensary area, please see building life safety plan for additional fire resistance ratings
15	Fire Barriers	706	2010 NYS Building Code, 2010 NYS Fire Code	Provide code information and identify all applicable required Fire Barrier(s) and fire resistance requirement on Building Plans.	706.3.8 Separation of mixed occupancies. Where the provisions of Section 508.3.3 are applicable, the fire barrier separating mixed occupancies shall have a fire-resistance rating of not less than that indicated in Section 508.3.3 based on the occupancies being separated.	2 HR fire wall separates the dispensary area, please see building life safety plan for additional fire resistance ratings
16	Shaft Enclosures	707	2010 NYS Building Code	Provide code information and identify all applicable required Shaft Wall(s) and fire resistance requirement on Building Plans.	Not Applicable	Not Applicable
17	Fire Partitions	708	2010 NYS Building Code, 2010 NYS Fire Code	Provide code information and identify all applicable required Fire Partition(s) and fire resistance requirement on Building Plans.	Separation of mixed occupancies. Where the provisions of Section 508.3.3 are applicable, the fire barrier separating mixed occupancies shall have a fire-resistance rating of not less than that indicated in Section 508.3.3 based on the occupancies being separated.	2 HR fire wall separates the dispensary area, please see building life safety plan for additional fire resistance ratings

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
18	Horizontal Assemblies	711	2010 NYS Building Code - 2010 Fire Code of New York	Provide code information and identify all applicable required Horizontal Assemblies and fire resistance requirement on Building Plans.	The fire-resistance rating of floor and roof assemblies shall not be less than that required by the building type of construction. Where the floor assembly separates mixed occupancies, the assembly shall have a fire-resistance rating of not less than that required by Section 508.3.3 based on the occupancies being separated.	Floor Construction 1-HR Roof Construction 1-HR 2-HR Separates occupancies - Please see building life safety plan for additional fire resistance ratings
19	Fire Protection: Sprinkler System	903	2010 NYS Building Code - 2010 Fire Code of New York	Indicate Type of Sprinkler System: NFPA 13 X NFPA 13 R NFPA 13D Provide code information of all applicable requirements for Automatic Sprinkler Systems with code section cited.	Not Applicable	Not Applicable
20	Alt. Fire Extinguishing System	904	2010 NYS Building Code	Provide code information of all applicable requirements for Alternative Automatic Fire-Extinguishing Systems with code section(s) cited.	Automatic fire-extinguishing systems installed as an alternative to the required automatic sprinkler systems of Section 903 shall be approved by the code enforcement official. Automatic fire-extinguishing systems shall not be considered alternatives for the purposes of exceptions or reductions allowed by other requirements of this code.	Not Applicable. No Alt fire extinguishing system required.
21	Standpipe System	905	2010 NYS Building Code	Provide code information of all applicable requirements for Standpipe Systems with code section(s) cited.	Not Applicable	Not Applicable. No standpipe system required
22	Fire Alarm & Detection Systems	907	2010 NYS Building Code - 2010 Fire Code of New York	Provide code information of all applicable requirements for Fire Alarm System(s) with code section cited. Indicate Type of Fire Alarm System Addressable Hardwired X (zoned)	Fire protection systems shall be monitored by an approved supervising station in accordance with NFPA 72 - 901.6.2 Fire alarm systems. Fire alarm systems required by the provisions of Section 907.2 of this code and Section 907.2 of the Fire Code of New York State shall be monitored by an approved supervising station in accordance with Section 907.14	Automatic hardwired fire and smoke detector alarm system. Please see building life safety plan for additional fire resistance ratings

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
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23	Emergency Alarm System	908	2010 NYS Building Code - 2010 Fire Code of New York	Provide code information of all applicable requirements for Emergency Alarm Systems with code section cited.	908.1 Group H occupancies. Emergency alarms for the detection and notification of an emergency condition in Group H occupancies shall be provided in accordance with Section 414.7.	Group M - Emergency alarm system not required.
24	Fire Department Connections	912	2010 NYS Building Code - 2010 Fire Code of New York	Identify Fire Department connections in accordance with NFPA applicable standard.	912.2 Location With respect to hydrants, driveways, buildings and landscaping, fire department connections shall be so located that fire apparatus and hose connected to supply the system will not obstruct access to the buildings for other fire apparatus. The location of fire department connections shall be approved 912.2.2 Existing buildings. On existing buildings, wherever the fire department connection is not visible to approaching fire apparatus, the fire department connection shall be indicated by an approved sign mounted on the street front or on the side of the building. Such sign shall have the letters "FDC" at least 6 inches (152 mm) high and words in letters at least 2 inches (51 mm) high or an arrow to indicate the location. All such signs shall be subject to the approval of the code enforcement official	Fire department connections are located on the street side of the building, fully visible and recognizable from the street or nearest point of fire department vehicle access or as otherwise approved by the code enforcement official
25	Exits	1001.1 & 2	2010 NYS Building Code - 2010 Fire Code of New York	Identify on the Building Plans and documents, per each door, the following information: door width, door height, direction of swing, type of construction, hourly rating, and door closures.	1001.1 General Buildings or portions thereof shall be provided with a means of egress system as required by this chapter. The provisions of this chapter shall control the design, construction and arrangement of means of egress components required to provide an approved means of egress from structures and portions thereof 1001.2 Minimum requirements. It shall be unlawful to alter a building or structure in a manner that will reduce the number of exits or the capacity of the means of egress to less than required by this code. 1001.3 Maintenance. Means of egress shall be maintained in accordance with the Fire Code of New York State	Door width: 36" per door Door Height: 80" per door Direction of swing: Exterior/Outward Type of Construction: Fire rated metal frame doors and Fire rated glazing doors Hourly rating: 1HR Door Closures will be provided on all exit doors. See life safety plans for additional information.
26	Occupant Load	1004 & Table 1004.1.1		Identify the use/name of each room, dimensions of each room, and Occupant Loads per each room on the Building Plans.	TABLE 1004.1.1 MAXIMUM FLOOR AREA ALLOWANCES PER OCCUPANT - Mercantile Areas on other floors - 60 gross	Area: 1345 SF / 60SF Occupancy Classification: Mercantile Occupancy Load: 23
27	Egress Width	1005		Provide egress widths & cite applicable code section(s) and requirement(s) on the Building Plans	TABLE 1005.1 EGRESS WIDTH PER OCCUPANT SERVED - WITHOUT SPRINKLER SYSTEM = 0.2	Total Occupancy = 23 * 0.20 Egress width required = 5" Total Egress width provided = 72" Number of exits: 2 See life safety plans for additional information
28	Accessible Means of Egress	1007.1		Provide accessible means of egress as per Section 1007 & cite applicable code section(s) and requirement(s) on the Building Plans.	1007.1 Accessible means of egress required. Accessible means of egress shall comply with this section. Accessible spaces shall be provided with not less than one accessible means of egress. Where more than one means of egress is required by Section 1015.1 or 1019.1 from any accessible space, each accessible portion of the space shall be served by not less than two accessible means of egress	Total number of accessible means of egress: 2 - Please see building life safety plan for additional Accessible Means of Egress

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* (Allowed Code Value)	Facility's Actual Value*
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29	Doors, Gates, and Turnstiles	1008	2010 NYS Building Code	Means of egress doors shall meet the requirements of this section.	1008.1.1 Size of doors The minimum width of each door opening shall be sufficient for the occupant load thereof and shall provide a clear width of not less than 32 inches (813 mm) Clear openings of doorways with swinging doors shall be measured between the face of the door and the stop, with the door open 90 degrees (1.57 rad). Where this section requires a minimum clear width of 32 inches (813 mm) and a door opening includes two door leaves without a mullion, one leaf shall provide a clear opening width of 32 inches (813 mm) The maximum width of a swinging door leaf shall be 48 inches (1219 mm) nominal. Means of egress doors in a Group I-2 occupancy used for the movement of beds shall provide a clear width not less than 41.5 inches (1054 mm). The height of doors shall not be less than 80 inches (2032 mm). 1008.2 Gates. Gates serving the means of egress system shall comply with the requirements of this section. Gates used as a component in a means of egress shall conform to the applicable requirements for doors.	Total Occupancy = 23 * 0.20 Egress width required = 5" Total Egress width provided = 72" Number of exits 2 Please see building life safety plan for additional information on doors, and gates.
30	Interior Stairs	1009	2010 NYS Building Code	Identify the following information for each stairway on the Building Plan(s): the width of stairways; the height, width, depth and number of risers and treads; dimensions of landings; stairway construction type; and handrail height.	Not Applicable	Not Applicable
31	Ramps	1010.1	2010 NYS Building Code	Identify the following information of each ramp, on the Building Plan(s): width; total vertical rise; length of ramp; and handrail height.	Not Applicable	Not Applicable
32	Common Path of Travel	1014.3	2010 NYS Building Code	Identify on the Building Plan(s): the length of the "Common Path of Travel" per each room as per applicable building code requirements.	The exit access arrangement shall comply with Sections 1014 through 1017 and the applicable provisions of Sections 1003 through 1013	Common path of travel - Main Dispensary: 46'-0" Employee Area: 37'-0"
33	Exit Doorway Arrangement	1015	2010 NYS Building Code	Identify on the Building Plan(s): applicable building code requirements for all Exits and Exit Access Doorways per each room and required exits in all buildings.	1015.1 Exit or exit access doorways required. Two exits or exit access doorways from any space shall be provided where one of the following conditions exists: 1 The occupant load of the space exceeds the values in Table 1015.1 2 The common path of egress travel exceeds the limitations of Section 1014.3 3 Where required by Sections 1015.3, 1015.4 and 1015.5.	Egress width required = 5" Total Egress width provided = 72" Number of exits: 2 Please see building life safety plan for additional Accessible Means of Egress
34	Corridor Fire Rating	1017.1	2010 NYS Building Code, 2010 NYS Fire Code	Identify, on the Building Plan(s): all corridors with required fire resistance and the applicable fire rating.	The corridor walls required to be fire-resistance rated shall comply with Section 708 for fire partitions. Occupancy: M Occupant Load served by corridor: Greater than 30 Required Fire - Resistance Rating (hrs): 1-HR without sprinkler system	Not Applicable - No corridors provided

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² Allowed Code Value	Facility's Actual Value ³
35	Corridor Width	1017.2	2010 NYS Building Code	Identify on the Building Plan(s): the width of all corridors. Provide applicable code section(s) and requirement(s).	1017.2 Corridor width The minimum corridor width shall be as determined in Section 1005.1, but not less than 44 inches (1118 mm)	Not Applicable - No corridors
36	Dead End Corridor	1017.3	2010 NYS Building Code	Corridors shall not exceed the maximum dead end corridor length as per applicable code.	1017.3 Dead ends Where more than one exit or exit access doorway is required, the exit access shall be arranged such that there are no dead ends in corridors more than 20 feet (6096 mm) in length	Not Applicable - No dead end corridors provided.

37	Number of Exits and Continuity	1019	2010 NYS Building Code	Identify on the Building Plan(s): required number of exits, continuity and arrangement as per the applicable code requirements.	1019.1 Minimum number of exits. All rooms and spaces within each story shall be provided with and have access to the minimum number of approved independent exits required by Table 1019.1 based on the occupant load of the story, except as modified in Section 1015.1 or 1019.2 For the purposes of this chapter, occupied roofs shall be provided with exits as required for stories. The required number of exits from any story, basement or individual space shall be maintained until arrival at grade or the public way - OCCUPANT LOAD (persons per story) = 1/500 MINIMUM NUMBER OF EXITS (per story) = 2	OCCUPANT LOAD (persons per story) = 23 MINIMUM NUMBER OF EXITS (per story) = 2
38	Vertical Exit Enclosures	1020	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements for each Vertical Exit Enclosure.	1020.1 Enclosures required. Interior exit stairways and interior exit ramps shall be enclosed with fire barriers constructed in accordance with Section 706 or horizontal assemblies constructed in accordance with Section 711, or both. Exit enclosures shall have a fire-resistance rating of not less than 2 hours where	Not Applicable - No vertical exit enclosures provided
39	Exit Passageways	1021	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements for each Exit Passageway.	The width of exit passageways shall be determined as specified in Section 1005.1 but such width shall not be less than 44 inches (1118 mm), except that exit passageways serving an occupant load of less than 50 shall not be less than 36 inches (914 mm) in width The required width of exit passageways shall be unobstructed	Egress width required = 5" Total Egress width provided = 72" Number of exits: 2 Please see building life safety plan for additional information on Exit Passageways
40	Horizontal Exits	1022	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements for each Horizontal Exit.	1022.1 Horizontal exits. Horizontal exits serving as an exit in a means of egress system shall comply with the requirements of this section. A horizontal exit shall not serve as the only exit from a portion of a building, and where two or more exits are required, not more than one-half of the total number of exits or total exit width shall be horizontal exits.	Egress width required = 5" Total Egress width provided = 72" Number of exits: 2 - See building life safety plan for additional information.

Appendix B – Architectural Program

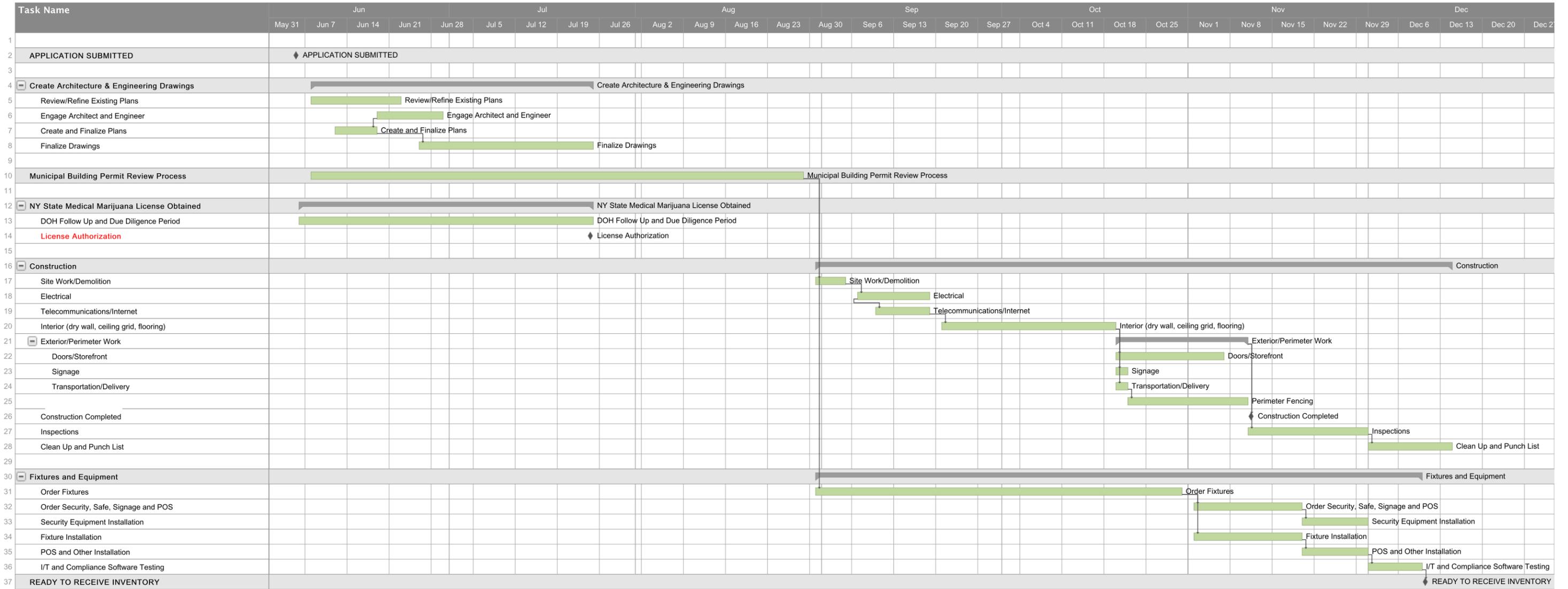
No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² (Allowed Code Value)	Facility's Actual Value ³
41	Exterior Exit Ramps & Stairways	1023	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements for each exterior exit ramps and stairways.	Exterior exit ramps and stairways shall not be used as an element of a required means of egress for Group I-2 occupancies. For occupancies in other than Group I-2, exterior exit ramps and stairways shall be permitted as an element of a required means of egress for buildings not exceeding six stories above grade plane or having occupied floors more than 75 feet (22 860 mm) above the lowest level of fire department vehicle access	Not Applicable - No exit ramps or stairways provided
42	Exit Discharge	1024	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements for each Exit Discharge.	Exits shall discharge directly to the exterior of the building. The exit discharge shall be at grade or shall provide direct access to grade. The exit discharge shall not reenter a building.	All exits discharge directly to the exterior of the building. See life safety plans for additional information
43	Accessibility	1101.1 - 1110 & ICC/A117.1(03)	2010 NYS Building Code, ICC/A	Identify on the Building Plan(s): all applicable code requirements such that the design and construction of each building/facility provides accessibility to physically disabled persons.	Buildings and facilities shall be designed and constructed to be accessible in accordance with this code and ICC/ANSI A117.1	The dispensary is designed and constructed to be accessible. See life safety plans for more information

44	Energy Conservation	2010 NYS ECCC & IECC 2012	2010 NYS Building Code, 2010 NYS ECC, IECC 2012	Identify the R-Value and U-Value of each construction component and assembly of the building envelope as required in the applicable energy and building code(s).	<p>The commercial building project shall comply with the requirements in Sections 502 (Building envelope requirements), 503 (Building mechanical systems), 504 (Service water heating) and 505 (Electrical power and lighting systems) in its entirety. As an alternative the commercial building project shall comply with the requirements of ASHRAE/IESNA 90.1 in its entirety.</p> <p>Commercial buildings shall comply with one of the following:</p> <ol style="list-style-type: none"> 1 The requirements of ANSI/ASHRAE/IESNA 90.1. 2 The requirements of Sections C402, C403, C404 and C405. In addition, commercial buildings shall comply with either Section C406 2, C406 3 or C406 4. 3 The requirements of Section C407, C402.4, C403.2, C404, C405.2, C405 3, C405.4, C405.6 and C405.7. The building energy cost shall be equal to or less than 85 percent of the standard reference design building. 	<p>The dispensary complies with the requirements of ASHRAE/IESNA 90.1</p> <p>CLIMATE ZONES All other Group R Roofs Insulation entirely above deck U-0.048U-0.048 Metal buildings U-0.055U-0.055 Attic and other U-0.027U-0.027 Walls, Above Grade Mass U-0.090U-0.080 Metal building U-0.069U-0.069 Metal framed U-0.064U-0.064 Wood framed and other U-0.064U-0.051 Below-Grade Walls a Below-grade walls a C-0.119C-0.119 Floors Mass U-0.074U-0.064 Joist/Framing U-0.033U-0.033 Slab-on-Grade Floors Unheated slabs F-0.730F-0.540 Heated slabs F-0.860F-0.860</p>
45	Emergency & Standby Power	2702.1	2010 NYS Building Code	Identify emergency & Standby Power locations and specifications of the system to be provided.	2702.1 Installation. Emergency and standby power systems required by this code or the Fire Code of New York State shall be installed in accordance with this code, NFPA 110 and 111.	Emergency and standby power generators will be installed in accordance with the security requirements. See life safety plans for additional information.
46	Smoke Control Systems	2702.2.2	2010 NYS Building Code	Identify the Standby power for smoke control systems in accordance with Section 909.11 of NYS Building Code.	Not Applicable	Not Applicable

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* / Allowed Code Value	Facility's Actual Value*
47	Plumbing Fixture Count	2902.1	2010 NYS Building Code, 2010 NYS Plumbing Code	Identify on the Building Plan(s): the minimum plumbing facilities as per applicable plumbing code(s).	2901.1 Scope. The provisions of this chapter and the Plumbing Code of New York State shall govern the erection, installation, alteration, repairs, relocation, replacement, addition to, use or maintenance of plumbing equipment and systems. Plumbing systems and equipment shall be constructed, installed and maintained in accordance with the Plumbing Code of New York State.	(1) One Unisex ADA Restroom provided. See building plans Separate facilities shall not be required in mercantile occupancies in which the maximum occupant load is 50 or less.
48	Available Street Water Pressure		2010 NYS Building Code, 2010 NYS Plumbing Code	Provide the available street or well water pressure.	Static Pressure 45.5 PSI	Static Pressure 45.5 PSI
49	Fire Apparatus Access Road	FC503.1	2010 NYS Building Code, 2010 NYS Fire Code	Identify on the Site Plan: Fire Apparatus Road, Fire Lane and other Fire Service requirements per applicable Building and Fire Codes.	501.3 Construction documents. Construction documents for proposed fire apparatus access, location of fire lanes and construction documents and hydraulic calculations for fire hydrant systems shall be submitted to the fire department for review and approval prior to construction.	Fire Apparatus Road, Alexander Street

215 ALEXANDER: CONSTRUCTION TIMELINE





Dispensary - Rochester, New York : LEED v4 Rating System BD+C: Retail

What is LEED?

LEED is the most recognized international certification for green buildings and was developed in the United States by the U.S. Green Building Council.

The United States Green Building Council (USGBC) is a non-profit organization that promotes sustainability and energy efficiency in the design, construction and operation of buildings.

Benefits of LEED

Owners that opt for LEED certification improve their image and competitiveness in the market. The reduced environmental impact of building activities results in improvements for generations of occupants.

- 15% to 30% Reduction in energy consumption
- 20% to 40% reduction in water consumption
- 10% to 30% Reduction in operation costs

Project Overview

The reuse and upgrading of the existing structure into an active dispensary facility will bring renewed aesthetic appeal, activity and energy to the property and the neighborhood. New signage, low-maintenance native landscaping and improved site lighting will dramatically enhance the character of the existing property and help differentiate the dispensary from the many commercial constructions along the avenue.

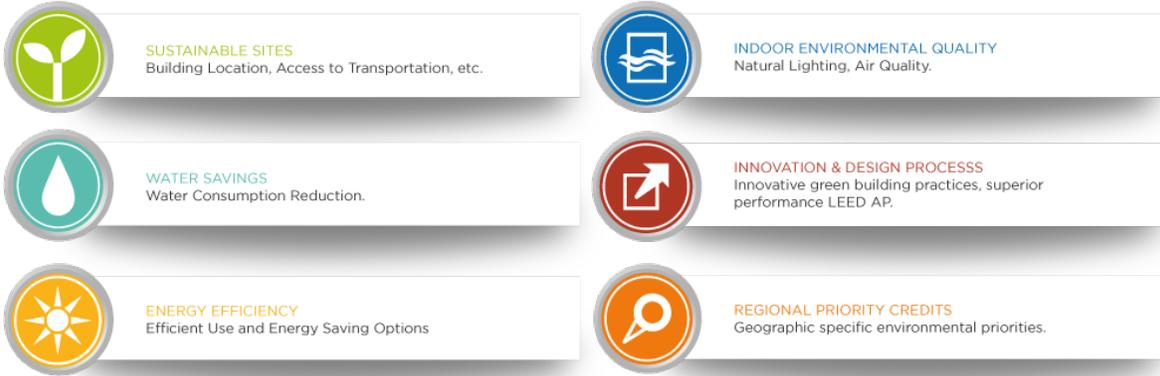
The facility will be renovated to meet or exceed all construction regulations and standards with a priority on environmental sustainability, including such features as the use of repurposed, sustainable building materials including stone, wood and metal, and re-landscaping with natural, locally indigenous plants and materials requiring minimal water and maintenance.

The re-use of this existing facility will promote the design and construction of a high performance environment pertaining to the overall sustainable goals. It will also ensure a responsible, profitable, and healthy place to work.

Upon completion of the Rochester, New York dispensary and installation of all "green" features, the Company intends to seek LEED (Leadership in Energy and Environmental Design) certification through the LEED BD + C (Retail), based on responsible practices in water use, conservation, building materials, energy efficiency, indoor air quality, emission control, landscaping and design.

sumac

LEED Categories



BD + C : Retail

LEED BD+C: Retail is designed for interior spaces that will be used to conduct retail sale of consumer product goods, including both direct customer service areas (showroom) and preparation or storage areas that support customer service.

Sustainability Goals

ENERGY

- Maximize energy efficiency.
- Minimize energy demand and emissions.
- Increase reliability on renewably energy sources.

WASTE REDUCTION

- Packaging
- Maximize the re-use of waste products as a resource

CLEAN AND SECURE WORK ENVIRONMENT

- Efficient space planning.
- Effective ventilation system and sanitation procedures.
- Comprehensive security system coverage.
- Visibility control
- Restricted access.



RE: Build Out Timeline - Dispensary - ROCHESTER (Monroe County)

DISPENSARY LOCATION: 215 Alexander Street, Rochester, NY 14607

PROPOSED PROJECT BUILD-OUT TIMELINE

Milestone	Timeframe
1. Authorization of License(s)	July, 2015
2. Architecture and Engineering Technical Drawings	August – September, 2015
3. Local Municipal Review Process* (* Tenant Build-out Only)	September, 2015
4. Construction Start	October, 2015
5. Construction Completion	December, 2016
6. Equipment Installation & Move-in	January, 2016

The above schedule is for preliminary review only, actual times may vary based on final design and construction scope and municipal review process.

Ronald Dean AIA, CSI, LEED AP BC+C
Vice President
Sumac Inc.
New York Licensed Architect #037858

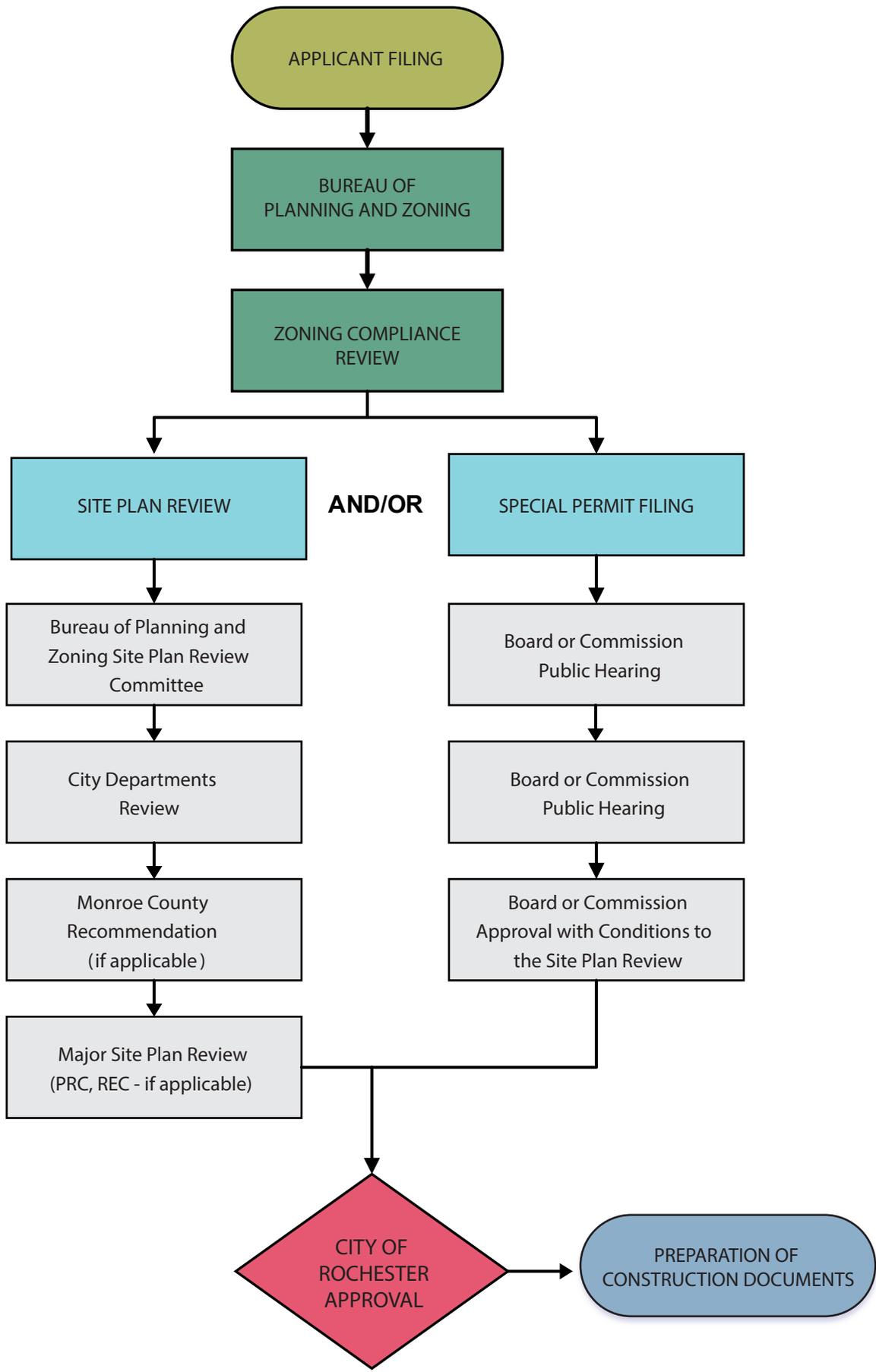


Figure A-1

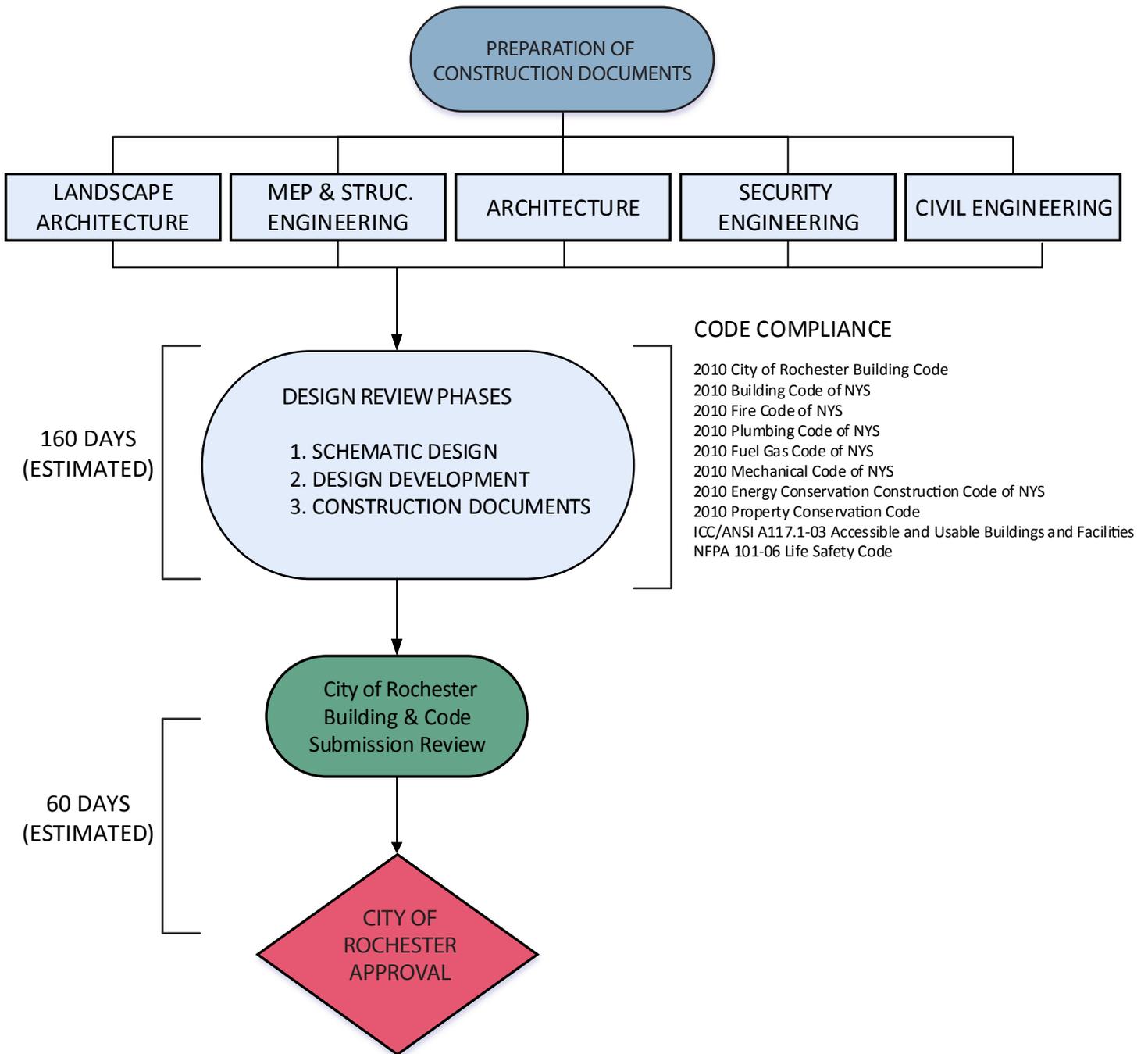
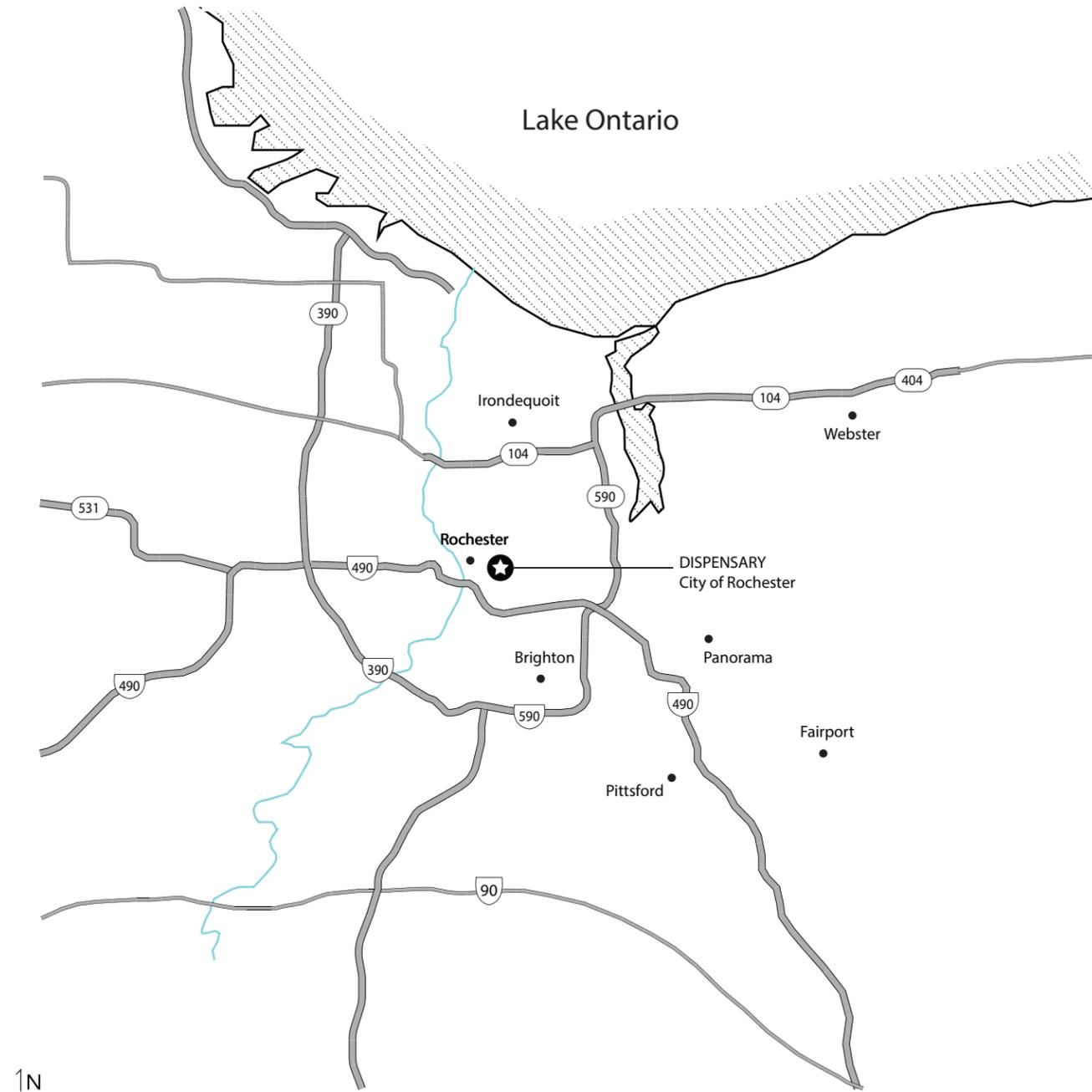


Figure A-2

REGIONAL LOCATION AREA MAP

LOCATION AREA MAP



REGIONAL LOCATION MAP KEY	LOCATION MAP KEY
Proposed Sites	Proposed Site
Railroad	Preschools (Public or Private)
Lake shore	Elementary Schools / Secondary Schools
River	Day Care Facilities
Major Highway or Expressway	Residential (Zoned exclusively for Residential Use)
Airport	

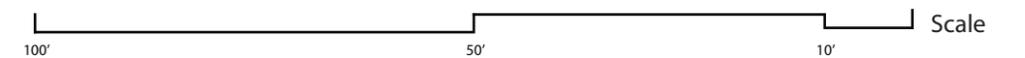
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LEGEND	
	Dispensary
	Emergency Power Systems
	10'-0" Exterior Fence
	Building Entrance / Exit

Site Information	
Address	215 Alexander Street Rochester, NY 14607
County District	Monroe County - City Rochester
Building Type	Office, 2-4 Story, Load Supporting Wall, Post, Beam
Zoning District	R3
Use and Classification	Retail
Lot Frontage	50 ft.
Lot Depth	188 ft.
Total Acreage/Size	.21 acres
Building/Dispensary Area	1345 SF

N

DISPENSARY SITE PLAN



N\

DISPENSARY ENLARGED PLAN



Scale

Building Information	
Construction Type	Type V-B
Sprinklers	NA
Building Height	One Story 12' - 0" to top of roof
Building Area	1345 SF
Use and Occupancy	Group M - Mercantile
Fire Resistive Ratings	
Structural Frame	0 HR
Bearing Walls - Exterior	0 HR
Bearing Walls - Interior	1 HR
Floor Construction	1 HR
Roof Construction	1 HR
* Roof supports: Fire resistnace ratings of structural and bearing walls are permitted to be reduced by 1 HR where supporting the roof only.	

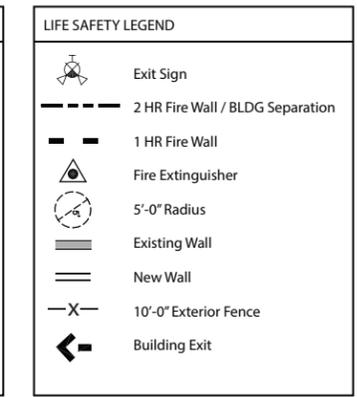
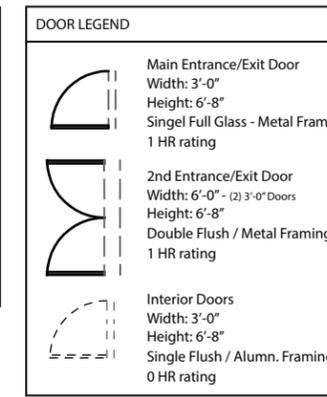
Function of Space	Area	Area Per Occupant	Occupancy Classification	Occupancy Load
Retail Dispensary	1345 SF	60 SF	Mercantile	23
Total Occupant Load				23
Egress width Required				5"
Total Egress Provided				72"
Total # of Exits				2

Estimate of Code required number of Plumbing Fixtures

TABLE 403.1 MINIMUM NUMBER OF REQUIRED PLUMBING FIXTURES

Occupancy	1 per 500	1 per 500	1 per 750	1 per 750	1 per 1,000	1 service sink
Mercantile (see sections 403.2, 403.4, 403.4.1 and 403.4.2)	M	1	1	1	1	1

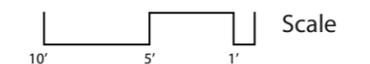
* Separate facilities shall not be required in mercantile occupancies in which the maximum occupant load is 50 or less.



nt to N.Y. Public Officers Law, Art. 6

N\

DISPENSARY LIFE SAFETY PLAN





PALLIATECH™

ReliefCenters™



PART III ENERGY SOURCES AND ENGINEERING SYSTEMS



Appendix B – Dispensary #3
Part III – Energy Sources and Engineering Systems

Rochester Dispensary

Part III – Energy Sources & Engineering Systems (Outline and Specifications):

Energy Source:

- Natural Gas

Engineering Systems:

- Heating System: Type: Furnace
 Size: 60 kBtu/h
 Efficiency: 96 AFUE
 Ventilation Requirements: ASHRAE 62.1
- Cooling System: Type: DX
 Size: 3 Tons
 Efficiency: 13 SEER
 Ventilation Requirements: ASHRAE 62.1
- Ventilation & Humidification System: Type: Exhaust
 Size: 100 CFM
 Efficiency: 70
 Ventilation Requirements: ASHRAE 62.1

Water Supply:

- Municipal Water Service (City of Rochester/Monroe County)

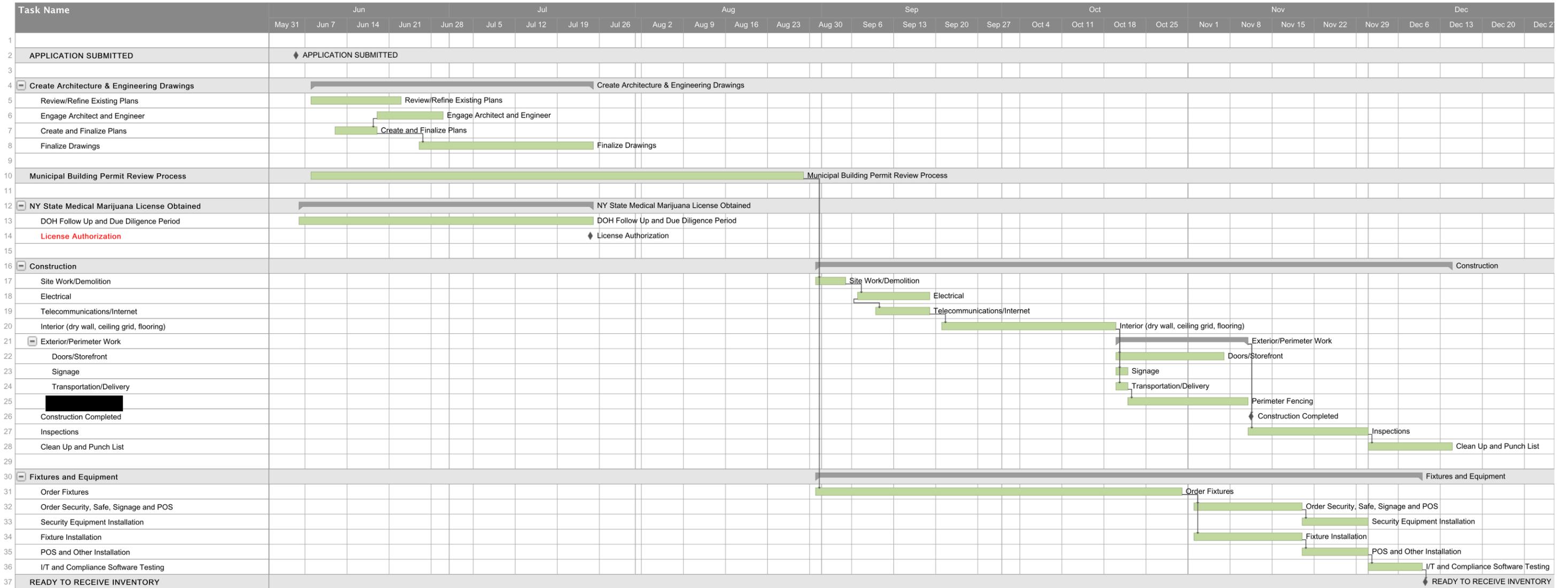
Sewage:

- Municipal Water Service (City of Rochester/Monroe County)

Emergency Power System:

Type: Generator
Size: 5 kW
Efficiency: 25%

215 ALEXANDER: CONSTRUCTION TIMELINE





Appendix B: Architectural Program

A SEPARATE "APPENDIX B" SHALL BE COMPLETED FOR EACH SEPARATE BUILDING AND/OR FACILITY INCLUDED IN THE ORGANIZATION'S BUSINESS PLAN

COMPANY INFORMATION

Business Name: Palliatech
Facility Type: Manufacturing Facility [] Dispensing Facility []
Use and Occupancy Classification: Group M - Mercantile
Building Construction Type and Classification: Type IB
Facility Address: 350 Leland Ave., Utica, NY 13502
Primary Contact Telephone number:
Primary Contact Fax number:

PART I - ARCHITECTURAL PROGRAM & CONSTRUCTION TIMELINE:

Applicant shall identify planning requirements, including but not limited to:

- Checklist of construction requirements: TOWN BOARD APPROVAL, PLANNING BOARD APPROVAL, ZONING BOARD OF APPEALS APPROVAL, PREPARATION OF CONSTRUCTION DOCUMENTS, BUILDING PERMIT, BIDDING PHASE, CONTRACT AWARD PHASE PER EACH APPLICABLE CONTRACTOR (Identify all that apply), COMMENCEMENT OF CONSTRUCTION, COMPLETION OF CONSTRUCTION.



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PART II – SITE PLAN(S)

Applicant shall provide the appropriate details for each of the following by identifying the location and dimension on the Site Plan attached to the application for each building location.

- Entrance and Exits
Public Parking Spaces
Staff Parking Spaces
Accessible Parking Spaces
Accessible Route(s)
Fire Lane and/or Fire Apparatus Road
Percentage of Green Space
Location of Emergency Power Systems
Loading & Unloading
Security Gates & Fences

PART III – ENERGY SOURCES & ENGINEERING SYSTEMS:

Applicant shall provide the following minimum information to outline the specifications relating to the energy sources and engineering systems of each building included in the application.

- Energy Source: Natural Gas, Solar, Oil, Other, Electric
Engineering Systems: Heating System (Furnace, 100 kBtu/h, 96 AFUE), Cooling System (DX, 5 tons, 13 SEER), Ventilation & Humidification Systems (Exhaust, 100 cfm, 70), Electrical Distribution Available, Water Supply (Municipal/Private), Sewage (Municipal/Private), Emergency Power System (Generator, 6kW, 25%)



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PART IV – BUILDING CODE COMPLIANCE: (pages 3-13)

CHECK ALL APPLICABLE CODES FOR THE FACILITY

- 2010 BUILDING CODE OF NYS
2010 FIRE CODE OF NYS
2010 PLUMBING CODE OF NYS
2010 MECHANICAL CODE OF NYS
2010 FUEL GAS CODE OF NYS
2010 PROPERTY MAINTENANCE CODE OF NYS
2010 ENERGY CONSERVATION CONSTRUCTION CODE OF NYS
2012 IECC COMMERCIAL PROVISIONS
2010 EXISTING BUILDING CODE OF NYS
NEC NATIONAL ELECTRIC CODE, (Specify Applicable Version)
2014 NY CITY CONSTRUCTION CODE
2008 NY CITY CONSTRUCTION CODE
1968 NY CITY CONSTRUCTION CODE
NFPA 101-06 LIFE SAFETY CODE
ICC/ANSI A117.1-03 ACCESSIBLE AND USABLE BUILDINGS AND FACILITIES
OTHER



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Select Project

Type:
Check all that apply.
Refer to the Existing
Building Code for
definitions.

- New Building
- Repair
- Alteration Level 1
- Alteration Level 2

- Alteration Level 3
- Change of Occupancy
- Addition
- Historic Building

- Demolition
- Chapter 3. Prescriptive Compliance Method
- Chapter 13. Performance Compliance Method

Select Work

Involved:
Check all that apply.

- General Construction
- Roofing
- Asbestos
Abatement/Environmental
- Fire Alarm

- Structural
- Mechanical
- Plumbing
- Electrical

- Site Work
- Sprinkler
- Elevators
- Other: _____

CODE COMPLIANCE REVIEW

Applicant shall provide all applicable information in regards to the code topic and section listed below.

- 1 Code Compliance Review is based on the 2010 NY State Building Code for New Construction. If any other building code applies to the location or type of construction, provide applicable code and sections that most closely relates and references the code topic and information in the code sections listed below. Provide appropriate abbreviations for other applicable codes, such as: **FC: Fire Code, PC: Plumbing Code, MC: Mechanical Code, FGC: Fuel Gas Code, ECCC: Energy Conservation Code.**
- 2 Provide the Required standard for each applicable code section. (i.e.: area, quantity, classification type, materials, hourly separation, etc.). If section does not apply, indicate one of the following with explanation: **NA: Not Applicable, NR: Not Required, NP: Not Permitted**
- 3 Provide your facilities "Actual" value for each required standard as per applicable code section.

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
1	Use & Occupancy Classification	302.1 - 312	2010 NYS Building Code	Use & occupancy of this facility. Identify all applicable materials, class and quantities regarding Table 307.1.	309.1 Mercantile Group M. Mercantile Group M occupancy includes, among others buildings and	Group M - Mercantile



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
2	Combustible Storage	413	2010 NYS Building Code - 2010 Fire +	All combustible storage areas and rooms, as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	Group M, shall comply with NYS File Building Code - 1-hour fire-resistance-rated construction for combustible +	The dispensary facility will not store hazardous materials. See building life safety plan for area and room +
3	Hazardous Materials	414	2010 NYS Building Code - 2010 Fire Code of +	All hazardous materials stored or used as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	414.2.5 Hazardous material in Group M display and storage areas and in Group S storage areas. The aggregate quantity of +	The dispensary facility will not store hazardous materials. See building life safety plan for area and room dimensions and exit +
4	Hazardous Materials Control Areas	414.2	2010 NYS Building +	Provide additional information indicating number, size, materials stored, and quantity of each material.	414.2 Control areas. Control areas shall comply with +	The dispensary facility will not store hazardous materials. +
5	Building Area & Height	501-507	2010 NYS Building Code	Provide the building area & height. Provide all calculations and cite applicable code sections for increased Building Area & Heights allowed per building code(s).	TABLE 503 Allowable Height and Building Areas: Type I-B, S:11, A:UL	Type I-B, S: 1, A: 2400 SF. See Life Safety Plan for additional information.
6	Incidental Use Areas	508.2	2010 NYS Building +	Identify all Incidental Use Areas and required fire separation of occupancies on Building Plans.	TABLE 508.2 Incidental Use Areas - Not Applicable	The dispensary does not have incidental use areas +



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
7	Mixed Occupancies	508.3	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	508.3 Mixed occupancies. Each portion of a building shall be individually	The dispensary is classified as Group M - Mercantile. See life safety plan for
8	Nonseparated Uses	508.3.2	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	508.3 Mixed occupancies. Each portion of a building shall be individually	The dispensary is classified as Group M - Mercantile. The adjacent facility is classified
9	Separated Uses (Ratio < 1)	508.3.3	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	TABLE 508.3.3 - Group M - Group B : 1-HR	2 HR fire wall separates the dispensary area, please see building life safety plan for
10	Construction Classification	602	2010 NYS Building Code	Provide Construction Classification per each building included in Application.	602.2 Types I and II. Type I and II construction are those	Building Type I-B Fully Sprinklered 2-HR rating
11	Fire Resistance Rating Req'm't for Building Elements	Table 601	2010 NYS Building Code	Provide Fire Resistance Rating per each building element as per Table 601. Identify rating & elements on Building Plans.	TABLE 601 FIRE-RESISTANCE RATING REQUIREMENTS	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
12	Exterior Wall Fire-Resistance Rating	Table 602	2010 NYS Building Code +	Identify required fire resistance rating of exterior walls on Building Plan(s).	FIRE-RESISTANCE RATING REQUIREMENTS FOR BUILDING +	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor +
13	Exterior Fire Separation Distance	Table 602	2010 NYS Building Code +	Identify required fire separation distance of exterior walls between Buildings on Plan.	TABLE 602 FIRE-RESISTANCE RATING REQUIREMENTS +	Rear Building = None Side, Adjacent Buildings = 100'-0" +
14	Fire Walls	705	2010 NYS Building Code	Provide code information and identify all applicable required Fire Wall(s) and fire resistance requirement on Building Plans.	Walls shall be not less than 2-hour fire-resistance rated where separating buildings +	Type IB Construction - 2 HR fire wall separates the proposed dispensary area, +
15	Fire Barriers	706	2010 NYS Building Code +	Provide code information and identify all applicable required Fire Barrier(s) and fire resistance requirement on Building Plans.	706.3.8 Separation of mixed occupancies. Where the provisions of Section 508.3 +	2 HR fire wall separates the dispensary area. See building life safety plan for additional +
16	Shaft Enclosures	707	2010 NYS Building Code +	Provide code information and identify all applicable required Shaft Wall(s) and fire resistance requirement on Building Plans.	Not Applicable	Not Applicable
17	Fire Partitions	708	2010 NYS Building Code +	Provide code information and identify all applicable required Fire Partition(s) and fire resistance requirement on Building Plans.	Separation of mixed occupancies. Where the provisions of Section 508.3 +	2 HR fire wall separates the dispensary area See building life safety plan for additional +



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
18	Horizontal Assemblies	711	2010 NYS Building Code - <input checked="" type="checkbox"/>	Provide code information and identify all applicable required Horizontal Assemblies and fire resistance requirement on Building Plans.	The fire-resistance rating of floor and roof assemblies shall not be less than that <input checked="" type="checkbox"/>	Floor Construction 2-HR Roof Construction 1-HR 2-HR Separates <input checked="" type="checkbox"/>
19	Fire Protection: Sprinkler System	903	2010 NYS Building Code - 2010 Fire <input checked="" type="checkbox"/>	Indicate Type of Sprinkler System: <input checked="" type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13 R <input type="checkbox"/> NFPA 13D Provide code information of all applicable requirements for Automatic Sprinkler Systems with code section cited.	903.2.6 Group M. An automatic sprinkler system shall be provided throughout buildings containing a Group <input checked="" type="checkbox"/>	Fully Sprinklered per NFPA 13
20	Alt. Fire Extinguishing System	904	2010 NYS Building Code - <input checked="" type="checkbox"/>	Provide code information of all applicable requirements for Alternative Automatic Fire-Extinguishing Systems with code section(s) cited.	Automatic fire-extinguishing systems installed as an alternative to the required <input checked="" type="checkbox"/>	Not Applicable. No Alt fire extinguishing system required <input checked="" type="checkbox"/>
21	Standpipe System	905	2010 NYS Building Code <input checked="" type="checkbox"/>	Provide code information of all applicable requirements for Standpipe Systems with code section(s) cited.	Not Applicable	Not Applicable. No standpipe system required. <input checked="" type="checkbox"/>
22	Fire Alarm & Detection Systems	907	2010 NYS Building Code - 2010 Fire <input checked="" type="checkbox"/>	Provide code information of all applicable requirements for Fire Alarm System(s) with code section cited. Indicate Type of Fire Alarm System <input type="checkbox"/> Addressable <input type="checkbox"/> Hardwired (zoned)	Fire protection systems shall be monitored by an approved supervising station in accordance with NFPA 72 <input checked="" type="checkbox"/>	Automatic hardwired fire and smoke detector alarm system. Please see building life safety plan for additional <input checked="" type="checkbox"/>



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
23	Emergency Alarm System	908	2010 NYS Building Code +	Provide code information of all applicable requirements for Emergency Alarm Systems with code section cited.	908.1 Group H occupancies. Emergency alarms for the +	Group M - Emergency alarm system not required.
24	Fire Department Connections	912	2010 NYS Building Code +	Identify Fire Department connections in accordance with NFPA applicable standard.	912.2 Location. With respect to hydrants, driveways, +	Fire department connections are located on the street side +
25	Exits	1001.1 & 2	2010 NYS Building Code	Identify on the Building Plans and documents, per each door, the following information: door width, door height, direction of swing, type of construction, hourly rating, and door closures.	1001.1 General. Buildings or portions thereof shall be provided with a means of +	Door width: 36" per door Door Height: 80" per door Direction of swing: +
26	Occupant Load	1004 & Table 1004.1.1	2010 NYS Building Code +	Identify the use/name of each room, dimensions of each room, and Occupant Loads per each room on the Building Plans.	TABLE 1004.1.1 MAXIMUM FLOOR AREA ALLOWANCES PER +	Area: 2400 SF / 60SF = 40 Occupancy Classification: Mercantile +
27	Egress Width	1005	2010 NYS Building Code +	Provide egress widths & cite applicable code section(s) and requirement(s) on the Building Plans	TABLE 1005.1 EGRESS WIDTH PER OCCUPANT +	Total Occupancy = 40 * 0.15 Egress width required = 8" +
28	Accessible Means of Egress	1007.1	2010 NYS Building Code	Provide accessible means of egress as per Section 1007 & cite applicable code section(s) and requirement(s) on the Building Plans.	1007.1 Accessible means of egress required. Accessible means of egress shall +	Total number of accessible means of egress: 2 - See building life safety plan for +



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
29	Doors, Gates, and Turnstiles	1008	2010 NYS Building Code	Means of egress doors shall meet the requirements of this section.	1008.1.1 Size of doors. The	Total Occupancy = 40 * 0.15
30	Interior Stairs	1009	2010 NYS Building Code	Identify the following information for each stairway on the Building Plan(s): the width of stairways; the height, width, depth and number of risers and treads; dimensions of landings; stairway construction type; and handrail height.	Not Applicable	Not Applicable
31	Ramps	1010.1	2010 NYS Building Code	Identify the following information of each ramp, on the Building Plan(s): width; total vertical rise; length of ramp; and handrail height.	Not Applicable	Not Applicable
32	Common Path of Travel	1014.3	2010 NYS Building Code	Identify on the Building Plan(s): the length of the "Common Path of Travel" per each room as per applicable building code requirements.	The exit access arrangement shall comply with Sections 1014 through	Common path of travel - Main Dispensary: 67'-0"
33	Exit Doorway Arrangement	1015	2010 NYS Building Code	Identify on the Building Plan(s): applicable building code requirements for all Exits and Exit Access Doorways per each room and required exits in all buildings.	1015.1 Exit or exit access doorways required. Two exits or exit access	Egress width required = 6" Total Egress width provided = 72"
34	Corridor Fire Rating	1017.1	2010 NYS Building Code	Identify, on the Building Plan(s): all corridors with required fire resistance and the applicable fire rating.	The corridor walls required to be fire-resistance rated	Not Applicable - No corridors provided.



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
35	Corridor Width	1017.2	2010 NYS Building Code +	Identify on the Building Plan(s): the width of all corridors. Provide applicable code section(s) and requirement(s).	1017.2 Corridor width. The minimum corridor width shall be as determined in Section +	Not Applicable - No corridors
36	Dead End Corridor	1017.3	2010 NYS Building Code +	Corridors shall not exceed the maximum dead end corridor length as per applicable code.	1017.3 Dead ends. Where more than one exit or exit access doorway is required +	Not Applicable - No dead end corridors provided.
37	Number of Exits and Continuity	1019	2010 NYS Building Code +	Identify on the Building Plan(s): required number of exits, continuity and arrangement as per the applicable code requirements.	1019.1 Minimum number of exits. All rooms and spaces within each story shall be +	OCCUPANT LOAD (persons per story) = 40 MINIMUM NUMBER OF +
38	Vertical Exit Enclosures	1020	2010 NYS Building Code +	Identify on the Building Plan(s): all applicable code requirements for each Vertical Exit Enclosure.	1020.1 Enclosures required. Interior exit stairways and interior exit ramps shall be +	Not Applicable - No vertical exit enclosures provided
39	Exit Passageways	1021	2010 NYS Building Code +	Identify on the Building Plan(s): all applicable code requirements for each Exit Passageway.	The width of exit passageways shall be determined as specified in +	Egress width required = 6" Total Egress width provided = 72" +
40	Horizontal Exits	1022	2010 NYS Building Code +	Identify on the Building Plan(s): all applicable code requirements for each Horizontal Exit.	1022.1 Horizontal exits. Horizontal exits serving as an exit in a means of egress +	Egress width required = 6" Total Egress width provided = 72" +



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
41	Exterior Exit Ramps & Stairways	1023	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements for each exterior exit ramps and stairways.	Exterior exit ramps and stairways shall not be used	Not Applicable - No ramps or stairways required to exit
42	Exit Discharge	1024	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements for each Exit Discharge.	Exits shall discharge directly to the exterior of the	All exits discharge directly to the exterior of the building.
43	Accessibility	1101.1 - 1110 & ICC/A117.1(03)	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements such that the design and construction of each building/facility provides accessibility to physically disabled persons.	Buildings and facilities shall be designed and constructed to be accessible in accordance with this code	The dispensary is designed and constructed to be accessible. See life safety plans for more information.
44	Energy Conservation	2010 NYS ECCC & IECC 2012	2010 NYS Building Code	Identify the R-Value and U-Value of each construction component and assembly of the building envelope as required in the applicable energy and building code(s).	The commercial building project shall comply with the requirements in Sections	The dispensary complies with the requirements of ASHRAE/IESNA 90.1
45	Emergency & Standby Power	2702.1	2010 NYS Building Code	Identify emergency & Standby Power locations and specifications of the system to be provided.	2702.1 Installation. Emergency and standby power systems required by	Emergency and standby power generators will be installed in accordance
46	Smoke Control Systems	2702.2.2	2010 NYS Building Code	Identify the Standby power for smoke control systems in accordance with Section 909.11 of NYS Building Code.	Not Applicable	Not Applicable



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
47	Plumbing Fixture Count	2902.1	2010 NYS Building Code	Identify on the Building Plan(s): the minimum plumbing facilities as per applicable plumbing code(s).	2901.1 Scope. The provisions of this chapter	(1) One Unisex ADA Public Restroom and (1) Unisex
48	Available Street Water Pressure		2010 NYS Building Code	Provide the available street or well water pressure.	Static Pressure: 65.5 PSI	Static Pressure: 65.5 PSI
49	Fire Apparatus Access Road	FC503.1	2010 NYS Building Code	Identify on the Site Plan: Fire Apparatus Road, Fire Lane and other Fire Service requirements per applicable Building and Fire Codes.	501.3 Construction documents. Construction documents for proposed fire	Service road and Fire Lane surrounds the facility. See Site Plan for additional

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PART IV – BUILDING CODE COMPLIANCE (pages 3-13)

CHECK ALL APPLICABLE CODES FOR THE FACILITY

- 2010 BUILDING CODE OF NYS
- 2010 FIRE CODE OF NYS
- 2010 PLUMBING CODE OF NYS
- 2010 MECHANICAL CODE OF NYS
- 2010 FUEL GAS CODE OF NYS
- 2010 ENERGY CONSERVATION CONSTRUCTION CODE OF NYS
- 2012 IECC COMMERCIAL PROVISIONS
- 2010 EXISTING BUILDING CODE OF NYS
- NFPA 101-06 LIFE SAFETY CODE
- ICC/ANSI A117.1-03 ACCESSIBLE AND USABLE BUILDINGS AND FACILITIES
- City of Utica Building Code

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CODE COMPLIANCE REVIEW

Applicant shall provide all applicable information in regards to the code topic and section listed below.

1 Code Compliance Review is based on the 2010 NY State Building Code for New Construction. If any other building code applies to the location or type of construction, provide applicable code and sections that most closely relates and references the code topic and information in the code sections listed below. Provide appropriate abbreviations for other applicable codes, such as FC: Fire Code, PC: Plumbing Code, MC: Mechanical Code, FGC: Fuel Gas Code, ECCC: Energy Conservation Code.

2 Provide the Required standard for each applicable code section. (i.e. area, quantity, classification type, materials, hourly separation, etc.). If section does not apply, indicate one of the following with explanation: NA: Not Applicable, NR: Not Required, NP: Not Permitted

3 Provide your facilities 'Actual' value for each required standard as per applicable code section.

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² (Allowed Code Value)	Facility's Actual Value ³
1	Use & Occupancy Classification	302.1 - 312	2010 NYS Building Code	Use & occupancy of this facility. Identify all applicable materials, class and quantities regarding Table 307.1.	309 I Mercantile Group M Mercantile Group M occupancy includes, among others, buildings and structures or a portion thereof, for the display and sale of merchandise, and involves stocks of goods, wares or merchandise incidental to such purposes and accessible to the public	Group M - Mercantile

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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² (Allowed Code Value)	Facility's Actual Value ³
2	Combustible Storage	413	2010 NYS Building Code	All combustible storage areas and rooms, as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	Group M, shall comply with NYS Fire Building Code - 1-hour fire-resistance-rated construction for combustible storage areas and rooms	The dispensary facility will not store hazardous materials. See building life safety plan for area and room dimensions, and exit requirements
3	Hazardous Materials	414	2010 NYS Building Code	All hazardous materials stored or used as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	414.2.5 Hazardous material in Group M display and storage areas and in Group S storage areas. The aggregate quantity of nonflammable solid and nonflammable or noncombustible liquid hazardous materials permitted within a single control area of a Group M display and storage area, a Group S storage area or an outdoor control area is permitted to exceed the maximum allowable quantities per control area specified in Tables 307.1(1) and 307.1(2) without classifying the building or use as a Group H occupancy, provided that the materials are displayed and stored in accordance with the Fire Code of New York State and quantities do not exceed the maximum allowable specified in Table 414.2.5(1).	The dispensary facility will not store hazardous materials. See building life safety plan for area and room dimensions, and exit requirements

4	Hazardous Materials Control Areas	414.2	2010 NYS Building Code	Provide additional information indicating number, size, materials stored, and quantity of each material.	414.2 Control areas Control areas shall comply with Sections 414 2.1 through 414 2.5 and the Fire Code of New York State	The dispensary facility will not store hazardous materials Referred to Palliatech's equipment list for additional information indicating the number, size, materials stored, and quantity of each material.
5	Building Area & Height	501-507	2010 NYS Building Code	Provide the building area & height Provide all calculations and cite applicable code sections for increased Building Area & Heights allowed per building code(s).	TABLE 503 Allowable Height and Building Areas. Type I-B, S. 11, A UL	Type I-B, S' 1, A 2400 SF. See Life Safety Plan for additional information.
6	Incidental Use Areas	508.2	2010 NYS Building Code	Identify all Incidental Use Areas and required fire separation of occupancies on Building Plans.	TABLE 508 2 Incidental Use Areas - Not Applicable	The dispensary does not have incidental use areas within the facility See building life safety plan for additional fire separation of occupancies

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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² Allowed Code Value	Facility's Actual Value ³
7	Mixed Occupancies	508.3	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	508 3 Mixed occupancies. Each portion of a building shall be individually classified in accordance with Section 302 1.	The dispensary is classified as Group M - Mercantile. See life safety plan for additional occupancy analysis
8	Nonseparated Uses	508.3.2	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	508 3 Mixed occupancies. Each portion of a building shall be individually classified in accordance with Section 302 1	The dispensary is classified as Group M - Mercantile. The adjacent facility is classified as Group B. The proposed dispensary includes a 2-HR fire wall separation See building life safety plan for additional information
9	Separated Uses (Ratio < 1)	508.3.3	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	TABLE 508 3 3 - Group M - Group B 1-HR	2 HR fire wall separates the dispensary area, please see building life safety plan for additional fire resistance ratings
10	Construction Classification	602	2010 NYS Building Code	Provide Construction Classification per each building included in Application.	602 2 Types I and II Type I and II construction are those types of construction in which the building elements listed in Table 601 are of noncombustible materials, except as permitted in Section 603 and elsewhere in this code	Building Type I-B Fully Sprinklered 2-HR rating separation wall 2-HR Floor construction 1-HR Roof construction.
11	Fire Resistance Rating Req'm't for Building Elements	Table 601	2010 NYS Building Code, 2010 NYS Fire Code	Provide Fire Resistance Rating per each building element as per Table 601. Identify rating & elements on Building Plans.	TABLE 601 FIRE-RESISTANCE RATING REQUIREMENTS FOR BUILDING ELEMENTS: Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor Construction 2-HR Roof Construction 1-HR	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor Construction 2-HR Roof Construction 1-HR

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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² Allowed Code Value	Facility's Actual Value ³
12	Exterior Wall Fire-Resistance Rating	Table 602	2010 NYS Building Code, 2010 NYS Fire Code	Identify required fire resistance rating of exterior walls on Building Plan(s).	FIRE-RESISTANCE RATING REQUIREMENTS FOR BUILDING ELEMENTS: Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor Construction 2-HR Roof Construction 1-HR	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor Construction 2-HR Roof Construction 1-HR
13	Exterior Fire Separation Distance	Table 602	2010 NYS Building Code, 2010 NYS Fire Code	Identify required fire separation distance of exterior walls between Buildings on Plan.	TABLE 602 FIRE-RESISTANCE RATING REQUIREMENTS FOR EXTERIOR WALLS BASED ON FIRE SEPARATION DISTANCE - OCCUPANCY GROUP F-1, M, S-1 FIRE SEPARATION DISTANCE = X (feet) = X>30	Rear Building = None Side, Adjacent Buildings = 100'-0" Front = Leland Ave. (Parking Lot) > 30
14	Fire Walls	705	2010 NYS Building Code, 2010 NYS Fire Code	Provide code information and identify all applicable required Fire Wall(s) and fire resistance requirement on Building Plans.	Walls shall be not less than 2-hour fire-resistance rated where separating buildings of Type II or V construction	Type IB Construction - 2 HR fire wall separates the proposed dispensary area, please see building life safety plan for additional fire resistance ratings.
15	Fire Barriers	706	2010 NYS Building Code, 2010 NYS Fire Code	Provide code information and identify all applicable required Fire Barrier(s) and fire resistance requirement on Building Plans.	706 3 8 Separation of mixed occupancies Where the provisions of Section 508 3.3 are applicable, the fire barrier separating mixed occupancies shall have a fire-resistance rating of not less than that indicated in Section 508.3.3 based on the occupancies being separated.	2 HR fire wall separates the dispensary area. See building life safety plan for additional fire resistance ratings

16	Shaft Enclosures	707	2010 NYS Building Code, 2010 NYS Fire Code	Provide code information and identify all applicable required Shaft Wall(s) and fire resistance requirement on Building Plans.	Not Applicable	Not Applicable
17	Fire Partitions	708	2010 NYS Building Code, 2010 NYS Fire Code	Provide code information and identify all applicable required Fire Partition(s) and fire resistance requirement on Building Plans.	Separation of mixed occupancies Where the provisions of Section 508.3.3 are applicable, the fire barrier separating mixed occupancies shall have a fire-resistance rating of not less than that indicated in Section 508.3.3 based on the occupancies being separated.	2 HR fire wall separates the dispensary area See building life safety plan for additional fire resistance ratings

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
18	Horizontal Assemblies	711	2010 NYS Building Code, 2010 NYS Fire Code	Provide code information and identify all applicable required Horizontal Assemblies and fire resistance requirement on Building Plans.	The fire-resistance rating of floor and roof assemblies shall not be less than that required by the building type of construction. Where the floor assembly separates mixed occupancies, the assembly shall have a fire-resistance rating of not less than that required by Section 508.3.3 based on the occupancies being separated	Floor Construction 2-HR Roof Construction 1-HR 2-HR Separates occupancies. See building life safety plan for additional fire resistance ratings.
19	Fire Protection: Sprinkler System	903	2010 NYS Building Code, 2010 NYS Fire Code	Indicate Type of Sprinkler System: NFPA 13 X NFPA 13 R NFPA 13D Provide code information of all applicable requirements for Automatic Sprinkler Systems with code section cited.	903.2.6 Group M. An automatic sprinkler system shall be provided throughout buildings containing a Group M occupancy where one of the following conditions exists. [F] 1. Where a Group M fire area exceeds 12,000 square feet (1115 m2), 2. Where a Group M fire area is located more than three stories above grade plane, or 3. Where the combined area of all Group M fire areas on all floors, including any mezzanines, exceeds 24,000 square feet (2230 m2).	Fully Sprinklered per NFPA 13
20	Alt. Fire Extinguishing System	904	2010 NYS Building Code, 2010 NYS Fire Code	Provide code information of all applicable requirements for Alternative Automatic Fire-Extinguishing Systems with code section(s) cited.	Automatic fire-extinguishing systems installed as an alternative to the required automatic sprinkler systems of Section 903 shall be approved by the code enforcement official. Automatic fire-extinguishing systems shall not be considered alternatives for the purposes of exceptions or reductions allowed by other requirements of this code	Not Applicable. No Alt fire extinguishing system required.
21	Standpipe System	905	2010 NYS Building Code, 2010 NYS Fire Code	Provide code information of all applicable requirements for Standpipe Systems with code section(s) cited.	Not Applicable	Not Applicable. No standpipe system required
22	Fire Alarm & Detection Systems	907	2010 NYS Building Code, 2010 NYS Fire Code	Provide code information of all applicable requirements for Fire Alarm System(s) with code section cited. Indicate Type of Fire Alarm System: Addressable Hardwired X (zoned)	Fire protection systems shall be monitored by an approved supervising station in accordance with NFPA 72 - 901.6.2 Fire alarm systems. Fire alarm systems required by the provisions of Section 907.2 of this code and Section 907.2 of the Fire Code of New York State shall be monitored by an approved supervising station in accordance with Section 907.14	Automatic hardware fire and smoke detector alarm system. Please see building life safety plan for additional fire resistance ratings

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
23	Emergency Alarm System	908	2010 NYS Building Code, 2010 NYS Fire Code	Provide code information of all applicable requirements for Emergency Alarm Systems with code section cited.	908.1 Group H occupancies. Emergency alarms for the detection and notification of an emergency condition in Group H occupancies shall be provided in accordance with Section 414.7	Group M - Emergency alarm system not required.

24	Fire Department Connections	912	2010 NYS Building Code, 2010 NYS Fire Code	Identify Fire Department connections in accordance with NFPA applicable standard.	912.2 Location With respect to hydrants, driveways, buildings and landscaping, fire department connections shall be so located that fire apparatus and hose connected to supply the system will not obstruct access to the buildings for other fire apparatus. The location of fire department connections shall be approved. 912.2.2 Existing buildings On existing buildings, wherever the fire department connection is not visible to approaching fire apparatus, the fire department connection shall be indicated by an approved sign mounted on the street front or on the side of the building. Such sign shall have the letters "FDC" at least 6 inches (152 mm) high and words in letters at least 2 inches (51 mm) high or an arrow to indicate the location. All such signs shall be subject to the approval of the code enforcement official.	Fire department connections are located on the street side of the building, fully visible and recognizable from the street or nearest point of fire department vehicle access or as otherwise approved by the code enforcement official.
25	Exits	1001.1 & 2	2010 NYS Building Code	Identify on the Building Plans and documents, per each door, the following information: door width, door height, direction of swing, type of construction, hourly rating, and door closures.	1001.1 General. Buildings or portions thereof shall be provided with a means of egress system as required by this chapter. The provisions of this chapter shall control the design, construction and arrangement of means of egress components required to provide an approved means of egress from structures and portions thereof. 1001.2 Minimum requirements It shall be unlawful to alter a building or structure in a manner that will reduce the number of exits or the capacity of the means of egress to less than required by this code. 1001.3 Maintenance Means of egress shall be maintained in accordance with the Fire Code of New York State	Door width: 36" per door Door Height: 80" per door Direction of swing: Exterior/Outward Type of Construction: Fire rated metal frame doors and Fire rated glazing doors Hourly rating: 1HR Door Closures will be provided on all exit doors. See life safety plans for additional information
26	Occupant Load	1004 & Table 1004.1.1	2010 NYS Building Code	Identify the use/name of each room, dimensions of each room, and Occupant Loads per each room on the Building Plans.	TABLE 1004.1.1 MAXIMUM FLOOR AREA ALLOWANCES PER OCCUPANT - Mercantile Areas on other floors - 60 gross	Area: 2400 SF / 60SF = 40 Occupancy Classification: Mercantile Occupancy Load: 40 See life safety plans for additional information
27	Egress Width	1005	2010 NYS Building Code	Provide egress widths & cite applicable code section(s) and requirement(s) on the Building Plans	TABLE 1005.1 EGRESS WIDTH PER OCCUPANT SERVED - WITH SPRINKLER SYSTEM = 0.15	Total Occupancy = 40 * 0.15 Egress width required = 8" Total Egress width provided = 72" Number of exits: 2
28	Accessible Means of Egress	1007.1	2010 NYS Building Code	Provide accessible means of egress as per Section 1007 & cite applicable code section(s) and requirement(s) on the Building Plans.	1007.1 Accessible means of egress required. Accessible means of egress shall comply with this section. Accessible spaces shall be provided with not less than one accessible means of egress. Where more than one means of egress is required by Section 1015.1 or 1019.1 from any accessible space, each accessible portion of the space shall be served by not less than two accessible means of egress	Total number of accessible means of egress: 2 - See building life safety plan for additional Accessible Means of Egress

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
29	Doors, Gates, and Turnstiles	1008	2010 NYS Building Code	Means of egress doors shall meet the requirements of this section.	1008.1.1 Size of doors. The minimum width of each door opening shall be sufficient for the occupant load thereof and shall provide a clear width of not less than 32 inches (813 mm). Clear openings of doorways with swinging doors shall be measured between the face of the door and the stop, with the door open 90 degrees (1.57 rad). Where this section requires a minimum clear width of 32 inches (813 mm) and a door opening includes two door leaves without a mullion, one leaf shall provide a clear opening width of 32 inches (813 mm). The maximum width of a swinging door leaf shall be 48 inches (1219 mm) nominal. Means of egress doors in a Group 1-2 occupancy used for the movement of beds shall provide a clear width not less than 41.5 inches (1054 mm). The height of doors shall not be less than 80 inches (2032 mm). 1008.2 Gates. Gates serving the means of egress system shall comply with the requirements of this section. Gates used as a component in a means of egress shall conform to the applicable requirements for doors.	Total Occupancy = 40 * 0.15 Egress width required = 6" Total Egress width provided = 72" Number of exits: 2 Please see building life safety plan for additional information on doors and gates.

30	Interior Stairs	1009	2010 NYS Building Code	Identify the following information for each stairway on the Building Plan(s): the width of stairways; the height, width, depth and number of risers and treads; dimensions of landings; stairway construction type; and handrail height.	Not Applicable	Not Applicable
31	Ramps	1010.1	2010 NYS Building Code	Identify the following information of each ramp, on the Building Plan(s): width; total vertical rise; length of ramp; and handrail height.	Not Applicable	Not Applicable
32	Common Path of Travel	1014.3	2010 NYS Building Code, 2010 NYS Fire Code	Identify on the Building Plan(s): the length of the "Common Path of Travel" per each room as per applicable building code requirements.	The exit access arrangement shall comply with Sections 1014 through 1017 and the applicable provisions of Sections 1003 through 1013	Common path of travel - Main Dispensary 67'-0"
33	Exit Doorway Arrangement	1015	2010 NYS Building Code	Identify on the Building Plan(s): applicable building code requirements for all Exits and Exit Access Doorways per each room and required exits in all buildings.	1015.1 Exit or exit access doorways required Two exits or exit access doorways from any space shall be provided where one of the following conditions exists: 1 The occupant load of the space exceeds the values in Table 1015.1 2 The common path of egress travel exceeds the limitations of Section 1014.3 3 Where required by Sections 1015.3, 1015.4 and 1015.5	Egress width required = 6" Total Egress width provided = 72" Number of exits: 2 See building life safety plan for additional Accessible Means of Egress
34	Corridor Fire Rating	1017.1	2010 NYS Building Code, 2010 NYS Fire Code	Identify, on the Building Plan(s): all corridors with required fire resistance and the applicable fire rating.	The corridor walls required to be fire-resistance rated shall comply with Section 708 for fire partitions Occupancy: M Occupant Load served by corridor Greater than 30 Required Fire - Resistance Rating (hrs). I-HR without sprinkler system	Not Applicable - No corridors provided

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
35	Corridor Width	1017.2	2010 NYS Building Code	Identify on the Building Plan(s): the width of all corridors. Provide applicable code section(s) and requirement(s).	1017.2 Corridor width The minimum corridor width shall be as determined in Section 1005.1, but not less than 44 inches (1118 mm)	Not Applicable - No corridors
36	Dead End Corridor	1017.3	2010 NYS Building Code	Corridors shall not exceed the maximum dead end corridor length as per applicable code.	1017.3 Dead ends Where more than one exit or exit access doorway is required, the exit access shall be arranged such that there are no dead ends in corridors more than 20 feet (6096 mm) in length.	Not Applicable - No dead end corridors provided.
37	Number of Exits and Continuity	1019	2010 NYS Building Code	Identify on the Building Plan(s): required number of exits, continuity and arrangement as per the applicable code requirements.	1019.1 Minimum number of exits All rooms and spaces within each story shall be provided with and have access to the minimum number of approved independent exits required by Table 1019.1 based on the occupant load of the story, except as modified in Section 1015.1 or 1019.2. For the purposes of this chapter, occupied roofs shall be provided with exits as required for stores The required number of exits from any story, basement or individual space shall be maintained until arrival at grade or the public way. - OCCUPANT LOAD (persons per story) = 1/500 MINIMUM NUMBER OF EXITS (per story) = 2	OCCUPANT LOAD (persons per story) = 40 MINIMUM NUMBER OF EXITS (per story) = 2
38	Vertical Exit Enclosures	1020	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements for each Vertical Exit Enclosure.	1020.1 Enclosures required. Interior exit stairways and interior exit ramps shall be enclosed with fire barriers constructed in accordance with Section 706 or horizontal assemblies constructed in accordance with Section 711, or both Exit enclosures shall have a fire-resistance rating of not less than 2 hours where	Not Applicable - No vertical exit enclosures provided
39	Exit Passageways	1021	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements for each Exit Passageway.	The width of exit passageways shall be determined as specified in Section 1005.1 but such width shall not be less than 44 inches (1118 mm), except that exit passageways serving an occupant load of less than 50 shall not be less than 36 inches (914 mm) in width. The required width of exit passageways shall be unobstructed.	Egress width required = 6" Total Egress width provided = 72" Number of exits: 2 See building life safety plan for additional information on Exit Passageways

40	Horizontal Exits	1022	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements for each Horizontal Exit.	1022.1 Horizontal exits. Horizontal exits serving as an exit in a means of egress system shall comply with the requirements of this section. A horizontal exit shall not serve as the only exit from a portion of a building, and where two or more exits are required, not more than one-half of the total number of exits or total exit width shall be horizontal exits.	Egress width required = 6" Total Egress width provided = 72" Number of exits = 2 - See building life safety plan for additional information.
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Appendix B – Architectural Program

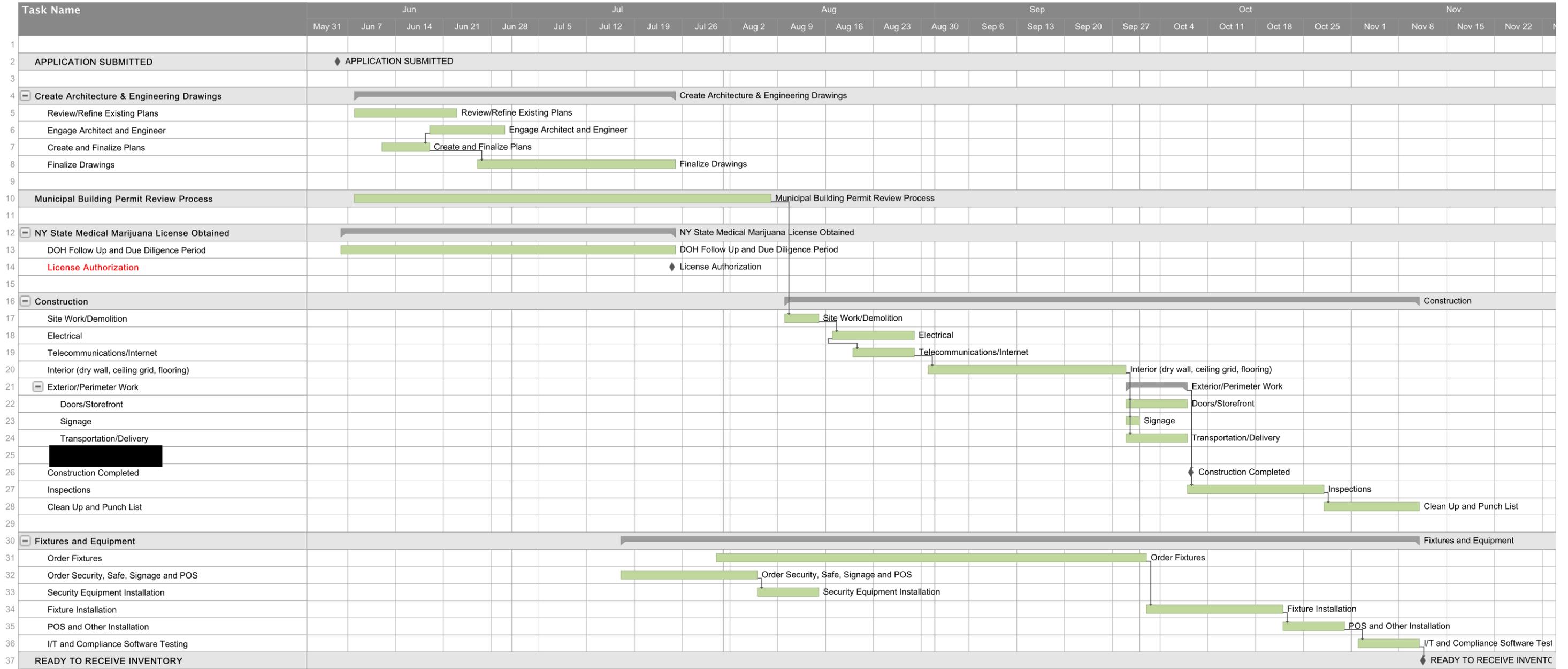
No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
41	Exterior Exit Ramps & Stairways	1023	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements for each exterior exit ramps and stairways.	Exterior exit ramps and stairways shall not be used as an element of a required means of egress for Group I-2 occupancies. For occupancies in other than Group I-2, exterior exit ramps and stairways shall be permitted as an element of a required means of egress for buildings not exceeding six stories above grade plane or having occupied floors more than 75 feet (22 860 mm) above the lowest level of fire department vehicle access.	Not Applicable - No ramps or stairways required to exit building.
42	Exit Discharge	1024	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements for each Exit Discharge.	Exits shall discharge directly to the exterior of the building. The exit discharge shall be at grade or shall provide direct access to grade. The exit discharge shall not reenter a building.	All exits discharge directly to the exterior of the building. See life safety plans for additional information.
43	Accessibility	1101.1 - 1110 & ICC/A117.1(03)	2010 NYS Building Code, ICC/A	Identify on the Building Plan(s): all applicable code requirements such that the design and construction of each building/facility provides accessibility to physically disabled persons.	Buildings and facilities shall be designed and constructed to be accessible in accordance with this code and ICC/ANSI A117.1	The dispensary is designed and constructed to be accessible. See life safety plans for more information.
44	Energy Conservation	2010 NYS ECCC & IECC 2012.	2010 NYS Building Code, 2010 NYS ECC & IECC 2012	Identify the R-Value and U-Value of each construction component and assembly of the building envelope as required in the applicable energy and building code(s).	The commercial building project shall comply with the requirements in Sections 502 (Building envelope requirements), 503 (Building mechanical systems), 504 (Service water heating) and 505 (Electrical power and lighting systems) in its entirety. As an alternative the commercial building project shall comply with the requirements of ASHRAE/IESNA 90.1 in its entirety. Commercial buildings shall comply with one of the following: 1. The requirements of ANSI/ASHRAE/IESNA 90.1 2. The requirements of Sections C402, C403, C404 and C405. In addition, commercial buildings shall comply with either Section C406.2, C406.3 or C406.4. 3. The requirements of Section C407, C402.4, C403.2, C404, C405.2, C405.3, C405.4, C405.6 and C405.7. The building energy cost shall be equal to or less than 85 percent of the standard reference design building.	The dispensary complies with the requirements of ASHRAE/IESNA 90.1 CLIMATE ZONES All other Group R Roofs Insulation entirely above deck U-0.048U-0.048 Metal buildings U-0.055U-0.055 Attic and other U-0.027U-0.027 Walls, Above Grade Mass U-0.090U-0.080 Metal building U-0.069U-0.069 Metal framed U-0.064U-0.064 Wood framed and other U-0.064U-0.051 Below-Grade Walls a Below-grade walls a C-0.119C-0.119 Floors Mass U-0.074U-0.064 Joist/Framing U-0.033U-0.033 Slab-on-Grade Floors Unheated slabs F-0.730F-0.540 Heated slabs F-0.860F-0.860
45	Emergency & Standby Power	2702.1	2010 NYS Building Code	Identify emergency & Standby Power locations and specifications of the system to be provided.	2702.1 Installation. Emergency and standby power systems required by this code or the Fire Code of New York State shall be installed in accordance with this code, NFPA 110 and 111	Emergency and standby power generators will be installed in accordance section 2701.1 and with the security engineering requirements. See life safety plans for additional information.

46	Smoke Control Systems	2702.2.2	2010 NYS Building Code	Identify the Standby power for smoke control systems in accordance with Section 909.11 of NYS Building Code.	Not Applicable	Not Applicable
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Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code* (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value* Allowed Code Value	Facility's Actual Value*
47	Plumbing Fixture Count	2902.1	2010 NYS Building Code - 2010 NYS Plumbing Code	Identify on the Building Plan(s) the minimum plumbing facilities as per applicable plumbing code(s).	2901.1 Scope The provisions of this chapter and the Plumbing Code of New York State shall govern the erection, installation, alteration, repairs, relocation, replacement, addition to, use or maintenance of plumbing equipment and systems. Plumbing systems and equipment shall be constructed, installed and maintained in accordance with the Plumbing Code of New York State	(1) One Unisex ADA Public Restroom and (1) Unisex ADA Employee Restroom provided See building plans. Separate facilities shall not be required in mercantile occupancies in which the maximum occupant load is 50 or less
48	Available Street Water Pressure		2010 NYS Building Code - 2010 NYS Plumbing Code	Provide the available street or well water pressure.	Static Pressure 65.5 PSI	Static Pressure 65.5 PSI
49	Fire Apparatus Access Road	FC503.1	2010 NYS Building Code - 2010 NYS Fire Code	Identify on the Site Plan: Fire Apparatus Road, Fire Lane and other Fire Service requirements per applicable Building and Fire Codes.	501.3 Construction documents Construction documents for proposed fire apparatus access, location of fire lanes and construction documents and hydraulic calculations for fire hydrant systems shall be submitted to the fire department for review and approval prior to construction.	Service road and Fire Lane surrounds the facility. See Site Plan for additional information

350 LELAND AVENUE: CONSTRUCTION TIMELINE





Dispensary - Utica, New York : LEED v4 Rating System BD+C: Retail

What is LEED?

LEED is the most recognized international certification for green buildings and was developed in the United States by the U.S. Green Building Council.

The United States Green Building Council (USGBC) is a non-profit organization that promotes sustainability and energy efficiency in the design, construction and operation of buildings.

Benefits of LEED

Owners that opt for LEED certification improve their image and competitiveness in the market. The reduced environmental impact of building activities results in improvements for generations of occupants.

- 15% to 30% Reduction in energy consumption
- 20% to 40% reduction in water consumption
- 10% to 30% Reduction in operation costs

Project Overview

The reuse and upgrading of the existing structure into an active dispensary facility will bring renewed aesthetic appeal, activity and energy to the property and the neighborhood. New signage, low-maintenance native landscaping and improved site lighting will dramatically enhance the character of the existing property and help differentiate the dispensary from the many commercial constructions along the avenue.

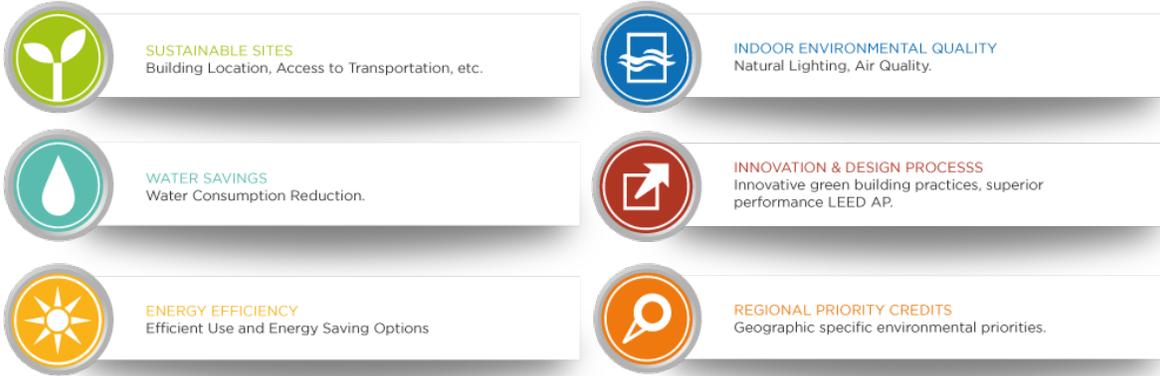
The facility will be renovated to meet or exceed all construction regulations and standards with a priority on environmental sustainability, including such features as the use of repurposed, sustainable building materials including stone, wood and metal, and re-landscaping with natural, locally indigenous plants and materials requiring minimal water and maintenance.

The re-use of this existing facility will promote the design and construction of a high performance environment pertaining to the overall sustainable goals. It will also ensure a responsible, profitable, and healthy place to work.

Upon completion of the Utica, New York dispensary and installation of all "green" features, the Company intends to seek LEED (Leadership in Energy and Environmental Design) certification through the LEED BD + C (Retail), based on responsible practices in water use, conservation, building materials, energy efficiency, indoor air quality, emission control, landscaping and design.

sumac

LEED Categories



BD + C : Retail

LEED BD+C: Retail is designed for interior spaces that will be used to conduct retail sale of consumer product goods, including both direct customer service areas (showroom) and preparation or storage areas that support customer service.

Sustainability Goals

ENERGY

- Maximize energy efficiency.
- Minimize energy demand and emissions.
- Increase reliability on renewably energy sources.

WASTE REDUCTION

- Packaging
- Maximize the re-use of waste products as a resource

CLEAN AND SECURE WORK ENVIRONMENT

- Efficient space planning.
- Effective ventilation system and sanitation procedures.
- Comprehensive security system coverage.
- Visibility control
- Restricted access.



RE: Build Out Timeline - Dispensary - UTICA (Oneida County)

DISPENSARY LOCATION: 350 Leland, Utica, NY 13502

PROPOSED PROJECT BUILD-OUT TIMELINE

Milestone	Timeframe
1. Authorization of License(s)	July, 2015
2. Architecture and Engineering Technical Drawings	August – September, 2015
3. Local Municipal Review Process* (* Tenant Build-out Only)	September, 2015
4. Construction Start	October, 2015
5. Construction Completion	December, 2016
6. Equipment Installation & Move-in	January, 2016

The above schedule is for preliminary review only, actual times may vary based on final design and construction scope and municipal review process.

Ronald Dean AIA, CSI, LEED AP BC+C
Vice President
Sumac Inc.
New York Licensed Architect #037858

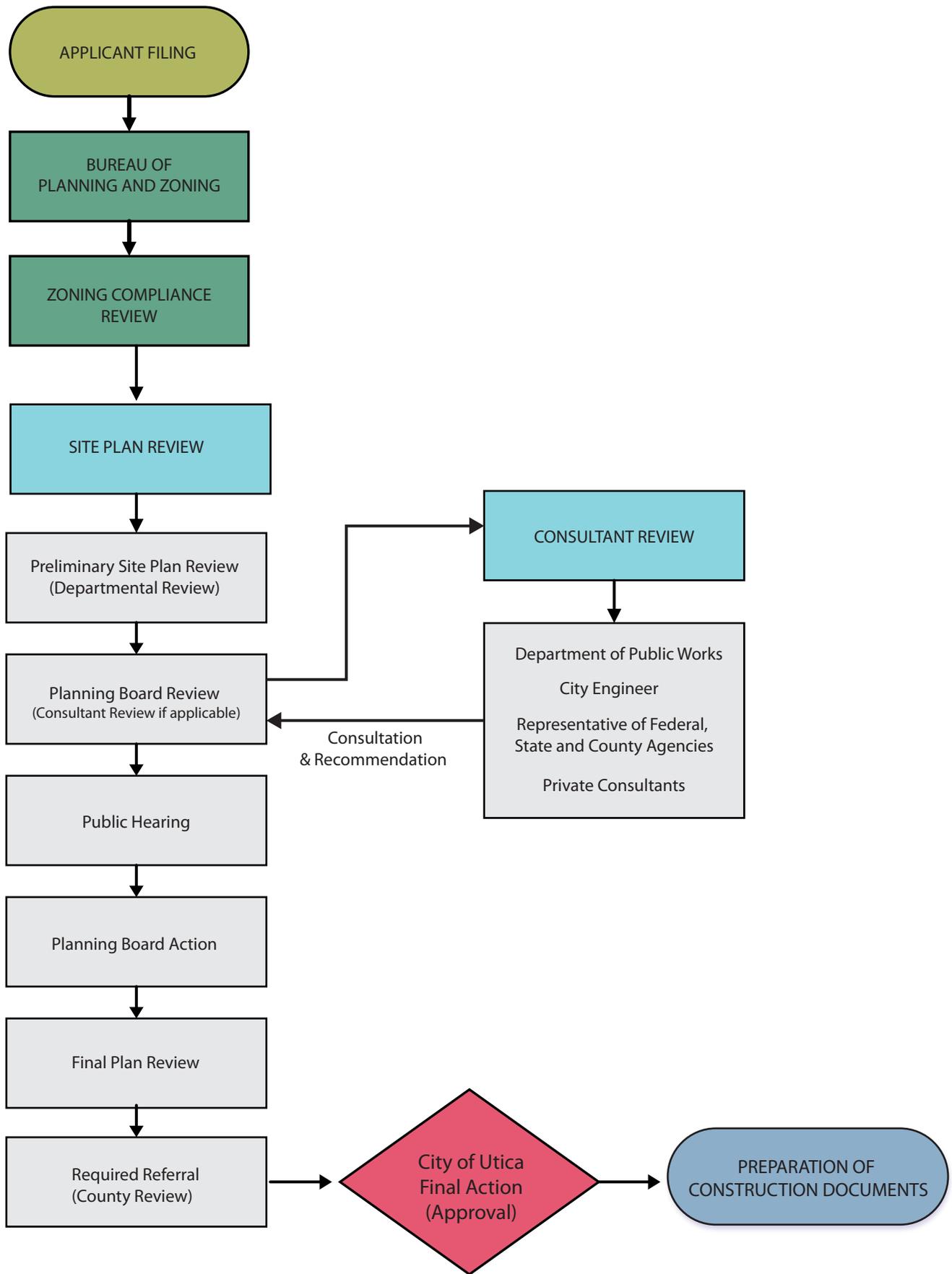


Figure A-1

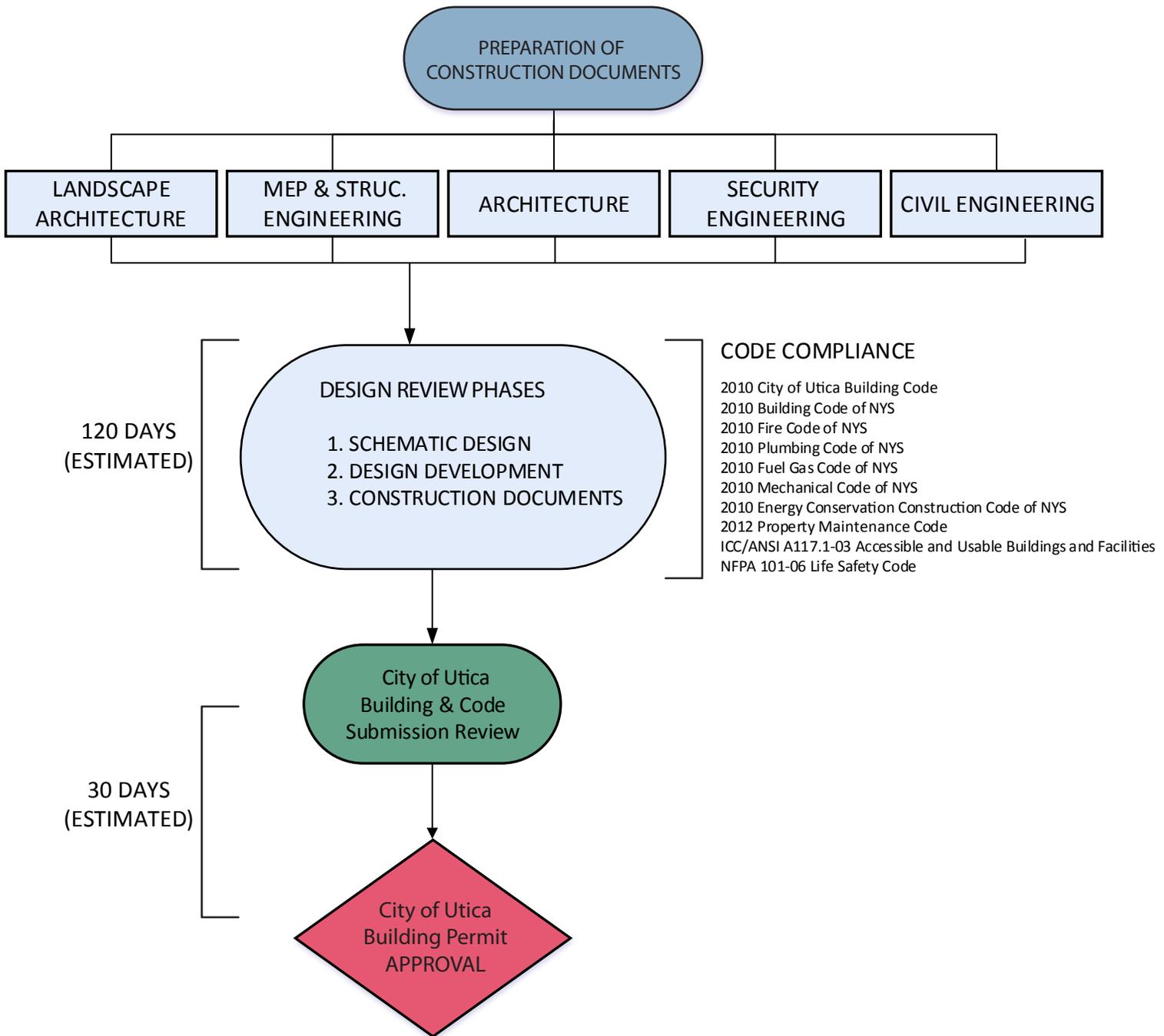
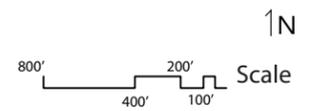
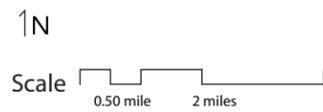
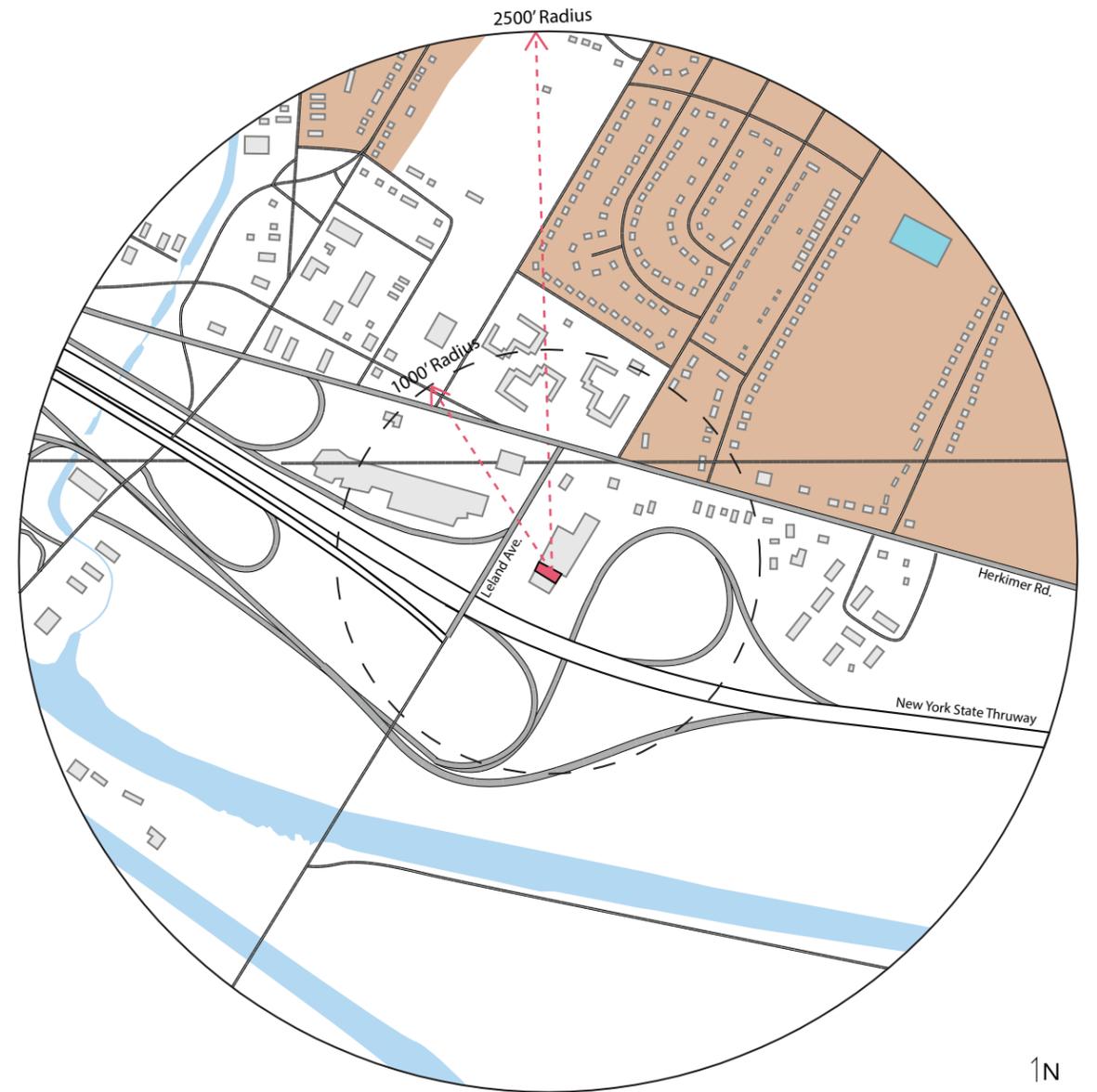
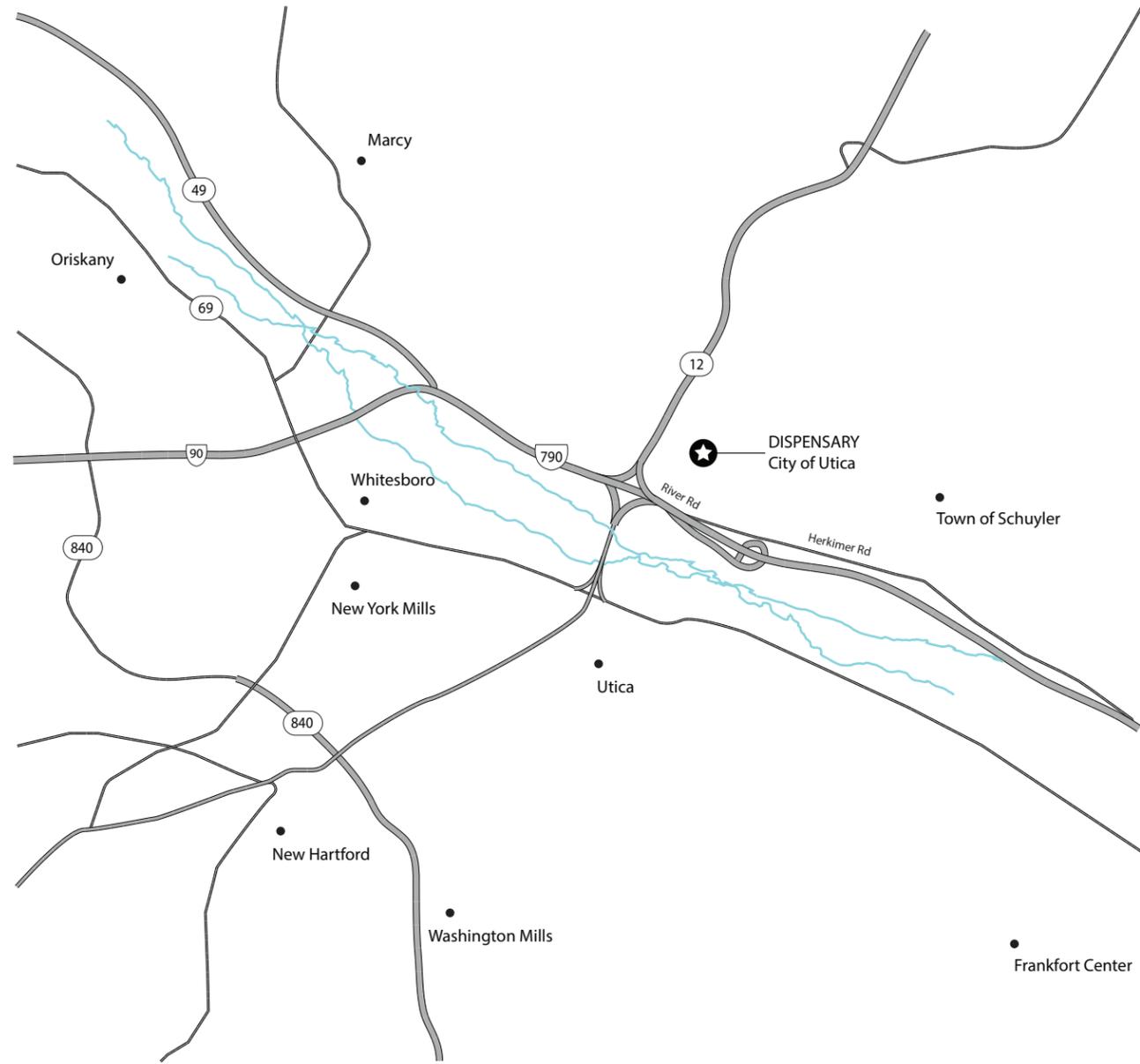


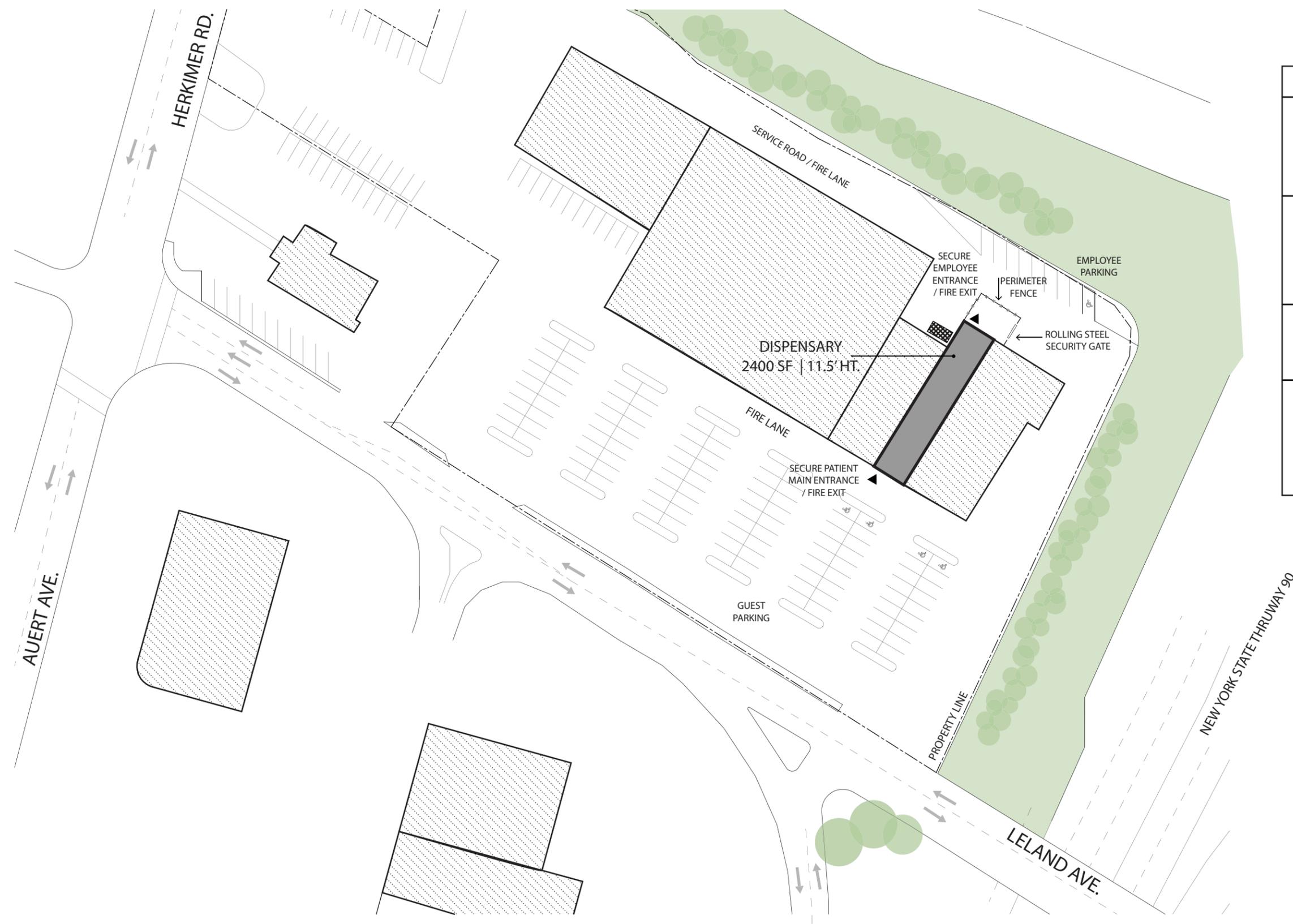
Figure A-2

REGIONAL LOCATION AREA MAP

LOCATION AREA MAP

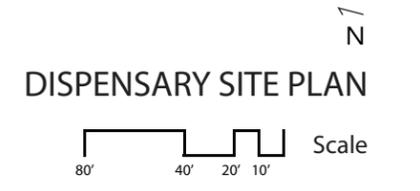


REGIONAL LOCATION MAP KEY	LOCATION MAP KEY
Proposed Sites	Proposed Site
Railroad	Preschools (Public or Private)
Lake shore	Elementary Schools / Secondary Schools
River	Day Care Facilities
Major Highway or Expressway	Residential (Zoned exclusively for Residential Use)
Airport	



Site Information	
Location	
Property address	350 Leland Ave Utica, NY 13502
Section, Block, & Lot	307.18-1-4/2
Parcel ID	2317
Zoning	Community Commercial
General	
Gross floor area	48,950 SF
Yr blt	1975
Nbr stories	1
Story height	11.5
Dispensary floor area	2400 SF
Land	
Acreage	4.7
Property class	Area of Neighborhood Shopping Centers (452)
Details	
Cond cd	3
Nbr identical	1
Air conditioning pct	100
Sprinkler pct	100
Alarm pct	100

LEGEND	
	Dispensary
	Emergency Power Systems
	10'-0" Exterior Fence
	Building Entrance / Exit



Redacted pursuant to N.Y. Public Officers Law, Art. 6

↑N

DISPENSARY ENLARGED PLAN



Building Information	
Construction Type	Type I-B
Sprinklers	FULLY SPRINKLERED
Building Height	11'-0" TOS
Building Area	2400 SF
Use and Occupancy	Group M - Mercantile
Fire Resistive Ratings	
Structural Frame	2 HR
Bearing Walls - Exterior	2 HR
Bearing Walls - Interior	1 HR
Floor Construction	2 HR
Roof Construction	1 HR
* Roof supports: Fire resistnace ratings of structural and bearing walls are permitted to be reduced by 1 HR where supporting the roof only.	

Function of Space	Area	Area Per Occupant	Occupancy Classification	Occupancy Load
Retail Dispensary	2400 SF	60 SF	Mercantile	40
Total Occupant Load				40
Sprinkler Factor				0.15
Egress width Required				6"
Total Egress Provided				72"
Total # of Exits				2

Estimate of Code required number of Plumbing Fixtures									
TABLE 403.1 MINIMUM NUMBER OF REQUIRED PLUMBING FIXTURES									
Mercantile (see Sections 403.2, 403.4, 403.4.1 and 403.4.2)	M	Retail stores, service stations, shops, salesrooms, markets and shopping centers	1 per 500	1 per 500	1 per 750	1 per 750	—	1 per 1,000	1 service sink
* Separate facilities shall not be required in mercantile occupancies in which the maximum occupant load is 50 or less.									

DOOR LEGEND	
	Main Entrance/Exit Door Width: 3'-0" Height: 6'-8" Single Full Glass - Metal Frame 1 HR rating
	2nd Entrance/Exit Door Width: 6'-0" - (2) 3'-0" Doors Height: 6'-8" Double Flush / Metal Framing 1 HR rating
	Interior Doors Width: 3'-0" Height: 6'-8" Single Flush / Alumn. Framing 0 HR rating

LIFE SAFETY LEGEND	
	Exit Sign
	2 HR Fire Wall / BLDG Separation
	1 HR Fire Wall
	Fire Extinguisher
	5'-0" Radius
	Existing Wall
	New Wall
	10'-0" Exterior Fence
	Building Exit

Redacted pursuant to N.Y. Public Officers Law, Art. 6

N
DISPENSARY LIFE SAFETY PLAN





PALLIATECH™

ReliefCenters™

PART III ENERGY SOURCES AND ENGINEERING SYSTEMS



Appendix B – Dispensary #4
Part III – Energy Sources and Engineering Systems

Utica Dispensary

Part III – Energy Sources & Engineering Systems (Outline and Specifications):

Energy Source:

Natural Gas

Engineering Systems:

- Heating System: Type: Furnace
 Size: 100 kBtu/h
 Efficiency: 96 AFUE
 Ventilation Requirements: ASHRAE 62.1
- Cooling System: Type: DX
 Size: 5 Tons
 Efficiency: 13 SEER
 Ventilation Requirements: ASHRAE 62.1
- Ventilation & Humidification System: Type: Exhaust
 Size: 100 CFM
 Efficiency: 70
 Ventilation Requirements: ASHRAE 62.1

Water Supply:

- Municipal Water Service (City of Utica/Mohawk County)

Sewage:

- Municipal Water Service (City of Utica/Mohawk County)

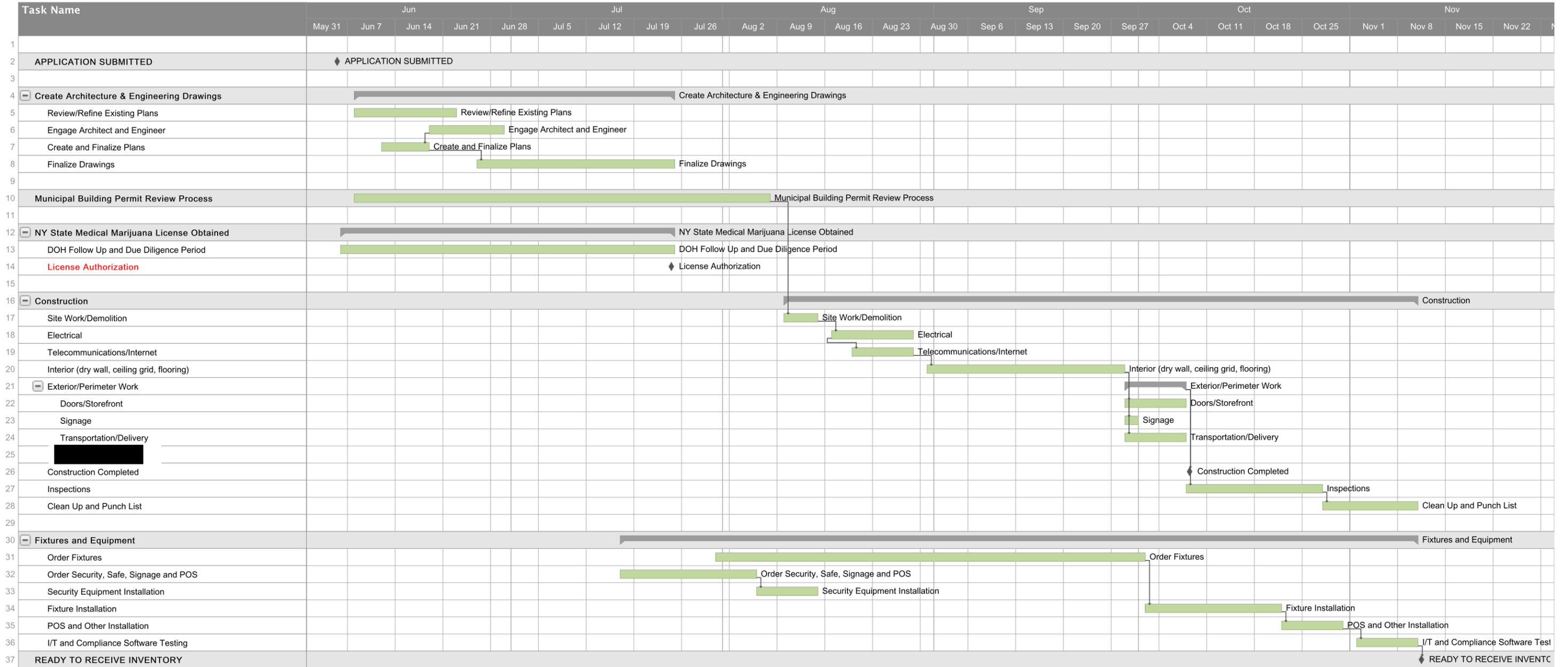
Emergency Power System:

Type: Generator

Size: 6 kW

Efficiency: 25%

350 LELAND AVENUE: CONSTRUCTION TIMELINE





Appendix B: Architectural Program

A SEPARATE "APPENDIX B" SHALL BE COMPLETED FOR EACH SEPARATE BUILDING AND/OR FACILITY INCLUDED IN THE ORGANIZATION'S BUSINESS PLAN

COMPANY INFORMATION

Business Name: Palliatech Inc.
Facility Type: Manufacturing Facility [checked] Dispensing Facility []
Use and Occupancy Classification: Group F-1
Building Construction Type and Classification: Type IB
Facility Address: 641 Ridge Rd, Chazy, NY 12921
Primary Contact Telephone number:
Primary Contact Fax number:

PART I - ARCHITECTURAL PROGRAM & CONSTRUCTION TIMELINE:

Applicant shall identify planning requirements, including but not limited to:

- Checkboxes for: TOWN BOARD APPROVAL, PLANNING BOARD APPROVAL, ZONING BOARD OF APPEALS APPROVAL, PREPARATION OF CONSTRUCTION DOCUMENTS, BUILDING PERMIT, BIDDING PHASE, CONTRACT AWARD PHASE PER EACH APPLICABLE CONTRACTOR (Identify all that apply), COMMENCEMENT OF CONSTRUCTION, COMPLETION OF CONSTRUCTION



Appendix B – Architectural Program

PART II – SITE PLAN(S)

Applicant shall provide the appropriate details for each of the following by identifying the location and dimension on the Site Plan attached to the application for each building location.

- Entrance and Exits
Public Parking Spaces
Staff Parking Spaces
Accessible Parking Spaces
Accessible Route(s)
Fire Lane and/or Fire Apparatus Road
Percentage of Green Space
Location of Emergency Power Systems
Loading & Unloading
Security Gates & Fences

PART III – ENERGY SOURCES & ENGINEERING SYSTEMS:

Applicant shall provide the following minimum information to outline the specifications relating to the energy sources and engineering systems of each building included in the application.

- Energy Source: Natural Gas, Oil, Electric, Solar, Other
Engineering Systems: Heating System (Hot water), Cooling System (ChilledW), Ventilation & Humidification Systems (Exhaust), Electrical Distribution Available, Water Supply, Sewage, Emergency Power System (Generato)



Appendix B – Architectural Program

PART IV – BUILDING CODE COMPLIANCE: (pages 3-13)

CHECK ALL APPLICABLE CODES FOR THE FACILITY

- 2010 BUILDING CODE OF NYS
2010 FIRE CODE OF NYS
2010 PLUMBING CODE OF NYS
2010 MECHANICAL CODE OF NYS
2010 FUEL GAS CODE OF NYS
2010 PROPERTY MAINTENANCE CODE OF NYS
2010 ENERGY CONSERVATION CONSTRUCTION CODE OF NYS
2012 IECC COMMERCIAL PROVISIONS
2010 EXISTING BUILDING CODE OF NYS
NEC NATIONAL ELECTRIC CODE, (Specify Applicable Version)
2014 NY CITY CONSTRUCTION CODE
2008 NY CITY CONSTRUCTION CODE
1968 NY CITY CONSTRUCTION CODE
NFPA 101-06 LIFE SAFETY CODE
ICC/ANSI A117.1-03 ACCESSIBLE AND USABLE BUILDINGS AND FACILITIES
OTHER



Appendix B – Architectural Program

Select Project

Type:
Check all that apply.
Refer to the Existing
Building Code for
definitions.

- New Building
- Repair
- Alteration Level 1
- Alteration Level 2

- Alteration Level 3
- Change of Occupancy
- Addition
- Historic Building

- Demolition
- Chapter 3. Prescriptive Compliance Method
- Chapter 13. Performance Compliance Method

Select Work

Involved:
Check all that apply.

- General Construction
- Roofing
- Asbestos
Abatement/Environmental
- Fire Alarm

- Structural
- Mechanical
- Plumbing
- Electrical

- Site Work
- Sprinkler
- Elevators
- Other: _____

CODE COMPLIANCE REVIEW

Applicant shall provide all applicable information in regards to the code topic and section listed below.

- 1 Code Compliance Review is based on the 2010 NY State Building Code for New Construction. If any other building code applies to the location or type of construction, provide applicable code and sections that most closely relates and references the code topic and information in the code sections listed below. Provide appropriate abbreviations for other applicable codes, such as: **FC: Fire Code, PC: Plumbing Code, MC: Mechanical Code, FGC: Fuel Gas Code, ECCC: Energy Conservation Code.**
- 2 Provide the Required standard for each applicable code section. (i.e.: area, quantity, classification type, materials, hourly separation, etc.). If section does not apply, indicate one of the following with explanation: **NA: Not Applicable, NR: Not Required, NP: Not Permitted**
- 3 Provide your facilities "Actual" value for each required standard as per applicable code section.

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
1	Use & Occupancy Classification	302.1 - 312	2010 NYS Building Code	Use & occupancy of this facility. Identify all applicable materials, class and quantities regarding Table 307.1.	306.1 Factory Industrial Group F. Factory Industrial Group F occupancy includes among others the	Group F-1



Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
2	Combustible Storage	413	2010 NYS Building Code - 2010 Fire	All combustible storage areas and rooms, as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	413.1 General. High-piled stock or rack storage in any occupancy group shall comply with the Fire Code	Sprinklers are installed in proposed areas as complete sprinkler systems providing fire protections in accordance
3	Hazardous Materials	414	2010 NYS Building Code - 2010 Fire Code of	All hazardous materials stored or used as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	The provisions of this section shall apply to buildings and structures occupied for the manufacturing processing	Sprinklers are installed in proposed areas as complete sprinkler systems providing fire protections in accordance with Section 413.2 and using
4	Hazardous Materials Control Areas	414.2	2010 NYS Building	Provide additional information indicating number, size, materials stored, and quantity of each material.	Control areas shall comply with Sections 414.2.1	Sprinklers are installed in proposed areas as complete
5	Building Area & Height	501-507	2010 NYS Building Code	Provide the building area & height Provide all calculations and cite applicable code sections for increased Building Area & Heights allowed per building code(s).	Height and Areas are defined in Table 503. Allowable areas per floor is	Type I-B, S: 1, A: 66,000 SF. See Life Safety Plan for additional information.
6	Incidental Use Areas	508.2	2010 NYS Building	Identify all Incidental Use Areas and required fire separation of occupancies on Building Plans.	As identify in Table 508.2, the following room or area	The existing automatic sprinkler system protection



Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
7	Mixed Occupancies	508.3	2010 NYS Building Code - 508.3	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	The mixed occupancies, Group F-1 and Group B, require a separation of 1HR	The proposed area is separated by 1HR fire-rated construction and protected by
8	Nonseparated Uses	508.3.2	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	Buildings or portions of buildings that comply with the provisions of this section	All other portions of the building will comply with non separated uses. See building
9	Separated Uses (Ratio < 1)	508.3.3	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	The mixed occupancies, Group F-1 and Group B, require a separation of 1HR	The proposed area is separated by 1HR fire-rated construction and protected by
10	Construction Classification	602	2010 NYS Building Code	Provide Construction Classification per each building included in Application.	602.2 Types I and II. Type I and II construction are those	Building Type I-B Fully Sprinklered 2-HR Structural
11	Fire Resistance Rating Req'm't for Building Elements	Table 601	2010 NYS Building Code	Provide Fire Resistance Rating per each building element as per Table 601. Identify rating & elements on Building Plans.	Table 601: Fire-resistance rating requirements for building elements identify	The proposed manufacturing facility structural elements consist of a fire-resistance of



Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
12	Exterior Wall Fire-Resistance Rating	Table 602	2010 NYS Building Code +	Identify required fire resistance rating of exterior walls on Building Plan(s).	FIRE-RESISTANCE RATING REQUIREMENTS FOR BUILDING +	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor +
13	Exterior Fire Separation Distance	Table 602	2010 NYS Building Code +	Identify required fire separation distance of exterior walls between Buildings on Plan.	TABLE 602 FIRE-RESISTANCE RATING REQUIREMENTS +	Building 1 and 2 are separated by an existing 2-HR fire walls. The propose +
14	Fire Walls	705	2010 NYS Building Code	Provide code information and identify all applicable required Fire Wall(s) and fire resistance requirement on Building Plans.	Each portion of a building separated by one or more fire walls, need to comply +	The manufacturing facility is separated by an existing 2-HR fire wall. In addition, the proposed facility classified +
15	Fire Barriers	706	2010 NYS Building Code +	Provide code information and identify all applicable required Fire Barrier(s) and fire resistance requirement on Building Plans.	706.3.7 Control areas. Fire barriers separating control areas shall have a +	Fire Barriers, as defined in Sections 706, will utilized a 1-HR fire rated construction +
16	Shaft Enclosures	707	2010 NYS Building Code +	Provide code information and identify all applicable required Shaft Wall(s) and fire resistance requirement on Building Plans.	Not Applicable	No shaft enclosures will be required for the proposed area. In the case where the +
17	Fire Partitions	708	2010 NYS Building Code +	Provide code information and identify all applicable required Fire Partition(s) and fire resistance requirement on Building Plans.	Not Applicable	No fire partitions will be required for the proposed area. In the case where the +



Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
18	Horizontal Assemblies	711	2010 NYS Building Code - <input checked="" type="checkbox"/>	Provide code information and identify all applicable required Horizontal Assemblies and fire resistance requirement on Building Plans.	The fire-resistance rating of floor and roof assemblies shall not be less than that <input checked="" type="checkbox"/>	Building 1: In accordance with Section 711, fire resistance of floor and roof <input checked="" type="checkbox"/>
19	Fire Protection: Sprinkler System	903	2010 NYS Building Code - 2010 Fire <input checked="" type="checkbox"/>	Indicate Type of Sprinkler System: <input checked="" type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13 R <input type="checkbox"/> NFPA 13D Provide code information of all applicable requirements for Automatic Sprinkler Systems with code section cited.	903.2.3 Group F-1. An automatic sprinkler system shall be provided throughout all buildings containing a <input checked="" type="checkbox"/>	Building 1: Fully automatic sprinkler system. Building 2: Fully automatic sprinkler system. <input checked="" type="checkbox"/>
20	Alt. Fire Extinguishing System	904	2010 NYS Building Code - <input checked="" type="checkbox"/>	Provide code information of all applicable requirements for Alternative Automatic Fire-Extinguishing Systems with code section(s) cited.	904.2 Where required. Automatic fire-extinguishing systems installed as an <input checked="" type="checkbox"/>	As required by Section 904.2.1 for commercial hood and duct systems. An <input checked="" type="checkbox"/>
21	Standpipe System	905	2010 NYS Building <input checked="" type="checkbox"/>	Provide code information of all applicable requirements for Standpipe Systems with code section(s) cited.	Standpipe systems shall be provided in new buildings <input checked="" type="checkbox"/>	The proposed area will not require a standpipe system. <input checked="" type="checkbox"/>
22	Fire Alarm & Detection Systems	907	2010 NYS Building Code - 2010 Fire <input checked="" type="checkbox"/>	Provide code information of all applicable requirements for Fire Alarm System(s) with code section cited. Indicate Type of Fire Alarm System <input type="checkbox"/> Addressable <input type="checkbox"/> Hardwired (zoned)	907.3 Where required— existing buildings and structures. Fire alarm systems and smoke alarms <input checked="" type="checkbox"/>	Fully automatic sprinkler system in accordance with 903.3.1.1 and or 903.3.1.2.



Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
23	Emergency Alarm System	908	2010 NYS Building Code +	Provide code information of all applicable requirements for Emergency Alarm Systems with code section cited.	908.6 Refrigeration systems. Refrigeration system +	Emergency alarm system not required.
24	Fire Department Connections	912	2010 NYS Building Code +	Identify Fire Department connections in accordance with NFPA applicable standard.	912.2.2 Existing buildings. On existing buildings, +	The proposed facility is equipped with adequate fire +
25	Exits	1001.1 & 2	2010 NYS Building Code	Identify on the Building Plans and documents, per each door, the following information: door width, door height, direction of swing, type of construction, hourly rating, and door closures.	1001.1 General. Buildings or portions thereof shall be provided with a means of +	Door width: 36" per door Door Height: 80" per door Direction of swing: +
26	Occupant Load	1004 & Table 1004.1.1	2010 NYS Building Code +	Identify the use/name of each room, dimensions of each room, and Occupant Loads per each room on the Building Plans.	TABLE 1004.1.1 MAXIMUM FLOOR AREA ALLOWANCES PER +	Manufacturing Area: 15300 SF / 200 SF = 77 Office Area: 1650 SF / 100 +
27	Egress Width	1005	2010 NYS Building Code +	Provide egress widths & cite applicable code section(s) and requirement(s) on the Building Plans	TABLE 1005.1 EGRESS WIDTH PER OCCUPANT +	Total Occupancy = 112 * 0.15 Egress width required = 17" +
28	Accessible Means of Egress	1007.1	2010 NYS Building Code	Provide accessible means of egress as per Section 1007 & cite applicable code section(s) and requirement(s) on the Building Plans.	1007.1 Accessible means of egress required. Accessible means of egress shall +	Total number of accessible means of egress: 17. See building life safety plan for +



Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
29	Doors, Gates, and Turnstiles	1008	2010 NYS Building Code	Means of egress doors shall meet the requirements of this section.	1008.1.1 Size of doors. The	Total Occupancy = 112 * 0.15
30	Interior Stairs	1009	2010 NYS Building Code	Identify the following information for each stairway on the Building Plan(s): the width of stairways; the height, width, depth and number of risers and treads; dimensions of landings; stairway construction type; and handrail height.	Not Applicable	Not Applicable. The location of the manufacturing is designated in a (1) one-story building. See Life Safety
31	Ramps	1010.1	2010 NYS Building Code	Identify the following information of each ramp, on the Building Plan(s): width; total vertical rise; length of ramp; and handrail height.	Not Applicable	Not Applicable
32	Common Path of Travel	1014.3	2010 NYS Building Code	Identify on the Building Plan(s): the length of the "Common Path of Travel" per each room as per applicable building code requirements.	The exit access arrangement shall comply with Sections 1014 through	The common path of travel does not exceed 75 feet, in accordance with Section
33	Exit Doorway Arrangement	1015	2010 NYS Building Code	Identify on the Building Plan(s): applicable building code requirements for all Exits and Exit Access Doorways per each room and required exits in all buildings.	1015.1 Exit or exit access doorways required. Two exits or exit access	Total Occupancy = 112 * 0.15 Egress width required = 17" Total Egress width provided =
34	Corridor Fire Rating	1017.1	2010 NYS Building Code	Identify, on the Building Plan(s): all corridors with required fire resistance and the applicable fire rating.	The corridor walls required to be fire-resistance rated	0-HR, Fully automatic sprinkler system in



Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
35	Corridor Width	1017.2	2010 NYS Building Code +	Identify on the Building Plan(s): the width of all corridors. Provide applicable code section(s) and requirement(s).	1017.2 Corridor width. The minimum corridor width shall be as determined in Section +	All building corridors = 60" See building plans for additional information. +
36	Dead End Corridor	1017.3	2010 NYS Building Code +	Corridors shall not exceed the maximum dead end corridor length as per applicable code.	1017.3 Dead ends. Where more than one exit or exit access doorway is required +	Not Applicable - No dead end corridors provided. See building plans for additional +
37	Number of Exits and Continuity	1019	2010 NYS Building Code +	Identify on the Building Plan(s): required number of exits, continuity and arrangement as per the applicable code requirements.	1019.1 Minimum number of exits. All rooms and spaces within each story shall be +	OCCUPANT LOAD (persons per story) = 112 MINIMUM NUMBER OF +
38	Vertical Exit Enclosures	1020	2010 NYS Building Code +	Identify on the Building Plan(s): all applicable code requirements for each Vertical Exit Enclosure.	Not Applicable	Not Applicable - No vertical exit enclosures provided. See Life Safety Plans for +
39	Exit Passageways	1021	2010 NYS Building Code +	Identify on the Building Plan(s): all applicable code requirements for each Exit Passageway.	The width of exit passageways shall be determined as specified in +	All building corridors = 60" Egress width required = 17" Total Egress width provided +
40	Horizontal Exits	1022	2010 NYS Building Code +	Identify on the Building Plan(s): all applicable code requirements for each Horizontal Exit.	1022.1 Horizontal exits. Horizontal exits serving as an exit in a means of egress +	All building corridors = 60" Egress width required = 17" Total Egress width provided +



Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
41	Exterior Exit Ramps & Stairways	1023	2010 NYS Building Code +	Identify on the Building Plan(s); all applicable code requirements for each exterior exit ramps and stairways.	Exterior exit ramps and stairways shall not be used +	Not Applicable - No ramps or stairways required to exit +
42	Exit Discharge	1024	2010 NYS Building Code +	Identify on the Building Plan(s); all applicable code requirements for each Exit Discharge.	Exits shall discharge directly to the exterior of the +	All exits discharge directly to the exterior of the building. +
43	Accessibility	1101.1 - 1110 & ICC/A117.1(03)	2010 NYS Building Code	Identify on the Building Plan(s); all applicable code requirements such that the design and construction of each building/facility provides accessibility to physically disabled persons.	Buildings and facilities shall be designed and constructed to be accessible in accordance with this code +	The dispensary is designed and constructed to be accessible. See life safety plans for more information +
44	Energy Conservation	2010 NYS ECCC & IECC 2012	2010 NYS ECCC - IECC +	Identify the R-Value and U-Value of each construction component and assembly of the building envelope as required in the applicable energy and building code(s).	The commercial building project shall comply with the requirements in Sections +	The dispensary complies with the requirements of ASHRAE/IESNA 90.1 +
45	Emergency & Standby Power	2702.1	2010 NYS Building Code +	Identify emergency & Standby Power locations and specifications of the system to be provided.	2702.1 Installation. Emergency and standby power systems required by +	Emergency and standby power generators will be installed in accordance +
46	Smoke Control Systems	2702.2.2	2010 NYS Building Code +	Identify the Standby power for smoke control systems in accordance with Section 909.11 of NYS Building Code.	The smoke control system shall be supplied with two sources of power. Primary +	All power systems will comply with NFPA 70.



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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² /Allowed Code Value	Facility's Actual Value ³
47	Plumbing Fixture Count	2902.1	2010 NYS Building Code <input type="checkbox"/>	Identify on the Building Plan(s): the minimum plumbing facilities as per applicable plumbing code(s).	2901.1 Scope. The provisions of this chapter <input type="checkbox"/>	Water Closet (M): 18 Water Closet (F): 15 <input type="checkbox"/>
48	Available Street Water Pressure		2010 NYS Building Code <input type="checkbox"/>	Provide the available street or well water pressure.	The water distribution system shall be designed, <input type="checkbox"/>	The design of the water distribution system will <input type="checkbox"/>
49	Fire Apparatus Access Road	FC503.1	2010 NYS Building Code <input type="checkbox"/>	Identify on the Site Plan: Fire Apparatus Road, Fire Lane and other Fire Service requirements per applicable Building and Fire Codes.	501.3 Construction documents. Construction documents for proposed fire <input type="checkbox"/>	Service road and Fire Lane surrounds the facility. See Site Plan for additional <input type="checkbox"/>

Chazy Manufacturing Facility - Medical Marijuana Program

DOH 5146 PART IV

Appendix B – Architectural Program

PART IV – BUILDING CODE COMPLIANCE: (pages 3-13)

CHECK ALL APPLICABLE CODES FOR THE FACILITY

- 2010 BUILDING CODE OF NYS
- 2010 FIRE CODE OF NYS
- 2010 PLUMBING CODE OF NYS
- 2010 MECHANICAL CODE OF NYS
- 2010 FUEL GAS CODE OF NYS
- 2010 ENERGY CONSERVATION CONSTRUCTION CODE OF NYS
- 2012 IECC COMMERCIAL PROVISIONS
- 2010 EXISTING BUILDING CODE OF NYS
- NEC NATIONAL ELECTRIC CODE, (Specify Applicable Version)
- NFPA 101-06 LIFE SAFETY CODE
- ICC/ANSI A117.1-03 ACCESSIBLE AND USABLE BUILDINGS AND FACILITIES
- OTHER

Appendix B – Architectural Program

CODE COMPLIANCE REVIEW

Applicant shall provide all applicable information in regards to the code topic and section listed below.

1 Code Compliance Review is based on the 2010 NY State Building Code for New Construction. If any other building code applies to the location or type of construction, provide applicable code and sections that most closely relates and references the code topic and information in the code sections listed below. Provide appropriate abbreviations for other applicable codes, such as FC: Fire Code, PC: Plumbing Code, MC: Mechanical Code, FGC: Fuel Gas Code, ECCC: Energy Conservation Code.

2 Provide the Required standard for each applicable code section, (i.e. area, quantity classification type, materials, hourly separation, etc.). If section does not apply, indicate one of the following with explanation: NA: Not Applicable, NR: Not Required, NP: Not Permitted

3 Provide your facilities "Actual" value for each required standard as per applicable code section.

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² Allowed Code Value	Facility's Actual Value ³
1	Use & Occupancy Classification	302.1 - 312	2010 NYS Building Code	Use & occupancy of this facility. Identify all applicable materials, class and quantities regarding Table 307.1.	306.1 Factory Industrial Group F. Factory Industrial Group F occupancy includes, among others, the use of a building or structure, or a portion thereof, for assembling, disassembling, fabricating, finishing, manufacturing, packaging, repair or processing operations that are not classified as a Group H hazardous or Group S storage occupancy)	Group F-1

Appendix B – Architectural Program

No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² Allowed Code Value	Facility's Actual Value ³
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2	Combustible Storage	413	2010 NYS Building Code	All combustible storage areas and rooms, as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	413.1 General. High-piled stock or rack storage in any occupancy group shall comply with the Fire Code of New York State. 413.2 Attic, under-floor and concealed spaces. Attic, under-floor and concealed spaces used for storage of combustible materials shall be protected on the storage side as required for 1-hour fire-resistance-rated construction. Openings shall be protected by assemblies that are self-closing and are of noncombustible construction or solid wood core not less than 13/4 inch (45 mm) in thickness. Exceptions: 1. Areas protected by approved automatic sprinkler systems. 2. Group R-3 and U occupancies.	Sprinklers are installed in proposed areas as complete sprinkler systems providing fire protections in accordance with Section 413.2, and using NFPA 13. See Life Safety Plans and Palliatech's equipment list for additional information.
3	Hazardous Materials	414	2010 NYS Building Code	All hazardous materials stored or used as per applicable Building and Fire Codes. Identify all combustible stored materials, area and room dimensions, all required fire separations, and exit requirements.	The provisions of this section shall apply to buildings and structures occupied for the manufacturing, processing, dispensing, use or storage of hazardous materials. The provisions of this section shall apply to the storage and use of hazardous materials in excess of the maximum allowable quantities per control area listed in Section 307.1.	Sprinklers are installed in proposed areas as complete sprinkler systems providing fire protections in accordance with Section 413.2, and using NFPA 13. See Life Safety Plans and Palliatech's equipment list for additional information.
4	Hazardous Materials Control Areas	414.2	2010 NYS Building Code	Provide additional information indicating number, size, materials stored, and quantity of each material.	Control areas shall comply with Sections 414.2.1 through 414.2.5 and the Fire Code of New York State.	Sprinklers are installed in proposed areas as complete sprinkler systems providing fire protections in accordance with Section 413.2, and using NFPA 13. See Life Safety Plans and Palliatech's equipment list for additional information.
5	Building Area & Height	501-507	2010 NYS Building Code	Provide the building area & height Provide all calculations and cite applicable code sections for increased Building Area & Heights allowed per building code(s).	Height and Areas are defined in Table 503. Allowable areas per floor is calculated using the tabular area from 503, plus the area increase for sprinkler system permitted by section 506.3 and the area increase for frontage permitted by section 506.2 Required by code: BLDG 2, Type IB, Group F-1, 1-story, UL	Type I-B, S: 1, A: 66,000 SF. See Life Safety Plan for additional information.
6	Incidental Use Areas	508.2	2010 NYS Building Code	Identify all Incidental Use Areas and required fire separation of occupancies on Building Plans.	As identify in Table 508.2, the following room or area will required fire separation: 1. Furnace room where any piece of equipment is over 400,000 Btu per hour input 1 hour or provide automatic fire-extinguishing system 2. Rooms with boilers where the largest piece of equipment is over 15 psi and 10 horsepower 1 hour or provide automatic fire-extinguishing system 3. Refrigerant machinery rooms 1 hour or provide automatic sprinkler system	The existing automatic sprinkler system protection eliminates the requirement for fire separation, the incidental use room is to be separated by a construction capable of resisting the passage or control of smoke, per section, as permitted by Table 508.2.

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No.	Topic	NYS Building Code Section	Other Code ¹ (as Stated Above) & Section	Minimum Information Required to be Identified for this building/facility on the Building or Site Plan(s)	Required Code Value ² Allowed Code Value	Facility's Actual Value ³
7	Mixed Occupancies	508.3	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	The mixed occupancies, Group F-1 and Group B, require a separation of IHR (Table 508.3.3) with the provisions of 903.3.1.1 NFPA 13 sprinkler systems.	The proposed area is separated by IHR fire-rated construction and protected by an automatic sprinkler system. See Life Safety Plans for additional information.
8	Nonseparated Uses	508.3.2	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	Buildings or portions of buildings that comply with the provisions of this section shall qualify as nonseparated occupancies.	All other portions of the building will comply with non separated uses. See building life safety plan for additional information.

9	Separated Uses (Ratio < 1)	508.3.3	2010 NYS Building Code	Provide analysis with code cited, and required fire separation of occupancies. Identify required fire separation of occupancies on Building Plan(s).	The mixed occupancies, Group F-1 and Group B, require a separation of 1HR (Table 508.3.3) with the provisions of 903.3.1.1 NFPA 13 sprinkler systems.	The proposed area is separated by 1HR fire-rated construction and protected by an automatic sprinkler system.
10	Construction Classification	602	2010 NYS Building Code	Provide Construction Classification per each building included in Application.	602.2 Types I and II. Type I and II construction are those types of construction in which the building elements listed in Table 601 are of noncombustible materials, except as permitted in Section 603 and elsewhere in this code.	Building Type I-B Fully Sprinklered 2-HR Structural Frame 2-HR Bearing Walls 2-HR Floor construction 1-HR Roof construction. See Life Safety Plans for additional information.
11	Fire Resistance Rating Req'm't for Building Elements	Table 601	2010 NYS Building Code - 2010 NYS Fire Code	Provide Fire Resistance Rating per each building element as per Table 601. Identify rating & elements on Building Plans.	Table 601: Fire-resistance rating requirements for building elements identify the following: BLDG 2 - Structural Frame - 2b-HR (Fire-resistance ratings of structural frame and bearing walls are permitted to be reduced by one hour where supporting a roof only)	The proposed manufacturing facility structural elements consist of a fire-resistance of 2-HR and 1-HR for roof supports only, as permitted in Table 601.

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12	Exterior Wall Fire-Resistance Rating	Table 602	2010 NYS Building Code - 2010 NYS Fire Code	Identify required fire resistance rating of exterior walls on Building Plan(s).	FIRE-RESISTANCE RATING REQUIREMENTS FOR BUILDING ELEMENTS: Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor Construction 2-HR Roof Construction 1-2 HR Type IB Construction	Structural Frame-2 HR Bearing Walls-2 HR Interior Bearing Wall-2 HR Floor Construction 2-HR Roof Construction 1-HR - Type IB Construction. See Life Safety Plans for additional information.
13	Exterior Fire Separation Distance	Table 602	2010 NYS Building Code - 2010 NYS Fire Code	Identify required fire separation distance of exterior walls between Buildings on Plan.	TABLE 602 FIRE-RESISTANCE RATING REQUIREMENTS FOR EXTERIOR WALLS BASED ON FIRE SEPARATION DISTANCE - OCCUPANCY GROUP F-1, M, S-1 FIRE SEPARATION DISTANCE = 10<X<30, Construction Type IB	Building 1 and 2 are separated by an existing 2-HR fire walls. The proposed area will not require a fire separation distance of exterior walls between buildings. See Life Safety Plan and Site Plan for additional information.
14	Fire Walls	705	2010 NYS Building Code - 2010 NYS Fire Code	Provide code information and identify all applicable required Fire Wall(s) and fire resistance requirement on Building Plans.	Each portion of a building separated by one or more fire walls, need to comply with Section 705, shall be considered a separate building. The extent and location of such fire walls shall provide a complete separation. Where a fire wall also separates occupancies that are required to be separated by a fire barrier wall, the most restrictive requirements of each separation shall apply. Using Table 508.3.3, a separation of 1-HR between Group F-1 and Group B is require.	The manufacturing facility is separated by an existing 2-HR fire wall. In addition, the proposed facility, classified as Group F-1 has a 1HR fire-rated construction and protected by an automatic sprinkler system. See life safety and building plans for additional information.
15	Fire Barriers	706	2010 NYS Building Code - 2010 NYS Fire Code	Provide code information and identify all applicable required Fire Barrier(s) and fire resistance requirement on Building Plans.	706.3.7 Control areas. Fire barriers separating control areas shall have a fire-resistance rating of not less than that required in Section 414.2.4. 706.3.8 Separation of mixed occupancies. Where the provisions of Section 508.3.3 are applicable, the fire barrier separating mixed occupancies shall have a fire-resistance rating of not less than that indicated in Section 508.3.3 based on the occupancies being separated.	Fire Barriers, as defined in Sections 706, will utilized a 1-HR fire rated construction and protected by an automatic sprinkler system, separating the designated control area (kitchen or preparation area if applicable) and occupancy separation. See Life Safety Plans for additional information.
16	Shaft Enclosures	707	2010 NYS Building Code - 2010 NYS Fire Code	Provide code information and identify all applicable required Shaft Wall(s) and fire resistance requirement on Building Plans.	Not Applicable	No shaft enclosures will be required for the proposed area. In the case where the building department and/or the code enforcer will require such systems, the provisions of section 707, shall apply to vertical shafts where such shafts are required to protect openings and penetrations through floor/ceiling and roof/ceiling assemblies.
17	Fire Partitions	708	2010 NYS Building Code - 2010 NYS Fire Code	Provide code information and identify all applicable required Fire Partition(s) and fire resistance requirement on Building Plans.	Not Applicable	No fire partitions will be required for the proposed area. In the case where the building department and/or code enforcer will require such system, the wall assemblies' provisions of section 708 will be applied.

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18	Horizontal Assemblies	711	2010 NYS Building Code - 2010 NYS Fire Code	Provide code information and identify all applicable required Horizontal Assemblies and fire resistance requirement on Building Plans.	The fire-resistance rating of floor and roof assemblies shall not be less than that required by the building type of construction. Where the floor assembly separates mixed occupancies, the assembly shall have a fire-resistance rating of not less than that required by Section 508.3.3 based on the occupancies being separated.	Building 1: In accordance with Section 711, fire resistance of floor and roof assembly of 0-HR per Type IIB, protected by an automatic sprinkler system, with provision set forth in Section 508.3.3 based on the occupancies being separated. Building 2: In accordance with Section 711, fire resistance floor construction of 2-HR and roof assembly of 1-HR, per Type IB, protected by an automatic sprinkler system, and with provision set forth in Section 508.3.3 based on the occupancies being separated.
19	Fire Protection: Sprinkler System	903	2010 NYS Building Code - 2010 NYS Fire Code	Indicate Type of Sprinkler System: NFPA 13 X NFPA 13 R NFPA 13D Provide code information of all applicable requirements for Automatic Sprinkler Systems with code section cited.	903.2.3 Group F-1. An automatic sprinkler system shall be provided throughout all buildings containing a Group F-1 occupancy where one of the following conditions exists: [F] 1. Where a Group F-1 fire area exceeds 12,000 square feet (1115 m ²); 2. Where a Group F-1 fire area is located more than three stories above grade plane; or 3. Where the combined area of all Group F-1 fire areas on all floors, including any mezzanines, exceeds 24,000 square feet (2230 m ²).	Building 1: Fully automatic sprinkler system. Building 2: Fully automatic sprinkler system. See Life Safety Plan for additional information.
20	Alt. Fire Extinguishing System	904	2010 NYS Building Code - 2010 NYS Fire Code	Provide code information of all applicable requirements for Alternative Automatic Fire-Extinguishing Systems with code section(s) cited.	904.2 Where required. Automatic fire-extinguishing systems installed as an alternative to the required automatic sprinkler systems of Section 903 shall be approved by the code enforcement official. Automatic fire-extinguishing systems shall not be considered alternatives for the purposes of exceptions or reductions allowed by other requirements of this code. 904.2.1 Commercial hood and duct systems. Each required commercial kitchen exhaust hood and duct system required by the Fire Code of New York State or the Mechanical Code of New York State to have a Type I hood shall be protected with an approved automatic fire-extinguishing system installed in accordance with this code.	As required by Section 904.2.1 for commercial hood and duct systems. An alternative automatic fire-extinguishing will be monitored by the building fire alarm system in accordance with NFPA 72. All alternative fire-extinguishing systems installed shall be approved by the code enforcement official.
21	Standpipe System	905	2010 NYS Building Code - 2010 NYS Fire Code	Provide code information of all applicable requirements for Standpipe Systems with code section(s) cited.	Standpipe systems shall be provided in new buildings and structures in accordance with section 907. Fire hose threads used in connection with standpipe systems shall be approved and shall be compatible with fire department hose threads. The location of fire department hose connections shall be approved. In buildings used for high-piled combustible storage, fire protection shall be in accordance with the Fire Code of New York State.	The proposed area will not require a standpipe system.
22	Fire Alarm & Detection Systems	907	2010 NYS Building Code - 2010 NYS Fire Code	Provide code information of all applicable requirements for Fire Alarm System(s) with code section cited. Indicate Type of Fire Alarm System Addressable Hardwired X (zoned)	907.3 Where required—existing buildings and structures. Fire alarm systems and smoke alarms shall be installed in existing buildings in accordance with Sections 907.3.1 and 907.3.2. 907.3.1 Where required by the Existing Building Code of New York State. When required by the Existing Building Code of New York State, an approved manual fire alarm system, automatic fire detection system, or heat detection system shall be provided in the occupancies listed in Sections 907.3.1.1 through 907.3.1.8 and installed in accordance with this Code and NFPA 72. Where automatic sprinkler protection is provided in accordance with 903.3.1.1 or 903.3.1.2 and connected to the building fire alarm, automatic heat detection shall not be required.	Fully automatic sprinkler system in accordance with 903.3.1.1 and or 903.3.1.2.

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23	Emergency Alarm System	908	2010 NYS Building Code - 2010 NYS Fire Code	Provide code information for all applicable requirements for Emergency Alarm Systems with code section cited.	908.6 Refrigeration systems. Refrigeration system machinery rooms shall be provided with a refrigerant detector in accordance with Section 606.8. 606.8 Refrigerant detector. Machinery rooms shall contain a refrigerant detector with an audible and visual alarm. The detector, or a sampling tube that draws air to the detector, shall be located in an area where refrigerant from a leak will concentrate. The alarm shall be actuated at a value not greater than the corresponding TLV-TWA values shown in the Mechanical Code of New York State for the refrigerant classification. Detectors and alarms shall be placed in approved locations.	Emergency alarm system not required.
24	Fire Department Connections	912	2010 NYS Building Code - 2010 NYS Fire Code	Identify Fire Department connections in accordance with NFPA applicable standard.	912.2.2 Existing buildings. On existing buildings, wherever the fire department connection is not visible to approaching fire apparatus, the fire department connection shall be indicated by an approved sign mounted on the street front or on the side of the building. Such sign shall have the letters "FDC" at least 6 inches (152 mm) high and words in letters at least 2 inches (51 mm) high or an arrow to indicate the location. All such signs shall be subject to the approval of the code enforcement official.	The proposed facility is equipped with adequate fire department connection and fire department apparatus defined per Section 503, FCNYS. Access roads are provided such that apparatus can reach all portions of the exterior wall at the ground floor level as permitted by the fire code official for automatic sprinklered buildings.
25	Exits	1001.1 & 2	2010 NYS Building Code - 2010 NYS Fire Code	Identify on the Building Plans and documents, per each door, the following information: door width, door height, direction of swing, type of construction, hourly rating, and door closures.	1001.1 General. Buildings or portions thereof shall be provided with a means of egress system as required by this chapter. The provisions of this chapter shall control the design, construction and arrangement of means of egress components required to provide an approved means of egress from structures and portions thereof. 1001.2 Minimum requirements. It shall be unlawful to alter a building or structure in a manner that will reduce the number of exits or the capacity of the means of egress to less than required by this code. 1001.3 Maintenance. Means of egress shall be maintained in accordance with the Fire Code of New York State	Door width: 36" per door Door Height: 80" per door Direction of swing: Exterior/Outward Type of Construction: Fire rated metal frame doors and Fire rated glazing doors. Hourly rating: 1HR Door Closures will be provided on all exit doors. See life safety plans for additional information.
26	Occupant Load	1004 & Table 1004.1.1	2010 NYS Building Code	Identify the use/name of each room, dimensions of each room, and Occupant Loads per each room on the Building Plans.	TABLE 1004.1.1 MAXIMUM FLOOR AREA ALLOWANCES PER OCCUPANT - Fabrication and manufacturing areas = 200 gross Storage = 300 gross Office = 100 gross	Manufacturing Area: 15300 SF / 200 SF = 77 Office Area: 1650 SF / 100 SF = 17 Storage Area: 5300 SF / 300 SF = 18 Total: 112 occupant load Occupancy Classification: Group F-1 Manufacturing Facility.
27	Egress Width	1005	2010 NYS Building Code	Provide egress widths & cite applicable code section(s) and requirement(s) on the Building Plans	TABLE 1005.1 EGRESS WIDTH PER OCCUPANT SERVED - WITH SPRINKLER SYSTEM = 0.15	Total Occupancy = 112 * 0.15 Egress width required = 17" Total Egress width provided = 720" Number of exits: 17 See Life Safety Plans
28	Accessible Means of Egress	1007.1	2010 NYS Building Code	Provide accessible means of egress as per Section 1007 & cite applicable code section(s) and requirement(s) on the Building Plans.	1007.1 Accessible means of egress required. Accessible means of egress shall comply with this section. Accessible spaces shall be provided with not less than one accessible means of egress. Where more than one means of egress is required by Section 1015.1 or 1019.1 from any accessible space, each accessible portion of the space shall be served by not less than two accessible means of egress	Total number of accessible means of egress: 17. See building life safety plan for additional Accessible Means of Egress.

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29	Doors, Gates, and Turnstiles	1008	2010 NYS Building Code	Means of egress doors shall meet the requirements of this section.	1008.1.1 Size of doors. The minimum width of each door opening shall be sufficient for the occupant load thereof and shall provide a clear width of not less than 32 inches (813 mm). Clear openings of doorways with swinging doors shall be measured between the face of the door and the stop, with the door open 90 degrees (1.57 rad). Where this section requires a minimum clear width of 32 inches (813 mm) and a door opening includes two door leaves without a mullion, one leaf shall provide a clear opening width of 32 inches (813 mm). The maximum width of a swinging door leaf shall be 48 inches (1219 mm) nominal. Means of egress doors in a Group I-2 occupancy used for the movement of beds shall provide a clear width not less than 41.5 inches (1054 mm). The height of doors shall not be less than 80 inches (2032 mm). 1008.2 Gates. Gates serving the means of egress system shall comply with the requirements of this section. Gates used as a component in a means of egress shall conform to the applicable requirements for doors.	Total Occupancy = 112 * 0.15 Egress width required = 17" Total Egress width provided = 720" Number of exits: 17 See Life Safety Plans for additional information.
30	Interior Stairs	1009	2010 NYS Building Code	Identify the following information for each stairway on the Building Plan(s): the width of stairways; the height, width, depth and number of risers and treads; dimensions of landings; stairway construction type; and handrail height.	Not Applicable	Not Applicable. The location of the manufacturing is designated in a (1) one-story building. See Life Safety Plans for additional information.
31	Ramps	1010.1	2010 NYS Building Code	Identify the following information of each ramp, on the Building Plan(s): width; total vertical rise; length of ramp; and handrail height.	Not Applicable	Not Applicable
32	Common Path of Travel	1014.3	2010 NYS Building Code	Identify on the Building Plan(s): the length of the "Common Path of Travel" per each room as per applicable building code requirements.	The exit access arrangement shall comply with Sections 1014 through 1017 and the applicable provisions of Sections 1003 through 1013	The common path of travel does not exceed 75 feet, in accordance with Section 1014.3. See Life Safety Plan for additional information.
33	Exit Doorway Arrangement	1015	2010 NYS Building Code	Identify on the Building Plan(s): applicable building code requirements for all Exits and Exit Access Doorways per each room and required exits in all buildings.	1015.1 Exit or exit access doorways required. Two exits or exit access doorways from any space shall be provided where one of the following conditions exists: 1. The occupant load of the space exceeds the values in Table 1015.1. 2. The common path of egress travel exceeds the limitations of Section 1014.3. 3. Where required by Sections 1015.3, 1015.4 and 1015.5.	Total Occupancy = 112 * 0.15 Egress width required = 17" Total Egress width provided = 720" Number of exits: 17 See Life Safety Plans for additional information.
34	Corridor Fire Rating	1017.1	2010 NYS Building Code	Identify, on the Building Plan(s): all corridors with required fire resistance and the applicable fire rating.	The corridor walls required to be fire-resistance rated shall comply with Section 708 for fire partitions. Occupancy: F Occupant Load served by corridor: Greater than 30. Required Fire - Resistance Rating (hrs): 0-HR with sprinkler system , 1-HR without sprinkler system	0-HR, Fully automatic sprinkler system in accordance with 903.3.1.1 and or 903.3.1.2.

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35	Corridor Width	1017.2	2010 NYS Building Code	Identify on the Building Plan(s): the width of all corridors. Provide applicable code section(s) and requirement(s).	1017.2 Corridor width. The minimum corridor width shall be as determined in Section 1005.1, but not less than 44 inches (1118 mm).	All building corridors = 60" See building plans for additional information.
36	Dead End Corridor	1017.3	2010 NYS Building Code	Corridors shall not exceed the maximum dead end corridor length as per applicable code.	1017.3 Dead ends. Where more than one exit or exit access doorway is required, the exit access shall be arranged such that there are no dead ends in corridors more than 20 feet (6096 mm) in length.	Not Applicable - No dead end corridors provided. See building plans for additional information.
37	Number of Exits and Continuity	1019	2010 NYS Building Code	Identify on the Building Plan(s): required number of exits, continuity and arrangement as per the applicable code requirements.	1019.1 Minimum number of exits. All rooms and spaces within each story shall be provided with and have access to the minimum number of approved independent exits required by Table 1019.1 based on the occupant load of the story, except as modified in Section 1015.1 or 1019.2. For the purposes of this chapter, occupied roofs shall be provided with exits as required for stories. The required number of exits from any story, basement or individual space shall be maintained until arrival at grade or the public way. - OCCUPANT LOAD (persons per story) = 1/500 MINIMUM NUMBER OF EXITS (per story) = 2	OCCUPANT LOAD (persons per story) = 112 MINIMUM NUMBER OF EXITS (per story) = 2 PROVIDED NUMBER OF EXITS = 17
38	Vertical Exit Enclosures	1020	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements for each Vertical Exit Enclosure.	Not Applicable	Not Applicable - No vertical exit enclosures provided. See Life Safety Plans for additional information.
39	Exit Passageways	1021	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements for each Exit Passageway.	The width of exit passageways shall be determined as specified in Section 1005.1 but such width shall not be less than 44 inches (1118 mm), except that exit passageways serving an occupant load of less than 50 shall not be less than 36 inches (914 mm) in width. The required width of exit passageways shall be unobstructed.	All building corridors = 60" Egress width required = 17" Total Egress width provided = 720" Number of exits: 17 See building life safety plan for additional information on Exit Passageways.
40	Horizontal Exits	1022	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements for each Horizontal Exit.	1022.1 Horizontal exits. Horizontal exits serving as an exit in a means of egress system shall comply with the requirements of this section. A horizontal exit shall not serve as the only exit from a portion of a building, and where two or more exits are required, not more than one-half of the total number of exits or total exit width shall be horizontal exits.	All building corridors = 60" Egress width required = 17" Total Egress width provided = 720" Number of exits: 17 See building life safety plan for additional information on Exit Passageways.

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41	Exterior Exit Ramps & Stairways	1023	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements for each exterior exit ramps and stairways.	All building corridors = 60" Egress width required = 17" Total Egress width provided = 720" Number of exits: 17 See building life safety plan for additional information on Exit Passageways.	Not Applicable - No ramps or stairways required to exit building.

42	Exit Discharge	1024	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements for each Exit Discharge.	Exits shall discharge directly to the exterior of the building. The exit discharge shall be at grade or shall provide direct access to grade. The exit discharge shall not reenter a building.	All exits discharge directly to the exterior of the building. See life safety plans for additional information.
43	Accessibility	1101.1 - 1110 & ICC/A117.1(03)	2010 NYS Building Code	Identify on the Building Plan(s): all applicable code requirements such that the design and construction of each building/facility provides accessibility to physically disabled persons.	Buildings and facilities shall be designed and constructed to be accessible in accordance with this code and ICC/ANSI A117.1.	The dispensary is designed and constructed to be accessible. See life safety plans for more information.
44	Energy Conservation	2010 NYS ECCC & IECC 2012	2010 NYS ECCC - IECC 2012 - 2010 NYS Building Code	Identify the R-Value and U-Value of each construction component and assembly of the building envelope as required in the applicable energy and building code(s).	<p>The commercial building project shall comply with the requirements in Sections 502 (Building envelope requirements), 503 (Building mechanical systems), 504 (Service water heating) and 505 (Electrical power and lighting systems) in its entirety. As an alternative the commercial building project shall comply with the requirements of ASHRAE/IESNA 90.1 in its entirety.</p> <p>Commercial buildings shall comply with one of the following:</p> <ol style="list-style-type: none"> 1. The requirements of ANSI/ASHRAE/IESNA 90.1. 2. The requirements of Sections C402, C403, C404 and C405. In addition, commercial buildings shall comply with either Section C406.2, C406.3 or C406.4. 3. The requirements of Section C407, C402.4, C403.2, C404, C405.2, C405.3, C405.4, C405.6 and C405.7. The building energy cost shall be equal to or less than 85 percent of the standard reference design building. 	<p>The dispensary complies with the requirements of ASHRAE/IESNA 90.1 CLIMATE ZONE5 All other Group R</p> <p>Roofs Insulation entirely above deck U-0.048U-0.048 Metal buildings U-0.055U-0.055 Attic and other U-0.027U-0.027 Walls, Above Grade Mass U-0.090U-0.080 Metal building U-0.069U-0.069 Metal framed U-0.064U-0.064 Wood framed and other U-0.064U-0.051 Below-Grade Walls a Below-grade walls a C-0.119C-0.119 Floors Mass U-0.074U-0.064 Joist/Framing U-0.033U-0.033 Slab-on-Grade Floors Unheated slabs F-0.730F-0.540 Heated slabs F-0.860F-0.860</p>
45	Emergency & Standby Power	2702.1	2010 NYS Building Code	Identify emergency & Standby Power locations and specifications of the system to be provided.	2702.1 Installation. Emergency and standby power systems required by this code or the Fire Code of New York State shall be installed in accordance with this code, NFPA 110 and 111	Emergency and standby power generators will be installed in accordance section 2701.1 and with the security engineering requirements. See life safety plans for additional information.
46	Smoke Control Systems	2702.2.2		Identify the Standby power for smoke control systems in accordance with Section 909.11 of NYS Building Code.	The smoke control system shall be supplied with two sources of power. Primary power shall be from the normal building power system. Secondary power shall be from an approved standby source complying with NFPA 70. The standby power source and its transfer switches shall be in a separate room from the normal power transformers and switch gear and shall be enclosed in a room constructed of not less than 1-hour fire barriers ventilated directly to and from the exterior. Power distribution from the two sources shall be by independent routes. Transfer to full standby power shall be automatic and within 60 seconds of failure of the primary power. The systems shall comply with this code or NFPA 70.	All power systems will comply with NFPA 70.

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47	Plumbing Fixture Count	2902.1	2010 NYS Building Code - 2010 NYS Plumbing Code	Identify on the Building Plan(s): the minimum plumbing facilities as per applicable plumbing code(s).	2901.1 Scope. The provisions of this chapter and the Plumbing Code of New York State shall govern the erection, installation, alteration, repairs, relocation, replacement, addition to, use or maintenance of plumbing equipment and systems. Plumbing systems and equipment shall be constructed, installed and maintained in accordance with the Plumbing Code of New York State. Code Required: Water Closet (M): 15 Water Closet (F): 15 Lavs: 20 Drinking Fountains: 11	Water Closet (M): 18 Water Closet (F): 15 Lavs: 28 Drinking Fountains: 18
48	Available Street Water Pressure		2010 NYS Building Code - 2010 NYS Plumbing Code	Provide the available street or well water pressure.	The water distribution system shall be designed, and pipe sizes shall be selected such that under conditions of peak demand, the capacities at the fixture supply pipe outlets shall not be less than shown in Table 604.3.	The design of the water distribution system will conform the engineering practice and methods utilized to determine pipe sizes. The system shall be approved by the Town of Chazy.
49	Fire Apparatus Access Road	FC503.1	2010 NYS Building Code - 2010 NYS Fire Code	Identify on the Site Plan: Fire Apparatus Road, Fire Lane and other Fire Service requirements per applicable Building and Fire Codes.	501.3 Construction documents. Construction documents for proposed fire apparatus access, location of fire lanes and construction documents and hydraulic calculations for fire hydrant systems shall be submitted to the fire department for review and approval prior to construction.	Service road and Fire Lane surrounds the facility. See Site Plan for additional information.

CHAZY: EFM & LAB CONSTRUCTION TIMELINE

Task Name	Start Date	End Date	Duration	Q2			Q3			Q4			Q1			
				Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	
Enter your deadline as start and end date:	06/04/15	11/02/15	108													
APPLICATION SUBMITTED	06/05/15	06/05/15	0	APPLICATION SUBMITTED												
<input type="checkbox"/> Create Architecture & Engineering Drawings	06/08/15	07/24/15	35	Create Architecture & Engineering Drawings												
Review/Refine Existing Plans	06/08/15	06/22/15	11	Review/Refine Existing Plans												
Engage Architect and Engineer	06/19/15	06/29/15	7	Engage Architect and Engineer												
Create and Finalize Plans	06/12/15	06/18/15	5	Create and Finalize Plans												
Finalize Drawings	06/26/15	07/24/15	21	Finalize Drawings												
Municipal Building Permit Review Process	06/08/15	07/17/15	30	Municipal Building Permit Review Process												
ZONING APPROVALS - COMPLETED	Completed	Completed														
<input type="checkbox"/> NY State Medical Marijuana License Obtained	06/06/15	07/24/15	36	NY State Medical Marijuana License Obtained												
DOH Follow Up and Due Diligence Period	06/06/15	07/24/15	36	DOH Follow Up and Due Diligence Period												
License Authorization	07/24/15	07/24/15	0	License Authorization												
<input type="checkbox"/> Construction	07/20/15	09/18/15	45	Construction												
Site Work/Demolition	07/20/15	07/24/15	5	Site Work/Demolition												
<input type="checkbox"/> Interior (walls, flooring, finishes)																
EFM	Completed	Completed														
Cultivation	Completed	Completed														
Laboratory	Completed	Completed														
<input type="checkbox"/> HVAC																
EFM	Completed	Completed														
Cultivation	Completed	Completed														
Laboratory	Completed	Completed														
<input type="checkbox"/> Fixtures																
EFM	Completed	Completed														
Cultivation	Completed	Completed														
Laboratory	Completed	Completed														
<input type="checkbox"/> Electrical	07/20/15	08/17/15	21	Electrical												
EFM	07/20/15	08/17/15	21	EFM												
Cultivation	07/20/15	08/17/15	21	Cultivation												
Laboratory	07/20/15	07/28/15	7	Laboratory												
Security	07/20/15	08/06/15	14	Security												
<input type="checkbox"/> Plumbing	07/20/15			Plumbing												
EFM	07/20/15	Completed	21	EFM												
Cultivation	07/20/15	Completed	21	Cultivation												
Laboratory	07/20/15	Completed	7	Laboratory												

Task Name	Start Date	End Date	Duration	Q2			Q3			Q4			Q1		
				Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Plumbing	07/20/15														
EFM	07/20/15	Completed	21												
Exterior/Perimeter Work	07/20/15	08/17/15	21												
Entry Doors	Completed	Completed													
Transportation/Delivery (limited work)	07/20/15	07/28/15	7												
[REDACTED]	07/20/15	08/17/15	21												
Telecommunications/Internet	07/27/15	08/13/15	14												
Construction and Fixture Installation Completed	08/18/15	08/18/15	0												
Inspections	08/18/15	09/04/15	14												
Clean Up and Punch List	09/07/15	09/18/15	10												
Equipment	07/17/15	09/11/15	41												
Initiate EFM Equipment Delivery	07/31/15	08/10/15	7												
Order Security and Other Equipment	07/17/15	08/05/15	14												
Security Equipment Installation	08/14/15	09/02/15	14												
Cultivation Equipment Installation	08/25/15	09/11/15	14												
Install Extraction, Formulation & Manufacturing Equip.	08/18/15	08/26/15	7												
Calibrate Equipment Ready for Initial Run	08/27/15	09/04/15	7												
READY FOR PLANTING (CULTIVATION)	09/07/15	09/07/15	0												
PLEASE REFER TO MANUFACTURING TIMELINE- 15 WEEKS FROM SEED TO SALE	01/04/16	01/04/16	0												



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PART III ENERGY SOURCES AND ENGINEERING SYSTEMS



Appendix B – MANUFACTURING
Part III – Energy Sources and Engineering Systems

Chazy Manufacturing Facility

Part III – Energy Sources & Engineering Systems (Outline and Specifications):

Energy Source:

- Natural Gas

Engineering Systems:

- **Heating System:** Type: Hot Water
Size: 33171 MBh
Efficiency: N/A
Ventilation Requirements: ASHRAE 62.1
- **Cooling System:** Type: Chilled W
Size: 2309 Tons
Efficiency: N/A
Ventilation Requirements: ASHRAE 62.1
- **Ventilation & Humidification System:** Type: Exhaust
Size: 308000 CFM
Efficiency: 70
Ventilation Requirements: ASHRAE 62.1

Water Supply:

- Municipal Water Service (Town of Chazy, Clinton County)

Sewage:

- Private Septic System

Emergency Power System:

Type: Generator
Size: 3450 kW
Efficiency: N/A

CHAZY: EFM & LAB CONSTRUCTION TIMELINE

Task Name	Start Date	End Date	Duration	Q2			Q3			Q4			Q1		
				Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Enter your deadline as start and end date:	06/04/15	11/02/15	108												
APPLICATION SUBMITTED	06/05/15	06/05/15	0	APPLICATION SUBMITTED											
<input type="checkbox"/> Create Architecture & Engineering Drawings	06/08/15	07/24/15	35	Create Architecture & Engineering Drawings											
Review/Refine Existing Plans	06/08/15	06/22/15	11	Review/Refine Existing Plans											
Engage Architect and Engineer	06/19/15	06/29/15	7	Engage Architect and Engineer											
Create and Finalize Plans	06/12/15	06/18/15	5	Create and Finalize Plans											
Finalize Drawings	06/26/15	07/24/15	21	Finalize Drawings											
Municipal Building Permit Review Process	06/08/15	07/17/15	30	Municipal Building Permit Review Process											
ZONING APPROVALS - COMPLETED	Completed	Completed													
<input type="checkbox"/> NY State Medical Marijuana License Obtained	06/06/15	07/24/15	36	NY State Medical Marijuana License Obtained											
DOH Follow Up and Due Diligence Period	06/06/15	07/24/15	36	DOH Follow Up and Due Diligence Period											
License Authorization	07/24/15	07/24/15	0	License Authorization											
<input type="checkbox"/> Construction	07/20/15	09/18/15	45	Construction											
Site Work/Demolition	07/20/15	07/24/15	5	Site Work/Demolition											
<input type="checkbox"/> Interior (walls, flooring, finishes)															
EFM	Completed	Completed													
Cultivation	Completed	Completed													
Laboratory	Completed	Completed													
<input type="checkbox"/> HVAC															
EFM	Completed	Completed													
Cultivation	Completed	Completed													
Laboratory	Completed	Completed													
<input type="checkbox"/> Fixtures															
EFM	Completed	Completed													
Cultivation	Completed	Completed													
Laboratory	Completed	Completed													
<input type="checkbox"/> Electrical	07/20/15	08/17/15	21	Electrical											
EFM	07/20/15	08/17/15	21	EFM											
Cultivation	07/20/15	08/17/15	21	Cultivation											
Laboratory	07/20/15	07/28/15	7	Laboratory											
Security	07/20/15	08/06/15	14	Security											
<input type="checkbox"/> Plumbing	07/20/15			Plumbing											
EFM	07/20/15	Completed	21	EFM											
Cultivation	07/20/15	Completed	21	Cultivation											
Laboratory	07/20/15	Completed	7	Laboratory											

Task Name	Start Date	End Date	Duration	Q2			Q3			Q4			Q1		
				Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Plumbing	07/20/15														
EFM	07/20/15	Completed	21												
Exterior/Perimeter Work	07/20/15	08/17/15	21												
Entry Doors	Completed	Completed													
Transportation/Delivery (limited work)	07/20/15	07/28/15	7												
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Inspections	08/18/15	09/04/15	14												
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Cultivation Equipment Installation	08/25/15	09/11/15	14												
Install Extraction, Formulation & Manufacturing Equip.	08/18/15	08/26/15	7												
Calibrate Equipment Ready for Initial Run	08/27/15	09/04/15	7												
READY FOR PLANTING (CULTIVATION)	09/07/15	09/07/15	0												
PLEASE REFER TO MANUFACTURING TIMELINE- 15 WEEKS FROM SEED TO SALE	01/04/16	01/04/16	0												



RE: Build Out Timeline - E.F.M. FACILITY - CHAZY-PLATTSBURGH (Clinton County)

PROJECT LOCATION: 641 Ridge Road, Chazy, NY 12921-2420

PROPOSED PROJECT BUILD-OUT TIMELINE – E.F.M. FACILITY

Milestone	Timeframe
1. Authorization of License(s)	July, 2015
2. Architecture and Engineering Technical Drawings	August – September, 2015
3. Local Municipal Building Permit Review Process	September, 2015
4. Construction Start	October, 2015
5. Construction Completion	December, 2016
6. Equipment Installation & Move-in	January, 2016

The above schedule is for preliminary review only, actual times may vary based on final design and construction scope and municipal review process.

Ronald Dean AIA, CSI, LEED AP BC+C
Vice President
Sumac Inc.
New York Licensed Architect #037858



EFM Facility, Chazy, New York : LEED v4 Rating System

What is LEED?

LEED is the most recognized international certification for green buildings and was developed in the United States by the U.S. Green Building Council.

The United States Green Building Council (USGBC) is a non-profit organization that promotes sustainability and energy efficiency in the design, construction and operation of buildings.

Benefits of LEED

Owners that opt for LEED certification improve their image and competitiveness in the market. The reduced environmental impact of building activities results in improvements for generations of occupants.

- 15% to 30% Reduction in energy consumption
- 20% to 40% reduction in water consumption
- 10% to 30% Reduction in operation costs

Project Overview

The PalliaTech Medical Marijuana Program will take full advantage of the existing Wyeth Research Facility in Chazy, New York; previously used for a similar purpose and will require minimal modifications to adapt to its new use. The re-use of this existing facility will promote the design and construction of a high performance environment pertaining to the overall sustainable goals. It will also ensure a responsible, profitable, and healthy place to work.

The reuse and upgrading of the existing structure into an active production facility alleviates the cost of demolition and brings renewed activity and energy to the property and neighborhood. The 65,000-square-foot facility will be restructured and renovated to meet or exceed all construction regulations and standards with a priority on environmental sustainability, including such features the use of repurposed, sustainable building materials, including stone, wood and metal; and re-landscaping with natural, locally indigenous plants and materials requiring minimal water and maintenance. T

Upon completion of the Chazy, New York, E.F.M. facility and installation of all “green” features, the Company intends to seek LEED (Leadership in Energy and Environmental Design) certification through the LEED O+M (Operations and Maintenance), based on responsible practices in water use, conservation, building materials, energy efficiency, indoor air quality, emission control, landscaping and design.

sumac

LEED Categories



SUSTAINABLE SITES
Building Location, Access to Transportation, etc.



INDOOR ENVIRONMENTAL QUALITY
Natural Lighting, Air Quality.



WATER SAVINGS
Water Consumption Reduction.



INNOVATION & DESIGN PROCESS
Innovative green building practices, superior performance LEED AP.



ENERGY EFFICIENCY
Efficient Use and Energy Saving Options



REGIONAL PRIORITY CREDITS
Geographic specific environmental priorities.

Operations and Maintenance (O+M): Existing Buildings

LEED O+M will raise the standard for green operations, helping the existing building improve its efficiency, reduce waste, and maintain a responsible and sustainable building.

Sustainability Goals

ENERGY

- Maximize energy efficiency.
- Minimize energy demand and emissions.
- Increase reliability on renewably energy sources.

WATER MANAGEMENT

- Reduce disposal of wastewater.
- Reduce fresh water consumption.
- Maximize the utility of rainwater as a resource.

WASTE REDUCTION

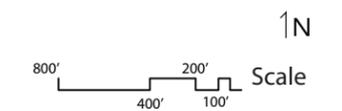
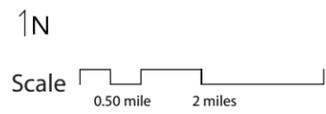
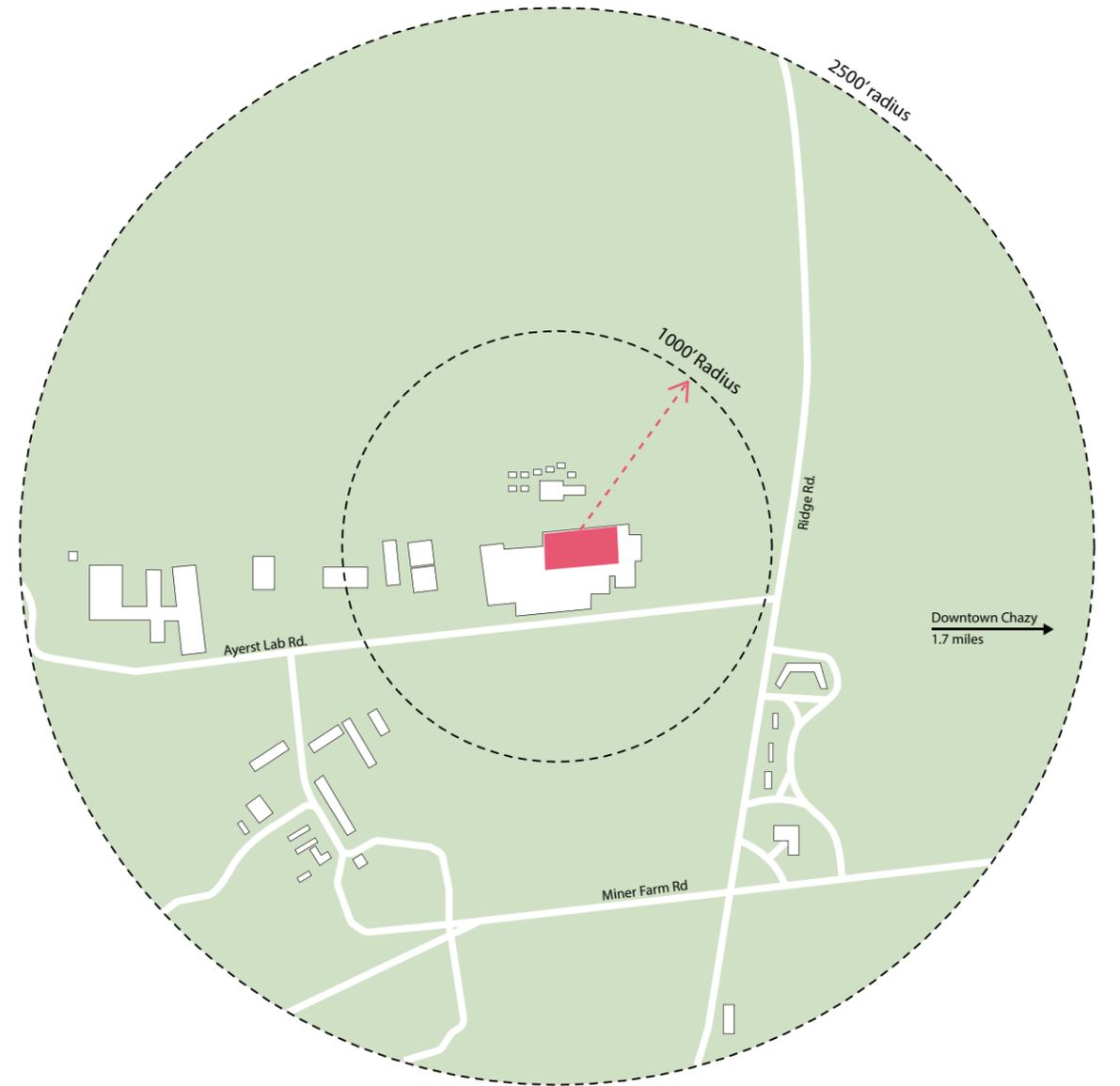
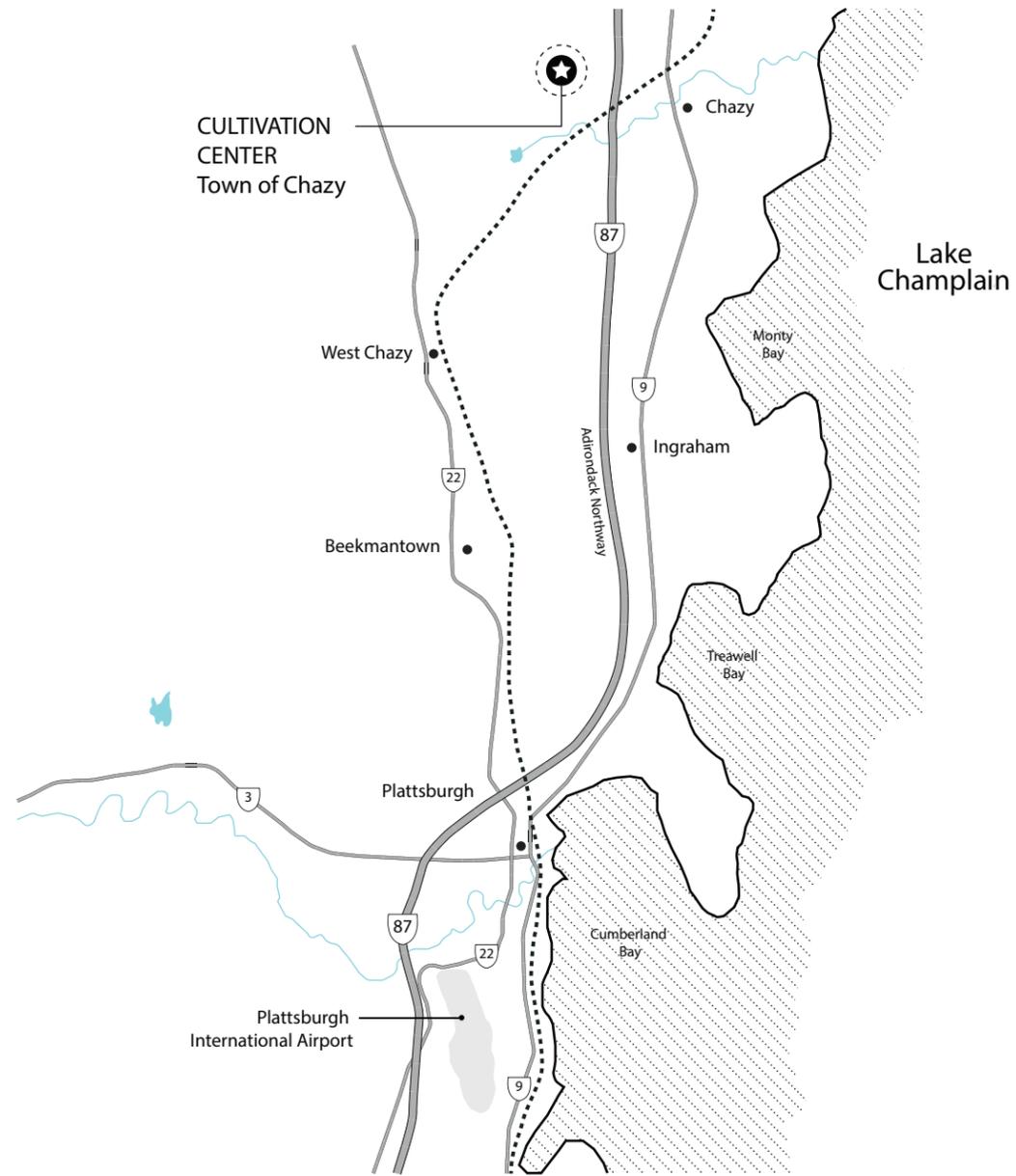
- Maximize the re-use of waste products as a resource
- Packaging

CLEAN AND SECURE WORK ENVIRONMENT

- Efficient space planning.
- Effective ventilation system and sanitation procedures.
- Comprehensive security system coverage.

REGIONAL LOCATION AREA MAP

LOCATION AREA MAP



REGIONAL LOCATION MAP KEY	LOCATION MAP KEY
Proposed Sites	Proposed Site
Railroad	Preschools (Public or Private)
Lake shore	Elementary Schools / Secondary Schools
River	Day Care Facilities
Major Highway or Expressway	Residential (Zoned exclusively for Residential Use)
Airport	

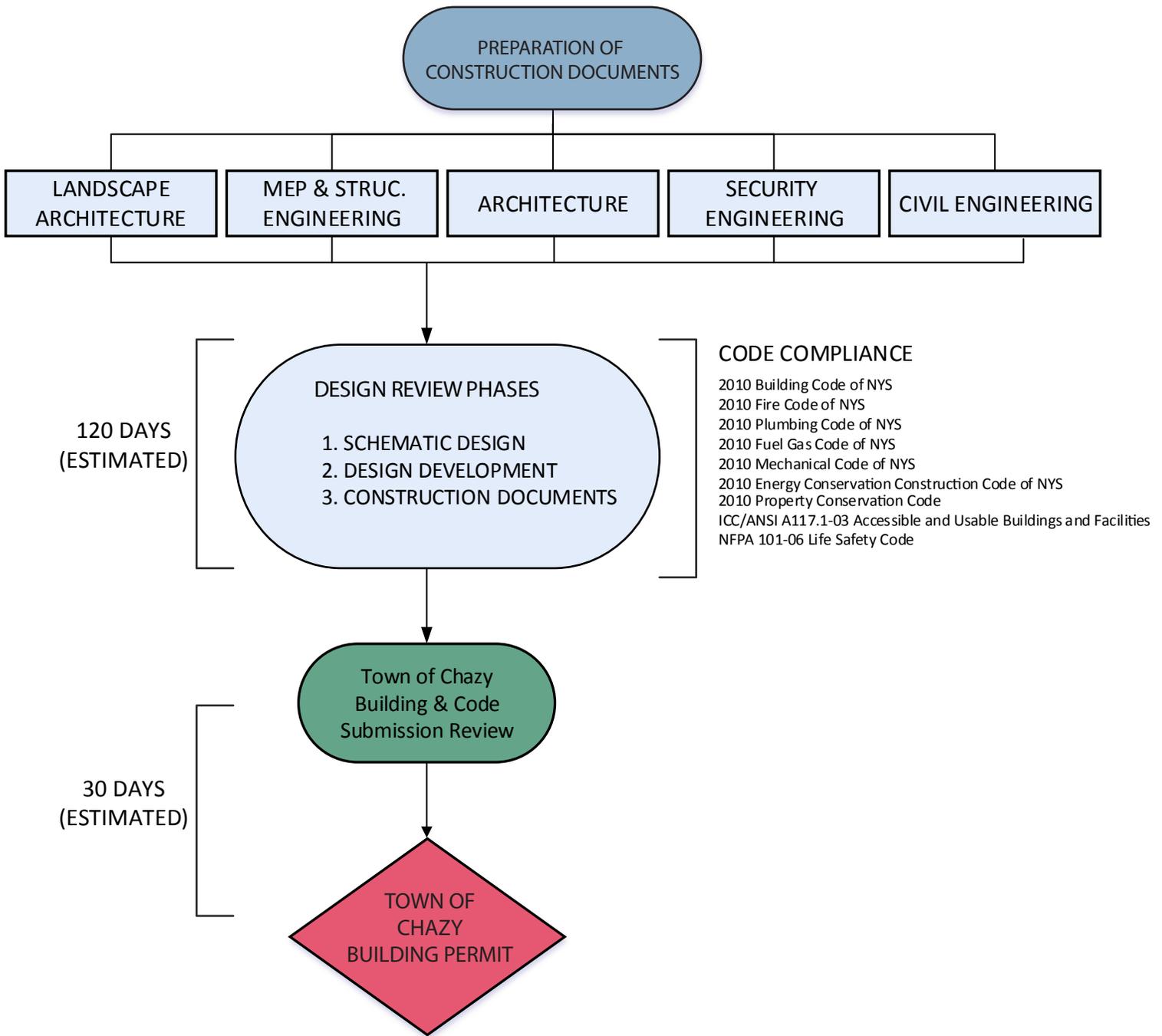
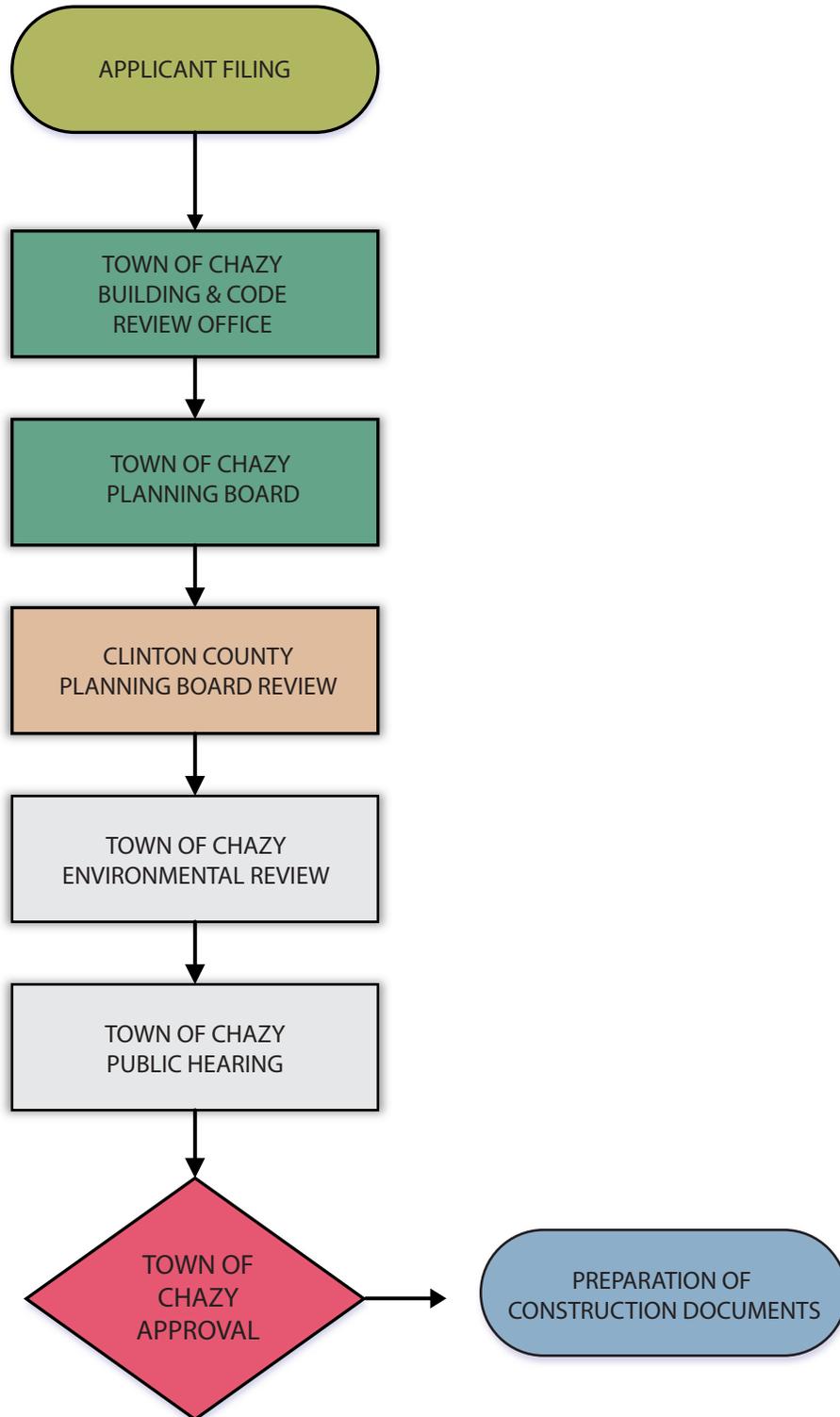


Figure A-2

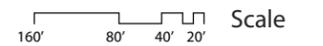


Redacted pursuant to N.Y. Public Officers Law, Art. 6

LEGEND	
	Dispensary
	Emergency Power Systems
	10'-0" Exterior Fence
	Building Entrance / Exit

SITE INFORMATION	
Address	641 Ridege Road Chazy, Ny 12921
County District	Clinton County Town of Chazy
Property Class	Manufacture - Industrial
Zoning District	01 - RU
Parcel ID	78-1-13.1
Neighborhood	Chazy
Acreage	55.7
Building Area	386,060 sq.ft.
Manufacturing Area	66,000 sq.ft.

MANUFACTURING FACILITY - SITE PLAN



Regulatory Information	
Project Name	Wyeth Chazy Office and C.U.B. Expansion
Project Address	Wyeth Pharmaceuticals 641 Ridge Road Chazy, New York 12921
Owner Name	Wyeth Pharmaceuticals
Contact Person	
Building Code	2002 Building Code of New York State
	2000 IBC w/ 2001 Supplement
	2002 Fire Code of New York State
	2002 Mechanical Code of New York State
	Fuel Gas Code of New York State
	Plumbing Code of New York State
	2002 Energy Conservation Construction Code of New York State

Building Information

	Building 1	Building 2
Construction Type	Type II B	Type I B
Sprinklers	Fully Sprinklered	Fully Sprinklered
Building Height	One Story 35'-0" to top of parapet	
Fire Resistive Ratings	Building 1	Building 2
Structural Frame	0	2 ^b
Bearing Walls Exterior	0	2
Bearing walls - Interior	0	2
Floor Construction	0	2
Roof Construction	0	1
Allowable Area Modifications Per IBC 2000	105,800	One Story Unlimited
Existing Area	93,285	126,098
New Addition	9,257	16,295
Total Building Area	102,542	142,393

^b Roof supports: Fire resistance ratings of structural and bearing walls are permitted to be reduced by 1 hour where supporting the roof only.

Egress

Wyeth Chazy	Areas			Occupant Total Entire Building	
Building	Existing	New	Total	Code Occ Load Factor	Code Occupant Load
Building	216,600	22,052	238,652		
First Floor Uses	216,600	25,552	242,152		
Office / Office Support	71,924	22,052	93,976	100	940
Lab / Lab Support	0	0	0	100	-
Business Other	0	0	0	100	-
Business Other	0	0	0	100	-
Business Uses	71,924	22,052	93,976		940
A-3 Assembly (net)	1,300	0	1,300	15	87
A-2 Assembly (net)	2,700	0	2,700	15	180
Factory / Industrial	11,700	0	11,700	100	117
Building Storage	18,000	0	18,000	300	60
Vivarium (Storage)	93,000	0	93,000	300	310
Vivarium (Procedure)	9,888	0	9,888	240	41
Mechanical ⁴	8,088	3,500	11,588	300	39
Warehouse	0	0	0	300	-
Total Occupant Load Existing and New Addition				Total	1,773
Total Building Egress Existing and New Addition					0.15
				Egress width Required =	285'
				Egress width Provided =	448'
				Total # of Exits Provided =	15

Estimate of Code Required Number of Plumbing Fixtures Based on Building Code of New York State (BCNYS)

Wyeth Chazy	Areas			Occupants			Plumbing Fixtures Required ⁶			
	Building	Existing	New	Actual Occupants Expected	Code Occ Load Factor	Code Occupant Load	Water Closets ² M ¹	Water Closets ³ F	Lavs ²	Drinking Fountains Total ²
Office / Office Support	71,924	22,052	93,976	0	100	940				
Lab / Lab Support	0	0	0	0	100	-				
Business Other	0	0	0	0	100	-				
Business Other	0	0	0	0	100	-				
Business Uses	71,924	22,052	93,976	0		940	9,398	9,398	11,747	9,398
A-3 Assembly (net)	1,300	0	1,300	0	15	87	0.347	0.667	0.433	0.173
A-2 Assembly (net)	2,700	0	2,700	0	15	180	1.200	1.200	0.900	0.360
Factory / Industrial	11,700	0	11,700	0	100	117	0.585	0.585	1.170	0.293
Building Storage	18,000	0	18,000	0	300	60	0.300	0.300	0.600	0.060
Vivarium (Storage)	93,000	0	93,000	0	300	310	1.550	1.550	3.100	0.090
Vivarium (Procedure)	9,888	0	9,888	0	240	41	0.824	0.824	1.177	0.412
Mechanical ⁴	8,088	3,500	11,588	0	300	39	NA	NA	NA	NA
Warehouse	0	0	0	0	300	-	0.000	0.000	0.000	0.000
Total Occupant Load Existing and New Addition				0		1,773	14,203	14,523	19,127	10,695
Total Estimated Code-Required Plumbing Fixtures:							15	15	20	11
Total Provides Plumbing Fixtures:							10 wc	15	28	18 B.W.D.
							8 urinals			4 D.F.

¹ Maximum 67% of the required water closets may be substituted for urinals.
² Maximum 50% of the required drinking fountains may be bottle water dispensers. (PCNYS Section 410)
³ Assumes equal numbers of males and females. (BCNYS Section 2902.3)
⁴ Mechanical space classification not in Plumbing Fixture Tables.
⁵ Minimum required numbers of fixtures are based on the following requirements: (Abstract of BCNYS Table 2902.1)

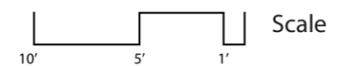
Occupancy Classification	Use	WC		Lavs		Drinking Fountains
		Male	Female	Male	Female	
Meeting Rooms	A-3	1:125	1:65	1:200	1:200	1:500
Dining rooms	A-2	1:75	1:75	1:200	1:200	1:500
Business	B	1:50	1:50	1:80	1:80	1:100
Offices, Labs						
Factory / Industrial	F	1:100	1:100	1:100	1:100	1:400
Mercantile	M	1:500	1:500	1:750	1:750	1:1000
Storage	S	1:100	1:100	1:100	1:100	0
Mechanical	All	NA	NA	NA	NA	NA

LIFE SAFETY LEGEND	
	Exit Sign
	2 HR Fire Wall / BLDG Separation
	Fire Extinguisher
	5'-0" Radius
	Existing Wall
	New Wall
	10'-0" Exterior Fence
	Building Exit

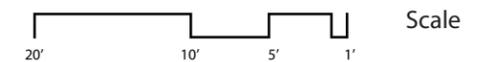
DOOR LEGEND	
	Main Entrance/Exit Door Width: 3'-0" Height: 6'-8" Single Full Glass - Metal Frame 1 HR rating
	2nd Entrance/Exit Door Width: 6'-0" - (2) 3'-0" Doors Height: 6'-8" Double Flush / Metal Framing 1 HR rating
	Interior Doors Width: 3'-0" Height: 6'-8" Single Flush / Alum. Framing 0 HR rating

Redacted pursuant to N.Y. Public Officers Law, Art. 6

ANUFACTURING FACILITY LIFE SAFETY PLAN

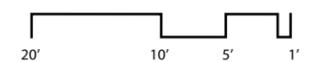


ENLARGED PLAN OF MANUFACTURING FACILITY: TRANSPORT AREA



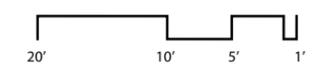
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ENLARGED PLAN OF MANUFACTURING FACILITY: CULTIVATION AREA



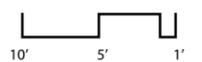
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ENLARGED PLAN OF MANUFACTURING FACILITY: CULTIVATION AREA



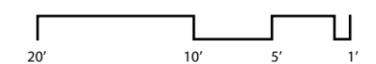
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ENLARGED PLAN OF MANUFACTURING FACILITY: RECEIVING EFM AREA



Scale

ENLARGED PLAN OF MANUFACTURING FACILITY: QA LAB & MANAGEMENT OFFICES

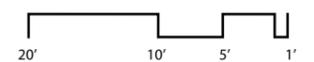


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ENLARGED PLAN OF MANUFACTURING FACILITY: RECEIVING AREA



OVERALL PLAN OF MANUFACTURING FACILITY: CULTIVATION AREA



Scale



PALLIATECH™

ReliefCenters™



REAL ESTATE PROPERTY LIST



Attachment A – Real Estate Property List

ReliefCenters™

NEW YORK LOCATIONS



- M Chazy - Manufacturing**
641 Ridge Road
Chazy, NY 12921-2420
Clinton County

- 1 Brooklyn - Dispensary**
425 Fulton Street
Brooklyn, NY 11201-5121
Kings County

- 2 Newburgh - Dispensary**
38 South Plank Road
Newburgh, NY 12550-3927
Orange County

- 3 Rochester - Dispensary**
215 Alexander Street
Rochester, NY 14607
Monroe County

- 4 Utica - Dispensary**
350 Leland Avenue
Utica, NY 13502
Oneida County





ReliefCenters™

MANUFACTURING

641 Ridge Road
Chazy, NY 12921-2420
Clinton County



Manufacturing Facility - Northstar Technology Center, Chazy, NY

OVERVIEW

By choosing the Northstar Technology Center as its manufacturing facility, PalliaTech stands ready to begin its state-of-the-art cultivation and manufacturing operations beginning as soon as January 2016. The Chazy Town Council and the Clinton County Legislature have each passed resolutions approving PalliaTech's use of the site for the manufacture of pharmaceutical-grade marijuana products. The Chazy Town Planning Board, upon broad political support for the proposal, issued its approval for the production of medical-use marijuana production, which means that PalliaTech can begin construction immediately upon certification by New York State.

Northstar Technology Center is a 386,000 square foot world-class pharmaceutical research and development facility that originally served as a manufacturing plant for Pfizer. Purchased by Northstar Private Capital in 2013, the facility has undergone significant modernization for commercial biotechnology applications, making it an ideal turnkey site for cultivation, manufacturing and laboratory operations.

Palliatech has contracted to lease 65,000 square feet of the state-of-the-art facility.

Northstar Technology Center features:

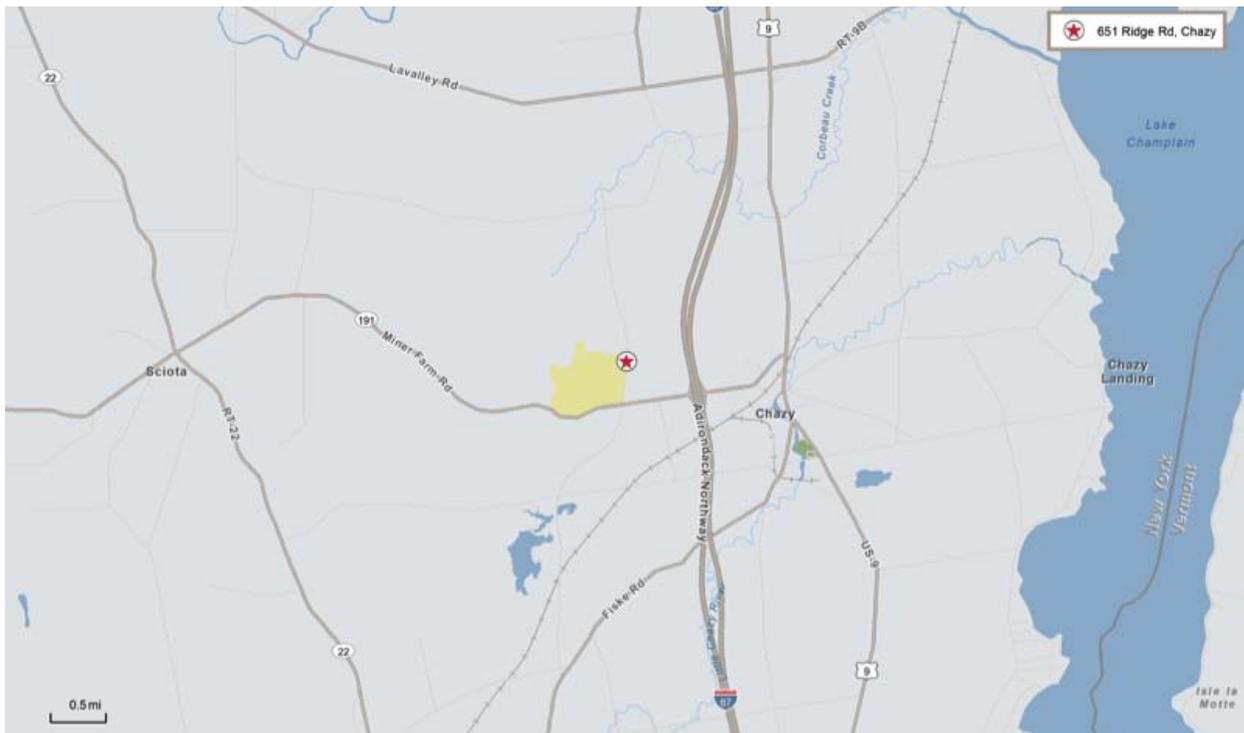
- Research space that can house over 200,000 square feet of grow operation;
- Laboratories for the harvesting, testing, packaging, oversight and quality assurance of the product;
- Warehousing for the storage and distribution to state-designated hospitals;
- Individual temperature, humidity and light control across hundreds of converted grow rooms;
- Onsite wells and sterilized water supply (reverse osmosis);
- Onsite waste water treatment for the spent hydroponic grow solutions;
- 9.5 megawatts of power, plus 3.5 megawatts of emergency backup power onsite;
- Onsite incinerator for the plant cuttings post harvest;
- Extremely tight security, card key access, video monitoring, fenced in facility on 56 acres in a remote area;
- Office facilities for the administration and state oversight of the operation;
- A production capacity to meet the needs of the entire State of New York;

- The facility is designated a "Priority Project" by the North Country Regional Economic Development Council;
- Virtually everything required to make Northstar the most secure, state of the art grow operation in the world, creating jobs in New York State.

PalliaTech Chazy, NY Cultivation, Extraction & Manufacturing Facility (Clinton County)

Lease and Location Summary

Address:	641 Ridge Road, Chazy, NY 12921
Neighborhood:	Chazy
Square Footage Leased:	65,000 sf
Square Footage Available:	387,000 sf (excluding roof cultivation)
Intersection/Cross Street:	none
Building Type:	Commercial Multi-Tenant
Distance From Major Thoroughfare:	Less than 1 mile from Rt. 87
Required paragraph per §1004.5(b)(9):	5B, page 4.
Driving Distance From Next Nearest PalliaTech Dispensary:	198 miles (3.25 hour drive time to Utica dispensary)
Estimated Build Out Time:	Sixty (60) Days



DISPENSARIES

OVERVIEW

PalliaTech had one single site selection objective when choosing its dispensary locations...to give as many possible certified New York patients convenient access to its cannabis formulations. We believe we have succeeded.

Our real estate statistics:

- The four dispensaries will give PalliaTech 84% county coverage. Fifty-two of New York State's 62 counties are within a two hour drive time of at least one of our future dispensaries (drive time maps attached);
- These 52 counties account for an estimated 96% of the population in New York State (as derived from National Association of Counties, archived August 4, 2010);
- Each dispensary is within ½ mile of at least one major transportation artery; and
- Each location has been received strong state-level and local political support.

PALLIATECH RELIEF CENTER DISPENSARIES

PalliaTech has executed leases for four dispensaries located throughout New York State.

They are:

1) 425 Fulton Street, Brooklyn, NY (King's County)

PalliaTech's proposed 3,000 sq.ft. Kings County medical marijuana dispensary is located at 425 Fulton Street on one of the world's busiest pedestrian malls. According to New York Metropolitan Transportation Authority statistics, the two subway stations that are less than one block from 425 Fulton service over 80,000 commuters per day and is less than a 30 minute subway ride from both Grand Central Station and Penn Station, a ten minute ride from downtown Manhattan and seven minute train or bus ride (or 15 minute walk) from the Long Island Rail Road station at Atlantic Yards

2) 38 South Plank Road, Newburgh NY (Orange County)

PalliaTech's Orange County proposed medical marijuana dispensary is located at 38 South Plank Road in Newburgh, NY. The dispensary will be a 4,000 square foot medical cannabis facility that is an eighth of a mile from NY Route 84 directly off Exit 8. Co-

tenants of the 12,000 sq. ft. strip center include Habitat for Humanity. Population within a one hour drive time of the Monroe County facility is an estimated 2.9 million.

3) 215 Alexander Street, Rochester, NY (Monroe County)

PalliaTech's 1,600 sq. ft. Monroe County proposed medical marijuana dispensary is located at 215 Alexander Street in Rochester New York. Alexander Street is a busy commercial corridor that connects Rochester's vibrant Park Avenue and East End neighborhoods. The site is immediately across the street from several Rochester General Hospital departments. The facility will be easily accessible from all city and suburban locations via I-490, NY-31 (Monroe Ave) and NY-96 (East Ave).and via Rochester's mass transit system. Population within a one hour drive time of the Monroe County facility is an estimated 1.25 million.

4) 350 Leland Avenue, Utica, NY(Oneida County)

PalliaTech's 2,500 sq. ft. Oneida County medical marijuana dispensary is located in north Utica, NY on Leland Avenue, a main commercial corridor. The center enjoys excellent accessibility and is visible from the New York State throughway. Population within a one hour drive time of the Oneida County facility is an approximately 700,000.

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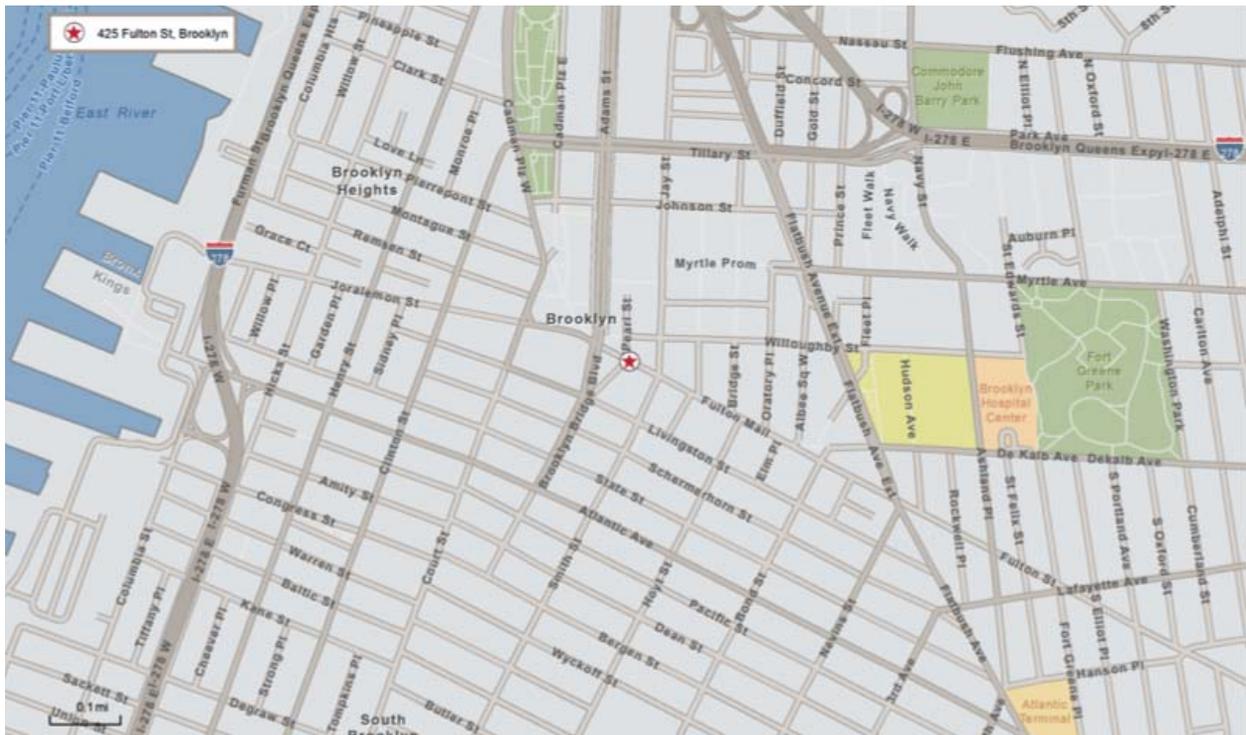
DISPENSARY



425 Fulton Street
Brooklyn, NY 11201-5121
Kings County

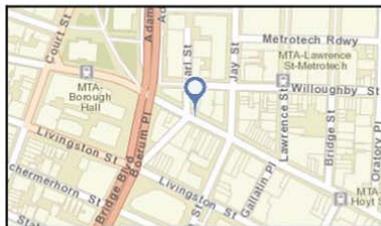
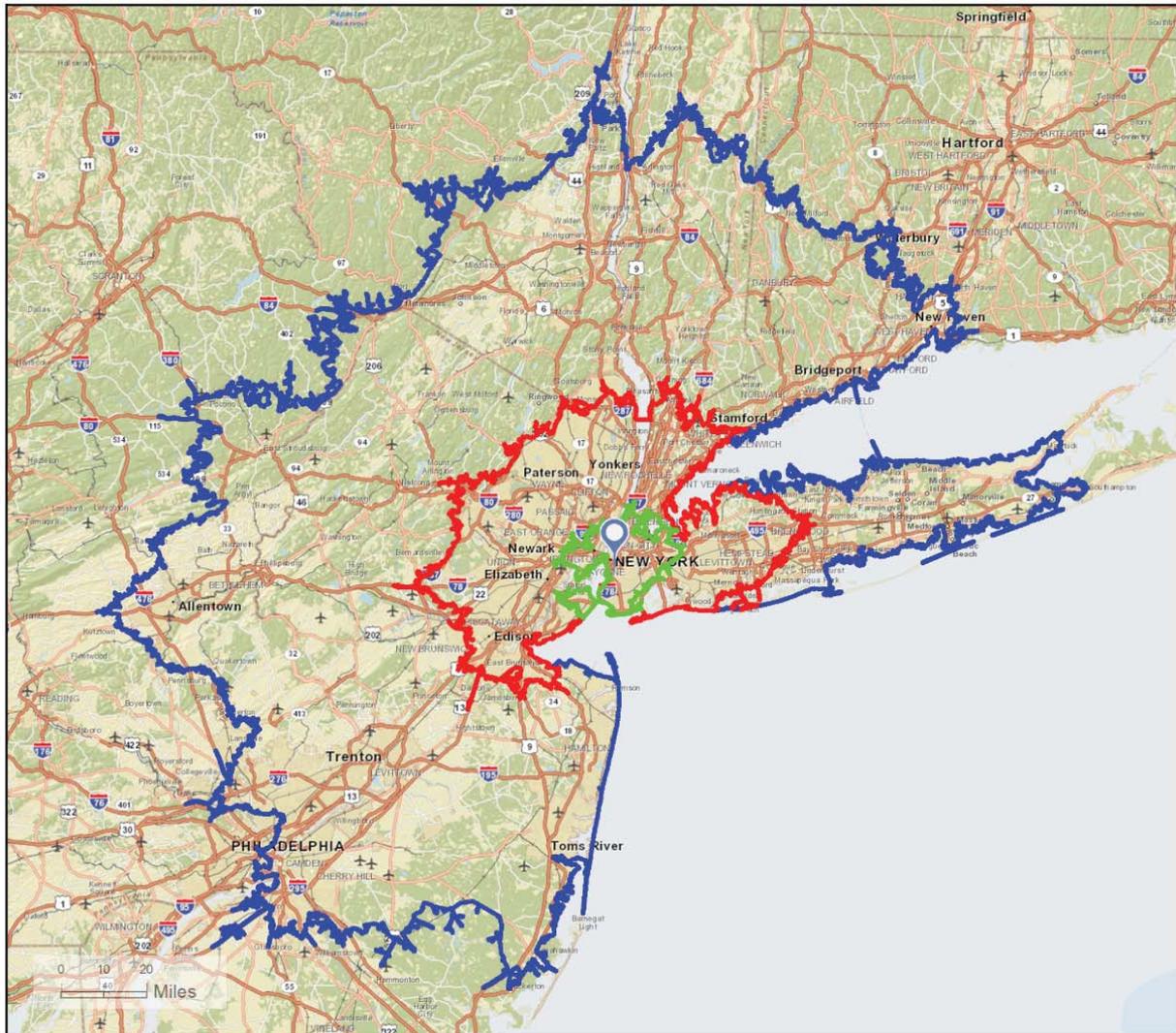


Address:	425 Fulton Avenue, Brooklyn, NY 11201
Neighborhood:	Downtown Commercial
Square Footage:	3.050 sf
Intersection/Cross Street:	Fulton Street Pedestrian Mall
Building Type:	Two Tenant Retail
Distance From Major Thoroughfare:	1/2 th mile from Rt. 278 (Brooklyn/Queens Expressway
Required paragraph per §1004.5(b)(9):	Lease § 55 p. 55
Use Clause:	§ 1(Q) p. 2
Driving Distance From Next Nearest PalliaTech Dispensary:	68 miles (1.75 hour drive time to Newburgh dispensary)
Population Within One Hour Drive Time:	14.7 million
Median Age per 2010 Census (1 hour):	36.7 years (Statewide = 38.1)
Estimated Build Out Time:	Sixty (60) Days



Drive times: 30, 60, 120 minute radii

Longitude: -73.98802

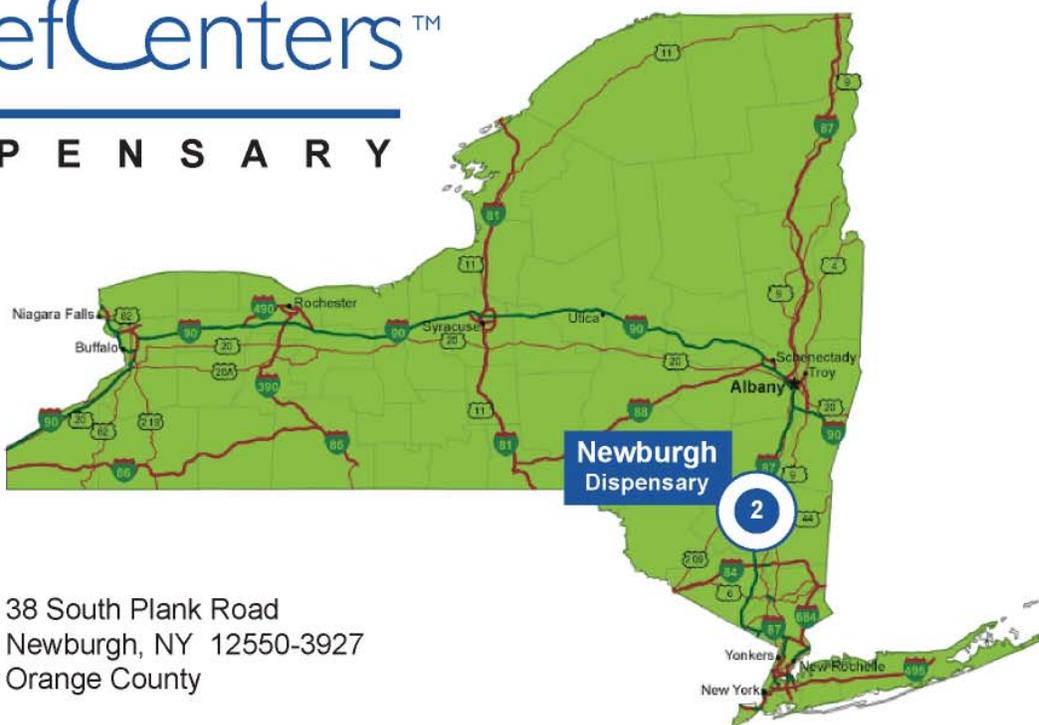


425 Fulton St, Brooklyn, New York, 11201
Drive Times: 30, 60, 120 minute radii



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DISPENSARY



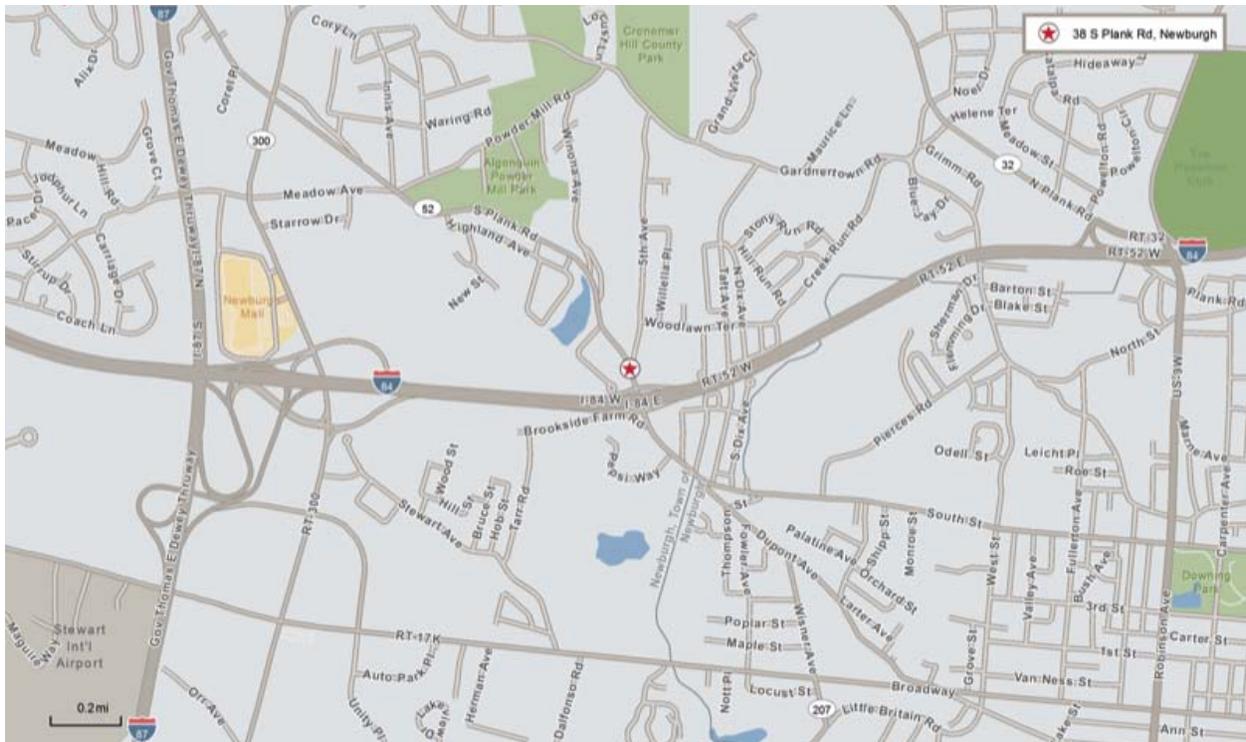
38 South Plank Road
Newburgh, NY 12550-3927
Orange County



PalliaTech Newburgh Dispensary (Orange County)

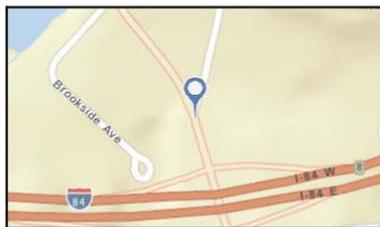
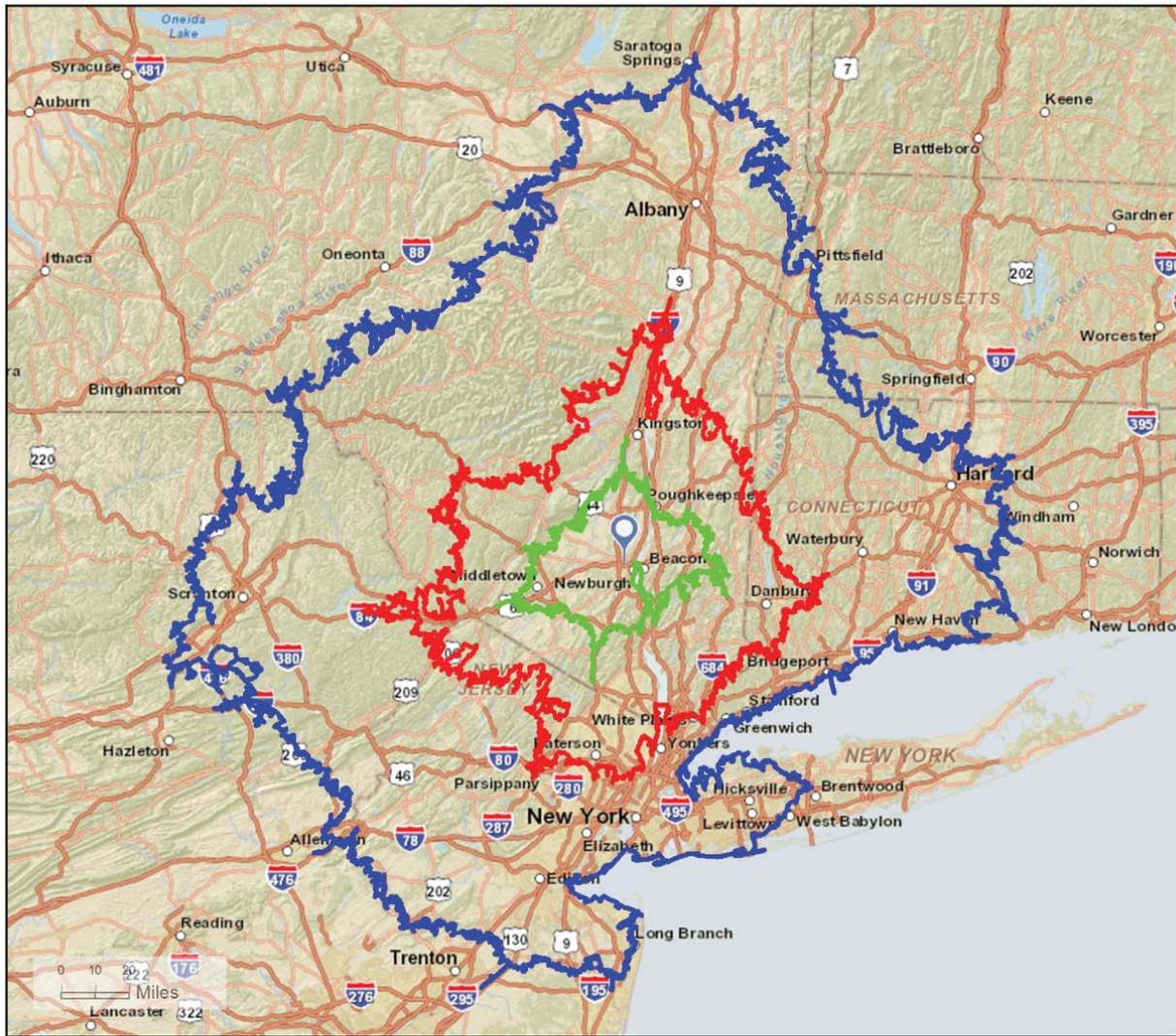
Lease and Location Summary

Address:	38 South Plank Road, Newburgh, NY 12550
Neighborhood:	Town of Newburgh
Square Footage:	4,000 sf
Intersection/Cross Street:	South Plank Road and Rt. 84
Building Type:	Local Multi-Tenant Retail
Distance From Major Thoroughfare:	Less than 1/8 th mile from Rt. 84
Required paragraph per §1004.5(b)(9):	Lease Section Thirty Seven
Driving Distance From Next Nearest PalliaTech Dispensary:	68 miles (1.75 hour drive time to Brooklyn dispensary)
Population Within One Hour Drive Time:	3.06 million
Median Age per 2010 Census (1 hour):	39.7 years (Statewide = 38.1)
Estimated Build Out Time:	Sixty (60) Days



Drive times: 30, 60, 120 minute radii

Longitude: -74.04996

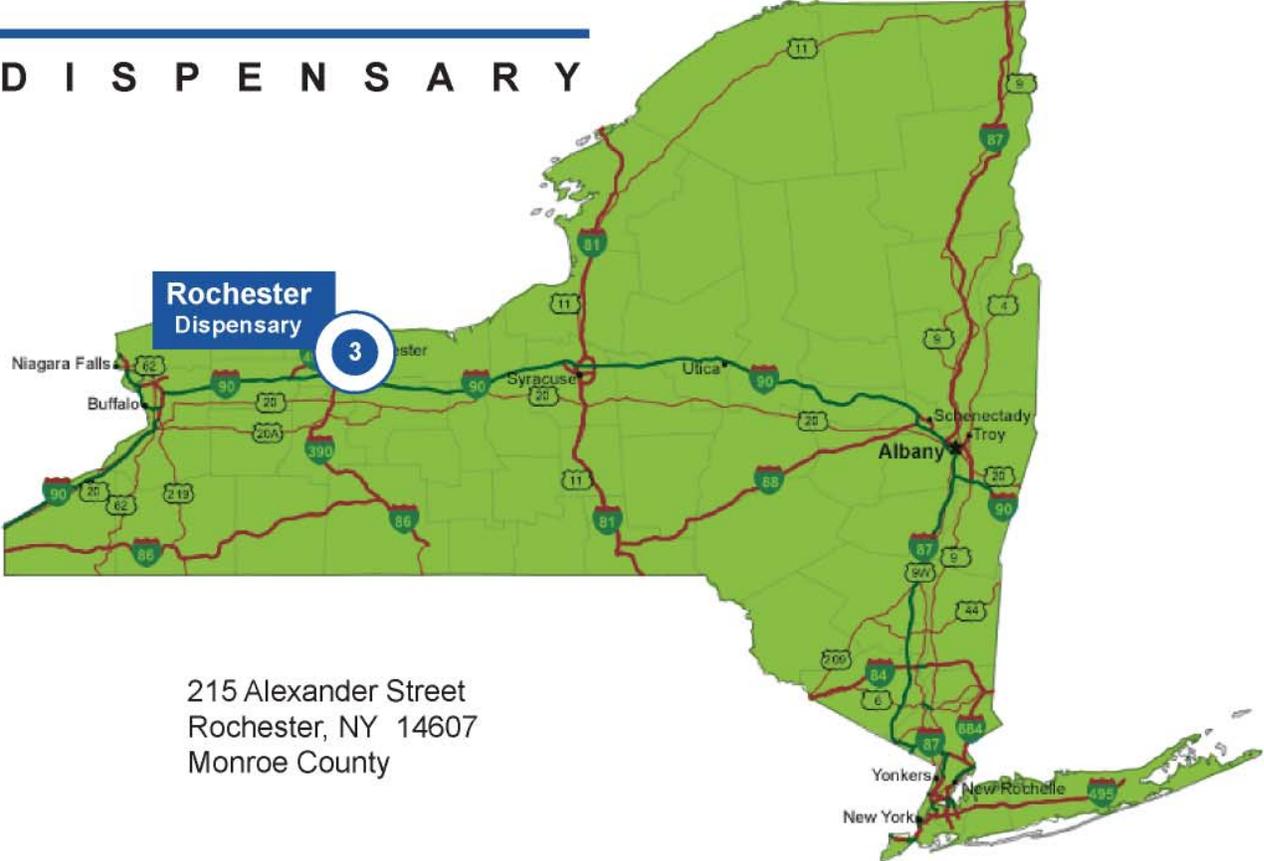


38 S Plank Rd, Newburgh, New York, 12550
Drive Times: 30, 60, 120 minute radii



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DISPENSARY



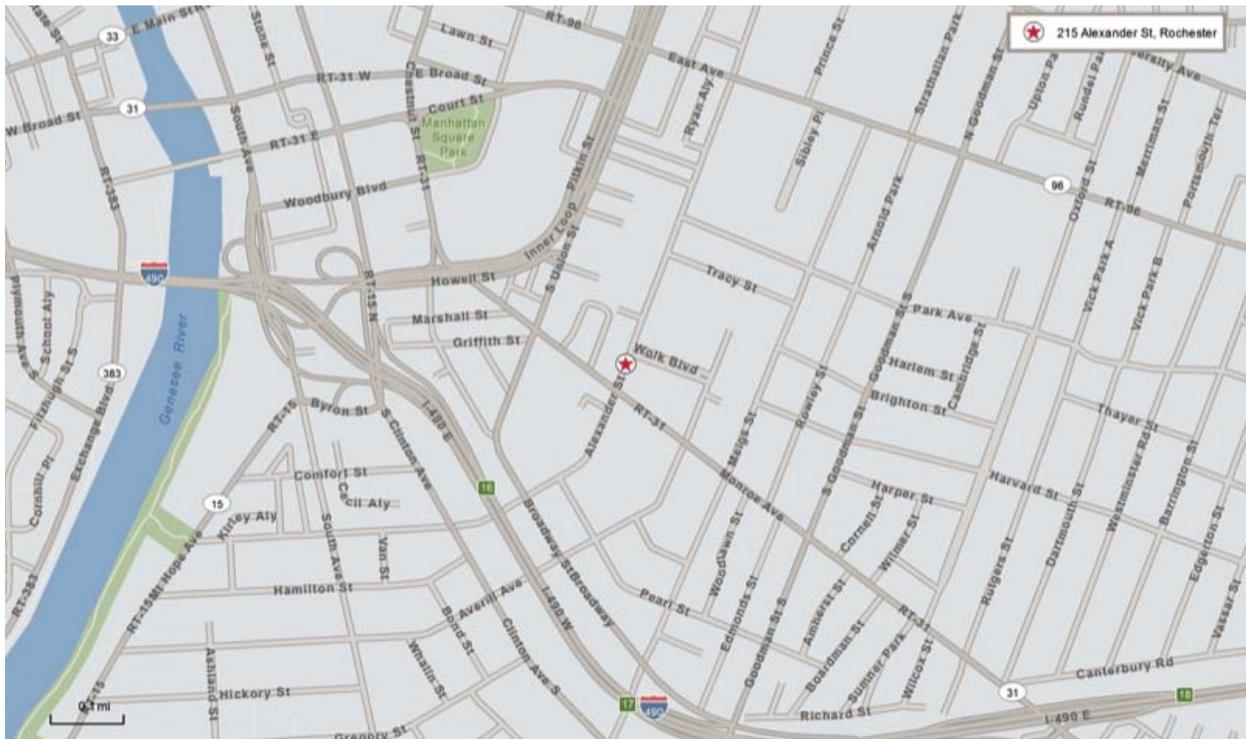
215 Alexander Street
Rochester, NY 14607
Monroe County



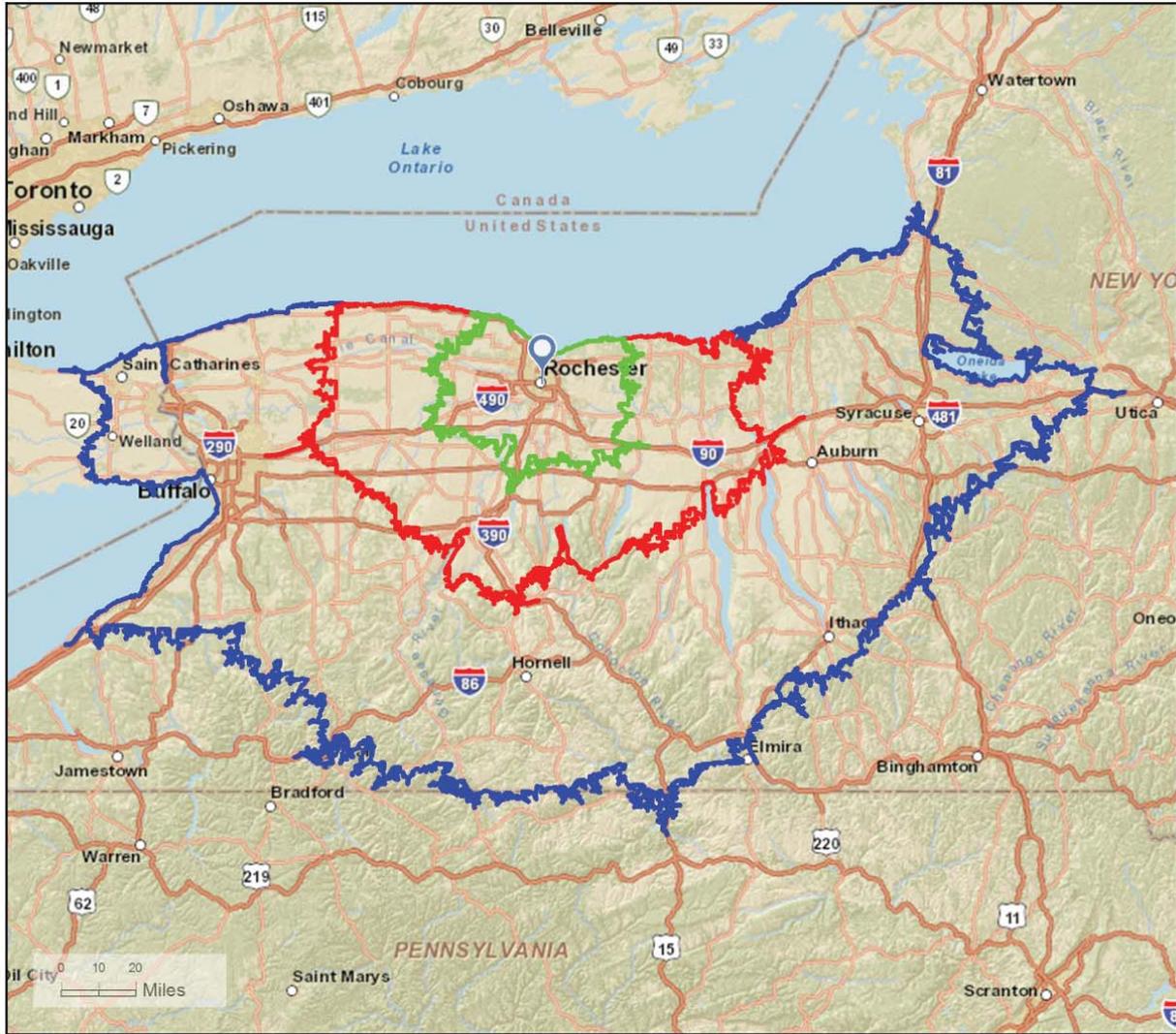
PalliaTech Rochester Dispensary (Monroe County)

Lease and Location Summary

Address:	215 Alexander Street, Rochester, NY 14607
Neighborhood:	Downtown Commercial
Square Footage:	1,545 sf
Intersection/Cross Street:	Alexander Street and Monroe Avenue
Building Type:	Multi-Tenant Mixed Use
Distance From Major Thoroughfare:	1/8 th mile from NY Throughway
Required paragraph per §1004.5(b)(9):	Lease § 4.3
Driving Distance From Next Nearest PalliaTech Dispensary:	133 miles (2 hour drive time to Utica dispensary)
Population Within One Hour Drive Time:	1.14 million
Median Age per 2010 Census (1 hour):	39.5 years (Statewide = 38.1)
Estimated Build Out Time:	Sixty (60) Days



Drive times: 30, 60, 120 minute radii



215 Alexander St, Rochester, New York, 14607
Drive Times: 30, 60, 120 minute radii



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DISPENSARY



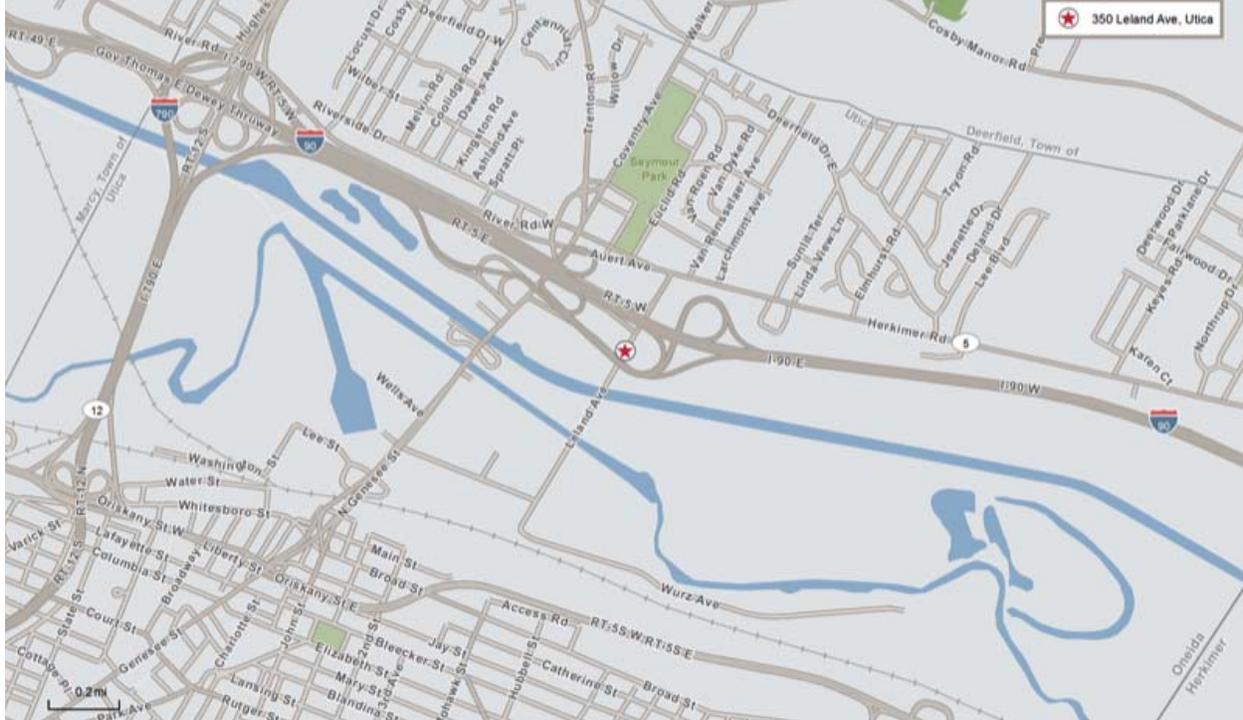
350 Leland Avenue
Utica, NY 13502
Oneida County



PalliaTech Utica Dispensary (Oneida County)

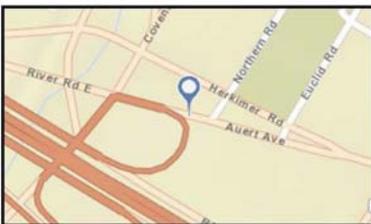
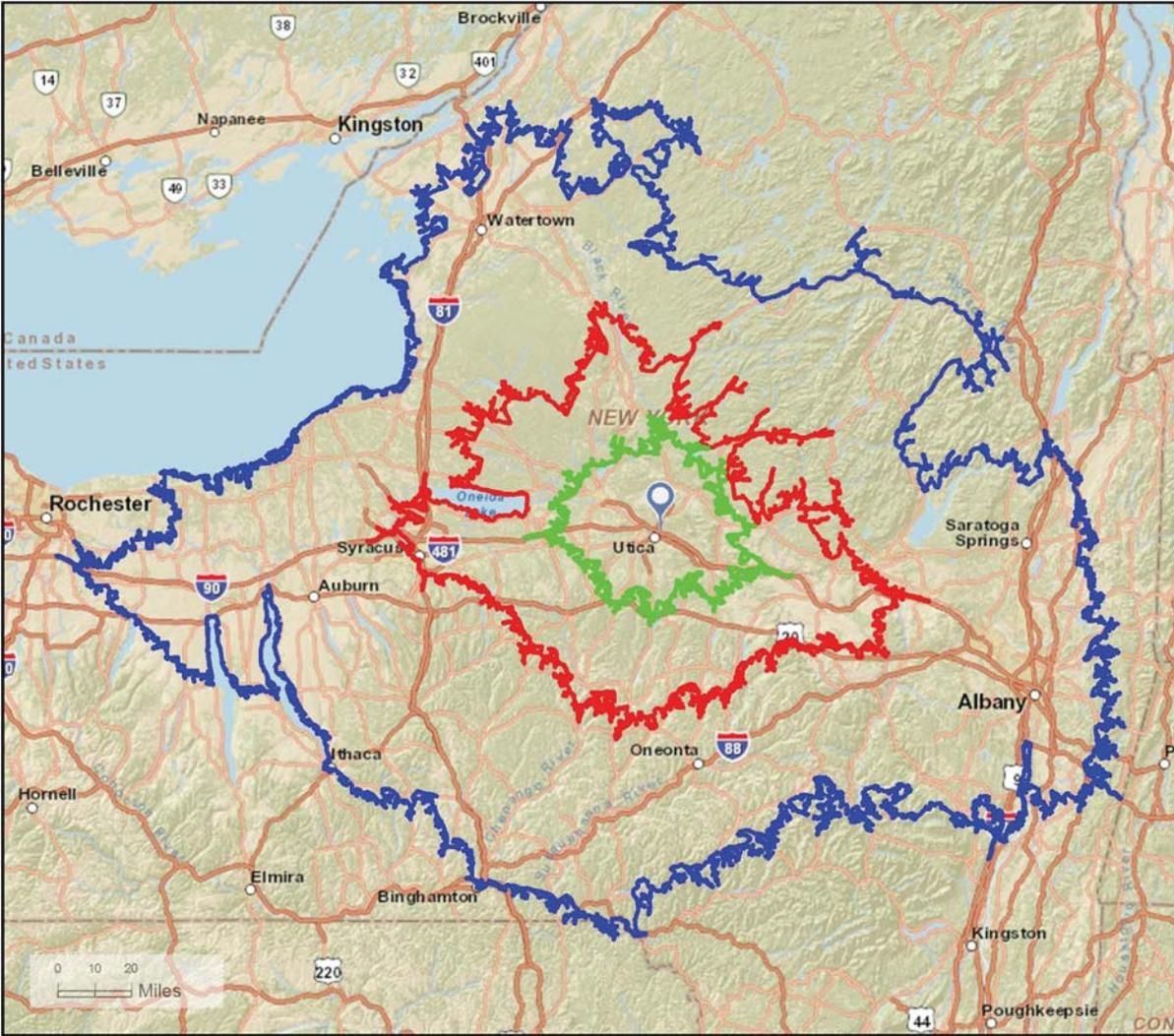
Lease and Location Summary

Address:	350 Leland Avenue, Utica, NY 13502
Neighborhood:	North Utica
Square Footage:	2,400 sf
Intersection/Cross Street:	Leland Avenue and Auert Avenue
Building Type:	Local Strip Center
Distance From Major Thoroughfare:	1/8 th mile from NY Throughway
Required paragraph per §1004.5(b)(9):	Lease § 19.2 p. 35
Driving Distance From Next Nearest PalliaTech Dispensary:	133 miles (2 hour drive time to Rochester dispensary)
Population Within One Hour Drive Time:	700,572
Median Age per 2010 Census (1 hour):	41.2 years(Statewide = 38.1)
Estimated Build Out Time:	Sixty (60) Days

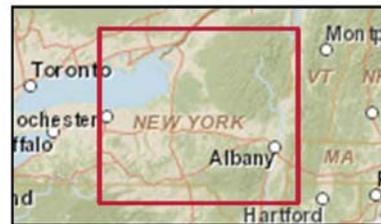


Drive times: 30, 60, 120 minute radii

Longitude: -75.20973



350 Leland Avenue, Utica, NY 13502
Drive Times: 30, 60, 120 minute radii





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EQUIPMENT LIST



Attachment B – Equipment List

Item	Use	Qty	Brand	Model Description
Extraction/Purification				
Electronic balance	Weighting Material	1	Shimadzu	JA 2003
Electronic balance	Weighting Material	1	Sartorius	A200S
Precision micro pipettes combo	Measuring Liquids	5	Eppendorf	Reference® 2
Commercial Refeigeratoir	Keeping Work in Process (WIP) at Correct Temperature	2	Thermo Scientific	ULT430A
Biological safety cabinet	Use For In House Microbial Contamination Testing	1	The Baker's company	SG600
Vacuum drying oven	Use For IN House QA/QC of WIP Samples	1	Yamato	ADP31
Rotary evaporator re300 with oil bath	Use For IN House QA/QC of WIP Samples	1	Yamato	rotary evaporator re300
Concentrator Cold trap	Use For IN House QA/QC of WIP Samples	1	Labonco	Centrivap centrifugal
Fume Hood	Saftey Protection while using solvents in QA Lab	1	Fisher Scientific	Safeaire
Spectrophotometer	Use For IN House QA/QC of WIP Samples	1	Bekman	DU640
Flash Chromatography Workstation	Use For IN House QA/QC of WIP Samples	1	Analogix	Intelliflash 280 system - workstation
Oven	Use For IN House QA/QC of WIP Samples	1	Precision scientific	Model 130
Nitro-Vap gas generator	Use to generate Analytical Nitrogen Gas for HPLC/MS	1	Parker Analytical gas systems	NitroVap-1LV
HPLC/MS	Use For IN House QA/QC of WIP Samples	1	Shimadzu	
HPLC	Use For IN House QA/QC of WIP Samples	1	Waters 2996	
ICP/MS	Use For IN House QA/QC of WIP Samples	1	perkinelmer	API 2000 LC/MS/MSSYSTEM
Microfuge Lite	Centrifuging Samples	1	Bekman	Microfuge 16 centrifuge
Safety mask	Employe Protection	C	3M	3M 6001 NIOSH
Safety Googles	Employe Protection	C	Shimadzu	ANSI Z87
Digital scale	Weighting Material	1	Shimadzu	JSK
Hydrolric Press	Packing CO2 extractor	1	Pittsborough automotive	12 ton Air hydraulic bottle jack
Air compressor	Packing CO2 extractor	1	Leffo central pressure control central pneumatic	2HP, 4Gal, 125 PSI
Working bench	work space	2		
Vacuum cleaner	cleaning	1	Shop vac blower vac	12 Gal/45.4L, 6.5 HP
Batch container	Holding Batch Feed Stock	50	Ikea	Samla 001.029.75
Chiller	Chiling Pump Heads	1	Temptek CFD digital scroll chiller control	S/N 134314 volt 230/3/60 fla 34.8
PVC 5 story rack	Storage	10	Home Depot	
Water bath	Heating WIP	3	Precision	Cat n 51221036 120V 1550watts 13 amps 50/60 hz
2x 15L CO2 extractor	Performing Extractions	1	Applied Separations	SFC fluid systems
Working bench	work space	3	Global industry	Stainless steel
Computer	Controlling CO2 extractor	1	Applied Separations	
Safety gloves	Employe Protection	C	Sharpro	Color orange
SFC 350	Fractionating Cannabinoids	2	Thar	Super pure SFC350 - lamp by one source
Collection containers	Collecting Cannabinoid Fractions	10	Thar	
Fridge	Holding WIP	1	Refrigerator I	
TFF Filtration Unit	Filtering Plant Waxes	1	Pall life sciences	?
Circulating water bath	Chilling Pump Heads	1	Precision Sicentific	M265
Rotary Evaporator	Removing Ethanol From Extracts	1	Heidolph	Laborota 20 Control
1L Large Wide-Mouth w/ Closure	Holding WIP	30	Thermo Scientific	Nalgene™ Large Square Wide-Mouth HDPE Bottle
1L Bottles with Screw-On cap	Holding WIP	1	Beckman	https://www.beckmancoulter.com/wsrportal/wsr/research-and-discovery/products-and-services/centrifugation/tubes-and-adapters/index.htm
One Gallon Industrial Round Jug	Holding WIP	10	SFB plastics inc	http://www.sfbplastics.com/14.html
Vaccum System	Provinf Process Vaccum	1	Vacuubrand	MD4CNT
High shear fluid processor	Forming Emulsions	1	Microfluidics corp	M-11EH
Lyophilizer	Forming WIP Powder	1	SP Scientific	VirTis Genesis 35L Pilot -
Comercial fridge	Holding WIP	2	Liebherr	
CO2 bottle	CO2 Storage	1	A. Edison	Airgas 50lbs

			Industries	
Workbench	work space	1		
Lab Island bench	work space	1	Global industrial	
Workbench	work space	4	Global industrial	
50L Heated Stirred Tank Mixer	Use for formulation mixing	1	MUELLER 50	LITER JACKETED BIO-REACTOR STAINLESS STEEL TANK W/ TOP MIXER
Scale	Weighting Material	1	Uline Easy-Count Scale - 3,000 grams x .1 gram	http://www.uline.com/Product/Detail/H-1653/Counting-Scales/Uline-Easy-Count-Scale-3000-grams-x-1-gram
2x10L Carboy	WIP storage	10	Nalgene™ Round LDPE Carboys	http://www.thermoscientific.com/en/product/nalgene-round-ldpe-carboys.html
50 ml Sterile Pipets	Measuring Liquids	C	Fisher	http://www.fishersci.com/ecomm/servlet/fsproductdetail_10652_616062_-1_0
10 ml Sterile Pipets	Measuring Liquids	C	Fisher	http://www.fishersci.com/ecomm/servlet/fsproductdetail_10652_616062_-1_0
1 ml Sterile Pipets	Measuring Liquids	C	Fisher	http://www.fishersci.com/ecomm/servlet/fsproductdetail_10652_616062_-1_0
Pipet Gun	Measuring Liquids	5	Bel-Art™ Scienceware™ Ergopet™	http://www.fishersci.com/ecomm/servlet/
Gloves, Hairnet, shoe covers	Employee Protection	C	3m	http://www.shop3m.com/3m-disposable-hair-net-407-one-size.html
Face mask	Employee Protection	C	Fisher	http://www.shop3m.com/3m-disposable-hair-net-407-one-size.html
Sample Containers	WIP storage	C	Falcon Tube	http://www.fishersci.com/ecomm/servlet/fsproductdetail_10652_661347_-1_0
Surface Pro 3	QA data	3	microsoft	http://www.microsoftstore.com/store/msusa/en_US/pdp/Surface-Pro-3/productID.300190600
QR Code Gun	QA data	3	motorola	https://www.google.com/shopping/product/18286284303474933432?q=qr+code+scanner&rlz=1C1CHFX_enUS576US576&es_sm=122&biw=1474&bih=630&bav=on.2.or.&bvm=bv.93564037.d.b2w&tch=1&ech=1&psi=G21XVZLSDoSZsAX9zoCwBg.1431792920317.5&ved=0CCAQpis&ei=LG1XVezHJIWNYATT4IHIDw
10L Heated Stirred Tank Mixer	WIP Mixing	1	AMAR EQUIPMENTS PVT. LTD.	http://www.amarequip.com/continuous-stirred-tank-reactors/
Scale	Weighting Material	1	Uline Easy-Count Scale - 3,000 grams x .1 gram	http://www.uline.com/Product/Detail/H-1653/Counting-Scales/Uline-Easy-Count-Scale-3000-grams-x-1-gram
10L Heated Stirred Tank Mixer	Used in Formulation Mixing	1	AMAR EQUIPMENTS PVT. LTD.	http://www.amarequip.com/continuous-stirred-tank-reactors/
50L Heated Stirred Tank Mixer	Used in Formulation Mixing	1	MUELLER 20	LITER JACKETED BIO-REACTOR STAINLESS STEEL TANK W/ TOP MIXER
10L Heated Stirred Tank Mixer	Used in Formulation Mixing	1	MUELLER 10	LITER JACKETED BIO-REACTOR STAINLESS STEEL TANK W/ TOP MIXER
Transfer Pump	Used in Formulation Mixing	1	Masterflex	Masterflex 7520-25
Transfer Pump Tubing	Used in Formulation Mixing	1	Masterflex	(0.25 inch ID, master flex)
Return Tubing	Used in Formulation Mixing	1	Masterflex	(0.25 inch ID, master flex)
Microfluidizer	Nano Emulsion Formation	1	Microfluidics	M-110P microfluidics
Heat exchanger,	Nano Emulsion Chilling	1	Muler	http://dreher-associates.com/
Pall	Nano Emulsion Filtering	1	Centramate™ 500 S Tangential Flow Filtration System	http://www.pall.com/main/biopharmaceuticals/product.page?id=47793
5 x 1000 K 2.5 m^2 filter cassettes	Nano Emulsion Filtering	10		(Millipore P2C01MC25)
Freeze Drier,	Producing Nano Particle Powder	1	Genesis Pilot Lyophilizer 25L	http://www.spscientific.com/Products/Freeze_Dryers/_Lyophilizers/Virtis/Floor_Model_Tray/Pilot_Lyophilizers/Genesis_Pilot_Lyophilizer/
Liquid Nitrogen Bath, 5L tray	Producing Nano Particle Powder	1	ThermalTray™ Platforms	http://biocision.com/products/ThermalTray/
Mylar 2L freeze drying bags	Producing Nano Particle Powder	C	Mylar	http://www.amazon.com/Gallon-Ziplock-Seal-Mylar-Storage/dp/B0050L9CJE
Scale	Weighting Material	3	Uline Easy-Count Scale - 3,000 grams x .1 gram	http://www.uline.com/Product/Detail/H-1653/Counting-Scales/Uline-Easy-Count-Scale-3000-grams-x-1-gram
Filling/Packaging lines				
Capsule filler	Filling bulk into gel capsules	1	IMA Pharma	Zanasi 325
Rotary unscrambling table	Selects capsules to rotary	1	IMA Pharma	Rotary unscrambling table
Swift count	Capsule counter	1	IMA Pharma	Swiftcount
Surecap	In-line capper for bottles	1	IMA Pharma	Surecap Inline capper
Capsule inspector	Verifies caps are well torqued	1	IMA Pharma	Capsule inspector
Induction sealer	Applies tamper	1	IMA Pharma	Enercon induction sealer

	resistant seal			
Surecap inline retorker	Verifies cap torque	1	IMA Pharma	SureCap in-line Retorquer
Labeler	Applies labels on bottles	1	IMA Pharma	Sensative Eco Labeler
Box sealer	Seals bulk boxes for transportation to dispensaries	1	IMA Pharma	
Weiler BFS 301-B	Molds/Fill/seals product container	1	Weiler engineering	http://www.weilerengineering.com/
Tamper Seal applicator	Bottle labeler	1	Weiler engineering	http://www.weilerengineering.com/
Bundler	Carton bundler	1	Weiler engineering	http://www.weilerengineering.com/
Carton taper	Carton taper	1	Weiler engineering	http://www.weilerengineering.com/
Rotary Pack off table	Pack selector	1	Weiler engineering	http://www.weilerengineering.com/
Wisoo Co Liquid Filling Robot	Fills PalliaVape pen cartridges	1	Wisoo CO	http://wisoo.en.alibaba.com/product/60164072847-0/Vaporizer_oil_filling_robot_wokable_for_atomizer_cartridge_dropper_disposable_e_cigarettes.html
Coin Counting Machine GG-02	Counts PalliaVape pellets	1	GELGOOG	http://www.chb2bshop.com/P/GELGOOG_GG_02_industrial_coin_counting_machine/1988506335

Manufacturing Reagents

Ethanol	USP Grade		Sigma	http://www.sigmaaldrich.com/catalog/product/sial/493538?lang=en&region=US
USP Water	USP Grade		Sigma	http://www.sigmaaldrich.com/catalog/search?term=USP+Water&interface=All&N=0&mode=match%20partialmax&lang=en&region=US&focus=product
Anylatical Grade CO2	USP Grade		Air Gas	https://www.airgas.com/
Diamotatious Earth	USP Grade		Sigma	http://www.sigmaaldrich.com/catalog/search?term=USP+Water&interface=All&N=0&mode=match%20partialmax&lang=en&region=US&focus=product
Beewax	USP Grade		Sigma	http://www.sigmaaldrich.com/catalog/product/sial/493538?lang=en&region=US
Carnauba Wax	USP Grade		Sigma	http://www.sigmaaldrich.com/catalog/product/sial/493538?lang=en&region=US
Aloclec PC Enriched 40-P	USP Grade		Sigma	http://www.sigmaaldrich.com/catalog/product/sial/493538?lang=en&region=US
Tween 80	USP Grade		Sigma	http://www.sigmaaldrich.com/catalog/product/sial/493538?lang=en&region=US
Lactose	USP Grade		Sigma	http://www.sigmaaldrich.com/catalog/product/sial/493538?lang=en&region=US
Polyethoxylated castor oil	USP Grade		Sigma	http://www.sigmaaldrich.com/catalog/product/sial/493538?lang=en&region=US
Polyethylene Glycol	USP Grade		Sigma	http://www.sigmaaldrich.com/catalog/product/sial/493538?lang=en&region=US
CORN OIL PEG-6 ESTERS (FDA IIG)	USP Grade		Sigma	http://www.sigmaaldrich.com/catalog/product/sial/493538?lang=en&region=US
Propylene glycol	USP Grade		Sigma	http://www.sigmaaldrich.com/catalog/product/sial/493538?lang=en&region=US
Vegetable Glycerin	USP Grade		Sigma	http://www.sigmaaldrich.com/catalog/product/sial/493538?lang=en&region=US
USP Water	USP Grade		Sigma	http://www.sigmaaldrich.com/catalog/product/sial/493538?lang=en&region=US

Cultivation Equipment

Illumitex Neo Sol NS	Lighting for flower rooms	90	Illumitex	NeoSol NS Led
GGs Moving benches	Benches to hold all plants and allow for sub-irrigation	16	GGs	Rail cart
T5 Light Fixtures	Lighting for cloning and early vegetation	30	Grow Crew	HO T5 4', 8 Bulbs Fixture w/ Bulbs
Water Tanks 250 gallon	Tanks to be pumped for sub-irrigation	5	The cary store	26WB2C
Can Filter 150	Air scrubbers	5	BFG supply	358700
CO2 Regulators	Controls the pressure for CO2	5	Builders World Wholesale Distribution	Victor High Flow CO2 regulator
CO2 Tank 1000lb	Stores all bulk CO2 for enrichment in flower rooms	1	Mizer	Max 1000
Hanna PH/TDS meters	Used to test any solutions for EC and TDS	2	Hanna	HI 98130
36" fans	Air circulation in all cultivation rooms	36	Global Industrial	Portable bower fan 36
Barcode scanners	For scanning plant id tags in cultivation	6	Wasp Technologies	WLR8950
Bio Track laptop computer	For input of all data in cultivation	2	Dell	Latitude 14 Rugged Extreme 14" Notebook
Bio Track PC	Main computer in cultivation	6	Dell	XPS 8700

Barcode Printer	Outputs labels for plants	2	Wasp Technologies	WPL305 Desktop Barcode Printer
Delivery Vehicles		2		
Quest Dehumidifiers	Dehumidification for all grow rooms	10	Quest	Dry 250
HVAC system	Provides primary and back-up cooling for all spaces		Webco	
RO water system	Source of clean water for all systems		U.S. Filter/Permutit	Model CD8040
BMS - Building Management system	Controls HVAC, Lighting, electrical, and systems		Siemens	Apogee
CO2 Drip Tubing 20' roll - 500ft	Drips CO2 in cultivation rooms	1		
Planter Pots 2 gallon	Holds plants for mother/cloning room	100	Green House Mega Store	600 series
Planter Pots 5 gallon	Holds plants for mother/cloning room	100	Green House Mega Store	2000 series
Planter Pots 10 gallon	Holds plants for mother/cloning room	100	Green House Mega Store	3000 series
Ratchet hangers	Holds lights in flower and cloning rooms	300	Hydrofarm	LULIFT Light Riser Hangers, 2/pk
Hoses 50 ft	For moving water by hand	6	Parker	RGR5825
Wands - watering	For any watering by hand	6	Waldoinc	36" E-zy Water Wand w/ foam insulated handle
Veg room Shelving	Holds lighting and clone trays	12		
Cordless tool set	Miscellaneous project work	1	Dewalt	DCK590L2 - 20V MAX* Lithium Ion 5-Tool Combo Kit (3.0Ah)
Utility knives	Miscellaneous project work	6	Durokon	Zenport K103 Harvest/Utility Knife, 3-Inch Straight Stainless Steel Non-Serrated Blade
Drill bits	Miscellaneous project work	25	Dewalt	DCK590L2 - 20V MAX* Lithium Ion 5-Tool Combo Kit (3.0Ah)
Single edge razor blades	For trimming plants	1000	Harbor freight tools	100 pack Item#39748
Wire cutters	Miscellaneous project work	1	Dewalt	Diagonal Pliers 4.25" Chrome Vandm 0.25
Screwdrivers	Miscellaneous project work	4	Dewalt	DCK590L2 - 20V MAX* Lithium Ion 5-Tool Combo Kit (3.0Ah)
Trimming scissors	For trimming plants	24	Dewalt	DWHT20123
Pruners	Cutting down plants	4	Corona	Forged Pro Cut™ Bypass Pruner – 1 in
Curing racks	Hangs plants for curing	12	Custom built	
Sunshine mix #4 soil (Pallet)	Soil for Mother Plants	4	Sunshine Advanced	Sunshine® Mix #4
5 gal buckets	Miscellaneous project work	12	Letica®- US Plastic	Standard Black 5 Gallon Bucket
Trash cans 55 gal	For specific watering needs	4	Rubbermaid	55 Gallon Square Rubbermaid Brute Waste Receptacles
Trash cans 40 gal	Trash cans for various work areas	10	Rubbermaid	40 Gallon Square Rubbermaid Brute Waste Receptacles
Shower board/Dry Eraser	For room notations per room	6	Global Industrial	The Board Dudes 17019BDUA-1
Atomizer	Foliar feeding of plants	2	HDHudson	
Tomato Clips	Support clips for plants	1000	Brinkman	792000156
Duct tape 6 pack	Miscellaneous project work		Homedepot	1.88 in. x 20 yds All purpose duct tape- # 392875
Paper towels Case of 30	Cleaning supply		Bounty	52 Two-Ply 11" x 11" Rolls
Rags Box of 100	Cleaning supply		Offshore Wake	Buffalo Rags 10087 Rag-Wiping Color 8Lb Box
Measuring cups Set of 20	For measuring nutrients by hand		Global Industrial	Cambro 25MCCW135 - Camwear Measuring Cup, 1 Cup, Dry Measure, Clear
Flashlights	Miscellaneous project work	4	Dewalt	DCL023 - Cordless Work Lights Voltage: 8 Run Time: 5 Hrs
Yellow stickies for fungus gnats	Insect control in cultivation rooms	30	Gempler's	T3305
Blue stickies for thrips Pkg of 5	Insect control in cultivation rooms	30	Evergreengrowers	Blue stiky card
Containers (Rubbermaids 17.75 gal)	For holding bulk material post-harvest		Rubbermaid	17.75 Gallon Square Rubbermaid Brute Waste Receptacles
Plant carts shelved	Moves plants from area to area	4	Global Industrial	Lakeside® 311 Stainless Steel Utility Cart 27 x 16 x 32 300 Lb Cap
Cart for BioTrack computer	Holds computer for cultivation	1	Mayline	MLN-945ANT cart
12' Ladder	Miscellaneous project work	1	Global Industrial	12 Step Steel Stock Picking Ladder Serrated Tread - SPL-12-14G
8' Ladder	Miscellaneous project work	1	Global Industrial	Maintenance Ladder - 8 Step Perforated - LAD-MM-8-P
Shovels	Miscellaneous project work	2	Global Industrial	General & Special Purpose Shovels, UNION TOOLS 79804
Latex Gloves	Hand protection for cleanliness in all work areas		Global Industrial	Ni-Flex Disposable Powder & Latex Free Nitrile Gloves, 100/Box, Small, Black
Rockwool cubes 2"	Cloning medium	5000	Grodan	Grodan Rockwool Cubes (2 X 2 X 1.5 Inches)
Rockwool cubes 8"	Flowering medium	5000	Grodan	Grodan Big Mama 8"x8"x8" Inch, Case of 18
Pallet jack	Moving pallets of supplies		Roughneck	Roughneck Pallet Truck — 5,500lb. Capacity

IRRIGATION AND NUTRIENT SYSTEM				
Suction lines	Components of the automated sub-irrigation	2	Zwart	
Discharge lines	Components of the automated sub-irrigation	2	Zwart	
Lot of glue, primer, Teflon tape etc.	Components of the automated sub-irrigation	1	Zwart	
"Link style" fertilizer mixing system		2	Zwart	
Pump temperature switch	Components of the automated sub-irrigation	1	Zwart	
Poly tank fill solenoid valve 24vac	Regulates the filling of feed tanks	1	Zwart	
Pulsatron acid injection pump	Injects acid to system for adjusting PH	1	Zwart	
Iwaki fertilizer pumps,	Injects nutrients to system	2	Zwart	
Sensor loop	Holds the sensors that regulate inputs	1	Zwart	
Sets of stock tank	Moves feed solutions from stock tanks	2	Zwart	
Lot of PVC connection fittings,	Components of the automated sub-irrigation	1	Zwart	
Stainless steel frame	Holds entire fertigation system	1	Zwart	
20 gallon stock tanks	Holds nutrient solutions for injection into water	4	Plastic Mart	Rubbermaid 4243-00 Stock Tank 20 Gallon Black
12 gallon Acid storage tanks	Holds Acid for PH adjusting	2	Plastic Mart	
Industrial control computer	Runs the Controls software for the fertigation system	1	HP	
License for "The Watchdog III"	Software for controlling all systems		Damatex	
KVM switch	Components of the automated sub-irrigation	1	Hewlet Packard	
Computer screen	Monitor for control computer	1	Hewlet Packard	
Mouse & keyboard	Mouse and keyboard for control computer	1	Hewlet Packard	
Modem	Modem	1	Hewlet Packard	
Computer enclosure RF Mote	Components for Fertigation controls	1	Damatex	
Stardom RAID security system	Components for Fertigation controls	1	Damatex	
UPS 550VA	Components for Fertigation controls	1	Damatex	
UPS 1000VA	Components for Fertigation controls	1	Damatex	
Watch Dog	Components for Fertigation controls	1	Damatex	
High voltage surge protection	Protects system from power surges	1	Damatex	
Telephone dialer	For utilizing modem	1	Damatex	
Com Switch 7500	Facilitates sharing phone line	1	Damatex	
Control modules 7-8-8	Components for Fertigation controls	4	Damatex	
Analog output module	Components for Fertigation controls	1	Damatex	
Module enclosure	Components for Fertigation controls	1	Damatex	
Lightening arrestor	Components for Fertigation controls	1	Signet	
High voltage surge protection	Protects system from power surges	1	Signet	
Power supplies 24VDC	Power supply	2	Signet	
Optic isolator	Components for Fertigation controls	1	Signet	
Temperature sensors (recipe tank)	Components for Fertigation controls	2	Honeywell	
Drywells	Components for Fertigation controls	2	Rubbermaid	
Flow meters	Components for Fertigation controls	2	Signet	
Water level sensors	Components for Fertigation controls	2	Signet	
Hammond boxes 16 x 14 x 8	Components for Fertigation controls	2		
Transmitters for EC 4-20MA	Components for Fertigation controls	4	Signet	
EC electrodes	Components for Fertigation controls	4	Honeywell	
Transmitters for pH 4-20MA	Components for Fertigation controls	4	Signet	

pH electrodes	Components for Fertigation controls	4	Signet	
pH sensor holders	Components for Fertigation controls	4	Signet	
EC and pH fittings	Components for Fertigation controls	8	Signet	
Wires for EC and pH	Components for Fertigation controls	8		
Transformers 50 VA- 13VAC	Components for Fertigation controls	1	Siemens	
Transformers 150 VA- 24VAC	Components for Fertigation controls	1	Siemens	
Relays w/base RMI 24V - 2 poles	Components for Fertigation controls	2	Siemens	
Wiring (approx)	Components for Fertigation controls			
Specialized hardware	Components for Fertigation controls			
Graphic interface / programming	Components for Fertigation controls		Damatex	

Nutrients/ Fertilizers/Pesticides/Herbicides

Canna Terra Vega	Nutrients for Flowering phase		Canna	Terra vega
Canna Terra Flores	Nutrients for Flowering phase		Canna	Terra vega
Canna Rhizotonic	Algae based nutrient		Canna	Terra vega
Cannazyme	Facilitates the improved absorption		Canna	Terra vega
Cannaboost	Flowering stimulator		Canna	Terra vega
Canna PK 13/14	Minerals that stimulate flowering		Canna	Terra vega
Maxi Crop	Seaweed Fertilizer		MaxiCrop	www.maxicrop.com
Liquid Ladybug	Spider Mite Killer		LiquidLadyBug	www.liquidladybug.com
Botanicare PH up	PH corrector - low level of phytotoxicity		BotaniCare	www.botanicare.com
Botanicare PH down	PH corrector - low level of phytotoxicity		BotaniCare	www.botanicare.com
Dispensary Eqpt				
Printers	General Printing of documents		HP	Series 300
Bio Track PC	POS tracking system	6	Dell	XPS 8700
Pens/paper clips/Staplers/Markers	General office		Uiline	
Phones	Phones		Uiline	
Containers (Rubbermaids)	Moving inventory to/from vault		Uiline	
Cash Drawers POS	For cash handling	3	APG	Series 100
Receipt Printers POS	Generating receipts for patients	3	Star	TSP143II
Barcode Scanners POS	POS inventory input	5	Motorolla	LS2208 - SR20007R-NA
Final Sales Bags POS	Exit packaging		Uiline	

Security Equipment List

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LEASE AGREEMENT

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OFFICE LEASE AGREEMENT

BETWEEN

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LEASE AGREEMENT

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Attachment D – Operating Plan

1. Manufacturing

Please See Detailed Standard Operating Procedures in Section 6

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CULTIVATION



Producing High-Quality Feedstock

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Producing Pure Monocannabinoids

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A Robust QA-QC Program and Controls

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Lab Results Verify New York Compliant Brands

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Attachment D – Operating Plan
2. Transport and Distribution



Attachment D – Operating Plan

3. Dispensing and Sale



Attachment D – Operating Plan

4. Devices

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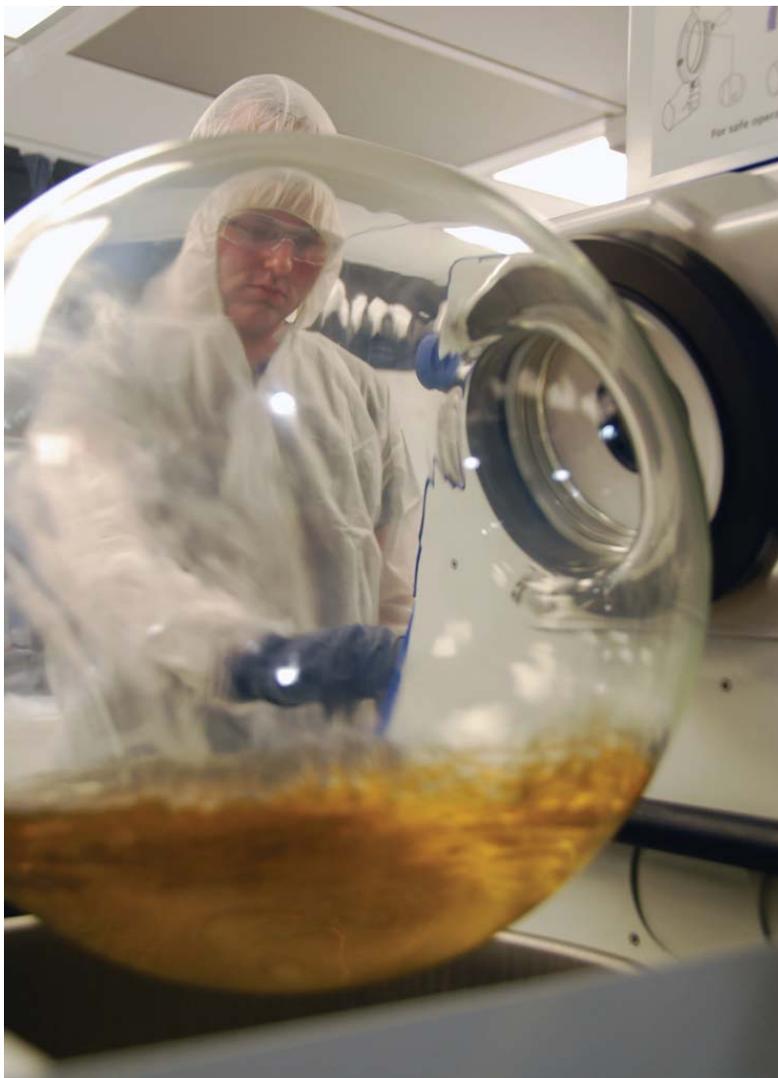
Attachment D – Operating Plan
5. Security and Control



Attachment D – Operating Plan
Standard Operating Procedures

Standard Operating Procedures

Palliaceutical™ Product Manufacturing Manual



PalliaTech Standard Operating Procedures were developed by the Company and our Manufacturing Compliance Team of multi-disciplinary experts. The SOPs comply with applicable provisions of the Compassionate Care Act, Chapter 90 of the Laws of 2014, Public Health Law Article 33, Title 5-A, New York Law and Department of Health regulations in 10 NYCRR Part 1004.

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Attachment D – Operating Plan

7. Quality Assurance Plan

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Attachment D – Operating Plan
7. Quality Assurance Plan



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**RETURNS
COMPLAINTS
ADVERSE EFFECTS
& RECALLS**



Attachment D – Operating Plan

8. Returns, Complaints, Adverse Effects and Recalls

EXECUTIVE SUMMARY

This document details the policies and procedures to be implemented to handle, document, and investigate returns, complaints, and adverse effects with respect to approved medical *Cannabis* products. It provides for both rapid voluntary and involuntary recalls of any lot of any medical *Cannabis* product in question.

The policies and procedures will apply to the following:

- Description of Adverse Effects
- Adverse Effects Originating at the Manufacturing Facility
- Adverse Effects Originating at the Dispensary
- Return Policy and Procedures
- Quality Control Investigation
- Retesting Returned Medical *Cannabis* Products
- Recalls
- Storage and Disposal

Returns, Complaints, Adverse Events and Recalls

At PalliaTech, all of our processes and procedures for producing and selling medical *Cannabis* have been expressly developed to minimize the likelihood of adverse events. To that end, we have embedded quality control into every stage of our operation, from cultivation and manufacturing (see Section 9: Product Quality Assurance for full details) to dispensing and sales (see Section 7: Quality Assurance Plan).

Nonetheless, there will always be, to some degree, the possibility that a product may be returned, subject to complaint, or recalled. Thus, we consider it our mandate to establish the proper procedures to effectively deal with product that has been deemed unsafe, unusable, or in violation of state or federal regulations. The processes outlined in this section are designed to investigate returns and complaints; identify effected products; quarantine and remove the products from distribution and dispose of them; and provide timely and accurate information and reporting to appropriate parties.

Adverse Events

The U.S. Food and Drug Administration defines an Adverse Event as any untoward medical occurrence associated with the use of a drug in humans, whether or not considered drug related. There are several ways that PalliaTech can learn of adverse events, including:

- identification of a failure in the manufacturing process based on our product testing and quality control;
- complaints and/or returns by patients or their registered caregivers; or
- complaints from a patients' physicians.

For example, a concern about the quality, performance, or safety of any medical Cannabis product may arise at the cultivation center / manufacturing facility with respect to any of the following:

- a failure in the manufacturing process;
- product contamination;
- defective components;
- improper packaging or product mix-up;
- questionable stability; or
- improper labeling

There might also be a problem during transportation or storage.

Moreover, whenever a patient, caregiver, or patient's physician returns or complains about a product, the Pharmacist will immediately evaluate the circumstances to discover the cause and take whatever corrective actions are appropriate.

Adverse Event Originating at the Manufacturing Facility

In the event that a contamination or failure in the manufacturing process is discovered and substantiated, the extent of the issue will be assessed and the effected products will be identified by the inventory control system, according to their product numbers. The system will quickly generate a report of all products and transactions associated with specific lot, brand and form. From that report, the system can quickly notify affected patients, the Department, appropriate authorities and agencies, and any other interested parties. At that point, there will also be an immediate recall and the entire original lot will be withdrawn from circulation given the uncertainty regarding the source and scope of contamination or failure in the manufacturing process.

The Quality Control (QC) Officer will contact the Department and appropriate state authorities regarding the recall and provide all information with respect to the type of contamination or failure in the manufacturing process and potential health risks.

Concurrently, the Quality Control Officer will notify each dispensary—either by phone or email—to pull the effected products from their inventories and initiate their destruction in keeping with state regulations and internal protocols. The Quality Control Officer will also query the dispensaries as to whether any effected products have already been sold to patients or their caregivers. If that is the case, the dispensaries will contact those customers with the details of the recall and advise them to return or destroy any unused medical cannabis products. They will make this and any additional information available to patients, caregivers, and the public via a telephone hotline and a special website that will have already been constructed for just this purpose.

Should the contamination pervade the supply chain, PalliaTech will issue a series of public service announcements via both conventional and online media regularly updating events until the recall is complete.

Throughout the process, cultivation center / manufacturing facility management will work closely and transparently with their persone, the dispensaries, the Department and state officials, and local law enforcement if necessary. Once the matter has been resolved, PalliaTech will convene a formal review of the incident and report results to the Department and the Board of Directors. Acting on the findings, we will initiate corrective action procedures to preclude a recurrence in the future, including educating and training cultivation center management and employees.

Adverse Events Originating at the Dispensary

Any adverse event reported by a patient, caregiver, or physician will be documented by the Pharmacist.

The documentation will include;

- details regarding the adverse event;
- date of event;
- was hospitalization or medical attention required;
- product lot, brand and form;
- was product brand, form, and dose required by certifying physician;
- provide physician required brand, form, and dose;
- was product used as certified by physician;
- duration of product use;
- details of patient suffering adverse event:
 - demographic information
 - known medical conditions
 - known allergies
 - current prescription medications
 - current OTC medications
 - other information (smoker, alcohol use, pregnancy, drug use, etc.)
- demographic information of person reporting the incident.

After fully documenting the adverse event, the Pharmacist will send it to the Department, PalliaTech's Quality Control Officer, and the Laboratory Director within twenty-four hours of the time it was first reported by the affected party.

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ADVERSE EVENT REPORT

Patient Name/Identifier Code: _____

Dispensary Name: _____

Date of Event: _____

Date Reported: _____

Product Used: _____

Product Number: _____

Lot Number: _____

Dose/Frequency: _____

Person Taking Report: _____

Date Report Taken: _____

CHECK ONE:

Patient's initial Use of Product:

Patient's repeat Use of Product:

Other medications being concomitantly being used by patient:

Other relevant Patient History:

Remedial Action Taken: (Check All Applicable)

Recall:

Replace:

Relabel:

Notified DOH:

Recommend Lab Testing: yes no

Notification of Manufacturing (date completed):

Description of Event or Problem:

Additional Dispensary Comments:

Report Prepared By: _____

Print Name

Return Policy

Whenever a medical *Cannabis* product is returned, the dispensary will either scan the receipt barcode or produce a sales report to identify the exact transaction and product. In addition to enabling a refund or providing an exchange for an equal amount, the system will also record the returned product as “to be destroyed” to ensure that without a system generated barcode, it will not be repackaged and resold. After destruction, the system will generate a destruction report for tracking purposes, recording the following information:

- name of the patient who returned product;
- the quantity and brand name;
- the address of the site at which it was received; and
- the date on which it was received

Customer Return and Complaint Procedure

Whenever a patient, caregiver, or patient’s physician returns or complains about a product, the Pharmacist will be responsible for evaluating, investigating, and managing all manner of verbal and written grievances to determine the cause and to take appropriate corrective action. The Pharmacist will complete a complaint form identifying the following:

- date of complaint;
- customer name/address/phone;
- contact person;
- the nature of the complaint, including:
 - date of purchase;
 - product brand and form;
 - product lot #;
 - reason for the return/complaint;
 - adverse event, if applicable;
 - possible health risks; and
- any reply to the complainant

The Pharmacist will conduct a material review of the details of the return or complaint to determine whether there is a basis for conducting a full investigation of potential failure in the manufacturing process, or if the return or complaint is an unrelated issue. In the case of the former, the Pharmacist will notify the Quality Control Officer that there is a need for further investigation.

Quality Control Investigation

If the Pharmacist believes there is a need for further investigation, the Quality Control Officer will conduct an examination of potential failure in procedures according to established protocol. The QC Officer will notify all dispensaries of the case and will place a hold on all inventoried products associated with the lot identification of the product in question until the investigation is concluded.

The QC Officer will scrutinize all applicable areas of the cultivation, manufacture, testing, packaging, labeling and storage of the identified lot for a failure in process. If the results show just such a failure, a recall will be immediately implemented and all affected product in inventory will be promptly disposed of..

If the findings come back clear of a failure in process, the investigation will be documented and closed. All documentation on the matter will be provided to the Department, patients and caregivers to whom product was sold, and to patients' practitioners.

Determining the Need for Investigation

There may be times when a complaint will not warrant an in depth investigation. Such grievances may be coincidental and not have a direct relation to the product. The dispensary management team will be responsible for evaluating all returns and complaints to determine whether the file can be closed or if further investigation by the Quality Control Officer is warranted. In any case, a dispensary complaint log will be created, and after the investigation of the complaint is completed, it will be documented and maintained for five (5) years.

The Pharmacist will also report all product returns and complaints to the Department within twenty-four hours of the time it was first reported by the affected person.

Retesting Returned Medical *Cannabis* Product

Any medical Cannabis product that is returned because of a complaint or adverse event will be quarantined, and samples will be delivered to an independent state laboratory (currently the Wadsworth Center) within 48 hours for re-testing. The result will be documented and communicated to all appropriate parties.

If the results are proven to show contamination, a recall will be implemented promptly following PalliaTech's recall policy. Product affected that is in inventory will also be disposed of immediately.

Any product that is returned will be disposed of by the dispensary following our disposal policy, regardless of the testing results.

Recalls

In the event that patients, caregivers, or patients' physicians return or complain about products that may be contaminated or tampered with, the dispensary involved will determine the extent of the problem, if possible, and identify effected users by pulling reports from our inventory control system of all relevant products and transactions associated with a specific plant, lot, or strain. Moreover, the dispensary will be able to quickly initiate a recall by finding and removing any remaining products in the facility, as well as all sources and derivatives of those products.

Upon discovery, the Pharmacist will immediately provide the Quality Control Officer with all details related to the adverse event, including those products and transactions associated with a specific plant, lot, or strain, so that the manufacturing facility can locate any product and prepare for its removal and replacement. The Pharmacist will also report adverse events and recalls to the Department, via phone call and follow up email, within 24 hours of the occurrence.

Just as importantly, any patients who are impacted by a recall will receive prompt verbal communication via a mandatory phone call, the details of which will be noted in each patient's electronic record. They will be instructed to immediately discontinue using any product from the specific lot that may still be in their possession. A follow up letter will also be drafted by the Pharmacist and mailed within 24 hours of the original notification. Envelopes will prominently display the statement "URGENT-Product Recall". Furthermore, the Pharmacist will make every effort to get in touch with patients who fail to respond to the initial recall communication.

When implementing a recall it is imperative that all dispensary personnel involved understand the urgency of the situation and that all actions reflect this urgency. Top priority will be given to the complete and immediate removal of the recalled products from all levels in the distribution chain all the way down to the consumer level.

Storage and Disposal

All recalled products will be safely destroyed or disposed of in compliance with state regulations and industry best practices, and will be logged in the electronic tracking system, noting any and all information pertaining to its disposal, including but not limited to method of destruction, witness documentation, and an electronic PIN from the person in charge. This will be considered the alternative end to the product life cycle, and true seed-to-sale traceability and reconciliation will be visibly achieved.

Any product deemed "unusable" will be removed as waste. The amount will first be counted under video surveillance. Then the pertinent information regarding its disposal will be recorded on a waste log that is signed by the Pharmacist. All waste information will also be tracked through our electronic system which will note the following:

- A description of the products, including the quantity, strain, variety, batch number and reason for disposal
- The method of disposal, along with the name, address, and telephone number of the disposal company
- The date of disposal
- The name of the person disposing of the product

All medical *Cannabis* that is judged unusable will be secured, stored, and disposed of in accordance with state statutes and regulations. Waste material from the dispensary will be placed in a biohazard container clearly marked "MMJ Waste". These containers will be placed in a locked, isolated area away from all other products to avoid contamination, and kept under constant video surveillance to prevent diversion. For added security, the chain of command will be limited to the Pharmacist and Security Officer.

Destroying defective *Cannabis* products will require degrading it into unusable form by grinding and soiling it with non-consumable solid wastes. Non-compostable mixed waste will be used as paper waste and can be disposed of at an approved waste facility, which will pick it up once a week.



**PRODUCT QUALITY
ASSURANCE**



Attachment D – Operating Plan

9. Product Quality Assurance



Attachment D – Operating Plan
10. Record Keeping

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Redacted pursuant to N.Y. Public Officers Law, Art. 6

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Redacted pursuant to N.Y. Public Officers Law, Art. 6

Redacted pursuant to N.Y. Public Officers Law, Art. 6

FILING RECEIPT

ENTITY NAME: ABRAMS FENSTERMAN ENTERPRISES LLC

DOCUMENT TYPE: ARTICLES OF ORGANIZATION (DOM LLC)

COUNTY: NASS

FILED:04/09/2015 DURATION:***** CASH#:150409000395 FILM #:150409000380
DOS ID:4739648

FILER:

EXIST DATE

ABRAMS FENSTERMAN FENSTERMAN EISMAN
FORMATO ET AL. - PATTI PICCININNI
1111 MARCUS AVENUE, SUITE 107
LAKE SUCCESS, NY 11042

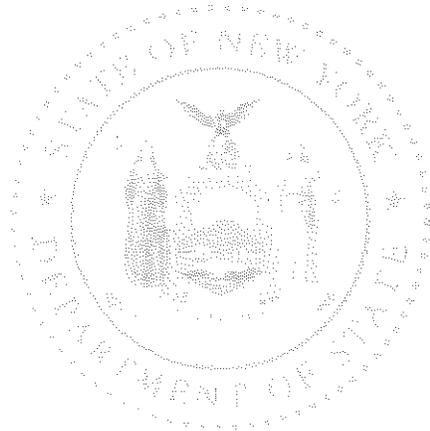
04/09/2015

ADDRESS FOR PROCESS:

THE LLC
ATTN: HOWARD FENSTERMAN
LAKE SUCCESS, NY 11042

1111 MARCUS AVENUE, SUITE 107

REGISTERED AGENT:



The limited liability company is required to file a Biennial Statement with the Department of State every two years pursuant to Limited Liability Company Law Section 301. Notification that the biennial statement is due will only be made via email. Please go to www.email.ebiennial.dos.ny.gov to provide an email address to receive an email notification when the Biennial Statement is due.

SERVICE COMPANY: CORPORATION SERVICE COMPANY - 45

SERVICE CODE: 45 *

FEES 285.00

FILING 200.00
TAX 0.00
CERT 0.00
COPIES 10.00
HANDLING 75.00

PAYMENTS 285.00

CASH 0.00
CHECK 0.00
CHARGE 0.00
DRAWDOWN 285.00
OPAL 0.00
REFUND 0.00

STATE OF NEW YORK
DEPARTMENT OF STATE

I hereby certify that the annexed copy has been compared with the original document in the custody of the Secretary of State and that the same is a true copy of said original.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on April 10, 2015.

Anthony Giardina

Anthony Giardina
Executive Deputy Secretary of State

150409000 380

CSC 45
DRAW DOWN

ARTICLES OF ORGANIZATION

OF

ABRAMS FENSTERMAN ENTERPRISES LLC

Under Section 203 of the Limited Liability Company Law

The Undersigned, desiring to form a Limited Liability Company under and pursuant to the laws of the State of New York, does hereby certify:

FIRST: The name of the Limited Liability Company is: ABRAMS FENSTERMAN ENTERPRISES LLC (the "Company").

SECOND: The office of the Company shall be located in the County of Nassau within the State of New York.

THIRD: The Company shall continue to exist until dissolved or terminated as provided in the Operating Agreement of the Company.

FOURTH: The Secretary of State of the State of New York is designated as the agent of the Company upon whom process against it may be served. The post office address to which the Secretary of State shall mail a copy of any such process served upon him is to the Company, 1111 Marcus Avenue, Suite 107, Lake Success, New York 11042, Attention: Howard Fensterman.

FIFTH: The purpose of the business shall be to pursue any lawful business purpose or purposes, except to do any business for which another statute of the State of New York or any other applicable jurisdiction specifically requires some other business entity or natural person to be formed or used for such business.

SIXTH: The relative rights, powers, preferences and limitations of the member(s) and manager(s), if any, are set forth in the Operating Agreement.

SEVENTH: A manager or member shall not be personally liable to the Company or its members for damages for any breach of duty as a manager or member, except for any matter in respect of which such manager or member shall be liable by reason that, in addition to any and all other requirements for such liability, there shall have been a judgment or other final adjudication adverse to such manager or member that establishes that such manager's or member's acts were committed in bad faith or were the result of active and deliberate dishonesty and were material to

the cause of action so adjudicated or that such manager or member personally gained in fact a financial profit or other advantage to which such manager or member was not legally entitled, or that with respect to a distribution the subject of Section 508 of the Limited Liability Company Law ("LLCL"), a manager's acts were not performed in accordance with Section 409 of the LLCL. Neither the amendment nor the repeal of this Article Seventh shall eliminate or reduce the effect of this Article Seventh in respect to any matter occurring, or any cause of action, suit or claim, that, but for this Article Seventh, would accrue or arise, prior to such amendment or repeal. This Article Seventh shall neither eliminate nor limit the liability of a manager or member for any act or omission occurring prior to the adoption of this Article Seventh.

EIGHTH: The Company shall indemnify, to the full extent permitted by the LLCL, as amended from time to time, all managers and members whom it is permitted to indemnify pursuant thereto.

IN WITNESS WHEREOF, the undersigned has hereunto executed these Articles of Organization for the Limited Liability Company on the 7th day of April, 2015 and affirms that the statements herein are true under the penalties of perjury.

/s/ Howard Fensterman
Howard Fensterman, Organizer

380

CSC 45
DRAW DOWN

ARTICLES OF ORGANIZATION
OF
ABRAMS FENSTERMAN ENTERPRISES LLC

FILED
2015 APR -9 PM 12:55

Under Section 203 of the Limited Liability Company Law

STATE OF NEW YORK
DEPARTMENT OF STATE

FILED APR 09 2015

TAX S _____
BY: MA

RECEIVED
2015 APR -9 AM 10:05

Filed By:

Abrams, Fensterman, Fensterman, Eisman, Formato, Ferrara & Wolf, LLP
1111 Marcus Avenue, Suite 107
Lake Success, New York 11042

Attention: Patti Piccininni, Esq.

Cost Bd 582409ASC

395

LIMITED LIABILITY COMPANY AGREEMENT

OF

MEDTECH INTERNATIONAL GROUP LLC

This Limited Liability Company Agreement of Medtech International Group LLC, a Delaware limited liability company ("Company"), is made as of May 28, 2015, by Boris Jordan (the "Member").

The Member agrees as follows:

ARTICLE I FORMATION

1.1 Term. Company's existence commenced upon the filing of its Certificate of Formation with the Delaware Secretary of State on May 28, 2015 and shall continue until such time as Company is dissolved and wound up pursuant to **Article VI**.

1.2 Places of Business. The principal place of business of Company shall be located at the Member's current place of business, or at such other place as the Member may determine. Company shall qualify to do business in such places as the Member may determine.

1.3 Purpose. The purpose of Company is to engage in any lawful business as the Member may determine.

ARTICLE II CAPITALIZATION

2.1 Capital Contribution; Admission of Member.

(a) Immediately following execution and delivery of this Agreement, the Member is contributing \$100 to the capital of Company and admitted to Company as its sole member.

(b) Except as expressly provided in **Section 2.1**, the Member shall not be required to, but may in the Member's sole discretion, make any capital contribution or lend or advance funds or property to Company for any purpose whatever.

ARTICLE III DISTRIBUTIONS AND ALLOCATIONS

3.1 Distributions. Company shall make distributions (including, without limitation, interim distributions) of cash or other property to the Member at such times and in such amounts as the Member may determine.

3.2 Allocation of Profit and Loss. All Company profit or loss for each period shall be allocated to the Member.

ARTICLE IV
FISCAL MATTERS

4.1 Tax Returns. Company shall prepare and file, or cause to be prepared and filed, all tax returns required to be filed for Company.

4.2 Elections. Except as otherwise specifically provided herein, all tax and accounting decisions and elections required or permitted to be made by Company under applicable law shall be made by the Member.

4.3 Books and Records. Company shall maintain or cause to be maintained at its principal place of business complete and accurate books and records of the assets, business and affairs of Company, including those required by Section §18-305 of the Delaware Limited Liability Company Act (the “Act”).

4.4 Limited Liability. The Member shall have no liability for the obligations of Company, except to the extent required by the Act.

4.5 Disregarded Entity. The Member intends that Company be characterized as a disregarded entity for United States federal income tax purposes.

ARTICLE V
ADMINISTRATION

5.1 Management of Company.

(a) The Member shall have the exclusive right, power, and authority to manage the business, assets, operation, and affairs of Company, with all rights and powers and the full authority necessary, desirable, or convenient to administer and operate the same for Company purposes, to incur, perform, satisfy, and compromise all manner of obligations on behalf of Company, and to make all decisions and do all things necessary or desirable in connection therewith.

(b) The Member may appoint such officers of Company, with such powers and duties, as the Member may determine from time to time. Each officer shall serve at the pleasure of the Member.

(c) The Member initially appoints the following officers with the authority and responsibilities normally accorded a person holding such office of a Delaware corporation, or as otherwise determined by the Member from time to time, but subject, in any case, to the Member’s direction and control: a President who initially shall be Boris Jordan; and a Secretary who initially shall be Boris Jordan.

5.2 Bank Accounts. Company shall maintain one or more accounts, including, without limitation, checking, cash management, money market, or investment accounts, at such banks or other financial institutions as the Member may select. All amounts deposited by or on behalf of Company in those accounts shall be and remain the property of Company. Withdrawals from such accounts shall be made by the signatories designated by the Member.

ARTICLE VI
DISSOLUTION AND LIQUIDATION

6.1 Dissolution. Company shall be dissolved upon the first of the following events to occur:

- (a) the determination of the Member;
- (b) the entry of a judicial decree of dissolution of Company pursuant to the Act; or
- (c) if there are no Members.

6.2 Winding Up.

(a) Upon the occurrence of any event specified in **Section 6.1**, the Member or a person designated by the Member shall, in the name of, and for and on behalf of Company, prosecute and defend suits, whether civil, criminal, or administrative, gradually settle and close Company's business, dispose of and convey Company's property, discharge or make reasonable provision for Company's liabilities, and distribute to the Members any remaining assets, which shall be distributed in the following order of priority:

- (i) first, in accordance with §§18-804(a)(1) and (b) of the Act; and
- (ii) second, to the Member.

(b) Following the winding-up of Company, the Member shall file a Certificate of Cancellation of Company's Certificate of Formation of Company with the Delaware Secretary of State.

ARTICLE VII
MISCELLANEOUS

7.1 Entire Agreement. This Agreement sets forth the entire agreement of the Member with respect to the subject matter hereof. No provision of this Agreement may be explained or qualified by any prior or contemporaneous understanding, negotiation, discussion, conduct, or course of conduct, and, except as otherwise expressly stated herein, there is no condition precedent to the effectiveness of any provision hereof.

7.2 Amendments. This Agreement cannot be terminated orally or by course of conduct, and this Agreement cannot be amended, except in writing by the Member. No provision hereof can be waived, except by a writing signed by the party against whom such waiver is to be enforced, and any such waiver shall apply only in the particular instance in which such waiver shall have been given.

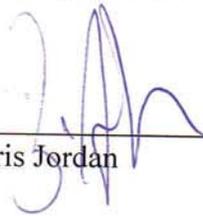
7.3 Governing Law. This Agreement, any disputed matter arising hereunder, including the construction, interpretation, or validity of any provision hereof or performance thereof, or any other matter relating hereto or arising in connection herewith (whether in tort,

contract, equity, or otherwise) is and shall be governed by and enforced in accordance with the laws of the State of Delaware, excluding its choice of law rules.

7.4 Interpretation. No presumption in favor of or against any party in the construction or interpretation of this Agreement or any provision hereof shall be made based upon which person might have drafted it. Captions are not a part of this Agreement, but are included for convenience, only. Whenever the context so requires, each pronoun, verb, or capitalized term used herein shall be construed in the singular, plural, masculine, feminine, or neuter sense. The words “herein,” “hereof,” “hereunder,” and words of similar import refer to this Agreement as a whole and not to any particular provision of this Agreement.

[signature page follows]

IN WITNESS WHEREOF, the Member has duly executed this Agreement as of the date first above written.



Boris Jordan

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "MEDTECH INTERNATIONAL GROUP LLC", FILED IN THIS OFFICE ON THE TWENTY-EIGHTH DAY OF MAY, A.D. 2015, AT 3:16 O'CLOCK P.M.



5755529 8100

150808631

You may verify this certificate online
at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2417487

DATE: 05-28-15

State of Delaware
Secretary of State
Division of Corporations
Delivered 03:18 PM 05/28/2015
FILED 03:16 PM 05/28/2015
SRV 150808631 - 5755529 FILE

CERTIFICATE OF FORMATION

OF

MEDTECH INTERNATIONAL GROUP LLC

FIRST: The name of the limited liability company is Medtech International Group LLC.

SECOND: The address of its registered office in the State of Delaware is 28 Old Rudnick Lane, in the City of Dover, in the County of Kent, 19901. The name of its Registered Agent at such address is Corp1, Inc.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation this 28th day of May, 2015.

/s/ Jaszick Maldonado
Jaszick Maldonado, Authorized Person

Date of this notice: 10-07-2010

Employer Identification Number:
[REDACTED]

Form: SS-4

Number of this notice: CP 575 A

PALLIATECH INC
PALLIATECH
[REDACTED]

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN [REDACTED]. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 941	01/31/2011
Form 940	01/31/2011
Form 943	01/31/2011
Form 1120	03/15/2011

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, *Accounting Periods and Methods*.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, *Entity Classification Election*. See Form 8832 and its instructions for additional information.

IMPORTANT INFORMATION FOR S CORPORATION ELECTION:

If you intend to elect to file your return as a small business corporation, an election to file a Form 1120-S must be made within certain timeframes and the corporation must meet certain tests. All of this information is included in the instructions for Form 2553, *Election by a Small Business Corporation*.

**AMENDED AND RESTATED CERTIFICATE OF INCORPORATION
OF
PALLIATECH, INC.
(a Delaware corporation)**

Richard Taney, president and chief executive officer of PalliaTech, Inc., a corporation organized and existing under the laws of the State of Delaware, does hereby certify:

1. The name of the corporation is PalliaTech, Inc. (the “**Corporation**”). The original Certificate of Incorporation of the Corporation was filed with the Secretary of State of the State of Delaware on October 5, 2010.
2. The amendment and restatement herein set forth has been duly approved by the Board of Directors of the Corporation and by the stockholders of the Corporation pursuant to Sections 141, 228 and 242 of the General Corporation Law of the State of Delaware.
3. The amendment and restatement herein set forth has been duly adopted pursuant to Section 245 of the General Corporation Law of the State of Delaware. This Amended and Restated Certificate of Incorporation restates and integrates and amends the provisions of the Corporation’s Certificate of Incorporation.
4. The text of the Amended and Restated Certificate of Incorporation is hereby restated and amended to read in its entirety as follows:

ARTICLE I

The name of this corporation is PalliaTech, Inc. (the “**Corporation**”).

ARTICLE II

The address of the Corporation’s registered office in the State of Delaware is 160 Greentree Drive, Suite 101, City of Dover, County of Kent, State of Delaware 19804. The name of its registered agent at such address is National Registered Agents, Inc.

ARTICLE III

The purpose of the Corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of Delaware.

ARTICLE IV

A. Capital Stock. The Corporation is authorized to issue two classes of stock to be designated, respectively, “**Common Stock**” and “**Preferred Stock**.” The total number of shares of all classes of stock which the Corporation shall have the authority to issue is five million, two hundred thousand (5,200,000), divided into five million, (5,000,000) shares of Common Stock, par value \$0.00001 (hereinafter called “**Common Stock**”) and two hundred thousand (200,000) shares of Preferred Stock, par value of \$0.00001 (hereinafter called “**Preferred Stock**”).

B. Preferred Stock. The Board of Directors of the Corporation (the “Board of Directors”) is hereby expressly authorized, by resolution or resolutions thereof, to provide out of the unissued shares of Preferred Stock for one or more series of Preferred Stock, and, with respect to each such series, to fix the number of shares constituting such series and the designation of such series, the powers (including voting powers), if any, of the shares of such series and the preferences and relative, participating, optional or other special rights, if any, and any qualifications, limitations or restrictions of the shares of such series. Prior to the issuance of any one or more series of Preferred Stock, the designations, powers, preferences and relative, participating, optional and other special rights of each series of Preferred Stock, if any, and the qualifications, limitations or restrictions thereof, shall be set forth in a certificate of designation related to the Preferred Stock to be executed and filed pursuant to Section 151(G) of the General Corporation Law of the State of Delaware.

ARTICLE V

The Corporation is to have perpetual existence.

ARTICLE VI

In furtherance and not in limitation of the powers conferred by the State of Delaware, the Board of Directors is expressly authorized to make, alter, amend, repeal or rescind any or all of the Bylaws of the Corporation, subject to the power of the stockholders of the Corporation to alter or repeal any bylaw whether adopted by them or otherwise.

ARTICLE VII

Elections of directors at an annual or special meeting need not be by written ballot unless and except to the extent that the Bylaws of the Corporation shall so provide.

ARTICLE VIII

Meetings of stockholders may be held within or without the State of Delaware, as the Bylaws may provide. The books of the Corporation may be kept (subject to any provision contained in the statutes) outside the State of Delaware at such place or places as may be designated from time to time by the Board of Directors or in the Bylaws of the Corporation.

ARTICLE IX

The Corporation reserves the right at any time and from time-to-time to amend, alter, change or repeal, any provision contained in this Amended and Restated Certificate of Incorporation and to add or insert other provisions authorized by the laws of the State of Delaware, in the manner now or hereafter prescribed by law. All rights conferred on stockholders herein are granted subject to this reservation.

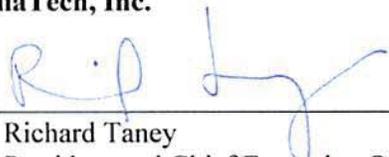
ARTICLE X

The Corporation shall, to the fullest extent permitted by the provisions of the General Corporation Law of Delaware, as now or hereafter in effect, provide indemnification of (and advancement of expenses to) directors, officers, employees and other agents of the Corporation, and is authorized to provide indemnification to any other persons to whom Delaware law permits the Corporation to provide indemnification. The indemnification provided by this Article X shall not limit or exclude any rights, indemnities or limitations of liability to which any person may be entitled whether as a matter of law, by

agreement or otherwise. To the fullest extent permitted by the General Corporation Law of the State of Delaware as the same exists or may hereafter be amended, a director of the Corporation shall not be personally liable to the Corporation or its stockholders for monetary damages for breach of fiduciary duty as a director. No amendment to, modification of or repeal of this Article X shall apply to or adversely affect any right or protection of a director of the Corporation hereunder in respect of any act or omission occurring prior to the time of such amendment, modification or repeal.

1. IN WITNESS WHEREOF, the undersigned has executed this certificate on July 2, 2014.

PalliaTech, Inc.

By: 

Richard Taney
President and Chief Executive Officer

**ORGANIZATIONAL CONSENT
OF THE
BOARD OF DIRECTORS
OF
PALLIATECH, INC.**

THE UNDERSIGNED, being all of the directors of PalliaTech, Inc., a Delaware corporation (the "Corporation"), do hereby consent to and adopt the following resolutions pursuant to Section 108(c) and Section 141(f) of the General Corporation Law of the State of Delaware, and hereby direct that this Consent be filed with the minutes of the proceedings of the Board of Directors of the Corporation (the "Board of Directors"):

Incorporation:

RESOLVED, that the original Certificate of Incorporation of this Corporation, filed in the office of the Secretary of State of the State of Delaware on October 5, 2010, is hereby approved and adopted.

RESOLVED, FURTHER, that all of the actions taken by the incorporator of this Corporation (the "Incorporator") to effect the incorporation of this Corporation are hereby approved, ratified, confirmed and adopted by and on behalf of this Corporation.

RESOLVED, FURTHER, that all the acts of the Incorporator and duly authorized agents of the Corporation heretofore done and performed are hereby approved, ratified, confirmed and adopted by the Corporation as duly authorized acts of the Corporation.

RESOLVED, FURTHER, that the President and Secretary be, and each of them hereby is, authorized and directed, for and on behalf of the Corporation, to pay all charges and expenses incident to or arising out of the incorporation of the Corporation and to reimburse the persons who have made any disbursements therefor, including, without limitation, the Incorporator.

Bylaws:

RESOLVED, FURTHER, that the Bylaws for the regulation of the affairs of this Corporation, attached hereto and incorporated herein by reference as **Exhibit A** (the "Bylaws"), are hereby ratified, adopted and approved as the Bylaws of this Corporation and shall be filed with the minutes of the Corporation.

Corporate Seal:

RESOLVED, FURTHER, that the form of corporate seal, an impression of which is imprinted at the margin of this Consent, is adopted as the official corporate seal of the Corporation.



Form of Stock Certificates:

RESOLVED, FURTHER, that the form of stock certificate representing shares of Common Stock, par value \$0.00001 per share, of the Corporation (the "*Common Stock*"), a specimen of which is attached hereto and incorporated herein by reference as **Exhibit B**, is adopted as the form of stock certificate for the Common Stock.

RESOLVED, FURTHER, that the form of stock certificate representing shares of Preferred Stock, par value \$0.00001 per share, of the Corporation (the "*Preferred Stock*"), a specimen of which is attached hereto and incorporated herein by reference as **Exhibit B**, is adopted as the form of stock certificate for the Common Stock.

Number of Directors:

RESOLVED, FURTHER, that pursuant to Section 2.1 of the Bylaws of this Corporation, the Board of Directors shall consist of five (5) members.

Officers of the Corporation:

RESOLVED, FURTHER, that the following persons be and each of them hereby is elected to serve in the offices of the Corporation set opposite their respective names, each to hold such offices until his or her respective successor is duly elected and qualified or until his or her earlier death, resignation or removal:

<u>Name</u>	<u>Office</u>
Jeffrey Beaver	Chairman
Richard Taney	President, Chief Executive Officer and Secretary
Jack Burkholder	Treasurer

Issuance of Founder Shares:

RESOLVED, FURTHER, that the Corporation shall initially issue one million (1,000,000) shares of its Common Stock (the "*Founder Shares*") to the persons listed on **Schedule A** attached hereto in the amount set forth opposite their name, and that such shares, when issued pursuant to this resolution, shall immediately vest and shall be validly issued, fully paid and non-assessable shares of Common Stock of the Corporation.

RESOLVED, FURTHER, that it is the judgment of the Board of Directors that fair consideration for the initial issuance of the Founder Shares shall be \$0.00001 per share.

RESOLVED, FURTHER, that the appropriate officers of the Corporation be and each of them hereby is authorized, empowered and

directed to execute and deliver and issue stock certificates evidencing the Founder Shares.

Employment Agreement:

WHEREAS, it is deemed to be in the best interest of the Corporation and its stockholders that the Corporation, subject to the terms of, and the Corporation successfully raising and receiving at least \$2.0 million in, private equity financing (the "*Financing Event*"), enter into an employment agreement with Richard Taney in substantially the form of **Exhibit C** attached hereto (the "*Employment Agreement*").

NOW, THEREFORE, BE IT RESOLVED, that, subject to the terms and occurrence of the Financing Event, the employment agreement, and the execution thereof on behalf of the Corporation, is hereby authorized and approved.

RESOLVED, FURTHER, it is anticipated that the Employment Agreement would be signed upon, or immediately following, the occurrence of the Financing Event and would be effective as of such date, *provided, however*, that neither the Corporation nor Richard Taney shall have any rights, liabilities or obligations to each other under the Employment Agreement unless and until the Employment Agreement has been fully executed and delivered by all parties thereto.

Authorization to Do Business:

RESOLVED, FURTHER, that for the purpose of authorizing the Corporation to do business in any jurisdiction in which it is necessary or expedient for the Corporation to transact business, the officers of the Corporation be and each of them hereby is authorized to appoint and substitute all necessary agents or attorneys for service of process, to designate and change the location of all necessary statutory offices and under the corporate seal if required, to make and file all necessary certificates, reports, powers of attorney and other instruments as may be required by the laws of such jurisdiction to authorize the Corporation to transact business therein, and whenever it is expedient for the Corporation to cease doing business therein and withdraw therefrom, to revoke any appointment of agent or attorney for service of process and to file such certificates, reports, revocations of appointment, or surrenders of authority as may be necessary to terminate the authority of the Corporation to do business in any such jurisdiction.

Bank Accounts:

RESOLVED, FURTHER, that the President and the Secretary of the Corporation (the "*Designated Officers*") be and each of them hereby is authorized for and on behalf of the Corporation to designate from time to time one or more banks, trust companies or other banking institutions (any thereof being hereinafter referred to as a "*bank*") to act as depository or depositories for the funds of the Corporation for and during

such period as he may from time to time deem necessary or desirable in the interests of the Corporation and to open or close out from time to time accounts in any such depository so selected or reselected.

RESOLVED, FURTHER, that the Designated Officers of the Corporation be and each of them hereby is authorized (i) to designate officers and employees who shall have authority to sign checks drawn against, and all orders for the payment or transfer of monies from, funds of the Corporation on deposit with any of the aforesaid banks, and (ii) to revoke the authority of officers and employees now or hereafter authorized to sign such checks and orders.

RESOLVED, FURTHER, that the Secretary and any other officer of this Corporation be and each of them hereby is authorized to certify to any of the aforesaid banks that the foregoing resolutions have been duly adopted and that they are in conformity with the Certificate of Incorporation and Bylaws of the Corporation.

General Authorization:

RESOLVED, FURTHER, that the officers of the Corporation be and each of them hereby is authorized and empowered on behalf of the Corporation to pay any other such fees and expenses and to do such other acts and things as they may deem necessary or advisable in connection with the carrying out of any of the matters or purposes set forth in the foregoing resolutions.

RESOLVED, FURTHER, that the Secretary of this Corporation be and hereby is authorized and directed to procure all appropriate corporate books, books of account and stock books that may be deemed necessary or appropriate in connection with the business of this Corporation.

RESOLVED, FURTHER, that the appropriate officers of this Corporation be and each of them hereby is authorized and directed to take any further action and execute any such document as may be deemed necessary or advisable in order to carry out the purpose and intent of the foregoing resolutions and to carry on the business of this Corporation.

RESOLVED, FURTHER, that this Consent may be executed in any number of counterparts with the same effect as if all of the directors had signed the same document, and all counterparts shall be construed together and shall constitute one written consent.

RESOLVED, FURTHER, that the Secretary is hereby directed to file a signed copy of this Organizational Consent in the Minute Book of the Corporation.

[SIGNATURE PAGE FOLLOWS]

IN WITNESS WHEREOF, the directors of this Corporation have caused this Consent to be executed as of the 5th day of October, 2010.


Jeffrey Beaver

Jack Burkholder

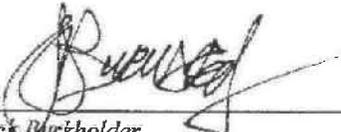
Steven Paterno

John Prufeta

Richard Taney

IN WITNESS WHEREOF, the directors of this Corporation have caused this Consent to be executed as of the 5th day of October, 2010.

Jeffrey Beaver



Jack Burkholder

Steven Patierno

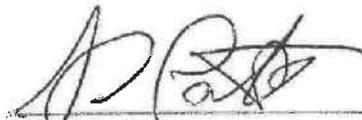
John Prufeta

Richard Taney

IN WITNESS WHEREOF, the directors of this Corporation have caused this Consent to be executed as of the 5th day of October, 2010.

Jeffrey Beaver

Jack Burkholder



Steven Patierno

John Prufeta

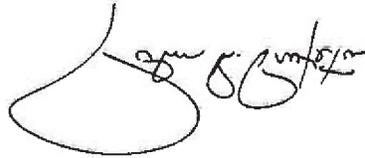
Richard Taney

IN WITNESS WHEREOF, the directors of this Corporation have caused this Consent to be executed as of the 5th day of October, 2010.

Jeffrey Beaver

Jack Burkholder

Steven Patierno

A handwritten signature in black ink, appearing to read "John Prufeta". The signature is stylized with a large, sweeping initial "J" and "P".

John Prufeta

Richard Taney

IN WITNESS WHEREOF, the directors of this Corporation have caused this Consent to be executed as of the 5th day of October, 2010.

Jeffrey Beaver

Jack Burkholder

Steven Patierno

John Prufeta

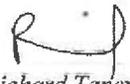

Richard Taney



EXHIBIT A

BYLAWS

BYLAWS
OF
PALLIATECH, INC.

ARTICLE I

Meetings of Stockholders

Section 1.1 Annual Meetings. If required by applicable law, an annual meeting of stockholders shall be held for the election of directors at such date, time and place, if any, either within or without the State of Delaware, as may be designated by resolution of the Board of Directors from time to time. Any other proper business may be transacted at the annual meeting.

Section 1.2 Special Meetings. Special meetings of stockholders for any purpose or purposes may be called at any time by the Board of Directors, but such special meetings may not be called by any other person or persons. Business transacted at any special meeting of stockholders shall be limited to the purposes stated in the notice.

Section 1.3 Notice of Meetings. Whenever stockholders are required or permitted to take any action at a meeting, a written notice of the meeting shall be given that shall state the place, if any, date and hour of the meeting, the record date for determining stockholders entitled to vote at the meeting, if such date is different from the record date for determining stockholders entitled to notice of the meeting, and, in the case of a special meeting, the purpose or purposes for which the meeting is called. Unless otherwise provided by law, the certificate of incorporation or these bylaws, the notice of any meeting shall be given not less than ten (10) nor more than sixty (60) days before the date of the meeting to each stockholder entitled to vote at such meeting, as of the record date for determining the stockholders entitled to notice of the meeting. If mailed, such notice shall be deemed to be given when deposited in the United States mail, postage prepaid, directed to the stockholder at such stockholder's address as it appears on the records of the corporation.

Section 1.4 Adjournments. Any meeting of stockholders, annual or special, may adjourn from time to time to reconvene at the same or some other place, and notice need not be given of any such adjourned meeting if the time and place thereof are announced at the meeting at which the adjournment is taken. At the adjourned meeting the corporation may transact any business which might have been transacted at the original meeting. If the adjournment is for more than thirty (30) days, a notice of the adjourned meeting shall be given to each stockholder of record entitled to vote at the meeting. If after the adjournment a new record date for stockholders entitled to vote is fixed for the adjourned meeting, the Board of Directors shall fix a new record date for notice of such adjourned meeting in accordance with Section 1.8 of these bylaws, and shall give notice of the adjourned meeting to each stockholder of record entitled to vote at such adjourned meeting as of the record date fixed for notice of such adjourned meeting.

Section 1.5 Quorum. Except as otherwise provided by law, the certificate of incorporation or these bylaws, at each meeting of stockholders the presence in person or by proxy of the holders of a majority in voting power of the outstanding shares of stock entitled to vote at the meeting shall be necessary and sufficient to constitute a quorum. In the absence of a quorum, the stockholders so present

may, by a majority in voting power thereof, adjourn the meeting from time to time in the manner provided in Section 1.4 of these bylaws until a quorum shall attend. Shares of its own stock belonging to the corporation or to another corporation, if a majority of the shares entitled to vote in the election of directors of such other corporation is held, directly or indirectly, by the corporation, shall neither be entitled to vote nor be counted for quorum purposes; provided, however, that the foregoing shall not limit the right of the corporation or any subsidiary of the corporation to vote stock, including but not limited to its own stock, held by it in a fiduciary capacity.

Section 1.6 Organization. Meetings of stockholders shall be presided over by the Chairperson of the Board, if any, or in his or her absence by the Vice Chairperson of the Board, if any, or in his or her absence by the President, or in his or her absence by a Vice President, or in the absence of the foregoing persons by a chairperson designated by the Board of Directors, or in the absence of such designation by a chairperson chosen at the meeting. The Secretary shall act as secretary of the meeting, but in his or her absence the chairperson of the meeting may appoint any person to act as secretary of the meeting.

Section 1.7 Voting; Proxies. Except as otherwise provided by or pursuant to the provisions of the certificate of incorporation, each stockholder entitled to vote at any meeting of stockholders shall be entitled to one vote for each share of stock held by such stockholder which has voting power upon the matter in question. Each stockholder entitled to vote at a meeting of stockholders or to express consent to corporate action in writing without a meeting may authorize another person or persons to act for such stockholder by proxy, but no such proxy shall be voted or acted upon after three years from its date, unless the proxy provides for a longer period. A proxy shall be irrevocable if it states that it is irrevocable and if, and only as long as, it is coupled with an interest sufficient in law to support an irrevocable power. A stockholder may revoke any proxy which is not irrevocable by attending the meeting and voting in person or by delivering to the Secretary of the corporation a revocation of the proxy or a new proxy bearing a later date. Voting at meetings of stockholders need not be by written ballot. At all meetings of stockholders for the election of directors at which a quorum is present a plurality of the votes cast shall be sufficient to elect. All other elections and questions presented to the stockholders at a meeting at which a quorum is present shall, unless otherwise provided by the certificate of incorporation, these bylaws, the rules or regulations of any stock exchange applicable to the corporation, or applicable law or pursuant to any regulation applicable to the corporation or its securities, be decided by the affirmative vote of the holders of a majority in voting power of the shares of stock of the corporation which are present in person or by proxy and entitled to vote thereon.

Section 1.8 Fixing Date for Determination of Stockholders of Record. In order that the corporation may determine the stockholders entitled to notice of any meeting of stockholders or any adjournment thereof, or to express consent to corporate action in writing without a meeting, or entitled to receive payment of any dividend or other distribution or allotment of any rights, or entitled to exercise any rights in respect of any change, conversion or exchange of stock or for the purpose of any other lawful action, the Board of Directors may fix a record date, which record date shall not precede the date upon which the resolution fixing the record date is adopted by the Board of Directors, and which record date: (1) in the case of determination of stockholders entitled to notice of any meeting of stockholders or any adjournment thereof, shall, unless otherwise required by law, not be more than sixty (60) nor less than ten (10) days before the date of such meeting and, unless the Board of Directors determines, at the time it fixes such record date, that a later date on or before the date of the meeting shall be the date for determining the stockholders entitled to vote at such meeting, such date shall also be the record date for determining the stockholders entitled to vote at such meeting; (2) in the case of determination of stockholders entitled to express consent to corporate action in writing without a meeting, shall not be more than ten (10) days from the date upon which the resolution fixing the record date is adopted by the Board of Directors; and (3) in the case of any other action, shall not be more than sixty (60) days prior to such other action. If no record date is fixed: (1) the record date for determining stockholders entitled to

notice of and to vote at a meeting of stockholders shall be at the close of business on the day next preceding the day on which notice is given, or, if notice is waived, at the close of business on the day next preceding the day on which the meeting is held; (2) the record date for determining stockholders entitled to express consent to corporate action in writing without a meeting, when no prior action of the Board of Directors is required by law, shall be the first date on which a signed written consent setting forth the action taken or proposed to be taken is delivered to the corporation in accordance with applicable law, or, if prior action by the Board of Directors is required by law, shall be at the close of business on the day on which the Board of Directors adopts the resolution taking such prior action; and (3) the record date for determining stockholders for any other purpose shall be at the close of business on the day on which the Board of Directors adopts the resolution relating thereto. A determination of stockholders of record entitled to notice of or to vote at a meeting of stockholders shall apply to any adjournment of the meeting; provided, however, that the Board of Directors may fix a new record date for the determination of stockholders entitled to vote at the adjourned meeting, and in such case shall also fix as the record date for the stockholders entitled to notice of such adjourned meeting the same or an earlier date as that fixed for the determination of stockholders entitled to vote in accordance with the foregoing provisions of this Section 1.8 at the adjourned meeting.

Section 1.9 List of Stockholders Entitled to Vote. The officer who has charge of the stock ledger shall prepare and make, at least ten (10) days before every meeting of stockholders, a complete list of the stockholders entitled to vote at the meeting; provided, however, if the record date for determining the stockholders entitled to vote is less than ten (10) days before the meeting date, the list shall reflect the stockholders entitled to vote as of the tenth day before the meeting date, arranged in alphabetical order, and showing the address of each stockholder and the number of shares registered in the name of each stockholder. Such list shall be open to the examination of any stockholder, for any purpose germane to the meeting for a period of at least ten (10) days prior to the meeting (i) on a reasonably accessible electronic network, provided that the information required to gain access to such list is provided with the notice of meeting or (ii) during ordinary business hours at the principal place of business of the corporation. The list of stockholders must also be open to examination at the meeting as required by applicable law. Except as otherwise provided by law, the stock ledger shall be the only evidence as to who are the stockholders entitled to examine the list of stockholders required by this Section 1.9 or to vote in person or by proxy at any meeting of stockholders.

Section 1.10 Action By Written Consent of Stockholders. Unless otherwise restricted by the certificate of incorporation, any action required or permitted to be taken at any annual or special meeting of the stockholders may be taken without a meeting, without prior notice and without a vote, if a consent or consents in writing, setting forth the action so taken, shall be signed by the holders of outstanding stock having not less than the minimum number of votes that would be necessary to authorize or take such action at a meeting at which all shares entitled to vote thereon were present and voted and shall be delivered to the corporation by delivery to its registered office in the State of Delaware, its principal place of business, or an officer or agent of the corporation having custody of the book in which minutes of proceedings of stockholders are recorded. Delivery made to the corporation's registered office shall be by hand or by certified or registered mail, return receipt requested. Prompt notice of the taking of the corporate action without a meeting by less than unanimous written consent shall, to the extent required by law, be given to those stockholders who have not consented in writing and who, if the action had been taken at a meeting, would have been entitled to notice of the meeting if the record date for notice of such meeting had been the date that written consents signed by a sufficient number of holders to take the action were delivered to the corporation.

Section 1.11 Inspectors of Election. The corporation may, and shall if required by law, in advance of any meeting of stockholders, appoint one or more inspectors of election, who may be employees of the corporation, to act at the meeting or any adjournment thereof and to make a written

report thereof. The corporation may designate one or more persons as alternate inspectors to replace any inspector who fails to act. In the event that no inspector so appointed or designated is able to act at a meeting of stockholders, the person presiding at the meeting shall appoint one or more inspectors to act at the meeting. Each inspector, before entering upon the discharge of his or her duties, shall take and sign an oath to execute faithfully the duties of inspector with strict impartiality and according to the best of his or her ability. The inspector or inspectors so appointed or designated shall (i) ascertain the number of shares of capital stock of the corporation outstanding and the voting power of each such share, (ii) determine the shares of capital stock of the corporation represented at the meeting and the validity of proxies and ballots, (iii) count all votes and ballots, (iv) determine and retain for a reasonable period a record of the disposition of any challenges made to any determination by the inspectors, and (v) certify their determination of the number of shares of capital stock of the corporation represented at the meeting and such inspectors' count of all votes and ballots. Such certification and report shall specify such other information as may be required by applicable law. In determining the validity and counting of proxies and ballots cast at any meeting of stockholders of the corporation, the inspectors may consider such information as is permitted by applicable law. No person who is a candidate for an office at an election may serve as an inspector at such election.

Section 1.12 Conduct of Meetings. The date and time of the opening and the closing of the polls for each matter upon which the stockholders will vote at a meeting shall be announced at the meeting by the person presiding over the meeting. The Board of Directors may adopt by resolution such rules and regulations for the conduct of the meeting of stockholders as it shall deem appropriate. Except to the extent inconsistent with such rules and regulations as adopted by the Board of Directors, the person presiding over any meeting of stockholders shall have the right and authority to convene and to adjourn the meeting, to prescribe such rules, regulations and procedures and to do all such acts as, in the judgment of such presiding person, are appropriate for the proper conduct of the meeting. Such rules, regulations or procedures, whether adopted by the Board of Directors or prescribed by the presiding person at the meeting, may include, without limitation, the following: (i) the establishment of an agenda or order of business for the meeting; (ii) rules and procedures for maintaining order at the meeting and the safety of those present; (iii) limitations on attendance at or participation in the meeting to stockholders of record of the corporation, their duly authorized and constituted proxies or such other persons as the presiding person of the meeting shall determine; (iv) restrictions on entry to the meeting after the time fixed for the commencement thereof, and (v) limitations on the time allotted to questions or comments by participants. The presiding person at any meeting of stockholders, in addition to making any other determinations that may be appropriate to the conduct of the meeting, shall, if the facts warrant, determine and declare to the meeting that a matter or business was not properly brought before the meeting and, if such presiding person should so determine, such presiding person shall so declare to the meeting, and any such matter or business not properly brought before the meeting shall not be transacted or considered. Unless and to the extent determined by the Board of Directors or the person presiding over the meeting, meetings of stockholders shall not be required to be held in accordance with the rules of parliamentary procedure.

ARTICLE II

Board of Directors

Section 2.1 Number; Qualifications. The Board of Directors shall consist of one or more members, the number thereof to be determined from time to time by resolution of the Board of Directors. Directors need not be stockholders.

Section 2.2 Election; Resignation; Vacancies. The Board of Directors shall initially consist of the persons named as directors in the certificate of incorporation or elected by the incorporator of the corporation, and each director so elected shall hold office until the first annual meeting of stockholders

and until his or her successor is duly elected and qualified. At the first annual meeting of stockholders and at each annual meeting thereafter, the stockholders shall elect directors each of whom shall hold office for a term of one year or until his or her successor is duly elected and qualified, subject to such director's earlier death, resignation, disqualification or removal. Any director may resign at any time upon notice to the corporation. Unless otherwise provided by law or the certificate of incorporation, any newly created directorship or any vacancy occurring in the Board of Directors for any cause may be filled by a majority of the remaining members of the Board of Directors, although such majority is less than a quorum, or by a plurality of the votes cast at a meeting of stockholders, and each director so elected shall hold office until the expiration of the term of office of the director whom he or she has replaced and until his or her successor is elected and qualified.

Section 2.3 Regular Meetings. Regular meetings of the Board of Directors may be held at such places within or without the State of Delaware and at such times as the Board of Directors may from time to time determine.

Section 2.4 Special Meetings. Special meetings of the Board of Directors may be held at any time or place within or without the State of Delaware whenever called by the President, any Vice President, the Secretary, or by any member of the Board of Directors. Notice of a special meeting of the Board of Directors shall be given by the person or persons calling the meeting at least twenty-four hours before the special meeting.

Section 2.5 Telephonic Meetings Permitted. Members of the Board of Directors, or any committee designated by the Board of Directors, may participate in a meeting thereof by means of conference telephone or other communications equipment by means of which all persons participating in the meeting can hear each other, and participation in a meeting pursuant to this by-law shall constitute presence in person at such meeting.

Section 2.6 Quorum: Vote Required for Action. At all meetings of the Board of Directors the directors entitled to cast a majority of the votes of the whole Board of Directors shall constitute a quorum for the transaction of business. Except in cases in which the certificate of incorporation, these bylaws or applicable law otherwise provides, a majority of the votes entitled to be cast by the directors present at a meeting at which a quorum is present shall be the act of the Board of Directors.

Section 2.7 Organization. Meetings of the Board of Directors shall be presided over by the Chairperson of the Board, if any, or in his or her absence by the Vice Chairperson of the Board, if any, or in his or her absence by the President, or in their absence by a chairperson chosen at the meeting. The Secretary shall act as secretary of the meeting, but in his or her absence the chairperson of the meeting may appoint any person to act as secretary of the meeting.

Section 2.8 Action by Unanimous Consent of Directors. Unless otherwise restricted by the certificate of incorporation or these bylaws, any action required or permitted to be taken at any meeting of the Board of Directors, or of any committee thereof, may be taken without a meeting if all members of the Board of Directors or such committee, as the case may be, consent thereto in writing or by electronic transmission and the writing or writings or electronic transmissions are filed with the minutes of proceedings of the board or committee in accordance with applicable law.

ARTICLE III

Committees

Section 3.1 Committees. The Board of Directors may designate one or more committees, each committee to consist of one or more of the directors of the corporation. The Board of Directors may designate one or more directors as alternate members of any committee, who may replace any absent or disqualified member at any meeting of the committee. In the absence or disqualification of a member of the committee, the member or members thereof present at any meeting and not disqualified from voting, whether or not he, she or they constitute a quorum, may unanimously appoint another member of the Board of Directors to act at the meeting in place of any such absent or disqualified member. Any such committee, to the extent permitted by law and to the extent provided in the resolution of the Board of Directors or these bylaws, shall have and may exercise all the powers and authority of the Board of Directors in the management of the business and affairs of the corporation, and may authorize the seal of the corporation to be affixed to all papers which may require it.

Section 3.2 Committee Rules. Unless the Board of Directors otherwise provides, each committee designated by the Board of Directors may make, alter and repeal rules for the conduct of its business. In the absence of such rules each committee shall conduct its business in the same manner as the Board of Directors conducts its business pursuant to Article II of these bylaws.

ARTICLE IV

Officers

Section 4.1 Executive Officers; Election; Qualifications; Term of Office; Resignation; Removal; Vacancies. The Board of Directors shall elect a President and Secretary, and it may, if it so determines, choose a Chairperson of the Board and a Vice Chairperson of the Board from among its members. The Board of Directors may also choose one or more Vice Presidents, one or more Assistant Secretaries, a Treasurer and one or more Assistant Treasurers and such other officers as it shall from time to time deem necessary or desirable. Each such officer shall hold office until the first meeting of the Board of Directors after the annual meeting of stockholders next succeeding his or her election, and until his or her successor is elected and qualified or until his or her earlier death, resignation or removal. Any officer may resign at any time upon written notice to the corporation. The Board of Directors may remove any officer with or without cause at any time, but such removal shall be without prejudice to the contractual rights of such officer, if any, with the corporation. Any number of offices may be held by the same person. Any vacancy occurring in any office of the corporation by death, resignation, removal or otherwise may be filled for the unexpired portion of the term by the Board of Directors at any regular or special meeting.

Section 4.2 Powers and Duties of Executive Officers. The officers of the corporation shall have such powers and duties in the management of the corporation as may be prescribed in a resolution by the Board of Directors and, to the extent not so provided, as generally pertain to their respective offices, subject to the control of the Board of Directors. The Board of Directors may require any officer, agent or employee to give security for the faithful performance of his or her duties.

Section 4.3 Appointing Attorneys and Agents; Voting Securities of Other Entities. Unless otherwise provided by resolution adopted by the Board of Directors, the Chairperson of the Board, the President or any Vice President may from time to time appoint an attorney or attorneys or agent or agents of the corporation, in the name and on behalf of the corporation, to cast the votes which the corporation may be entitled to cast as the holder of stock or other securities in any other corporation or other entity,

any of whose stock or other securities may be held by the corporation, at meetings of the holders of the stock or other securities of such other corporation or other entity, or to consent in writing, in the name of the corporation as such holder, to any action by such other corporation or other entity, and may instruct the person or persons so appointed as to the manner of casting such votes or giving such consents, and may execute or cause to be executed in the name and on behalf of the corporation and under its corporate seal or otherwise, all such written proxies or other instruments as he or she may deem necessary or proper. Any of the rights set forth in this Section 4.3 which may be delegated to an attorney or agent may also be exercised directly by the Chairperson of the Board, the President or the Vice President.

ARTICLE V

Stock

Section 5.1 Certificates. Every holder of stock represented by certificates shall be entitled to have a certificate signed by or in the name of the corporation by the Chairperson or Vice Chairperson of the Board of Directors, if any, or the President or a Vice President, and by the Treasurer or an Assistant Treasurer, or the Secretary or an Assistant Secretary, of the corporation certifying the number of shares owned by such holder in the corporation. Any of or all the signatures on the certificate may be a facsimile. In case any officer, transfer agent or registrar who has signed or whose facsimile signature has been placed upon a certificate shall have ceased to be such officer, transfer agent, or registrar before such certificate is issued, it may be issued by the corporation with the same effect as if such person were such officer, transfer agent, or registrar at the date of issue. The corporation shall not have the power to issue a certificate in bearer form.

Section 5.2 Lost, Stolen or Destroyed Stock Certificates: Issuance of New Certificates. The corporation may issue a new certificate of stock in the place of any certificate theretofore issued by it, alleged to have been lost, stolen or destroyed, and the corporation may require the owner of the lost, stolen or destroyed certificate, or such owner's legal representative, to give the corporation a bond sufficient to indemnify it against any claim that may be made against it on account of the alleged loss, theft or destruction of any such certificate or the issuance of such new certificate.

ARTICLE VI

Indemnification

Section 6.1 Right to Indemnification. The corporation shall indemnify and hold harmless, to the fullest extent permitted by applicable law as it presently exists or may hereafter be amended, any person (a "Covered Person") who was or is made or is threatened to be made a party or is otherwise involved in any action, suit or proceeding, whether civil, criminal, administrative or investigative (a "proceeding"), by reason of the fact that he or she, or a person for whom he or she is the legal representative, is or was a director or officer of the corporation or, while a director or officer of the corporation, is or was serving at the request of the corporation as a director, officer, employee or agent of another corporation or of a partnership, joint venture, trust, enterprise or nonprofit entity, including service with respect to employee benefit plans, against all liability and loss suffered and expenses (including attorneys' fees) reasonably incurred by such Covered Person. Notwithstanding the preceding sentence, except as otherwise provided in Section 6.3, the corporation shall be required to indemnify a Covered Person in connection with a proceeding (or part thereof) commenced by such Covered Person only if the commencement of such proceeding (or part thereof) by the Covered Person was authorized in the specific case by the Board of Directors of the corporation.

Section 6.2 Prepayment of Expenses. The corporation shall to the fullest extent not prohibited by applicable law pay the expenses (including attorneys' fees) incurred by a Covered Person in defending any proceeding in advance of its final disposition, provided, however, that, to the extent required by law, such payment of expenses in advance of the final disposition of the proceeding shall be made only upon receipt of an undertaking by the Covered Person to repay all amounts advanced if it should be ultimately determined that the Covered Person is not entitled to be indemnified under this Article VI or otherwise.

Section 6.3 Claims. If a claim for indemnification (following the final disposition of such action, suit or proceeding) or advancement of expenses under this Article VI is not paid in full within thirty days after a written claim therefor by the Covered Person has been received by the corporation, the Covered Person may file suit to recover the unpaid amount of such claim and, if successful in whole or in part, shall be entitled to be paid the expense of prosecuting such claim. In any such action the corporation shall have the burden of proving that the Covered Person is not entitled to the requested indemnification or advancement of expenses under applicable law.

Section 6.4 Nonexclusivity of Rights. The rights conferred on any Covered Person by this Article VI shall not be exclusive of any other rights which such Covered Person may have or hereafter acquire under any statute, provision of the certificate of incorporation, these bylaws, agreement, vote of stockholders or disinterested directors or otherwise.

Section 6.5 Other Sources. The corporation's obligation, if any, to indemnify or to advance expenses to any Covered Person who was or is serving at its request as a director, officer, employee or agent of another corporation, partnership, joint venture, trust, enterprise or nonprofit entity shall be reduced by any amount such Covered Person may collect as indemnification or advancement of expenses from such other corporation, partnership, joint venture, trust, enterprise or non-profit enterprise.

Section 6.6 Amendment or Repeal. Any repeal or modification of the foregoing provisions of this Article VI shall not adversely affect any right or protection hereunder of any Covered Person in respect of any act or omission occurring prior to the time of such repeal or modification.

Section 6.7 Other Indemnification and Prepayment of Expenses. This Article VI shall not limit the right of the corporation, to the extent and in the manner permitted by law, to indemnify and to advance expenses to persons other than Covered Persons when and as authorized by appropriate corporate action.

ARTICLE VII

Miscellaneous

Section 7.1 Fiscal Year. The fiscal year of the corporation shall be determined by resolution of the Board of Directors.

Section 7.2 Seal. The corporate seal shall have the name of the corporation inscribed thereon and shall be in such form as may be approved from time to time by the Board of Directors.

Section 7.3 Manner of Notice. Except as otherwise provided herein or permitted by applicable law, notices to directors and stockholders shall be in writing and delivered personally or mailed to the directors or stockholders at their addresses appearing on the books of the corporation. Notice to directors may be given by facsimile, telephone or other means of electronic transmission.

Section 7.4 Waiver of Notice of Meetings of Stockholders, Directors and Committees. Any waiver of notice, given by the person entitled to notice, whether before or after the time stated therein, shall be deemed equivalent to notice. Attendance of a person at a meeting shall constitute a waiver of notice of such meeting, except when the person attends a meeting for the express purpose of objecting, at the beginning of the meeting, to the transaction of any business because the meeting is not lawfully called or convened. Neither the business to be transacted at nor the purpose of any regular or special meeting of the stockholders, directors, or members of a committee of directors need be specified in a waiver of notice.

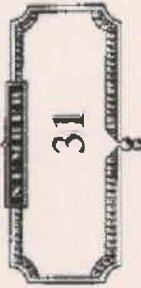
Section 7.5 Form of Records. Any records maintained by the corporation in the regular course of its business, including its stock ledger, books of account, and minute books, may be kept on, or by means of, or be in the form of, any information storage device or method, provided that the records so kept can be converted into clearly legible paper form within a reasonable time.

Section 7.6 Amendment of Bylaws. These bylaws may be altered, amended or repealed, and new bylaws made, by the Board of Directors, but the stockholders may make additional bylaws and may alter and repeal any bylaws whether adopted by them or otherwise.

EXHIBIT B

FORM OF STOCK CERTIFICATES

INCORPORATED UNDER THE LAWS OF THE
STATE OF DELAWARE



PaliaTech, Inc.

This Corporation is authorized to issue 1,800,000 Common Shares at \$0.00001 Par Value.

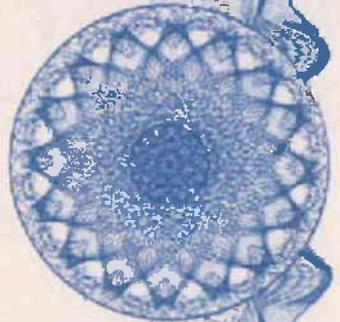
SPECIMEN

THIS CERTIFIES THAT _____ is the owner of _____
fully paid and nonassessable
shares of the above Corporation transferable only on the books of the Corporation by the holder hereof in person or
by duly authorized Attorney upon surrender of this Certificate properly endorsed.

In Witness Whereof, the said Corporation has caused this Certificate to be signed by its duly authorized
officers and its Corporate Seal to be hereunto affixed this _____ day of _____ A.D.

President

Secretary/Treasurer



SPECIMEN

*For Value Received, _____ hereby sell, assign and transfer
unto _____*

*_____ Shares
represented by the within Certificate, and do hereby irrevocably
constitute and appoint*

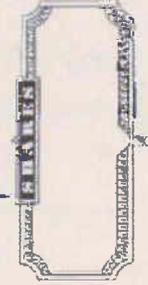
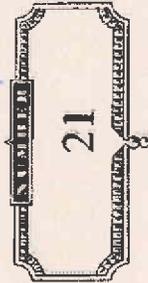
*_____ Attorney
to transfer the said Shares on the books of the within named
Corporation with full power of substitution in the premises.*

Dated _____

In presence of

NOTICE: THE SIGNATURE OF THIS ASSIGNMENT
MUST CORRESPOND WITH THE NAME AS WRITTEN UPON THE
FACE OF THE CERTIFICATE, IN EVERY PARTICULAR, WITHOUT
ALTERATION OR ENLARGEMENT OR ANY CHANGE WHATSOEVER.

INCORPORATED UNDER THE LAWS OF THE
STATE OF DELAWARE



PallaTech, Inc.

This Corporation is authorized to issue 200,000 Preferred Shares at \$0.00001 Par Value.

SPECIMEN

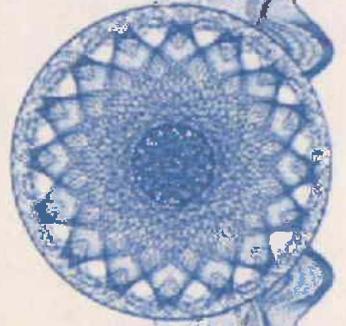
THIS CERTIFIES THAT

_____ is the owner of _____ fully paid and nonassessable shares of the above Corporation transferable only on the books of the Corporation by the holder hereof in person or by duly authorized attorney upon surrender of this Certificate properly endorsed.

In Witness Whereof, the said Corporation has caused this Certificate to be signed by its duly authorized officers and its Corporate Seal to be hereunto affixed this _____ day of _____, A.D. _____

President

Secretary/Treasurer



SPECIMEN

*For Value Received, _____ hereby sell, assign and transfer
unto _____*

*_____ Shares
represented by the within Certificate, and do hereby irrevocably
constitute and appoint*

*_____ Attorney
to transfer the said Shares on the books of the within named
Corporation with full power of substitution in the premises.*

Dated _____

In presence of

NOTICE: THE SIGNATURE OF THIS ASSIGNMENT
MUST CORRESPOND WITH THE NAME AS WRITTEN UPON THE
FACE OF THE CERTIFICATE IN EVERY PARTICULAR WITHOUT
ALTERATION OR ENLARGEMENT, OR ANY CHANGE WHATSOEVER.

EXHIBIT C
EMPLOYMENT AGREEMENT

EMPLOYMENT AGREEMENT

THIS EMPLOYMENT AGREEMENT ("Agreement") is made and entered into as of the ___ day of _____, 201_ (the "Effective Date") by and between **PalliaTech, Inc.**, a Delaware corporation (hereinafter called the "Company"), and **Richard L. Taney** (hereinafter called the "Executive").

Recitals

WHEREAS, the Company desires to employ Executive as the President and Chief Executive Officer of the Company; and

WHEREAS, Executive is willing to be employed as the President and Chief Executive Officer of the Company in the manner provided for herein, and to perform the duties of the President and Chief Executive Officer of the Company upon the terms and conditions herein set forth;

WHEREAS, Executive acknowledges that during the course of his employment, Executive will have access to and be provided with unique, confidential, and proprietary information and trade secrets of the Company which are invaluable to the Company and vital to the success of the Company's business;

WHEREAS, the Company and Executive desire to protect such unique, confidential, and proprietary information and trade secrets from disclosure to third parties or unauthorized use to the detriment of the Company; and

WHEREAS, the Company and Executive desire to set forth in this Agreement, the terms, conditions, and obligations of the parties with respect to such employment.

Agreement

NOW, THEREFORE, in consideration of the foregoing recitals, promises, and mutual covenants set forth herein, and intending to be legally bound hereby, the parties agree as follows:

1. Employment.

1.1 Employment and Term. The Company hereby agrees to employ the Executive and the Executive hereby agrees to serve the Company, on the terms and conditions set forth herein, for the period commencing on the Effective Date and continuing thereafter for a period of two (2) years, expiring on _____, 201_ (the "Initial Term"), unless sooner terminated as hereinafter set forth; provided, however, that unless this Agreement has been previously terminated, commencing on _____, 201_, the Initial Term of this Agreement shall automatically be extended for one additional year (a "Renewal Term") unless at least ninety (90) days prior to such date, the Company shall have delivered to the Executive written notice that the terms and conditions of the Executive's employment hereunder will not be extended.

1.2 Duties of Executive. The Executive shall serve as the President and Chief Executive Officer of the Company and shall have powers and authority superior to any other officer or employee of the Company or of any subsidiary of the Company, including, without limitation, the duties and responsibilities customarily associated with a chief executive (e.g., control of day-to-day operations, signing checks, hiring and firing, etc.). The Executive shall be required to report solely to, and shall be subject solely to the supervision and direction of the Board of Directors ("Board") and no other person or group shall be given authority to supervise or direct Executive in the performance of his duties. In

addition, the Executive shall regularly consult with the Chairman of the Board with respect to the Company's business and affairs. The Executive shall devote substantially all his working time and attention to the business and affairs of the Company (excluding any vacation and sick leave to which the Executive is entitled), render such services to the best of his ability (subject to the policies and procedures set by the Company), and use his reasonable best efforts to promote the interests of the Company, and shall not, without the Board's prior written consent, render to others services of any kind for compensation, or engage in any other business activity that would in any way materially interfere with the performance of his duties under this Agreement. It shall not be a violation of this Agreement for the Executive to (A) serve on corporate, civic or charitable boards or committees, (B) deliver lectures, fulfill speaking engagements or teach at educational institutions, and (C) manage personal investments, so long as such activities do not significantly interfere with the performance of the Executive's responsibilities as an employee of the Company in accordance with this Agreement. It further shall not be a violation of this Agreement for the Executive to perform services pursuant to consulting agreements entered into between (i) the Executive and Delcath Systems, Inc., (ii) the Executive and Perfusion Sciences (the term of which expires on October 7, 2011), and (iii) between Executive and an as yet unnamed company licensing the Hawk tattoo removal technology; however, the Executive agrees to perform any such services under those agreements in such a manner as to not detract from his duties and responsibilities to the Company, and further agrees not to enter into any new consulting agreements with any third parties during the Initial Term or any Renewal Term of this Agreement without the previous consent of the Board. Executive represents and warrants to the Company that he has no outstanding commitments inconsistent with any of the terms of this Agreement or the services to be rendered under it, including but not limited to any restrictive covenants previously entered into between Executive and any other entity which would prevent Executive from performing the duties required of him as Chief Executive Officer of the Company.

2. Compensation.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

3. Benefits.

3.1 Expense Reimbursement. During the Initial Term and any Renewal Term of Executive's employment hereunder, the Company, upon the submission of reasonable supporting documentation by the Executive, shall reimburse the Executive for all reasonable expenses actually paid or incurred by the Executive in the course of and pursuant to the business of the Company, including expenses for travel, lodging, entertainment, phone service and other office expenses.

3.2 Incentive, Savings and Retirement Plans. During the Initial Term and any Renewal Term of Executive's employment hereunder, the Executive shall be eligible to participate in all incentive, savings and retirement plans, practices, policies and programs applicable to other key executives of the Company and its subsidiaries. Such plans, practices, policies and programs, in the aggregate, shall provide the Executive with compensation, benefits and reward opportunities at least as favorable as the most favorable of such compensation, benefits and reward opportunities provided at any time hereafter with respect to other key executives.

3.3 Welfare Benefit Plans. During the Initial Term and any Renewal Term of Executive's employment hereunder, the Company agrees to pay the cost of medical and dental insurance premiums for the Executive and/or the Executive's dependents (to the extent they are eligible), as the

case may be, and in arrears to the Effective Date of this Agreement, if necessary. In addition, during the Term of this Agreement, the Executive and/or the Executive's dependents (to the extent they are eligible), as the case may be, shall be eligible for participation in and shall receive all benefits under any welfare benefit plans, practices, policies and programs provided by the Company and its subsidiaries (including, without limitation, medical, prescription, dental, disability, salary continuance, employee life, group life, accidental death and travel accident insurance plans and programs), at least as favorable as the most favorable of such plans, practices, policies and programs in effect at any time hereafter with respect to other key executives. Executive acknowledges and agrees that the benefits of such plans may vary with duties, salary, and length of employment, and that any questions concerning eligibility, coverage, or duration shall be governed by the terms of the plans or policies. Executive further acknowledges and agrees that the Company reserves the right to modify, suspend or discontinue any benefit plans, policies, and practices at any time without notice to or recourse by Executive, so long as such action is taken generally with respect to other similarly situated executives employed by the Company. In the event the Company has not implemented any group medical or dental insurance plan as of the Effective Date, or subsequent to the Company's having established any group medical or dental insurance plan, suspends or discontinues any such plans, policies, and practices, the Company agrees to pay the cost of premiums for reasonable medical and dental insurance coverage for Executive and Executive's eligible dependents during the Initial Term and any Renewal Term of this Agreement, or until such time as the Company implements a group medical and dental insurance plan that provides coverage to Executive and Executive's eligible dependents. In addition, in the event that the Company has not implemented any employee disability, life or group life insurance plans as of the Effective Date, the Company agrees to pay the premium cost for up to \$200,000 of term life insurance and \$200,000 of disability insurance for Executive during the Initial Term and any Renewal Term of this Agreement, or until such time as the Company implements an employee disability, life or group life insurance plan that provides coverage to Executive.

3.4 Vacation. During the term of Executive's employment hereunder, the Executive shall be entitled to paid vacation in accordance with the most favorable plans, policies, programs and practices of the Company and its subsidiaries as in effect at any time hereafter with respect to other key executives of the Company and its subsidiaries; provided, however, that in no event shall Executive be entitled to fewer than four weeks paid vacation per year, as well as pay for holidays observed by the Company. In the event that Executive has not used all accrued vacation by the end of a calendar year during the Initial Term or any Renewal Term of this Agreement, Executive may carry over to the subsequent calendar year no more than one (1) week of previously-accrued but unused vacation (for a maximum accrued vacation balance of five (5) weeks). In the event that Executive has accrued but unused vacation on the date of termination, any such accrued but unused vacation shall be paid to Executive (less all required withholding and deductions authorized by law or Executive), up to the maximum accrual amount of five (5) weeks vacation.

4. Termination.

4.1 Termination by Executive other than for Good Reason. Executive may terminate this Agreement and his employment hereunder at any time for any reason other than for Good Reason, as defined below. Executive is requested, but not required, to provide the Company, as a matter of professional courtesy, at least thirty (30) days' written notice of his intent to terminate this Agreement and his employment hereunder for other than Good Reason. Upon any termination pursuant to this Section 4.1, the Executive shall be entitled to be paid his Base Salary to the date of termination and the Company shall have no further liability hereunder (other than for reimbursement for reasonable business expenses incurred prior to the date of termination), unless the Executive and the Company agree to a different arrangement. In the event that Executive terminates this Agreement in his sole discretion without Good Reason prior to end of the Initial Term of this Agreement, Executive agrees to forfeit shares of vested common stock to be calculated according to the following formula: a maximum of 50,000 shares multiplied by a fraction, the numerator of which is the number of months remaining under the Initial Term rounded to

the nearest full month, and the denominator of which shall be 24. For example, if the Executive were to terminate his employment under this Agreement in his sole discretion without Good Reason on the one year anniversary of the Effective Date, the number of remaining months under the Initial Term of the Agreement would be 12 and Executive would forfeit 50,000 shares multiplied by .5 (calculated by taking the 12 remaining months of employment under the Initial Term of this Agreement divided by 24) or 25,000 shares. It is understood that under no circumstances will the maximum number of shares that could potentially be forfeited under the above formula ever exceed 50,000 shares.

4.2 Termination for Cause. Notwithstanding anything to the contrary in this Agreement, this Agreement and Executive's employment hereunder may be terminated by the Company for Cause, as defined below. Upon termination for Cause, Executive's employment hereunder shall immediately terminate, Executive shall only receive his Base Salary under this Agreement, prorated through the date his termination becomes effective, and the Company shall have no further liability hereunder (other than for reimbursement for reasonable business expenses incurred prior to the date of termination). For purposes of this Agreement, "Cause" shall mean: (i) "Disability" (as hereinafter defined) of Executive, (ii) the conviction of the Executive of any criminal felony, other than a marijuana-related conviction arising out of and directly relating to Executive's performance of his duties as CEO of the Company; (iii) alcoholism or drug addiction which renders Executive incapable of performing his duties hereunder for a period in excess of One Hundred Twenty (120) days; (iv) Executive's engagement in any act involving dishonesty or disloyalty that is materially injurious to the Company; (v) Executive's willful and continued material breach of or material failure substantially to perform under any of the material terms and covenants of this Agreement; and (vi) Executive's willful and continued material breach of or material failure substantially to perform under any material policy or reasonable performance goals agreed upon annually by Executive and the Company in good faith with respect to the operation of the Company's business and affairs or the management of the Company's employees, *provided, however*, that with respect to (iv), (v), and (vi) above, Executive will be provided written notice of any misconduct and/or breach constituting Cause and given reasonable opportunity to cure the misconduct and/or breach (unless such misconduct and/or breach is determined by the Board not to be susceptible to cure), and *provided further* that such cure period shall only be available for the first such misconduct and/or breach of the same or substantially similar type and subsequent misconduct and/or breach of the same or substantially similar type shall constitute Cause without regard to Executive's subsequent cure of same. In addition, upon any reasonable and good faith determination by the Board that Cause exists under clause (iv), (v), or (vi) herein (to the extent the conduct at issue has not been cured by the Executive), the Company shall cause a special meeting of the Board to be called and held at a time mutually convenient to the Board and Executive, but in no event later than ten (10) business days after Executive's receipt of the notice contemplated herein, at which Executive shall have the right to appear with legal counsel of his choosing to address any allegation of conduct constituting Cause specified in such notice, and any termination of Executive's employment by reason of such Cause determination shall not be effective until Executive is afforded such opportunity to appear.

4.3 Disability. "Disability" for purposes of Section 4.2 of this Agreement shall mean such physical or mental condition of Executive, which renders Executive incapable of performing his duties hereunder for a period in excess of One Hundred Twenty (120) days. The Company shall comply with the Americans with Disabilities Act and any other applicable federal, state, or local laws in making a determination whether Executive's condition constitutes Disability.

4.4 Death. In the event of the death of the Executive during the Initial Term or any Renewal Term of this Agreement, this Agreement and Executive's employment hereunder shall terminate as of the date of the death of Executive, and his estate or personal representative shall be entitled to receive only Executive's Base Salary, outstanding and unreimbursed business expenses and any other applicable benefits prorated through the date of Executive's death.

4.5 Termination Without Cause. Notwithstanding anything to the contrary in this Agreement, this Agreement and Executive's employment hereunder may be terminated at any time by the Company without Cause, as defined in Section 4.2, upon written notice to Executive. In such event, the Company shall pay to the Executive: (i) any unpaid Base Salary accrued through the effective date of termination specified in such notice, and any pro-rata bonus that would be payable had Executive completed a full year of employment, based on Executive's performance through the date of termination (which shall be paid within 30 days after the determination of any such bonus has been made); and (ii) in a lump sum, within 30 days after the effective date of termination specified in such notice, a gross amount equal to the greater of 100% of the Executive's annual Base Salary then in effect as of the effective date of termination, or the balance of the Executive's Base Salary from the effective date of termination through the expiration of the Initial Term or any Renewal Term then in effect. In addition, the Company shall continue to pay the Executive's health and dental insurance premiums for a period of twelve (12) months after such termination without Cause. All payments to the Executive under this Section 4.5 shall be subject to all required deductions and/or withholdings, including for federal and state taxes, and any other deductions authorized by Executive or law.

4.6 Termination by Executive for Good Reason. Notwithstanding anything to the contrary in this Agreement, this Agreement and Executive's employment hereunder may be terminated at any time by Executive for Good Reason, as defined herein, upon written notice to the Company. In such event, Executive's termination shall be treated in the same manner and fashion as if the Company had terminated Executive without Cause, and Executive shall be entitled to the payments provided for under such circumstances as set forth in Section 4.5 of this Agreement. For purposes of this Agreement, "Good Reason" shall mean: (i) the Company's material breach of any of the terms and conditions required to be complied with by the Company pursuant to this Agreement, excluding for this purpose an isolated, insubstantial and inadvertent action not taken in bad faith and which is remedied by the Company promptly after receipt of notice thereof given by the Executive; (ii) an unreasonable and material change in Employee's title, duties or responsibilities by the Board of Directors of the Company to a level below the title, duties, or responsibilities ordinarily or customarily granted or placed upon on a Chief Executive Officer, excluding for this purpose an isolated, insubstantial and inadvertent action not taken in bad faith and which is remedied by the Company promptly after receipt of notice thereof given by the Executive; (iii) any failure by the Company to comply with any of the provisions of Section 2 or Section 3 of this Agreement, other than an isolated, insubstantial and inadvertent failure not occurring in bad faith and which is remedied by the Company promptly after receipt of notice thereof given by the Executive; (iii) a relocation by the Company of the Executive's principal work site to a facility or location more than fifty (50) miles from the principal work site for the Executive as of the Effective Date; or (iv) any termination of the Executive's employment for any reason during the three-month period following the effective date of any "Change in Control," as defined herein.

4.7 Mutual Acknowledgment Regarding the Nature of the Company's Business. Executive and the Company mutually acknowledge and agree that, as of the Effective Date, the business of the Company, specifically, the production, distribution, marketing, and sale of medicinal cannabis and related products and services, although legal under the laws of several states in the United States, is presently illegal under federal law. Executive and the Company further mutually acknowledge and agree that, in light of the status of the Company's business under federal law, each party to this Agreement bears, and each party to this Agreement willingly accepts, a certain amount of risk that the Company's business could be ordered terminated by judicial or governmental action. Executive agrees that should the Company be required to cease all operations as a result of judicial or governmental action, Executive's employment with the Company shall immediately terminate, effective as of the date the Company terminates all operations, and that, under such circumstances, Executive's termination of employment shall not be deemed to be "without Cause" or for "Good Reason," as defined herein, and that the Company's only obligation shall be pay to Executive's Base Salary, as well as any earned bonus amounts and any other applicable benefits, prorated through the date when Executive's employment with the Company terminates. However, should the Executive incur legal fees directly relating to his position as

CEO of the Company even if such legal action begins subsequent to the Company's ceasing operations, the Company expressly agrees to reimburse Executive for reasonable legal expenses incurred by Executive in defense of any such actions.

5. Change in Control. For purposes of this Agreement, the term "Change in Control" shall mean:

5.1 The acquisition (other than by or from the Company), at any time after the Effective Date, by any person, entity or "group", within the meaning of Section 13(d)(3) or 14(d)(2) of the Securities Exchange Act of 1934 (the "Exchange Act"), of beneficial ownership (within the meaning of Rule 13d-3 promulgated under the Exchange Act) of 50% or more of either the then outstanding shares of common stock or the combined voting power of the Company's then outstanding voting securities entitled to vote generally in the election of directors; or

5.2 All or any of the five (5) individuals who, as of the Effective Date, constitute the Board (as of the Effective Date, the "Incumbent Board") cease for any reason to constitute at least a majority of the Board, provided that any person becoming a director subsequent to the date hereof whose election, or nomination for election by the Company's shareholders, was approved by a vote of at least a majority of the directors then comprising the Incumbent Board (other than an election or nomination of an individual whose initial assumption of office is in connection with an actual or threatened election contest relating to the election of the directors of the Company, as such terms are used in Rule 14a-11 of Regulation 14A promulgated under the Exchange Act) shall be, for purposes of this Agreement, considered as though such person were a member of the Incumbent Board; or

5.3 The approval by a majority of the Company's Board of Directors of: (1) any merger or consolidation in which the Company is not the surviving entity; (2) any reverse merger in which the Company is the surviving entity; or (3) any transaction involving the sale of all or substantially all of the Company's assets to any person other than a wholly or majority owned direct or indirect subsidiary of the Company.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Redacted pursuant to N.Y. Public Officers Law, Art. 6

7. Compliance with Section 409A.

7.1 General. It is the intention of both the Company and Executive that the benefits and rights to which Executive could be entitled pursuant to this Agreement comply with Section 409A of the Internal Revenue Code of 1986, as amended ("Code"), and the Treasury Regulations and other guidance promulgated or issued thereunder ("Section 409A"), to the extent that the requirements of Section 409A are applicable thereto, and the provisions of this Agreement shall be construed in a manner consistent with that intention. If any benefits or rights constitute "nonqualified deferred compensation" under Section 409A, then the nonqualified deferred compensation shall be subject to the following additional requirements, if and to the extent required to comply with Section 409A.

7.2 Payment Events. Payments may not be made earlier than the first to occur of (i) Executive's "separation from service"; (ii) the date Executive becomes "disabled"; (iii) Executive's death; (iv) a "specified time (or pursuant to a fixed schedule)" specified in an award agreement at the date of the deferral of such compensation; (v) a "change in the ownership or effective control" of the corporation, or in

the "ownership of a substantial portion of the assets" of the corporation; or (vi) the occurrence of an "unforeseeable emergency."

7.3. No Acceleration of Payments. Neither the Company nor Executive, individually or in combination, may accelerate any payment or benefit that is subject to Section 409A, except in compliance with Section 409A and the provisions of this Agreement, and no amount that is subject to Section 409A shall be paid prior to the earliest date on which it may be paid without violating Section 409A.

7.4 Distributions on Account of Separation from Service. If and to the extent required to comply with Section 409A, no payment or benefit required to be paid under this Agreement on account of termination of Executive's employment shall be made unless and until Executive incurs a "separation from service" within the meaning of Section 409A. For purposes of the foregoing, the terms in quotations shall have the same meanings as those terms have for purposes of Section 409A, and the limitations set forth herein shall be applied in such manner (and only to the extent) as shall be necessary to comply with any requirements of Section 409A that are applicable to the deferred compensation.

7.5 Treatment of Each Installment as a Separate Payment. For purposes of applying the provisions of Section 409A to this Agreement, each separately identified amount to which Executive is entitled under this Agreement shall be treated as a separate payment. In addition, to the extent permissible under Section 409A, any series of installment payments under this Agreement shall be treated as a right to a series of separate payments.

7.6 Taxable Reimbursements and In-Kind Benefits.

a. Any reimbursements by the Company to Executive of any eligible expenses under this Agreement that are not excludable from Executive's income for Federal income tax purposes (the "Taxable Reimbursements") shall be made by no later than the last day of Executive's taxable year immediately following the year in which the expense was incurred.

b. The amount of any Taxable Reimbursements, and the value of any in-kind benefits to be provided to Executive, during any taxable year of Executive shall not affect the expenses eligible for reimbursement, or in-kind benefits to be provided, in any other taxable year of Executive.

c. The right to Taxable Reimbursement, or in-kind benefits, shall not be subject to liquidation or exchange for another benefit.

7.8 6 Month Delay for Specified Employees.

a. If Executive is a "specified employee," then no payment or benefit that is payable on account of Executive's "separation from service," as that term is defined for purposes of Section 409A, shall be made before the date that is six months after Executive's "separation from service" (or, if earlier, the date of Executive's death) if and to the extent that such payment or benefit constitutes deferred compensation (or may be nonqualified deferred compensation) under Section 409A and such deferral is required to comply with the requirements of Section 409A. Any payment or benefit delayed by reason of the prior sentence shall be paid out or provided in a single lump sum at the end of such required delay period in order to catch up to the original payment schedule.

b. For purposes of this provision, Executive shall be considered to be a "specified employee" if, at the time of his separation from service, (i) Executive is a "key employee," within the meaning of Section 416(i) of the Code, of the Company (or any person or entity with whom the Company would be considered a single employer under Section 414(b) or Section 414(c) of the Code), and (ii) the Company's stock is publicly traded on an established securities market or otherwise.

7.9 Amendments Resulting from Section 409A. If Executive or the Company believes, at any time, that any such benefit or right that is subject to Section 409A does not so comply, the concerned party shall promptly advise the other and both parties shall negotiate reasonably and in good faith to amend the terms of such benefits and rights such that they comply with Section 409A (with the most limited possible economic effect on Executive and on the Company).

8. Governing Law. This Agreement shall be governed by and construed in accordance with the laws of the State of New York, without regard to the conflicts of laws principles of such state.

9. Notices. Any notice required or permitted to be given under this Agreement shall be in writing and shall be deemed to have been given when delivered by hand, by facsimile transmission, registered email, or overnight courier service, or three (3) days after being deposited in the United States mail, by registered or certified mail, return receipt requested, postage prepaid, addressed as follows:

If to the Company: PalliaTech, Inc.
c/o Chairman of the Board



With a copy to: Greenberg Traurig, LLP
3773 Howard Hughes Parkway
Suite 400 North
Las Vegas, NV 89169
Attention: John Jeppsen

If to the Executive: Richard L. Taney



or to such other addresses as either party hereto may from time to time give notice of to the other in the aforesaid manner.

10. Successors and Assigns. This Agreement is personal to the Executive and without the prior written consent of the Company shall not be assignable by the Executive otherwise than by will or the laws of descent and distribution. This Agreement shall inure to the benefit of and be enforceable by the Executive's legal representatives. This Agreement shall inure to the benefit of and be binding upon the Company and its successors and assigns.

11. Severability. The provisions of this Agreement are independent of and severable from each other, and no provision shall be affected or rendered invalid or unenforceable by virtue of the fact that for any reason any other or others of them may be invalid or unenforceable in whole or in part.

12. Waivers. The waiver by either party hereto of a breach or violation of any term or provision of this Agreement shall not operate nor be construed as a waiver of any subsequent breach or violation.

13. Damages. Nothing contained herein shall be construed to prevent the Company or the Executive from seeking and recovering from the other damages sustained by either or both of them as a result of its or his breach of any term or provision of this Agreement.

14. No Third Party Beneficiary. Nothing expressed or implied in this Agreement is intended, or shall be construed, to confer upon or give any person (other than the parties hereto and, in the case of

Executive, his heirs, personal representative(s) and/or legal representative) any rights or remedies under or by reason of this Agreement.

15. Entire Agreement. This Agreement contains the entire understanding between the parties hereto with respect to the employment of Executive by the Company, and supersedes all prior and contemporaneous agreements and understandings, inducements and conditions, express or implied, oral or written, with respect to said employment. The express terms hereof control and supersede any course of performance and/or usage of the trade inconsistent with any of the terms hereof. This Agreement may not be modified or amended other than by an agreement in writing signed by both parties.

16. Section Headings. The section headings in this Agreement are for convenience only; they form no part of this Agreement and shall not affect its interpretation.

17. Construction. The parties hereto acknowledge and agree that each party has participated in the drafting of this Agreement and has had the opportunity to have this document reviewed by the respective legal counsel for the parties hereto and that the normal rule of construction to the effect that any ambiguities are to be resolved against the drafting party shall not be applied to the interpretation of this Agreement. No inference in favor of, or against, any party shall be drawn from the fact that one party has drafted any portion hereof.

18. Consultation with Attorney. Executive acknowledges that he was advised by the Company to consult with an attorney prior to executing this Agreement.

19. Execution in Counterparts. This Agreement may be executed in any number of counterparts, each of which shall be deemed to be an original as against any party whose signature appears thereon, and all of which shall together constitute one and the same instrument. This Agreement shall become binding when one or more counterparts hereof, individually or taken together, shall bear the signatures of the parties reflected hereon as the signatories.

20. Attorneys' Fees and Costs. In the event of any claim, controversy or dispute arising out of or relating to this Agreement, or the breach hereof, the prevailing party shall be entitled to recover its reasonable attorneys' fees and costs in connection with any court proceeding.

21. Survival. The provisions in this Agreement that contemplate obligations on Executive's part after his employment with the Company ends, for whatever reason, shall survive the cessation of his employment.

[Signature Page Follows]

IN WITNESS WHEREOF, the undersigned have executed this Agreement as of the Effective Date.

PalliaTech, Inc.

By: _____
Jeffrey Beaver, Chairman of the Board

Executive:

By: _____
Richard L. Taney

SCHEDULE A

FOUNDER SHARES

PalliaTech, Inc.
Founders Shares (dated as of October 5, 2010)

Page 1 of 2

Name	Address	% of Founders Shares
William W. Todd	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6
Webster B. Todd, Jr.	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6
Sheila O. Todd	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6
Judson Traphagen	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6
Richard Taney	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6
Marisa Taney	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6
Juliana Taney	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6
George Schidlovsky	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6
Jack Burkholder	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6
Steven Patierno	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6
Dimitry Schidlovsky	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6
Constantine Schidlovsky	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6
Maxim Schidlovsky	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6
Andrei Bogolubov	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6
Sonja Rose Bogolubov	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6
Thomas L. Pulling	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6
Christopher Todd	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6
Jeffrey Beaver	Redacted pursuant to N.Y. Public Officers Law, Art. 6	Redacted pursuant to N.Y. Public Officers Law, Art. 6

PalliaTech, Inc.
Founders Shares (dated as of October 5, 2010)

Name	Address	% of Founders Shares
John Prufeta	Redacted pursuant to N.Y. Public Officers Law, Art. 6	
Alexander Liebers		
Andrew Liebers		
Hallie Friedman		
Jon Friedman		

BYLAWS
OF
PALLIATECH, INC.

ARTICLE I

Meetings of Stockholders

Section 1.1 Annual Meetings. If required by applicable law, an annual meeting of stockholders shall be held for the election of directors at such date, time and place, if any, either within or without the State of Delaware, as may be designated by resolution of the Board of Directors from time to time. Any other proper business may be transacted at the annual meeting.

Section 1.2 Special Meetings. Special meetings of stockholders for any purpose or purposes may be called at any time by the Board of Directors, but such special meetings may not be called by any other person or persons. Business transacted at any special meeting of stockholders shall be limited to the purposes stated in the notice.

Section 1.3 Notice of Meetings. Whenever stockholders are required or permitted to take any action at a meeting, a written notice of the meeting shall be given that shall state the place, if any, date and hour of the meeting, the record date for determining stockholders entitled to vote at the meeting, if such date is different from the record date for determining stockholders entitled to notice of the meeting, and, in the case of a special meeting, the purpose or purposes for which the meeting is called. Unless otherwise provided by law, the certificate of incorporation or these bylaws, the notice of any meeting shall be given not less than ten (10) nor more than sixty (60) days before the date of the meeting to each stockholder entitled to vote at such meeting, as of the record date for determining the stockholders entitled to notice of the meeting. If mailed, such notice shall be deemed to be given when deposited in the United States mail, postage prepaid, directed to the stockholder at such stockholder's address as it appears on the records of the corporation.

Section 1.4 Adjournments. Any meeting of stockholders, annual or special, may adjourn from time to time to reconvene at the same or some other place, and notice need not be given of any such adjourned meeting if the time and place thereof are announced at the meeting at which the adjournment is taken. At the adjourned meeting the corporation may transact any business which might have been transacted at the original meeting. If the adjournment is for more than thirty (30) days, a notice of the adjourned meeting shall be given to each stockholder of record entitled to vote at the meeting. If after the adjournment a new record date for stockholders entitled to vote is fixed for the adjourned meeting, the Board of Directors shall fix a new record date for notice of such adjourned meeting in accordance with Section 1.8 of these bylaws, and shall give notice of the adjourned meeting to each stockholder of record entitled to vote at such adjourned meeting as of the record date fixed for notice of such adjourned meeting.

Section 1.5 Quorum. Except as otherwise provided by law, the certificate of incorporation or these bylaws, at each meeting of stockholders the presence in person or by proxy of the holders of a majority in voting power of the outstanding shares of stock entitled to vote at the meeting shall be necessary and sufficient to constitute a quorum. In the absence of a quorum, the stockholders so present

may, by a majority in voting power thereof, adjourn the meeting from time to time in the manner provided in Section 1.4 of these bylaws until a quorum shall attend. Shares of its own stock belonging to the corporation or to another corporation, if a majority of the shares entitled to vote in the election of directors of such other corporation is held, directly or indirectly, by the corporation, shall neither be entitled to vote nor be counted for quorum purposes; provided, however, that the foregoing shall not limit the right of the corporation or any subsidiary of the corporation to vote stock, including but not limited to its own stock, held by it in a fiduciary capacity.

Section 1.6 Organization. Meetings of stockholders shall be presided over by the Chairperson of the Board, if any, or in his or her absence by the Vice Chairperson of the Board, if any, or in his or her absence by the President, or in his or her absence by a Vice President, or in the absence of the foregoing persons by a chairperson designated by the Board of Directors, or in the absence of such designation by a chairperson chosen at the meeting. The Secretary shall act as secretary of the meeting, but in his or her absence the chairperson of the meeting may appoint any person to act as secretary of the meeting.

Section 1.7 Voting; Proxies. Except as otherwise provided by or pursuant to the provisions of the certificate of incorporation, each stockholder entitled to vote at any meeting of stockholders shall be entitled to one vote for each share of stock held by such stockholder which has voting power upon the matter in question. Each stockholder entitled to vote at a meeting of stockholders or to express consent to corporate action in writing without a meeting may authorize another person or persons to act for such stockholder by proxy, but no such proxy shall be voted or acted upon after three years from its date, unless the proxy provides for a longer period. A proxy shall be irrevocable if it states that it is irrevocable and if, and only as long as, it is coupled with an interest sufficient in law to support an irrevocable power. A stockholder may revoke any proxy which is not irrevocable by attending the meeting and voting in person or by delivering to the Secretary of the corporation a revocation of the proxy or a new proxy bearing a later date. Voting at meetings of stockholders need not be by written ballot. At all meetings of stockholders for the election of directors at which a quorum is present a plurality of the votes cast shall be sufficient to elect. All other elections and questions presented to the stockholders at a meeting at which a quorum is present shall, unless otherwise provided by the certificate of incorporation, these bylaws, the rules or regulations of any stock exchange applicable to the corporation, or applicable law or pursuant to any regulation applicable to the corporation or its securities, be decided by the affirmative vote of the holders of a majority in voting power of the shares of stock of the corporation which are present in person or by proxy and entitled to vote thereon.

Section 1.8 Fixing Date for Determination of Stockholders of Record. In order that the corporation may determine the stockholders entitled to notice of any meeting of stockholders or any adjournment thereof, or to express consent to corporate action in writing without a meeting, or entitled to receive payment of any dividend or other distribution or allotment of any rights, or entitled to exercise any rights in respect of any change, conversion or exchange of stock or for the purpose of any other lawful action, the Board of Directors may fix a record date, which record date shall not precede the date upon which the resolution fixing the record date is adopted by the Board of Directors, and which record date: (1) in the case of determination of stockholders entitled to notice of any meeting of stockholders or any adjournment thereof, shall, unless otherwise required by law, not be more than sixty (60) nor less than ten (10) days before the date of such meeting and, unless the Board of Directors determines, at the time it fixes such record date, that a later date on or before the date of the meeting shall be the date for determining the stockholders entitled to vote at such meeting, such date shall also be the record date for determining the stockholders entitled to vote at such meeting; (2) in the case of determination of stockholders entitled to express consent to corporate action in writing without a meeting, shall not be more than ten (10) days from the date upon which the resolution fixing the record date is adopted by the Board of Directors; and (3) in the case of any other action, shall not be more than sixty (60) days prior to such other action. If no record date is fixed: (1) the record date for determining stockholders entitled to

notice of and to vote at a meeting of stockholders shall be at the close of business on the day next preceding the day on which notice is given, or, if notice is waived, at the close of business on the day next preceding the day on which the meeting is held; (2) the record date for determining stockholders entitled to express consent to corporate action in writing without a meeting, when no prior action of the Board of Directors is required by law, shall be the first date on which a signed written consent setting forth the action taken or proposed to be taken is delivered to the corporation in accordance with applicable law, or, if prior action by the Board of Directors is required by law, shall be at the close of business on the day on which the Board of Directors adopts the resolution taking such prior action; and (3) the record date for determining stockholders for any other purpose shall be at the close of business on the day on which the Board of Directors adopts the resolution relating thereto. A determination of stockholders of record entitled to notice of or to vote at a meeting of stockholders shall apply to any adjournment of the meeting; provided, however, that the Board of Directors may fix a new record date for the determination of stockholders entitled to vote at the adjourned meeting, and in such case shall also fix as the record date for the stockholders entitled to notice of such adjourned meeting the same or an earlier date as that fixed for the determination of stockholders entitled to vote in accordance with the foregoing provisions of this Section 1.8 at the adjourned meeting.

Section 1.9 List of Stockholders Entitled to Vote. The officer who has charge of the stock ledger shall prepare and make, at least ten (10) days before every meeting of stockholders, a complete list of the stockholders entitled to vote at the meeting; provided, however, if the record date for determining the stockholders entitled to vote is less than ten (10) days before the meeting date, the list shall reflect the stockholders entitled to vote as of the tenth day before the meeting date, arranged in alphabetical order, and showing the address of each stockholder and the number of shares registered in the name of each stockholder. Such list shall be open to the examination of any stockholder, for any purpose germane to the meeting for a period of at least ten (10) days prior to the meeting (i) on a reasonably accessible electronic network, provided that the information required to gain access to such list is provided with the notice of meeting or (ii) during ordinary business hours at the principal place of business of the corporation. The list of stockholders must also be open to examination at the meeting as required by applicable law. Except as otherwise provided by law, the stock ledger shall be the only evidence as to who are the stockholders entitled to examine the list of stockholders required by this Section 1.9 or to vote in person or by proxy at any meeting of stockholders.

Section 1.10 Action By Written Consent of Stockholders. Unless otherwise restricted by the certificate of incorporation, any action required or permitted to be taken at any annual or special meeting of the stockholders may be taken without a meeting, without prior notice and without a vote, if a consent or consents in writing, setting forth the action so taken, shall be signed by the holders of outstanding stock having not less than the minimum number of votes that would be necessary to authorize or take such action at a meeting at which all shares entitled to vote thereon were present and voted and shall be delivered to the corporation by delivery to its registered office in the State of Delaware, its principal place of business, or an officer or agent of the corporation having custody of the book in which minutes of proceedings of stockholders are recorded. Delivery made to the corporation's registered office shall be by hand or by certified or registered mail, return receipt requested. Prompt notice of the taking of the corporate action without a meeting by less than unanimous written consent shall, to the extent required by law, be given to those stockholders who have not consented in writing and who, if the action had been taken at a meeting, would have been entitled to notice of the meeting if the record date for notice of such meeting had been the date that written consents signed by a sufficient number of holders to take the action were delivered to the corporation.

Section 1.11 Inspectors of Election. The corporation may, and shall if required by law, in advance of any meeting of stockholders, appoint one or more inspectors of election, who may be employees of the corporation, to act at the meeting or any adjournment thereof and to make a written

report thereof. The corporation may designate one or more persons as alternate inspectors to replace any inspector who fails to act. In the event that no inspector so appointed or designated is able to act at a meeting of stockholders, the person presiding at the meeting shall appoint one or more inspectors to act at the meeting. Each inspector, before entering upon the discharge of his or her duties, shall take and sign an oath to execute faithfully the duties of inspector with strict impartiality and according to the best of his or her ability. The inspector or inspectors so appointed or designated shall (i) ascertain the number of shares of capital stock of the corporation outstanding and the voting power of each such share, (ii) determine the shares of capital stock of the corporation represented at the meeting and the validity of proxies and ballots, (iii) count all votes and ballots, (iv) determine and retain for a reasonable period a record of the disposition of any challenges made to any determination by the inspectors, and (v) certify their determination of the number of shares of capital stock of the corporation represented at the meeting and such inspectors' count of all votes and ballots. Such certification and report shall specify such other information as may be required by applicable law. In determining the validity and counting of proxies and ballots cast at any meeting of stockholders of the corporation, the inspectors may consider such information as is permitted by applicable law. No person who is a candidate for an office at an election may serve as an inspector at such election.

Section 1.12 Conduct of Meetings. The date and time of the opening and the closing of the polls for each matter upon which the stockholders will vote at a meeting shall be announced at the meeting by the person presiding over the meeting. The Board of Directors may adopt by resolution such rules and regulations for the conduct of the meeting of stockholders as it shall deem appropriate. Except to the extent inconsistent with such rules and regulations as adopted by the Board of Directors, the person presiding over any meeting of stockholders shall have the right and authority to convene and to adjourn the meeting, to prescribe such rules, regulations and procedures and to do all such acts as, in the judgment of such presiding person, are appropriate for the proper conduct of the meeting. Such rules, regulations or procedures, whether adopted by the Board of Directors or prescribed by the presiding person at the meeting, may include, without limitation, the following: (i) the establishment of an agenda or order of business for the meeting; (ii) rules and procedures for maintaining order at the meeting and the safety of those present; (iii) limitations on attendance at or participation in the meeting to stockholders of record of the corporation, their duly authorized and constituted proxies or such other persons as the presiding person of the meeting shall determine; (iv) restrictions on entry to the meeting after the time fixed for the commencement thereof, and (v) limitations on the time allotted to questions or comments by participants. The presiding person at any meeting of stockholders, in addition to making any other determinations that may be appropriate to the conduct of the meeting, shall, if the facts warrant, determine and declare to the meeting that a matter or business was not properly brought before the meeting and, if such presiding person should so determine, such presiding person shall so declare to the meeting, and any such matter or business not properly brought before the meeting shall not be transacted or considered. Unless and to the extent determined by the Board of Directors or the person presiding over the meeting, meetings of stockholders shall not be required to be held in accordance with the rules of parliamentary procedure.

ARTICLE II

Board of Directors

Section 2.1 Number; Qualifications. The Board of Directors shall consist of one or more members, the number thereof to be determined from time to time by resolution of the Board of Directors. Directors need not be stockholders.

Section 2.2 Election; Resignation; Vacancies. The Board of Directors shall initially consist of the persons named as directors in the certificate of incorporation or elected by the incorporator of the corporation, and each director so elected shall hold office until the first annual meeting of stockholders

and until his or her successor is duly elected and qualified. At the first annual meeting of stockholders and at each annual meeting thereafter, the stockholders shall elect directors each of whom shall hold office for a term of one year or until his or her successor is duly elected and qualified, subject to such director's earlier death, resignation, disqualification or removal. Any director may resign at any time upon notice to the corporation. Unless otherwise provided by law or the certificate of incorporation, any newly created directorship or any vacancy occurring in the Board of Directors for any cause may be filled by a majority of the remaining members of the Board of Directors, although such majority is less than a quorum, or by a plurality of the votes cast at a meeting of stockholders, and each director so elected shall hold office until the expiration of the term of office of the director whom he or she has replaced and until his or her successor is elected and qualified.

Section 2.3 Regular Meetings. Regular meetings of the Board of Directors may be held at such places within or without the State of Delaware and at such times as the Board of Directors may from time to time determine.

Section 2.4 Special Meetings. Special meetings of the Board of Directors may be held at any time or place within or without the State of Delaware whenever called by the President, any Vice President, the Secretary, or by any member of the Board of Directors. Notice of a special meeting of the Board of Directors shall be given by the person or persons calling the meeting at least twenty-four hours before the special meeting.

Section 2.5 Telephonic Meetings Permitted. Members of the Board of Directors, or any committee designated by the Board of Directors, may participate in a meeting thereof by means of conference telephone or other communications equipment by means of which all persons participating in the meeting can hear each other, and participation in a meeting pursuant to this by-law shall constitute presence in person at such meeting.

Section 2.6 Quorum; Vote Required for Action. At all meetings of the Board of Directors the directors entitled to cast a majority of the votes of the whole Board of Directors shall constitute a quorum for the transaction of business. Except in cases in which the certificate of incorporation, these bylaws or applicable law otherwise provides, a majority of the votes entitled to be cast by the directors present at a meeting at which a quorum is present shall be the act of the Board of Directors.

Section 2.7 Organization. Meetings of the Board of Directors shall be presided over by the Chairperson of the Board, if any, or in his or her absence by the Vice Chairperson of the Board, if any, or in his or her absence by the President, or in their absence by a chairperson chosen at the meeting. The Secretary shall act as secretary of the meeting, but in his or her absence the chairperson of the meeting may appoint any person to act as secretary of the meeting.

Section 2.8 Action by Unanimous Consent of Directors. Unless otherwise restricted by the certificate of incorporation or these bylaws, any action required or permitted to be taken at any meeting of the Board of Directors, or of any committee thereof, may be taken without a meeting if all members of the Board of Directors or such committee, as the case may be, consent thereto in writing or by electronic transmission and the writing or writings or electronic transmissions are filed with the minutes of proceedings of the board or committee in accordance with applicable law.

ARTICLE III

Committees

Section 3.1 Committees. The Board of Directors may designate one or more committees, each committee to consist of one or more of the directors of the corporation. The Board of Directors may designate one or more directors as alternate members of any committee, who may replace any absent or disqualified member at any meeting of the committee. In the absence or disqualification of a member of the committee, the member or members thereof present at any meeting and not disqualified from voting, whether or not he, she or they constitute a quorum, may unanimously appoint another member of the Board of Directors to act at the meeting in place of any such absent or disqualified member. Any such committee, to the extent permitted by law and to the extent provided in the resolution of the Board of Directors or these bylaws, shall have and may exercise all the powers and authority of the Board of Directors in the management of the business and affairs of the corporation, and may authorize the seal of the corporation to be affixed to all papers which may require it.

Section 3.2 Committee Rules. Unless the Board of Directors otherwise provides, each committee designated by the Board of Directors may make, alter and repeal rules for the conduct of its business. In the absence of such rules each committee shall conduct its business in the same manner as the Board of Directors conducts its business pursuant to Article II of these bylaws.

ARTICLE IV

Officers

Section 4.1 Executive Officers; Election; Qualifications; Term of Office, Resignation; Removal; Vacancies. The Board of Directors shall elect a President and Secretary, and it may, if it so determines, choose a Chairperson of the Board and a Vice Chairperson of the Board from among its members. The Board of Directors may also choose one or more Vice Presidents, one or more Assistant Secretaries, a Treasurer and one or more Assistant Treasurers and such other officers as it shall from time to time deem necessary or desirable. Each such officer shall hold office until the first meeting of the Board of Directors after the annual meeting of stockholders next succeeding his or her election, and until his or her successor is elected and qualified or until his or her earlier death, resignation or removal. Any officer may resign at any time upon written notice to the corporation. The Board of Directors may remove any officer with or without cause at any time, but such removal shall be without prejudice to the contractual rights of such officer, if any, with the corporation. Any number of offices may be held by the same person. Any vacancy occurring in any office of the corporation by death, resignation, removal or otherwise may be filled for the unexpired portion of the term by the Board of Directors at any regular or special meeting.

Section 4.2 Powers and Duties of Executive Officers. The officers of the corporation shall have such powers and duties in the management of the corporation as may be prescribed in a resolution by the Board of Directors and, to the extent not so provided, as generally pertain to their respective offices, subject to the control of the Board of Directors. The Board of Directors may require any officer, agent or employee to give security for the faithful performance of his or her duties.

Section 4.3 Appointing Attorneys and Agents; Voting Securities of Other Entities. Unless otherwise provided by resolution adopted by the Board of Directors, the Chairperson of the Board, the President or any Vice President may from time to time appoint an attorney or attorneys or agent or agents of the corporation, in the name and on behalf of the corporation, to cast the votes which the corporation may be entitled to cast as the holder of stock or other securities in any other corporation or other entity,

any of whose stock or other securities may be held by the corporation, at meetings of the holders of the stock or other securities of such other corporation or other entity, or to consent in writing, in the name of the corporation as such holder, to any action by such other corporation or other entity, and may instruct the person or persons so appointed as to the manner of casting such votes or giving such consents, and may execute or cause to be executed in the name and on behalf of the corporation and under its corporate seal or otherwise, all such written proxies or other instruments as he or she may deem necessary or proper. Any of the rights set forth in this Section 4.3 which may be delegated to an attorney or agent may also be exercised directly by the Chairperson of the Board, the President or the Vice President.

ARTICLE V

Stock

Section 5.1 Certificates. Every holder of stock represented by certificates shall be entitled to have a certificate signed by or in the name of the corporation by the Chairperson or Vice Chairperson of the Board of Directors, if any, or the President or a Vice President, and by the Treasurer or an Assistant Treasurer, or the Secretary or an Assistant Secretary, of the corporation certifying the number of shares owned by such holder in the corporation. Any of or all the signatures on the certificate may be a facsimile. In case any officer, transfer agent or registrar who has signed or whose facsimile signature has been placed upon a certificate shall have ceased to be such officer, transfer agent, or registrar before such certificate is issued, it may be issued by the corporation with the same effect as if such person were such officer, transfer agent, or registrar at the date of issue. The corporation shall not have the power to issue a certificate in bearer form.

Section 5.2 Lost, Stolen or Destroyed Stock Certificates; Issuance of New Certificates. The corporation may issue a new certificate of stock in the place of any certificate theretofore issued by it, alleged to have been lost, stolen or destroyed, and the corporation may require the owner of the lost, stolen or destroyed certificate, or such owner's legal representative, to give the corporation a bond sufficient to indemnify it against any claim that may be made against it on account of the alleged loss, theft or destruction of any such certificate or the issuance of such new certificate.

ARTICLE VI

Indemnification

Section 6.1 Right to Indemnification. The corporation shall indemnify and hold harmless, to the fullest extent permitted by applicable law as it presently exists or may hereafter be amended, any person (a "Covered Person") who was or is made or is threatened to be made a party or is otherwise involved in any action, suit or proceeding, whether civil, criminal, administrative or investigative (a "proceeding"), by reason of the fact that he or she, or a person for whom he or she is the legal representative, is or was a director or officer of the corporation or, while a director or officer of the corporation, is or was serving at the request of the corporation as a director, officer, employee or agent of another corporation or of a partnership, joint venture, trust, enterprise or nonprofit entity, including service with respect to employee benefit plans, against all liability and loss suffered and expenses (including attorneys' fees) reasonably incurred by such Covered Person. Notwithstanding the preceding sentence, except as otherwise provided in Section 6.3, the corporation shall be required to indemnify a Covered Person in connection with a proceeding (or part thereof) commenced by such Covered Person only if the commencement of such proceeding (or part thereof) by the Covered Person was authorized in the specific case by the Board of Directors of the corporation.

Section 6.2 Prepayment of Expenses. The corporation shall to the fullest extent not prohibited by applicable law pay the expenses (including attorneys' fees) incurred by a Covered Person in defending any proceeding in advance of its final disposition, provided, however, that, to the extent required by law, such payment of expenses in advance of the final disposition of the proceeding shall be made only upon receipt of an undertaking by the Covered Person to repay all amounts advanced if it should be ultimately determined that the Covered Person is not entitled to be indemnified under this Article VI or otherwise.

Section 6.3 Claims. If a claim for indemnification (following the final disposition of such action, suit or proceeding) or advancement of expenses under this Article VI is not paid in full within thirty days after a written claim therefor by the Covered Person has been received by the corporation, the Covered Person may file suit to recover the unpaid amount of such claim and, if successful in whole or in part, shall be entitled to be paid the expense of prosecuting such claim. In any such action the corporation shall have the burden of proving that the Covered Person is not entitled to the requested indemnification or advancement of expenses under applicable law.

Section 6.4 Nonexclusivity of Rights. The rights conferred on any Covered Person by this Article VI shall not be exclusive of any other rights which such Covered Person may have or hereafter acquire under any statute, provision of the certificate of incorporation, these bylaws, agreement, vote of stockholders or disinterested directors or otherwise.

Section 6.5 Other Sources. The corporation's obligation, if any, to indemnify or to advance expenses to any Covered Person who was or is serving at its request as a director, officer, employee or agent of another corporation, partnership, joint venture, trust, enterprise or nonprofit entity shall be reduced by any amount such Covered Person may collect as indemnification or advancement of expenses from such other corporation, partnership, joint venture, trust, enterprise or non-profit enterprise.

Section 6.6 Amendment or Repeal. Any repeal or modification of the foregoing provisions of this Article VI shall not adversely affect any right or protection hereunder of any Covered Person in respect of any act or omission occurring prior to the time of such repeal or modification.

Section 6.7 Other Indemnification and Prepayment of Expenses. This Article VI shall not limit the right of the corporation, to the extent and in the manner permitted by law, to indemnify and to advance expenses to persons other than Covered Persons when and as authorized by appropriate corporate action.

ARTICLE VII

Miscellaneous

Section 7.1 Fiscal Year. The fiscal year of the corporation shall be determined by resolution of the Board of Directors.

Section 7.2 Seal. The corporate seal shall have the name of the corporation inscribed thereon and shall be in such form as may be approved from time to time by the Board of Directors.

Section 7.3 Manner of Notice. Except as otherwise provided herein or permitted by applicable law, notices to directors and stockholders shall be in writing and delivered personally or mailed to the directors or stockholders at their addresses appearing on the books of the corporation. Notice to directors may be given by facsimile, telephone or other means of electronic transmission.

Section 7.4 Waiver of Notice of Meetings of Stockholders, Directors and Committees. Any waiver of notice, given by the person entitled to notice, whether before or after the time stated therein, shall be deemed equivalent to notice. Attendance of a person at a meeting shall constitute a waiver of notice of such meeting, except when the person attends a meeting for the express purpose of objecting, at the beginning of the meeting, to the transaction of any business because the meeting is not lawfully called or convened. Neither the business to be transacted at nor the purpose of any regular or special meeting of the stockholders, directors, or members of a committee of directors need be specified in a waiver of notice.

Section 7.5 Form of Records. Any records maintained by the corporation in the regular course of its business, including its stock ledger, books of account, and minute books, may be kept on, or by means of, or be in the form of, any information storage device or method, provided that the records so kept can be converted into clearly legible paper form within a reasonable time.

Section 7.6 Amendment of Bylaws. These bylaws may be altered, amended or repealed, and new bylaws made, by the Board of Directors, but the stockholders may make additional bylaws and may alter and repeal any bylaws whether adopted by them or otherwise.

INCORPORATED UNDER THE LAWS OF THE
STATE OF DELAWARE



NUMBER 31

SHARES

PalliaTech, Inc.

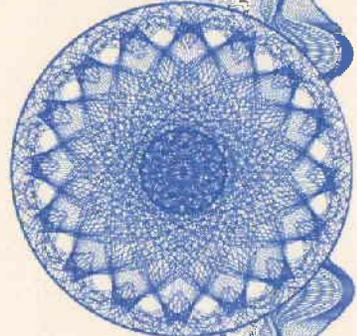
This Corporation is authorized to issue 1,800,000 Common Shares at \$0.00001 Par Value.

SPECIMEN

THIS CERTIFIES THAT _____ is the owner of _____ fully paid and non-assessable shares of the above Corporation transferable only on the books of the Corporation by the holder hereof in person or by duly authorized. Attorney upon surrender of this Certificate properly endorsed.
In Witness Whereof, the said Corporation has caused this Certificate to be signed by its duly authorized officers and its Corporate Seal to be hereunto affixed this _____ day of _____ A.D.

President

Secretary/Treasurer



SPECIMEN

*For Value Received, _____ hereby sell, assign and transfer
unto _____*

*_____ Shares
represented by the within Certificate, and do hereby irrevocably
constitute and appoint*

*_____ Attorney
to transfer the said Shares on the books of the within named
Corporation with full power of substitution in the premises.*

Dated _____

In presence of

NOTICE: THE SIGNATURE OF THIS ASSIGNMENT
MUST CORRESPOND WITH THE NAME AS WRITTEN UPON THE
FACE OF THE CERTIFICATE, IN EVERY PARTICULAR, WITHOUT
ALTERATION OR ENLARGEMENT, OR ANY CHANGE WHATSOEVER.

EMPLOYMENT AGREEMENT

THIS EMPLOYMENT AGREEMENT ("Agreement") is made and entered into as of the 1st day of October, 2010 (the "Effective Date") by and between **PalliaTech, Inc.**, a Delaware corporation (hereinafter called the "Company"), and **Richard L. Taney** (hereinafter called the "Executive").

Recitals

WHEREAS, the Company desires to employ Executive as the President and Chief Executive Officer of the Company; and

WHEREAS, Executive is willing to be employed as the President and Chief Executive Officer of the Company in the manner provided for herein, and to perform the duties of the President and Chief Executive Officer of the Company upon the terms and conditions herein set forth;

WHEREAS, Executive acknowledges that during the course of his employment, Executive will have access to and be provided with unique, confidential, and proprietary information and trade secrets of the Company which are invaluable to the Company and vital to the success of the Company's business;

WHEREAS, the Company and Executive desire to protect such unique, confidential, and proprietary information and trade secrets from disclosure to third parties or unauthorized use to the detriment of the Company; and

WHEREAS, the Company and Executive desire to set forth in this Agreement, the terms, conditions, and obligations of the parties with respect to such employment.

Agreement

NOW, THEREFORE, in consideration of the foregoing recitals, promises, and mutual covenants set forth herein, and intending to be legally bound hereby, the parties agree as follows:

1. **Employment.**

1.1 **Employment and Term.** The Company hereby agrees to employ the Executive and the Executive hereby agrees to serve the Company, on the terms and conditions set forth herein, for the period commencing on the Effective Date and continuing thereafter for a period of two (2) years, expiring on October 1, 2012 (the "Initial Term"), unless sooner terminated as hereinafter set forth; provided, however, that unless this Agreement has been previously terminated, commencing on October 1, 2012, the Initial Term of this Agreement shall automatically be extended for one additional year (a "Renewal Term") unless at least ninety (90) days prior to such date, the Company shall have delivered to the Executive written notice that the terms and conditions of the Executive's employment hereunder will not be extended.

1.2 **Duties of Executive.** The Executive shall serve as the President and Chief Executive Officer of the Company and shall have powers and authority superior to any other officer or employee of the Company or of any subsidiary of the Company, including, without limitation, the duties and responsibilities customarily associated with a chief executive (e.g., control of day-to-day operations, signing checks, hiring and firing, etc.). The Executive shall be required to report solely to, and shall be subject solely to the supervision and direction of the Board of Directors ("Board") and no other person or group shall be given authority to supervise or direct Executive in the performance of his duties. In

addition, the Executive shall regularly consult with the Chairman of the Board with respect to the Company's business and affairs. The Executive shall devote substantially all his working time and attention to the business and affairs of the Company (excluding any vacation and sick leave to which the Executive is entitled), render such services to the best of his ability (subject to the policies and procedures set by the Company), and use his reasonable best efforts to promote the interests of the Company, and shall not, without the Board's prior written consent, render to others services of any kind for compensation, or engage in any other business activity that would in any way materially interfere with the performance of his duties under this Agreement. It shall not be a violation of this Agreement for the Executive to (A) serve on corporate, civic or charitable boards or committees, (B) deliver lectures, fulfill speaking engagements or teach at educational institutions, and (C) manage personal investments, so long as such activities do not significantly interfere with the performance of the Executive's responsibilities as an employee of the Company in accordance with this Agreement. It further shall not be a violation of this Agreement for the Executive to perform services pursuant to consulting agreements entered into between the Executive and Delcath Systems, Inc. and between Executive and an as yet unnamed company licensing the Hawk tattoo removal technology, however, the Executive agrees to perform any such services under those agreements in such a manner as to not detract from his duties and responsibilities to the Company, and further agrees not to enter into any new consulting agreements with any third parties during the Initial Term or any Renewal Term of this Agreement without the previous consent of the Board. Executive represents and warrants to the Company that he has no outstanding commitments inconsistent with any of the terms of this Agreement or the services to be rendered under it, including but not limited to any restrictive covenants previously entered into between Executive and any other entity which would prevent Executive from performing the duties required of him as Chief Executive Officer of the Company.

2. Compensation.
Redacted pursuant to N.Y. Public Officers Law, Art. 6

3. Benefits.

3.1 Expense Reimbursement. During the Initial Term and any Renewal Term of Executive's employment hereunder, the Company, upon the submission of reasonable supporting documentation by the Executive, shall reimburse the Executive for all reasonable expenses actually paid or incurred by the Executive in the course of and pursuant to the business of the Company, including expenses for travel, lodging, entertainment, phone service and other office expenses.

3.2 Incentive, Savings and Retirement Plans. During the Initial Term and any Renewal Term of Executive's employment hereunder, the Executive shall be eligible to participate in all incentive, savings and retirement plans, practices, policies and programs applicable to other key

executives of the Company and its subsidiaries. Such plans, practices, policies and programs, in the aggregate, shall provide the Executive with compensation, benefits and reward opportunities at least as favorable as the most favorable of such compensation, benefits and reward opportunities provided at any time hereafter with respect to other key executives.

3.3 Welfare Benefit Plans. During the Initial Term and any Renewal Term of Executive's employment hereunder, the Company agrees to pay the cost of medical and dental insurance premiums for the Executive and/or the Executive's dependents (to the extent they are eligible), as the case may be, and in arrears to the Effective Date of this Agreement, if necessary. In addition, during the Term of this Agreement, the Executive and/or the Executive's dependents (to the extent they are eligible), as the case may be, shall be eligible for participation in and shall receive all benefits under any welfare benefit plans, practices, policies and programs provided by the Company and its subsidiaries (including, without limitation, medical, prescription, dental, disability, salary continuance, employee life, group life, accidental death and travel accident insurance plans and programs), at least as favorable as the most favorable of such plans, practices, policies and programs in effect at any time hereafter with respect to other key executives. Executive acknowledges and agrees that the benefits of such plans may vary with duties, salary, and length of employment, and that any questions concerning eligibility, coverage, or duration shall be governed by the terms of the plans or policies. Executive further acknowledges and agrees that the Company reserves the right to modify, suspend or discontinue any benefit plans, policies, and practices at any time without notice to or recourse by Executive, so long as such action is taken generally with respect to other similarly situated executives employed by the Company. In the event the Company has not implemented any group medical or dental insurance plan as of the Effective Date, or subsequent to the Company's having established any group medical or dental insurance plan, suspends or discontinues any such plans, policies, and practices, the Company agrees to pay the cost of premiums for reasonable medical and dental insurance coverage for Executive and Executive's eligible dependents during the Initial Term and any Renewal Term of this Agreement, or until such time as the Company implements a group medical and dental insurance plan that provides coverage to Executive and Executive's eligible dependents. In addition, in the event that the Company has not implemented any employee disability, life or group life insurance plans as of the Effective Date, the Company agrees to pay the premium cost for up to \$200,000 of term life insurance and \$200,000 of disability insurance for Executive during the Initial Term and any Renewal Term of this Agreement, or until such time as the Company implements an employee disability, life or group life insurance plan that provides coverage to Executive.

3.4 Vacation. During the term of Executive's employment hereunder, the Executive shall be entitled to paid vacation in accordance with the most favorable plans, policies, programs and practices of the Company and its subsidiaries as in effect at any time hereafter with respect to other key executives of the Company and its subsidiaries; provided, however, that in no event shall Executive be entitled to fewer than four weeks paid vacation per year, as well as pay for holidays observed by the Company. In the event that Executive has not used all accrued vacation by the end of a calendar year during the Initial Term or any Renewal Term of this Agreement, Executive may carry over to the subsequent calendar year no more than one (1) week of previously-accrued but unused vacation (for a maximum accrued vacation balance of five (5) weeks). In the event that Executive has accrued but unused vacation on the date of termination, any such accrued but unused vacation shall be paid to Executive (less all required withholding and deductions authorized by law or Executive), up to the maximum accrual amount of five (5) weeks vacation.

4. Termination.

4.1 Termination by Executive other than for Good Reason. Executive may terminate this Agreement and his employment hereunder at any time for any reason other than for Good Reason, as defined below. Executive is requested, but not required, to provide the Company, as a matter of professional courtesy, at least thirty (30) days' written notice of his intent to terminate this Agreement and

his employment hereunder for other than Good Reason. Upon any termination pursuant to this Section 4.1, the Executive shall be entitled to be paid his Base Salary to the date of termination and the Company shall have no further liability hereunder (other than for reimbursement for reasonable business expenses incurred prior to the date of termination), unless the Executive and the Company agree to a different arrangement. In the event that Executive terminates this Agreement in his sole discretion without Good Reason prior to end of the Initial Term of this Agreement, Executive agrees to forfeit shares of vested common stock to be calculated according to the following formula: a maximum of 50,000 shares multiplied by a fraction, the numerator of which is the number of months remaining from the date of the Executive's optional termination to August 2012, rounded to the nearest full month, and the denominator of which shall be 24. For example, if the Executive were to terminate his employment under this Agreement in his sole discretion without Good Reason in August 2011, the number of remaining months under the Initial Term of the Agreement would be 12 and Executive would forfeit 50,000 shares multiplied by .5 (calculated by taking the 12 remaining months of employment under the Initial Term of this Agreement divided by 24) or 25,000 shares. It is understood that under no circumstances will the maximum number of shares that could potentially be forfeited under the above formula ever exceed 50,000 shares.

4.2 Termination for Cause. Notwithstanding anything to the contrary in this Agreement, this Agreement and Executive's employment hereunder may be terminated by the Company for Cause, as defined below. Upon termination for Cause, Executive's employment hereunder shall immediately terminate, Executive shall only receive his Base Salary under this Agreement, prorated through the date his termination becomes effective, and the Company shall have no further liability hereunder (other than for reimbursement for reasonable business expenses incurred prior to the date of termination). For purposes of this Agreement, "Cause" shall mean: (i) "Disability" (as hereinafter defined) of Executive, (ii) the conviction of the Executive of any criminal felony, other than a marijuana-related conviction arising out of and directly relating to Executive's performance of his duties as CEO of the Company; (iii) alcoholism or drug addiction which renders Executive incapable of performing his duties hereunder for a period in excess of One Hundred Twenty (120) days; (iv) Executive's engagement in any act involving dishonesty or disloyalty that is materially injurious to the Company; (v) Executive's willful and continued material breach of or material failure substantially to perform under any of the material terms and covenants of this Agreement; and (vi) Executive's willful and continued material breach of or material failure substantially to perform under any material policy or reasonable performance goals agreed upon annually by Executive and the Company in good faith with respect to the operation of the Company's business and affairs or the management of the Company's employees, *provided, however*, that with respect to (iv), (v), and (vi) above, Executive will be provided written notice of any misconduct and/or breach constituting Cause and given reasonable opportunity to cure the misconduct and/or breach (unless such misconduct and/or breach is determined by the Board not to be susceptible to cure), and *provided further* that such cure period shall only be available for the first such misconduct and/or breach of the same or substantially similar type and subsequent misconduct and/or breach of the same or substantially similar type shall constitute Cause without regard to Executive's subsequent cure of same. In addition, upon any reasonable and good faith determination by the Board that Cause exists under clause (iv), (v), or (vi) herein (to the extent the conduct at issue has not been cured by the Executive), the Company shall cause a special meeting of the Board to be called and held at a time mutually convenient to the Board and Executive, but in no event later than ten (10) business days after Executive's receipt of the notice contemplated herein, at which Executive shall have the right to appear with legal counsel of his choosing to address any allegation of conduct constituting Cause specified in such notice, and any termination of Executive's employment by reason of such Cause determination shall not be effective until Executive is afforded such opportunity to appear.

4.3 Disability. "Disability" for purposes of Section 4.2 of this Agreement shall mean such physical or mental condition of Executive, which renders Executive incapable of performing his duties hereunder for a period in excess of One Hundred Twenty (120) days. The Company shall comply

with the Americans with Disabilities Act and any other applicable federal, state, or local laws in making a determination whether Executive's condition constitutes Disability.

4.4 Death. In the event of the death of the Executive during the Initial Term or any Renewal Term of this Agreement, this Agreement and Executive's employment hereunder shall terminate as of the date of the death of Executive, and his estate or personal representative shall be entitled to receive only Executive's Base Salary, outstanding and unreimbursed business expenses and any other applicable benefits prorated through the date of Executive's death.

4.5 Termination Without Cause. Notwithstanding anything to the contrary in this Agreement, this Agreement and Executive's employment hereunder may be terminated at any time by the Company without Cause, as defined in Section 4.2, upon written notice to Executive. In such event, the Company shall pay to the Executive: (i) any unpaid Base Salary accrued through the effective date of termination specified in such notice, and any pro-rata bonus that would be payable had Executive completed a full year of employment, based on Executive's performance through the date of termination (which shall be paid within 30 days after the determination of any such bonus has been made); and (ii) in a lump sum, within 30 days after the effective date of termination specified in such notice, a gross amount equal to the greater of 100% of the Executive's annual Base Salary then in effect as of the effective date of termination, or the balance of the Executive's Base Salary from the effective date of termination through the expiration of the Initial Term or any Renewal Term then in effect. In addition, the Company shall continue to pay the Executive's health and dental insurance premiums for a period of twelve (12) months after such termination without Cause. All payments to the Executive under this Section 4.5 shall be subject to all required deductions and/or withholdings, including for federal and state taxes, and any other deductions authorized by Executive or law.

4.6 Termination by Executive for Good Reason. Notwithstanding anything to the contrary in this Agreement, this Agreement and Executive's employment hereunder may be terminated at any time by Executive for Good Reason, as defined herein, upon written notice to the Company. In such event, Executive's termination shall be treated in the same manner and fashion as if the Company had terminated Executive without Cause, and Executive shall be entitled to the payments provided for under such circumstances as set forth in Section 4.5 of this Agreement. For purposes of this Agreement, "Good Reason" shall mean: (i) the Company's material breach of any of the terms and conditions required to be complied with by the Company pursuant to this Agreement, excluding for this purpose an isolated, insubstantial and inadvertent action not taken in bad faith and which is remedied by the Company promptly after receipt of notice thereof given by the Executive; (ii) an unreasonable and material change in Employee's title, duties or responsibilities by the Board of Directors of the Company to a level below the title, duties, or responsibilities ordinarily or customarily granted or placed upon on a Chief Executive Officer, excluding for this purpose an isolated, insubstantial and inadvertent action not taken in bad faith and which is remedied by the Company promptly after receipt of notice thereof given by the Executive; (iii) any failure by the Company to comply with any of the provisions of Section 2 or Section 3 of this Agreement, other than an isolated, insubstantial and inadvertent failure not occurring in bad faith and which is remedied by the Company promptly after receipt of notice thereof given by the Executive; (iii) a relocation by the Company of the Executive's principal work site to a facility or location more than fifty (50) miles from the principal work site for the Executive as of the Effective Date; or (iv) any termination of the Executive's employment for any reason during the three-month period following the effective date of any "Change in Control," as defined herein.

4.7 Mutual Acknowledgment Regarding the Nature of the Company's Business. Executive and the Company mutually acknowledge and agree that, as of the Effective Date, the business of the Company, specifically, the production, distribution, marketing, and sale of medicinal cannabis and related products and services, although legal under the laws of several states in the United States, is presently illegal under federal law. Executive and the Company further mutually acknowledge and agree that, in light of the status of the Company's business under federal law, each party to this Agreement

bears, and each party to this Agreement willingly accepts, a certain amount of risk that the Company's business could be ordered terminated by judicial or governmental action. Executive agrees that should the Company be required to cease all operations as a result of judicial or governmental action, Executive's employment with the Company shall immediately terminate, effective as of the date the Company terminates all operations, and that, under such circumstances, Executive's termination of employment shall not be deemed to be "without Cause" or for "Good Reason," as defined herein, and that the Company's only obligation shall be pay to Executive's Base Salary, as well as any earned bonus amounts and any other applicable benefits, prorated through the date of Executive's employment with the Company terminates. However, should the Executive incur legal fees directly relating to his position as CEO of the Company even if such legal action begins subsequent to the Company's ceasing operations, the Company expressly agrees to reimburse Executive for reasonable legal expenses incurred by Executive in defense of any such actions.

5. Change in Control. For purposes of this Agreement, the term "Change in Control" shall mean:

5.1 The acquisition (other than by or from the Company), at any time after the Effective Date, by any person, entity or "group", within the meaning of Section 13(d)(3) or 14(d)(2) of the Securities Exchange Act of 1934 (the "Exchange Act"), of beneficial ownership (within the meaning of Rule 13d-3 promulgated under the Exchange Act) of 50% or more of either the then outstanding shares of common stock or the combined voting power of the Company's then outstanding voting securities entitled to vote generally in the election of directors; or

5.2 All or any of the three (3) individuals who, as of the Effective Date, constitute the Board (as of the Effective Date, the "Incumbent Board") cease for any reason to constitute at least a majority of the Board, provided that any person becoming a director subsequent to the date hereof whose election, or nomination for election by the Company's shareholders, was approved by a vote of at least a majority of the directors then comprising the Incumbent Board (other than an election or nomination of an individual whose initial assumption of office is in connection with an actual or threatened election contest relating to the election of the directors of the Company, as such terms are used in Rule 14a-11 of Regulation 14A promulgated under the Exchange Act) shall be, for purposes of this Agreement, considered as though such person were a member of the Incumbent Board; or

5.3 The approval by a majority of the Company's Board of Directors of: (1) any merger or consolidation in which the Company is not the surviving entity; (2) any reverse merger in which the Company is the surviving entity; or (3) any transaction involving the sale of all or substantially all of the Company's assets to any person other than a wholly or majority owned direct or indirect subsidiary of the Company.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Redacted pursuant to N.Y. Public Officers Law, Art. 6

Redacted pursuant to N.Y. Public Officers Law, Art. 6

7. Compliance with Section 409A.

7.1 General. It is the intention of both the Company and Executive that the benefits and rights to which Executive could be entitled pursuant to this Agreement comply with Section 409A of the Internal Revenue Code of 1986, as amended (“Code”), and the Treasury Regulations and other

guidance promulgated or issued thereunder (“Section 409A”), to the extent that the requirements of Section 409A are applicable thereto, and the provisions of this Agreement shall be construed in a manner consistent with that intention. If any benefits or rights constitute “nonqualified deferred compensation” under Section 409A, then the nonqualified deferred compensation shall be subject to the following additional requirements, if and to the extent required to comply with Section 409A.

7.2 Payment Events. Payments may not be made earlier than the first to occur of (i) Executive’s “separation from service”; (ii) the date Executive becomes “disabled”; (iii) Executive’s death; (iv) a “specified time (or pursuant to a fixed schedule)” specified in an award agreement at the date of the deferral of such compensation; (v) a “change in the ownership or effective control” of the corporation, or in the “ownership of a substantial portion of the assets” of the corporation; or (vi) the occurrence of an “unforeseeable emergency.”

7.3. No Acceleration of Payments. Neither the Company nor Executive, individually or in combination, may accelerate any payment or benefit that is subject to Section 409A, except in compliance with Section 409A and the provisions of this Agreement, and no amount that is subject to Section 409A shall be paid prior to the earliest date on which it may be paid without violating Section 409A.

7.4 Distributions on Account of Separation from Service. If and to the extent required to comply with Section 409A, no payment or benefit required to be paid under this Agreement on account of termination of Executive’s employment shall be made unless and until Executive incurs a “separation from service” within the meaning of Section 409A. For purposes of the foregoing, the terms in quotations shall have the same meanings as those terms have for purposes of Section 409A, and the limitations set forth herein shall be applied in such manner (and only to the extent) as shall be necessary to comply with any requirements of Section 409A that are applicable to the deferred compensation.

7.5 Treatment of Each Installment as a Separate Payment. For purposes of applying the provisions of Section 409A to this Agreement, each separately identified amount to which Executive is entitled under this Agreement shall be treated as a separate payment. In addition, to the extent permissible under Section 409A, any series of installment payments under this Agreement shall be treated as a right to a series of separate payments.

7.6 Taxable Reimbursements and In-Kind Benefits.

a. Any reimbursements by the Company to Executive of any eligible expenses under this Agreement that are not excludable from Executive’s income for Federal income tax purposes (the “Taxable Reimbursements”) shall be made by no later than the last day of Executive’s taxable year immediately following the year in which the expense was incurred.

b. The amount of any Taxable Reimbursements, and the value of any in-kind benefits to be provided to Executive, during any taxable year of Executive shall not affect the expenses eligible for reimbursement, or in-kind benefits to be provided, in any other taxable year of Executive.

c. The right to Taxable Reimbursement, or in-kind benefits, shall not be subject to liquidation or exchange for another benefit.

7.8 6 Month Delay for Specified Employees.

a. If Executive is a “specified employee,” then no payment or benefit that is payable on account of Executive’s “separation from service,” as that term is defined for purposes of Section 409A, shall be made before the date that is six months after Executive’s “separation from service” (or, if earlier, the date of Executive’s death) if and to the extent that such payment or benefit constitutes

deferred compensation (or may be nonqualified deferred compensation) under Section 409A and such deferral is required to comply with the requirements of Section 409A. Any payment or benefit delayed by reason of the prior sentence shall be paid out or provided in a single lump sum at the end of such required delay period in order to catch up to the original payment schedule.

b. For purposes of this provision, Executive shall be considered to be a “specified employee” if, at the time of his separation from service, (i) Executive is a “key employee,” within the meaning of Section 416(i) of the Code, of the Company (or any person or entity with whom the Company would be considered a single employer under Section 414(b) or Section 414(c) of the Code), and (ii) the Company’s stock is publicly traded on an established securities market or otherwise.

7.9 Amendments Resulting from Section 409A. If Executive or the Company believes, at any time, that any such benefit or right that is subject to Section 409A does not so comply, the concerned party shall promptly advise the other and both parties shall negotiate reasonably and in good faith to amend the terms of such benefits and rights such that they comply with Section 409A (with the most limited possible economic effect on Executive and on the Company).

8. Governing Law. This Agreement shall be governed by and construed in accordance with the laws of the State of New York, without regard to the conflicts of laws principles of such state.

9. Notices. Any notice required or permitted to be given under this Agreement shall be in writing and shall be deemed to have been given when delivered by hand, by facsimile transmission, registered email, or overnight courier service, or three (3) days after being deposited in the United States mail, by registered or certified mail, return receipt requested, postage prepaid, addressed as follows:

If to the Company: PalliaTech, Inc.
c/o William Todd


With a copy to: John Jeppsen
Greenberg Traurig, LLP
3773 Howard Hughes Parkway
Suite 400 North
Las Vegas, NV 89169

If to the Executive: Richard L. Taney


or to such other addresses as either party hereto may from time to time give notice of to the other in the aforesaid manner.

10. Successors and Assigns. This Agreement is personal to the Executive and without the prior written consent of the Company shall not be assignable by the Executive otherwise than by will or the laws of descent and distribution. This Agreement shall inure to the benefit of and be enforceable by the Executive's legal representatives. This Agreement shall inure to the benefit of and be binding upon the Company and its successors and assigns.

11. Severability. The provisions of this Agreement are independent of and severable from each other, and no provision shall be affected or rendered invalid or unenforceable by virtue of the fact that for any reason any other or others of them may be invalid or unenforceable in whole or in part. .

12. Waivers. The waiver by either party hereto of a breach or violation of any term or provision of this Agreement shall not operate nor be construed as a waiver of any subsequent breach or violation.

13. Damages. Nothing contained herein shall be construed to prevent the Company or the Executive from seeking and recovering from the other damages sustained by either or both of them as a result of its or his breach of any term or provision of this Agreement.

14. No Third Party Beneficiary. Nothing expressed or implied in this Agreement is intended, or shall be construed, to confer upon or give any person (other than the parties hereto and, in the case of Executive, his heirs, personal representative(s) and/or legal representative) any rights or remedies under or by reason of this Agreement.

15. Entire Agreement. This Agreement contains the entire understanding between the parties hereto with respect to the employment of Executive by the Company, and supersedes all prior and contemporaneous agreements and understandings, inducements and conditions, express or implied, oral or written, with respect to said employment. The express terms hereof control and supersede any course of performance and/or usage of the trade inconsistent with any of the terms hereof. This Agreement may not be modified or amended other than by an agreement in writing signed by both parties.

16. Section Headings. The section headings in this Agreement are for convenience only; they form no part of this Agreement and shall not affect its interpretation.

17. Construction. The parties hereto acknowledge and agree that each party has participated in the drafting of this Agreement and has had the opportunity to have this document reviewed by the respective legal counsel for the parties hereto and that the normal rule of construction to the effect that any ambiguities are to be resolved against the drafting party shall not be applied to the interpretation of this Agreement. No inference in favor of, or against, any party shall be drawn from the fact that one party has drafted any portion hereof.

18. Consultation with Attorney. Executive acknowledges that he was advised by the Company to consult with an attorney prior to executing this Agreement.

19. Execution in Counterparts. This Agreement may be executed in any number of counterparts, each of which shall be deemed to be an original as against any party whose signature appears thereon, and all of which shall together constitute one and the same instrument. This Agreement shall become binding when one or more counterparts hereof, individually or taken together, shall bear the signatures of the parties reflected hereon as the signatories.

20. Attorneys' Fees and Costs. In the event of any claim, controversy or dispute arising out of or relating to this Agreement, or the breach hereof, the prevailing party shall be entitled to recover its reasonable attorneys' fees and costs in connection with any court proceeding.

21. Survival. The provisions in this Agreement that contemplate obligations on Executive's part after his employment with the Company ends, for whatever reason, shall survive the cessation of his employment.

[Signature Page Follows]

IN WITNESS WHEREOF, the undersigned have executed this Agreement as of the Effective Date.

PalliaTech, Inc.

By: _____
Jeffrey Beaver, Chairman of the Board

Executive:

By: _____
Richard L. Taney

Founders Shares (dated as of October 5, 2010)

Name	Address	% of Founders Shares
Redacted pursuant to N.Y. Public Officers Law, Art. 6		
William W. Todd		
Webster B. Todd, Jr.		
Sheila O. Todd		
Judson Traphagen		
Richard Taney		
Marisa Taney		
Juliana Taney		
George Schidlovsky		
Jack Burkholder		
Steven Patierno		
Dimitry Schidlovsky		
Constantine Schidlovsky		
Maxim Schidlovsky		
Andrei Bogolubov		
Sonja Rose Bogolubov		
Thomas L. Pulling		
Christoph ^l er Todd		

	Peapack, N.J. 07977	(Vested immediately)
Jeffrey Beaver ²		
PalliaTech, Inc.		Page 2 of 2
Founders Shares (dated as of October 5, 2010)		
Name	Address	% of Founders Shares
John Prufeta	Redacted pursuant to N.Y. Public Officers Law, Art. 6	
Alexander Liebers		
Andrew Liebers		
Hallie Friedman		
Jon Friedman		

Customer:	Saundra White	Report Date:	10/05/2010
	Greenberg Taurig (Las Vegas)	Work Order No:	28240-1866
	3773 Howard Hughes Parkway	Customer Ref No:	126673.010100
	Suite 400 North		
	Las Vegas, NV 89169		

Note:

Statement of Incorporator: Reminder: if Directors are not named in the Articles / Certificate of Incorporation, a Statement of Incorporator dated the date of incorporation must be prepared and executed by the Incorporator.

DOCUMENT FILING

<u>Entity</u>	<u>Document</u>	<u>Jurisdiction</u>
Palliatech, Inc.	Incorporation / Organization / Formation	Delaware

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF INCORPORATION OF "PALLIATECH, INC.", FILED IN THIS OFFICE ON THE FIFTH DAY OF OCTOBER, A.D. 2010, AT 2:10 O'CLOCK P.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE KENT COUNTY RECORDER OF DEEDS.

4880744 8100

100969141




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8270073

DATE: 10-05-10

**CERTIFICATE OF INCORPORATION
OF
PALLIATECH, INC.**

I, the undersigned, for the purposes of incorporating and organizing a corporation under the General Corporation Law of the State of Delaware, do execute this certificate of incorporation and do hereby certify as follows:

FIRST. The name of the corporation is PalliaTech, Inc. (the "*Corporation*").

SECOND. The address of the Corporation's registered office in the State of Delaware is 160 Greentree Drive, Suite 101, City of Dover, County of Kent, State of Delaware 19804. The name of its registered agent at such address is National Registered Agents, Inc.

THIRD. The purpose of the Corporation is to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of the State of Delaware, 8 *Del. C.* §§ 101 *et seq.* (the "*DGCL*").

FOURTH. Capital Stock.

A. Authorized Capital Stock. The total number of shares of all classes of stock which the Corporation shall have authority to issue is 2,000,000, divided into 1,800,000 shares of Common Stock, par value of \$0.00001 (hereinafter called "*Common Stock*"), and 200,000 shares of Preferred Stock, par value of \$0.00001 (hereinafter called "*Preferred Stock*").

B. Preferred Stock. The Board of Directors of the Corporation (the "*Board of Directors*") is hereby expressly authorized, by resolution or resolutions thereof, to provide out of the unissued shares of Preferred Stock for one or more series of Preferred Stock, and, with respect to each such series, to fix the number of shares constituting such series and the designation of such series, the powers (including voting powers), if any, of the shares of such series and the preferences and relative, participating, optional or other special rights, if any, and any qualifications, limitations or restrictions of the shares of such series. The designations, powers, preferences and relative, participating, optional and other special rights of each series of Preferred Stock, if any, and the qualifications, limitations or restrictions thereof, if any, may differ from those of any and all other series of Preferred Stock at any time outstanding.

FIFTH. The incorporator of the corporation is John C. Jeppsen, whose mailing address is c/o Greenberg Traurig, LLP, 3773 Howard Hughes Parkway, Suite 400 North, Las Vegas 89169.

SIXTH. Unless and except to the extent that the bylaws of the Corporation shall so require, the election of directors of the Corporation need not be by written ballot.

SEVENTH. In furtherance and not in limitation of the powers conferred by the laws of the State of Delaware, the Board of Directors is expressly authorized to make, alter and repeal the bylaws of the Corporation, subject to the power of the stockholders of the Corporation to alter or repeal any bylaw whether adopted by them or otherwise.

EIGHTH. To the fullest extent permitted by law, a director of the Corporation shall not be liable to the Corporation or its stockholders for monetary damages for breach of fiduciary duty as a director. No amendment to, modification of or repeal of this Article EIGHTH shall apply to or adversely affect any

right or protection of a director of the Corporation hereunder in respect of any act or omission occurring prior to the time of such amendment, modification or repeal.

NINTH. The Corporation reserves the right at any time, and from time to time, to amend, alter, change or repeal any provision contained in this certificate of incorporation, and other provisions authorized by the laws of the State of Delaware at the time in force may be added or inserted, in the manner now or hereafter prescribed by law; and all rights, preferences and privileges of whatsoever nature conferred upon stockholders, directors or any other persons whomsoever by and pursuant to this certificate of incorporation in its present form or as hereafter amended are granted subject to the rights reserved in this Article NINTH.

TENTH. The powers of the incorporator are to terminate upon the filing of this certificate of incorporation with the Secretary of State of the State of Delaware. The name and mailing address of the persons who are to serve as the initial directors of the Corporation until the first annual meeting of stockholders of the Corporation, or until his/her successors are duly elected and qualified, each director to serve in the class designated next to his/her name below, are:

Jeffrey Beaver



Jack Burkholder



Steven Paterno



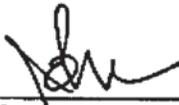
John Prufeta



Richard Taney



The undersigned incorporator hereby acknowledges that the foregoing certificate of incorporation is his act and deed on this the 5th day of October, 2010.



John C. Jeppsen
Incorporator

State of New York
Department of State } ss:

I hereby certify, that PALLIA TECH, INC. a DELAWARE corporation, filed an Application for Authority to do business in the State of New York on 08/01/2011. I further certify that so far as shown by the records of this Department, such corporation is still authorized to do business in the State of New York.

The Biennial Statement is past due.



*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 13th day of May two
thousand and fifteen.*

Anthony Scardino

Executive Deputy Secretary of State

FILING RECEIPT

=====

ENTITY NAME: PALLIATECH NY, LLC

DOCUMENT TYPE: ARTICLES OF ORGANIZATION (DOM LLC)

COUNTY: NASS

=====

FILED:11/13/2012 DURATION:***** CASH#:121113000416 FILM #:121113000364
DOS ID:4318923

FILER:

EXIST DATE

ABRAMS FENSTERMAN FENSTERMAN EISMAN
FORMATO FERRARA & EINIGER, LLP
1111 MARCUS AVENUE, SUITE 107
LAKE SUCCESS, NY 11042

11/13/2012

ADDRESS FOR PROCESS:

THE LLC
1111 MARCUS AVENUE, SUITE 107
LAKE SUCCESS, NY 11042

REGISTERED AGENT:



The limited liability company is required to file a Biennial Statement with the Department of State every two years pursuant to Limited Liability Company Law Section 301. Notification that the biennial statement is due will only be made via email. Please go to www.email.ebiennial.dos.ny.gov to provide an email address to receive an email notification when the Biennial Statement is due.

=====

SERVICE COMPANY: CORPORATION SERVICE COMPANY - 45

SERVICE CODE: 45 *

FEEES 260.00

FILING 200.00
TAX 0.00
CERT 0.00
COPIES 10.00
HANDLING 50.00

PAYMENTS 260.00

CASH 0.00
CHECK 0.00
CHARGE 0.00
DRAWDOWN 260.00
OPAL 0.00
REFUND 0.00

=====

418537JBA

DOS-1025 (04/2007)

STATE OF NEW YORK
DEPARTMENT OF STATE

I hereby certify that the annexed copy has been compared with the original document in the custody of the Secretary of State and that the same is a true copy of said original.

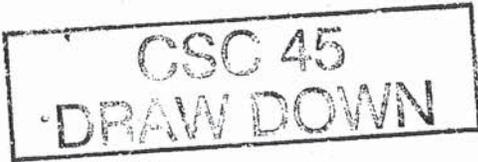


WITNESS my hand and official seal of the Department of State, at the City of Albany, on November 14, 2012.

A handwritten signature in black ink, appearing to read "Daniel E. Shapiro".

Daniel E. Shapiro
First Deputy Secretary of State

121113000 364



ARTICLES OF ORGANIZATION
OF

PALLIATECH NY, LLC

Under Section 203 of the Limited Liability Company Law

The Undersigned, desiring to form a Limited Liability Company under and pursuant to the laws of the State of New York, does hereby certify:

FIRST: The name of the Limited Liability Company is: **PALLIATECH NY, LLC** (the "Company").

SECOND: The office of the Company shall be located in the County of Nassau within the State of New York.

THIRD: The Company shall continue to exist until dissolved or terminated as provided in the Operating Agreement of the Company.

FOURTH: The Secretary of State of the State of New York is designated as the agent of the Company upon whom process against it may be served. The post office address to which the Secretary of State shall mail a copy of any such process served upon him is to the Company, 1111 Marcus Avenue, Suite 107, Lake Success, New York 11042, Attention: Bruce Blakeman.

FIFTH: The purpose of the business shall be to pursue any lawful business purpose or purposes, except to do any business for which another statute of the State of New York or any other applicable jurisdiction specifically requires some other business entity or natural person to be formed or used for such business.

SIXTH: The relative rights, powers, preferences and limitations of the member(s) and manager(s), if any, are set forth in the Operating Agreement.

SEVENTH: A manager or member shall not be personally liable to the Company or its members for damages for any breach of duty as a manager or member, except for any matter in respect of which such manager or member shall be liable by reason that, in addition to any and all other requirements for such liability, there shall have been a judgment or other final adjudication adverse to such manager or member that establishes that such manager's or member's acts were committed in bad faith or were the result of active and deliberate dishonesty and were material to the cause of action so adjudicated or that such manager or member personally gained in fact a

financial profit or other advantage to which such manager or member was not legally entitled, or that with respect to a distribution the subject of Section 508 of the Limited Liability Company Law ("LLCL"), a manager's acts were not performed in accordance with Section 409 of the LLCL. Neither the amendment nor the repeal of this Article Seventh shall eliminate or reduce the effect of this Article Seventh in respect to any matter occurring, or any cause of action, suit or claim, that, but for this Article Seventh, would accrue or arise, prior to such amendment or repeal. This Article Seventh shall neither eliminate nor limit the liability of a manager or member for any act or omission occurring prior to the adoption of this Article Seventh.

EIGHTH: The Company shall indemnify, to the full extent permitted by the LLCL, as amended from time to time, all managers and members whom it is permitted to indemnify pursuant thereto.

IN WITNESS WHEREOF, the undersigned has hereunto executed these Articles of Organization for the Limited Liability Company on the 9th day of November, 2012 and affirms that the statements herein are true under the penalties of perjury.

/s/ Bruce Blakeman
Bruce Blakeman, Organizer

121113000 364

FILED

2012 NOV 13 AM 11:50

ARTICLES OF ORGANIZATION
OF
PALLIATECH NY, LLC

Under Section 203 of the Limited Liability Company Law

lcc

STATE OF NEW YORK
DEPARTMENT OF STATE

FILED NOV 13 2012

TAX \$

BY: LAP

RECEIVED

2012 NOV 13 PM 9:11

Filed By:

Abrams, Fensterman, Fensterman, Eisman, Formato, Ferrara & Einiger, LLP
1111 Marcus Avenue, Suite 107
Lake Success, New York 11042

CUSTOMER REF. #

418537 JBA

416

CSC 45
DRAW DOWN

**MEMBERS' OPERATING AGREEMENT
PALLIATECH NY, LLC**

Redacted pursuant to N.Y. Public Officers Law, Art. 6

AMENDMENT AND MODIFICATION AGREEMENT

Redacted pursuant to N.Y. Public Officers Law, Art. 6

EXCLUSIVE REPRESENTATION CONTRACT

This Contract is made and entered into effective the th 14 day of February 2013, by and between PalliaTech, Inc. a Delaware Corporation, with offices located at 252 Sea Cliff Avenue, Sea Cliff, New York 11579 (hereinafter referred to as "PalliaTech") and PalliaTech NY, LLC, a New York limited liability company, with an office address for purposes hereof at 1111 Marcus Avenue, Suite 107, Lake Success, NY 11042 (hereinafter referred to as "PNY").

RECITALS:

A. PalliaTech conducts directly and/or manages business activities undertaken through operating affiliates related to a medical model of Palliative care developed by PalliaTech, and encompassing (subject to the procurement of required state licenses and operating permits), the design and development of therapeutic devices deployed in treatment of patients and the cultivation, production, manufacturing, distribution and sale of medical marijuana to qualifying patient or other constituencies, as defined in and subject to the requirements of enabling legislation of the states and jurisdictions in which PalliaTech or any of its affiliates conducts or seeks to conduct such activities (the "Business");

B. PNY was organized as a limited liability company under the laws of New York on November 13, 2012, for the purpose of pursuing the "Defined Opportunity" in the State of New York related to the Business, as described in "Recitations" A. and B. in the Member's Operating Agreement between and among the Members of PNY (the "PNY OA").

C. The terms of Paragraph 10 of the PNY OA specify that PalliaTech is appointed to serve as the initial sole Manager of PNY. Paragraph 11 of the PNY OA provides that PalliaTech will enter into an Exclusive Representation Contract with PNY related to the Defined Opportunity for the purposes therein described and for a term of agreement co-extensive with that of the PNY OA.

D. The purpose of this Contract is to serve as the Exclusive Representation Contract contemplated by the provisions of the PNY OA described in Recital C. above.

NOW THEREFORE, for the purposes stated in the Recitals (which form part of this Contract), and for and in consideration of the mutual covenants contained herein and Ten Dollars and other good and valuable consideration exchanged, the adequacy of which is mutually acknowledged, the parties hereto agree as follows:

1. PalliaTech hereby grants to PNY the exclusive right during a term of agreement co-extensive with the PNY OA to represent PalliaTech, its affiliates, assigns and successors in the State of New York in relation to the Defined Opportunity as defined in the PNY OA.

2. PNY shall work together with PalliaTech in seeking to obtain the required executive, legislative and administrative authorization necessary for PNY to obtain approvals

and/or a license to conduct business activities related to the Business and Defined Opportunity in the State of New York.

3. PalliaTech, at its sole cost and expense, shall be responsible for all fees and expenses associated with the approvals required to operate the business and the start up and actual business operating expenses. PNY, at its own cost and expense, may hire lobbying firms, attorneys and other consultants, but shall be under no obligation to do so.

4. All required licenses and approvals shall be in the name of and owned by PNY; however, PalliaTech shall run the day-to-day operations. All revenues derived from business in the State of New York shall be paid to PNY. PNY shall pay to PalliaTech the actual, normal and typical costs associated with obtaining a license and approvals and in conducting business on a day-to-day basis going forward. PNY shall retain the remaining net revenues to be distributed to the Members of PNY in conformity with the applicable provisions of the PNY OA. The normal and typical costs paid to PalliaTech shall not exceed 85% of gross revenues unless there are extraordinary circumstances. PalliaTech shall submit on a monthly basis an itemized list of its actual, normal and typical operating costs and expenses which PNY shall pay within fifteen (15) days thereafter at which time the remaining net revenues of PNY shall be distributed to the owner/Members of PNY in accordance with their ownership interest, except that PNY shall keep a sufficient sum of money on a monthly basis for general operating issues.

5. All Notices required to be given under this Contract shall be in writing and sent by overnight mail such as Federal Express, Express Mail, or UPS to the parties at their respective addresses set forth hereinabove, or by personal delivery acknowledged by written receipt.

6. No provisions under this Contract may be changed, revoked, modified, waived or withdrawn, except in a writing signed by both parties which is also approved in writing by all Members of PNY as required by the terms of the PNY OA.

7. This Contract shall be construed and enforced under and in accordance with the laws of the State of New York with venue placed in Nassau County. Costs, expenses and reasonable attorneys fees resulting from claims, issues or controversies shall be paid to the non-breaching party, or if both parties are found in breach, to the party determined by the Court to be the prevailing party.

8. The term of this Contract shall be for a term coextensive with that of the PNY OA as set forth in Paragraph 5 of the PNY OA, and for the avoidance of doubt, this Contract shall not survive the termination of the PNY OA.

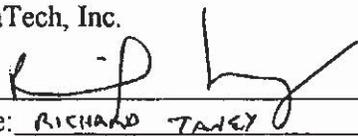
9. This parties acknowledge and agree that this Contract shall be implemented consistently with the terms, conditions and limitations of the PNY OA of which each party is deemed to have notice by this reference. The parties are acting herein as independent contractors, however, and the rights, obligations and responsibilities of the parties hereunder are stipulated to be those of contracting business entities.

10. This Contract shall be binding on the parties hereto and their respective successors and assigns, affiliates and subsidiaries provided, however, that neither party may assign or transfer this agreement and the rights and obligations hereunder in whole or in part directly or indirectly to any other person, firm, corporation or entity, without the written consent of the other party, which will not be unreasonably withheld).

11. The parties agree to take all reasonable actions and to execute such other and further documents as may be necessary or desirable in order to effectuate the terms and purposes of this Contract.

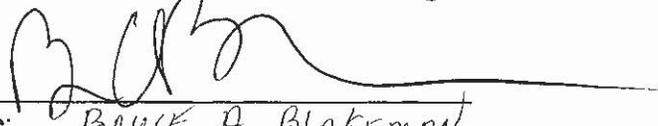
Witness the execution hereof as of the date first above written.

PalliaTech, Inc.

By: 
Name: RICHARD TASEY
Title: PRESIDENT & CEO
Date: 2/14/13

PalliaTech NY, LLC

By: PalliaTech, Inc., its authorized Manager

By: 
Name: BRUCE A. BLAKEMAN
Title: PRESIDENT
Date: 2/19/13

LABOR PEACE AGREEMENT
BY AND BETWEEN
PALLIATECH, NY LLC
AND
LOCAL 338, RWDSU/UFCW

This Labor Peace Agreement ("Agreement") is made by and between PalliaTech, NY LLC) (the "Employer") and Local 338, RWDSU/UFCW, 1505 Kellum Place, Mineola, New York (the "Union") pursuant to the requirements of the N.Y.S. Public Health Law, §§ 3360(14) and 3365(1)(iii) & (3)(vii) and to establish the following procedure to address the Union's efforts to organize employees in any existing or new facility owned or operated by the Employer in which the employees are not represented by a labor organization:

1. The term, "employees," used herein shall include all full time and part-time employees engaged in the manufacture and distribution of medical marijuana, including, but not limited to, pharmacists, pharmacy technicians, dispensaries, consultants, drivers, growers, retail, manufacturers, trimmers, for or on behalf of the Employer ("bargaining unit", excluding employees who are statutorily excluded by the National Labor Relations Act ("NLRA").
2. Within ten (10) days after receiving written notice of the Union's intent, the Employer agrees to furnish the Union with a complete list of employees in the shop designated in the notice, including job classifications, departments, street addresses, telephone numbers and e-mail addresses. The Employer agrees to thereafter provide updated lists as reasonably requested. The Employer waives the right under the NLRA to file any petition with the National Labor Relations Board for any election in connection with the invocation of this Agreement and agrees to refrain from directly or indirectly supporting any such petition.
3. The Employer agrees to take a neutral approach to unionization of employees. Neutrality means that the Employer will neither help nor hinder the Union's organizing effort by, for example, directly or indirectly demeaning by word or deed the Union or its representatives, or directly or indirectly supporting or assisting in any way any person or group who may oppose the Union. The Employer agrees not to communicate to any employee that it disfavors the Union or the signing of authorization cards, or that they may suffer adverse consequences for supporting the Union or signing cards. The parties will conduct themselves with mutual respect for each other during any organizing effort.
4. During organizing efforts, the Employer's managers, supervisors and other representatives will remain neutral and will refrain from communicating with employees about how they should respond to the Union. The Employer agrees to inform all of its managers, supervisors and representatives of this obligation and that the Employer has no objection to employees supporting the Union or engaging in union activities, including meeting with Union representatives or signing authorization cards. The Employer will promptly cease any such violation of this provision and immediately act to discourage any additional violation. The Employer agrees to take prompt action to mitigate the effects of any violation, including informing employees of the Employer's position on organizing and the rights of employees to organize.

5. The Employer agrees to permit Union representatives reasonable access to the workplace to communicate with employees, including through the distribution of materials. Union representatives will not disrupt the Employer's operations or unreasonably interfere with employee production. Where possible, the Union will provide the Employer with reasonable prior notice of its desire to have access to the Employer's facility.

6. The facility's highest level manager will communicate with employees that the Employer has no objection to employees meeting with Union representatives, supporting the Union or signing authorization cards. That manager will also communicate to employees that the Employer is neutral in their selection of union representation.

8. The Union and its representatives agree not to coerce or threaten any Employee in an effort to obtain authorization cards, nor shall the Union engage in an organizing campaign or other efforts with respect to the Facility which includes negative comments about Employer or its related companies or comments that otherwise disparage Employer, its management, related companies or owners, Facility representatives or the Facility's product, service or reputation. Likewise, the employer shall not disparage the Union or its agents in any manner.

9. If the Union provides evidence in support of its claim that a majority of employees have designated the Union as their collective bargaining representative, the Employer will recognize the Union as such representative of the employees in the bargaining unit described in the Union's notice invoking this provision and will extend this Agreement to them.

10. If both the Union and the Employer mutually agree that additional Agreement provisions are necessary for the new unit or if the National Labor Relations Board or a court determines that the parties may not lawfully extend this Agreement to the unit, the parties agree to bargain in good faith over a collective bargaining agreement to cover the employees. The parties agree to commence bargaining within 20 business days from the date the neutral verifies the Union's majority. If they are unable to agree to a collective bargaining agreement, the parties agree to submit all open provisions and issues to final and binding interest arbitration. If they are unable to select an arbitrator, the parties shall select an arbitrator to set the open provisions and resolve any other issues in accordance with the procedures of this Agreement's arbitration provision.

11. With respect to Employer or any related company, the Union will not directly or indirectly: engage in, promote or condone any type or kind of picketing, strike, consumer hand billing, demonstration or publicity campaigns boycotts, slowdowns, walkouts, sit-ins or any other disruption or interference with business activities (including any disruption of corporate or shareholder meetings or voting relating to Employer or its related companies) or any other economic or concerted activity, provided that the Employer has not violated any of the terms of this agreement.

12. The parties agree to resolve any dispute over the interpretation of this provision through expedited arbitration. The parties will invoke expedited arbitration by requesting an arbitrators list from the American Arbitration Association. Within 10 days of receiving AAA's

arbitrators' list, the parties will submit their struck lists to the AAA. The parties agree that AAA will follow its labor arbitration rules to select an arbitrator based on the list or lists the parties submit. The AAA will strictly apply its rule requiring struck lists to be timely submitted in accordance with this provision. The arbitrator will hear the dispute on either the first or second date the arbitrator is available and issue an award within 20 days thereafter. The parties will equally share the arbitrator's fees and costs.

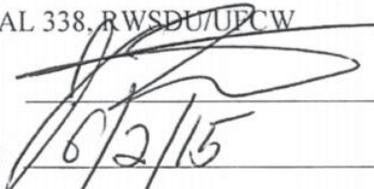
13. The parties agree that the arbitrator has the authority to direct the breaching party to specifically perform its obligations under this provision. The arbitrator may award a penalty of up to \$10,000 for willful breaches. A willful breach is one that clearly violated this provision and was not corrected after the aggrieved party provided notice of it to the violating party. The parties consent to the entry of the arbitrator's award as the order of judgment of a United States District Court, without notice.

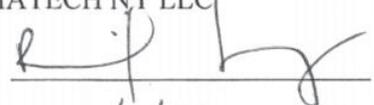
14. The Union and the Employer recognize that this Agreement is in their mutual best interests and therefore agree to prevent evasion of the terms of this Agreement through the use of contractors and/or subcontractors. To comply with the spirit of this Agreement, the Employer shall, as a condition of its relationship with any contractor and/or subcontractor regarding the contracting out of any bargaining unit work as defined in paragraph 1, require that: (a) the contractor and/or subcontractor enter into a neutrality agreement with the Union; and (b) immediately notify the Union when seeking to form a business relationship with the contractor and/or subcontractor.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed this 2nd day of June, 2015, by their duly authorized representatives.

LOCAL 338, RWSU/UPCW

PALLIATECH NY LLC

By: 

By: 

Date: 6/2/15

Date: 6/2/15

Name: Joseph Fontano

Name: Richard Taney

Title: Secretary-Treasurer

Title: President and CEO

Witness: 

Witness:



PALLIATECH™

ReliefCenters™

FINANCIAL STATEMENT (GAAP)



Attachment I – Financial Statement (GAAP)

PALLIATECH NY, LLC

Application Expenses

Attachment G

Period from January 1, 2015 to June 4, 2015

Expenses

Professional fees	\$ 116,220
Consulting fees	461,694
NYS Department of Health Fees	<u>210,000</u>
Total application expenses	<u>787,914</u>
Total Application Expenses	<u>\$ (787,914)</u>

The Company utilized various professionals and consultants in order to complete its application to become a Registered Organization under the New York Medical Marijuana Program. Please see below for a list of professionals and consultants engaged by the Company. If any additional information is required, please let us know and we'll respond immediately.

Redacted pursuant to N.Y. Public Officers Law, Art. 6

FOIL Confidential – Trade Secrets
NY Pub. Off. L. 87 (2) – Exemption
from Disclosure Requested”

The accompanying notes are an integral part of these financial statements.

PALLIATECH

SECURITY SYSTEMS PLAN

Guidepost Solutions, LLC -
Dallas
2800 North Dallas Pkwy., Suite 350
Plano, TX 75093
OFFICE: (469) 568-0300



GUIDEPOST SOLUTIONS LLC

HEADQUARTERS:
415 Madison Avenue, 11th Floor
New York, New York 10017
OFFICE: (212) 817-6700
FAX: (212) 817-8728, 6729
WEBSITE:
www.guidepostsolutions.com

Guidepost Solutions, LLC -
Oakland:

388 17th Street, Suite 230
Oakland, CA 94612
OFFICE: (510) 268-8373

Guidepost Solutions, LLC -
San Francisco:

433 California Street,
Suite 800
San Francisco, CA 94104
OFFICE: (415) 616-8822

Guidepost Solutions, LLC -
Chicago:

101 North Wacker Dr., Suite 604
Chicago, Illinois 60606
OFFICE: (312) 634-6060

Guidepost Solutions, LLC -
Los Angeles:

550 South Hope
Suite 850
Los Angeles, CA 90071
OFFICE: (213) 624-9000

Guidepost Solutions, LLC -
London:

Gainsborough House 59-60 Thames
Street
Windsor SL4 1TX, United Kingdom
OFFICE: +44 (0) 1753 272037

Guidepost Solutions, LLC -
Seattle:

800 Fifth Avenue, Suite 4100
Seattle, WA 98104
OFFICE: (206) 447-1486

Guidepost Solutions, LLC -
Washington, DC:

1130 Connecticut Avenue, NW
Suite 710
Washington, DC 20036
OFFICE: (202) 499-4330

Guidepost Solutions, LLC -
Denver:

600 17th Street,
Suite 2800 South
Denver, CO 80202
OFFICE: (303) 260-4634

Guidepost Solutions, LLC -
Palm Beach Gardens:

800 Village Square Crossing,
Suite 205
Palm Beach Gardens, FL 33410
OFFICE: (561) 656-2017

Redacted pursuant to N.Y. Public Officers Law, Art. 6

“FOIL Confidential – Critical Infrastructure (NY Pub. Off. L. 89(5)) –
Exemption from Disclosure Requested”-

Redacted pursuant to N.Y. Public Officers Law, Art. 6

“FOIL Confidential – Critical Infrastructure (NY Pub. Off. L.
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“FOIL Confidential – Critical Infrastructure (NY Pub. Off. L. 89(5)) –
Exemption from Disclosure Requested”-

Redacted pursuant to N.Y. Public Officers Law, Art. 6



PALLIATECH™

ReliefCenters™



SECURITY PLAN



Attachment H

Redacted pursuant to N.Y. Public Officers Law, Art. 6

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PALLIATECH NY, LLC
FINANCIAL STATEMENTS
AND
INDEPENDENT AUDITORS' REPORT
MAY 31, 2015

PALLIATECH NY, LLC

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Independent Auditors' Report	1-2
Financial Statements	
Balance Sheet	3
Statement of Operations	4
Statement of Changes in Members' Deficit	5
Statement of Cash Flows	6
Notes to Financial Statements	7-9



DEMETRIUS BERKOWER LLC
Certified Public Accountants and Advisors

INDEPENDENT AUDITORS' REPORT

To the Sole Manager Member
PalliaTech NY, LLC

Report on the Financial Statements

We have audited the accompanying financial statements of **PalliaTech NY, LLC** (the "Company"), which comprise the balance sheet as of May 31, 2015, and the related statements of operations, changes in members' deficit and cash flows for the period from April 1, 2013 to May 31, 2015, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Wayne Plaza II, 155 Route 46, Wayne, NJ 07470-6831 • P (973) 812-0100 • F (973) 812-0750
517 Route One, Iselin, NJ 08830 • P (732) 781-2712 • F (732) 781-2732
www.demetriusberkower.com

A PCAOB REGISTERED FIRM
New Jersey • California



Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of **PalliaTech NY, LLC** as of May 31, 2015, and the results of its operations, changes in its members' deficit and its cash flows for the period from April 1, 2013 to May 31, 2015 in accordance with accounting principles generally accepted in the United States of America.

Emphasis of Matter

As more fully described in Notes 1 and 4 to the financial statements, the Company's activities consisted primarily of incurring costs in connection with its application to the New York State Department of Health to become a Registered Organization in the Medical Marijuana Program. If the Company fails to secure a license, it could be determined that opportunities available to the Company may be limited. Our opinion is not modified with respect to this matter.

Demetrius Berkower LLC

Iselin, New Jersey
June 4, 2015



PALLIATECH™

ReliefCenters™

FINANCIAL STATEMENT (GAAP)



Attachment I – Financial Statement (GAAP)



PALLIATECH™

ReliefCenters™

**INTERNET
CONNECTIVITY**



Attachment K – Internet Connectivity

Consumer and Business Internet Service Providers

Location	Consumer	Business Specific
Chazy, Plattsburgh 641 Ridge Road] Chazy, NY 12921-2420 Clinton County	Time Warner Cable GlobalNet	Northland Communications Level (3) Chazy & Westport Telephone Co.
Brooklyn 425 Fulton Street Brooklyn, NY 11201-5121 Kings County	Time Warner Cable Optimum Verizon FiOS, RCN	Lighttower Broadband
Newburgh 38 South Plank Road Newburgh, NY 12550-3927 Orange County	Time Warner Cable Verizon FiOS Verizon	Lighttower Fiber Networks
Rochester 215 Alexander Street Rochester, NY 14607 Monroe County	Time Warner Cable Frontier	Fibertech Finger Lakes Technology Group Level (3)
Utica 50 Auert Avenue Utica, NY 13502-2326 Oneida County	Time Warner Cable Verizon	Northland Communications Level (3)

TELECOMMUNICATIONS SOLUTION

Proposed by



Lauren Mattia, Senior Account Executive, 315-624-2281

May 29, 2015

Northland Communications is pleased to submit the following proposal for Palliatech NY, LLC.

Internet services are an integral part of your business. Since 1905, Northland has invested in leading edge product and service offerings that customers have come to rely on. Northland's fiber optic infrastructure provides advanced networking solutions to meet your business needs.

INTERNET

Northland Communications' dedicated internet service is backed by an aggressive service level agreement that provides excellent performance standards. Our network supports critical business applications with:

- Up to 100 Gigabits of dedicated bandwidth
- Unmatched reliability, stability and accessibility
- Full duplex download and upload
- Local provider with local support, 24 X 7

PRICING FOR INTERNET:

Address: 641 Ridge Road, Chazy, NY 12921

Pricing and Term*		Description
36 month	60month	
\$750.00	\$200.00	One-time Installation Charge

Monthly Recurring Charges each option:

\$600.00/month	5M Dedicated Internet Connection
\$700.00	10M Dedicated Internet Connection
\$ 9.95	1 Static IP Addresses
\$14.95	5 Static IP Addresses

**plus applicable taxes and surcharges*

Pricing based upon a multi-Year Agreement with installation as stated above

Pricing is valid until: August 2, 2015

Taxes and surcharges are not included in this proposal.

A lead time of 180 days will be required from contract execution to cutover/conversion.

Any private network circuits with Northland or any other provider require a 30 day written notification to cancel the circuits to the appropriate provider.

Pricing is subject to change without the bundled services of Northland Communications which may include local usage, long distance, dedicated Internet, communications equipment and/or data services.

OPTIONAL INTERNET UPGRADE PRICING:

At any point during the contract term, Internet bandwidth can be increased to the following increments for the additional monthly fee listed:

10M to 25M = \$175/month

25M to 50M = \$175/month

50M to 75M = \$175/month

Taxes and surcharges are not included in this proposal.

A lead time of 30 days will be required from order to upgrade.

A \$70 one-time upgrade fee will apply.

INSTALLATION AND SUPPORT DETAILS

Northland will provide:

- Pre-planning services such as site survey of communication room/space, scheduling of installation with designated staff, coordination with other carriers, if required
- Access to web-based Internet graphs

- Customer portal that provides online bill access

Customer will provide:

- For installation during business hours (8am to 4pm, Monday - Friday). If conversion is required outside of normal business hours, a \$500 fee will apply
- Minimum of 2'x2' wall space at each location for mounting equipment
- Management and support of all equipment required beyond Ethernet hand-off of Internet service

Conversion Process:

- Cut-over dates are coordinated through our Network Operations Center with your current carrier to ensure a smooth transfer of services.
- Northland's Network Operations Center coordinates with you to determine the proper date and time for conversion of service. Conversion can take place during business hours, (recommended sometimes to ensure proper testing can take place) or after-hours should your organization prefer. (There is a \$500.00 fee for scheduled conversions outside Northland's business hours of 8am to 4pm, Monday thru Friday.)



Enterprise Account Executive
John Mazzaro
 Phone: 646-937-2140
 Fax: (631) 300-3702
jmazzaro@lightower.com

PalliaTech NY LLC

DIA Proposal

Standard Pricing

	Proposed Units	Proposed Terms	Unit Price	Monthly Rate	Additional Product Information
DEDICATED INTERNET 50 Megs 150/50 mbps	1	5 YR	\$1,725.00	\$1,725.00	<u>425 Fulton Street 2nd Flr Brooklyn NY 11201</u>
E-LINE - 50 MEG to 10 GIG Point to Point 1 GIG	0		\$0.00	\$0.00	
E-LAN - 10 MEG to 10 GIG Point to Multi Point	0		\$0.00	\$0.00	
E-VPL Pt. to Pt. Virtual Private Line	0		\$0.00	\$0.00	
METRO E-ADV PL - 1 GIG to 10 GIG Dedicated Pt. to Pt. (private fiber)	0		\$0.00	\$0.00	
VIRTUAL COLOCATION Full Cabinet	0		\$0.00	\$0.00	
1/2 Cabinet	0		\$0.00	\$0.00	
WAVELENGTHS Unprotected Pt. to Pt.	0		\$0.00	\$0.00	
				\$1,725.00	
One Time Fees					
Standard Installation:	0		\$0.00	\$0.00	
Set Up Fees:	0		\$0.00	\$0.00	
Total One Time Fees:				\$0.00	

Prepared By: John Mazzaro

Prepared on Date: May 27 2015

NOTES: Please refer to your MSA (Master Service Agreement)



Enterprise Account Executive
John Mazzaro
 Phone: 646-937-2140
 Fax: (631) 300-3702
jmazzaro@lighttower.com

PalliaTech NY LLC

DIA Proposal

Standard Pricing

	Proposed Units	Proposed Terms	Unit Price	Monthly Rate	Additional Product Information
DEDICATED INTERNET 50 Megs 150/50 mbps	1	5 YR	\$1,725.00	\$1,725.00	<u>38 South Plank Road Newburgh NY 12550</u>
E-LINE - 50 MEG to 10 GIG Point to Point 1 GIG	0		\$0.00	\$0.00	
E-LAN - 10 MEG to 10 GIG Point to Multi Point	0		\$0.00	\$0.00	
E-VPL Pt. to Pt. Virtual Private Line	0		\$0.00	\$0.00	
METRO E-ADV PL - 1 GIG to 10 GIG Dedicated Pt. to Pt. (private fiber)	0		\$0.00	\$0.00	
VIRTUAL COLOCATION Full Cabinet	0		\$0.00	\$0.00	
1/2 Cabinet	0		\$0.00	\$0.00	
WAVELENGTHS Unprotected Pt. to Pt.	0		\$0.00	\$0.00	
				\$1,725.00	
One Time Fees					
Standard Installation:	0		\$0.00	\$0.00	
Set Up Fees:	0		\$0.00	\$0.00	
Total One Time Fees:				\$0.00	

Prepared By: John Mazzaro

Prepared on Date: May 27 2015

NOTES: Please refer to your MSA (Master Service Agreement)

Subject: FW: Internet Connectivity

Date: Thursday, May 21, 2015 at 4:16:25 PM Eastern Daylight Time

From: Benjamin Tabar

Below is confirmations that Time Warner Cable has high speed internet and phone services at 215 Alexander St. Let me know when they are ready to review bandwidth options.

215 ALEXANDER ST
ROCHESTER, NY 14607

Type	Commercial location	Serviceability	ON-NET
Division	Western New York	Estimated Fiber Service Delivery	
Largest Tenant	UNION CITY CONTRACTORS	Estimated Coax Service Delivery	
TWC Customers (Res/Com)	1	Serviceability Code Description	
Tenants	11	Serviceability Code Per Billing	N
Total Employees In Building	13	Distance to Closest Fiber Serviceable Location	
Dominant Industry Vertical	Construction	Distance to Closest Coax Serviceable Location	0
Total Telcom Spend (\$/mo.) (D&B)		Closest Node	
Max Data Services Class (D&B)		Node Description	
MIDAS Building Key	612740	Distance to Node	0 ft
Building Name	215 ALEXANDER ST	DSL Distance	4783 ft
Franchise Area		Wire Center	ROCHNYXB
		Rate Center	
		Rate Center Abbr	
			2014 Proactive Fiber

Related Project [2014 Proactive Fiber Upgrade North East](#)

Up to 300M Internet Available?

Steve Conger
Account Executive

585-721-4737

steve.conger@twcable.com

www.twcbc.com/northeast/

Refer me and receive \$100! www.twcbc.com/nereferral



TELECOMMUNICATIONS SOLUTION

Proposed by



Lauren Mattia, Senior Account Executive 315-624-2281

May 28, 2015

Northland Communications is pleased to submit the following proposal for Palliatech NY, LLC.

Voice services are an integral part of your business--employee call management, lengthy bill review and service troubleshooting are not. Using Northland Communications' highly reliable fiber optic network and the newest technologies, Northland provides an unlimited local and long distance calling solution coupled with high speed internet bandwidth for customers that want to keep it simple.

VOICE AND DATA BUNDLED SERVICES

Business Simple

Business Simple is a traditional service providing a minimum of 3 business (POTS) lines over a fiber optic network, ensuring exceptional clear voice communications quality. This is combined with Northland's high-speed, **symmetrical** Internet bandwidth ranging from 10M to 50M. Business telephone lines include all local and long distance calls within US. One static IP address is provided and additional IP addresses are available for a nominal monthly fee.

PRICING FOR BUSINESS SIMPLE:

Qty Description

350 Leland Ave., Utica, NY

4 Business Lines: including ALL Local and Outbound Long Distance Usage

1 10 M Dedicated Internet Connection with one static IP address

Business Simple package: \$258.31* per month (plus applicable taxes)

*FCC and CAC charges have been included in this quote

Pricing based upon a 3-Year Agreement with installation of \$250.00

Pricing is valid until June 21, 2015

Taxes and surcharges are not included in this proposal.

A lead time of 90 days will be required from contract execution to cutover/conversion

Pricing is contingent upon physical site survey

Pricing is subject to change without the bundled services of Northland Communications which may include local usage, long distance, dedicated Internet, communications equipment and/or data services.

OPTIONAL INTERNET UPGRADE PRICING:

At any point during the contract term, Internet bandwidth can be increased to the following increments for the additional monthly fee listed:

10M to 25M = \$100/month
25M to 50M = \$100/month

*Taxes and surcharges are not included in this proposal.
A lead time of 30 days will be required from order to upgrade.
A \$70 one-time upgrade fee will apply.*

Installation and Support Details

Northland will provide:

- Pre-planning services such as site survey of communication room/space, scheduling of installation with designated staff, coordination with other carriers, if required
- Extensive testing after cutover to include local, long distance and International inbound and outbound calling, as well as faxing
- Access to web-based Internet graphs
- Customer portal that provides online bill access

Customer will provide:

- For installation during business hours (8am to 4pm, Monday - Friday). If conversion is required outside of normal business hours, a \$500 fee will apply
- Minimum of 2'x2' wall space at each location for mounting equipment
- Management and support of all equipment required beyond Ethernet hand-off of Internet service

Conversion Process:

- Operations technicians perform a detailed customer premise Site Survey for voice requirements and compare these findings with the Customer Service Records from your existing carriers. In the event there are discrepancies, these are relayed back to the Sales/ Customer Relations representatives in order to proactively resolve prior to the conversion.
- Cut-over dates are coordinated through our Network Operations Center with your current carrier to ensure a smooth transfer of services.
- Northland's Network Operations Center coordinates with you to determine the proper date and time for conversion of service. Conversion can take place during business hours (recommended to ensure proper testing can take place) or after-hours should your organization prefer. (There is a \$500.00 fee for scheduled conversions outside Northland's business hours of 8am to 4pm, Monday - Friday.)



PALLIATECH™

ReliefCenters™

MANUFACTURING TIMELINE



Attachment L – Manufacturing Timeline

Manufacturing Timeline Executive Summary

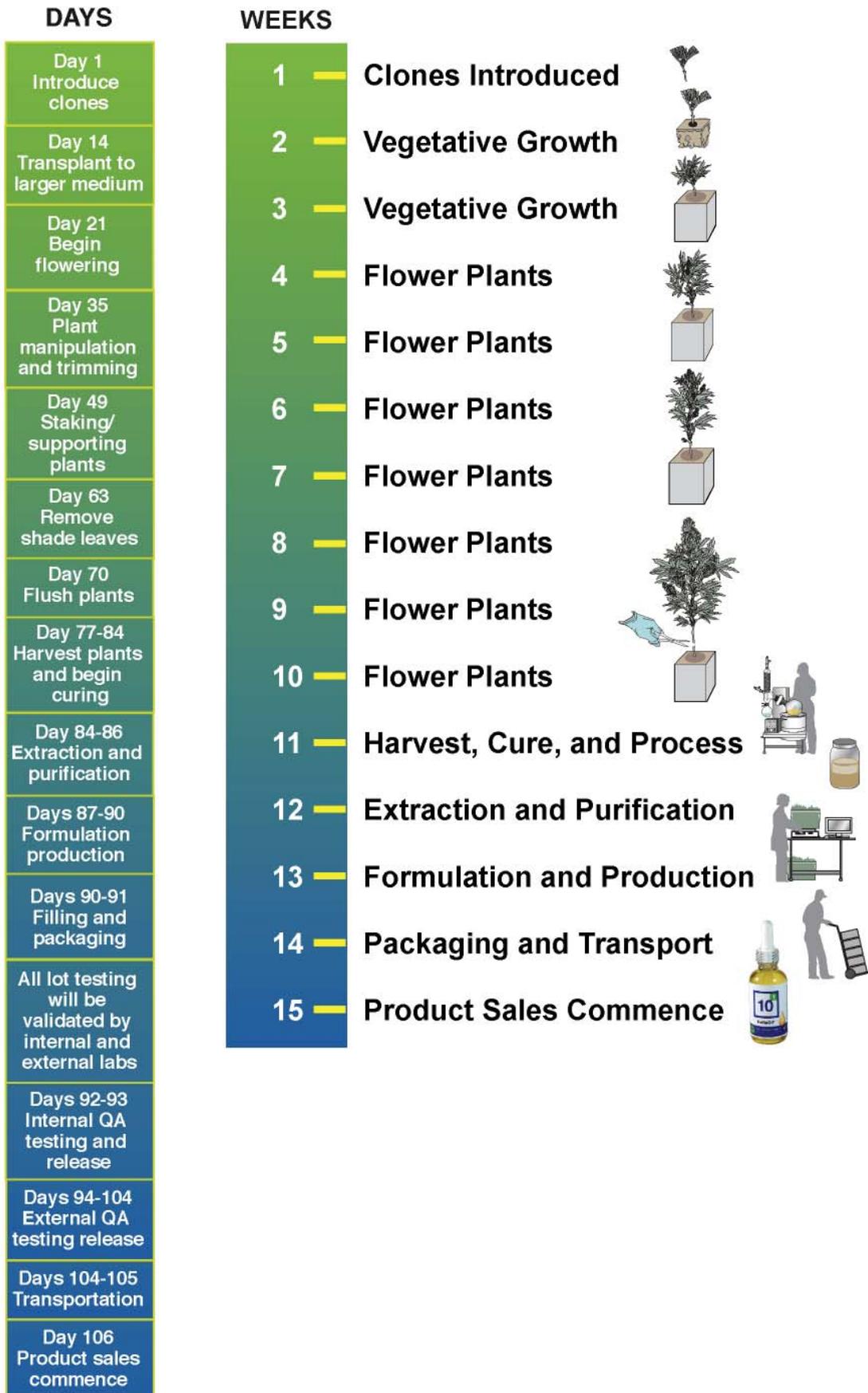
Production of final medical *Cannabis* product from planting to finished product will take 15 weeks. The process begins with initial plant cultivation. Clones will be introduced into the facility, and then require two weeks to be ready for flowering. Plants are then transferred to the next stage of their development, the flowering stage of their lifecycle. They are left to flower for seven weeks, at which time the plants are then harvested. Harvested plants are then dried and processed. The harvesting, drying and processing of the *Cannabis* flower feed stock takes one week.

Once the harvesting and processing phase is complete, the feed stock material is ready for the extraction process, which takes three days. Essential oils are extracted from the plant material feedstock using super critical CO₂ extraction methods, which yields extracted oils for further processing and purification. The purification process is a four-day process for the initial lot size. Purification involves a series of steps to remove the impurities and waxes that are present in the extracted oil. Purified extract is further processed through fractionation into pure individual cannabinoids. The purified extract and cannabinoids are then formulated in specific ratios according to the specific medicinal brand being produced.

The final production process is then initiated, which takes between three and five days, depending on the particular medicinal marijuana product being produced. Filling and manufacturing lines are run to produce the final medicinal marijuana products that are now ready for packaging and labeling.

After packaging and labeling are completed, the product is sent to the transportation department where it is prepared for shipment to the designated dispensary according to our strict transportation protocols. Transport requires one day for delivery, receiving and inventorying of the finished medical marijuana products, which is then ready for sale to state registered patients.

This process repeats itself on a repeating two-week cycle basis, which results in a new lot of products being released for transport and sale every two weeks.





THE ASSEMBLY
STATE OF NEW YORK
ALBANY

ANDREW P. RAIA
Assemblyman 12th District

DEPUTY MINORITY WHIP
RANKING MINORITY MEMBER
Committee on Health

COMMITTEES
Banks
Environmental Conservation
Housing
Rules

May 28, 2015

MINORITY REPRESENTATIVE
Legislative Council on
Health Care Financing

Howard A. Zucker, M.D, J.D.
Commissioner
NYS Department of Health
Corning Tower, Empire State Plaza
Albany, NY 12237

RE: PalliaTech NY LCC Application for New York Medical Marijuana Program

Dear Commissioner Zucker,

I am writing to you in support of the Organization Registration Application for the New York State Medical Marijuana Program submitted to the Department of Health by the New York-based company PalliaTech LLC.

During the next few years, the Department of Health will likely review the applications of many organizations and businesses seeking to become Registered Organizations under the New York Medical Marijuana Program. However, few applications will reflect a business which is more qualified to provide quality pharmaceutical-standard medicines to patients than PalliaTech.

With their qualified team of medical professionals, business executives, and pharmacology experts, PalliaTech has proven their ability to meet the growing demands of New York State patients, and the protocols of the Compassionate Care Act. PalliaTech has positioned itself to meet the operational needs and timelines of the program, and has worked tirelessly to ensure the successful delivery of quality treatments to New York patients. Not only was PalliaTech the developer of an FDA-standard medical device for metered, single-dose administration of vaporized medical Cannabis, but also stood as the leading advocate of the medical model of Cannabis care adopted in New York State. Additionally, PalliaTech is an experienced operator of Medical Cannabis facilities and laboratories, currently providing their services to four other states around the country.

In short, I believed PalliaTech has aligned their business model with the mission of the Compassionate Care Act, and I have no doubt of their ability to succeed under program guidelines. Please accept this letter as my strong support for PalliaTech's application for registration under the New York State Medical Marijuana Program. If you have any questions for me personally, please feel free to contact my office directly.

Sincerely,

Andrew P. Raia
Member of Assembly



ONEIDA COUNTY
OFFICE OF THE COUNTY EXECUTIVE

ANTHONY J. PICENTE, JR.
County Executive
ce@ocgov.net

June 4, 2015

Howard A. Zucker, M.D., J.D.
Commissioner
Department of Health, State of New York
Corning Tower, Empire State Plaza
Albany, NY 12237

Dear Commissioner Zucker:

I am writing in support of PalliaTech (www.palliatech.com) as an applicant to become a registered organization in the New York Medical Marijuana Program (MMP).

PalliaTech is a New York-based company founded to bring pharmaceutical-standard medicines and forms of administration to patients with serious diseases and conditions that can be treated with medical *Cannabis*. The company takes a medicinal and scientific approach to growing, manufacturing, distributing, dispensing, laboratory testing and securing cannabinoid medicines.

Led by a team of professionals with extensive healthcare, pharmacology, medical device and business experience, PalliaTech is uniquely qualified to meet the letter and spirit of the law, comprising the New York Compassionate Care Act and the implementing MMP regulations.

PalliaTech believes that New York has set a national standard for the safe and effective administration of medical *Cannabis*. I believe that the company can contribute to making the MMP a successful program in keeping with the legislative intent of the Compassionate Care Act.

I urge you to give PalliaTech's application your full and favorable consideration.

Best regards,

Anthony J. Picente Jr.
Oneida County Executive

PHIL BOYLE
SENATOR, 4TH DISTRICT
COMMITTEE CHAIRPERSON
COMMERCE, ECONOMIC DEVELOPMENT
AND SMALL BUSINESS



THE SENATE
STATE OF NEW YORK
ALBANY 12247

COMMITTEES
CODES
CONSUMER PROTECTION
HOUSING, CONSTRUCTION AND
COMMUNITY DEVELOPMENT
LOCAL GOVERNMENT
RACING, GAMING AND WAGERING

June 2, 2015

Department of Health, State of New York
Attn: Howard A. Zucker, M.D. J.D.
Corning Tower, Empire State Plaza
Albany, NY 12237

Re: PalliaTech NY LLC Application for Registration in Medical Marijuana Program

Dear Commissioner Zucker,

I write in support of PalliaTech as an applicant to become a registered organization in the New York Medical Marijuana Program (MMP).

PalliaTech is a New York-based company founded to bring pharmaceutical-standard medicines and forms of administration to patients with serious diseases and conditions that can be treated with medical Cannabis. As the Chairman of the Senate Committee on Commerce, Economic Development, and Small Business, I am confident that PalliaTech will promote job growth and economic development on Long Island and through the State of New York. Importantly, PalliaTech is interested in locating a facility in New York State's Fourth Senate District, which I represent.

PalliaTech is led by a team of professionals with extensive healthcare, pharmacology, medical device, and business experience. PalliaTech is uniquely qualified to implement the MMP regulations. This company is an experienced operator of medical marijuana facilities and a testing laboratory in New Jersey, Illinois, Colorado, and Montana. I believe that this company will contribute to making the MMP a successful program and efficiently assist countless New Yorker's in receiving the Medical Marijuana they require.

Again, I respectfully request that you give PalliaTech's application your full consideration. Please do not hesitate to contact me in my District office at (631) 665-2311 or, more directly, at pboyle@nysenate.gov if you would like to discuss this matter.

Sincerely,

A handwritten signature in black ink that reads "Phil Boyle".

Phil Boyle
Member of the Senate
PB/mr



ANTHONY J. BRINDISI
119th Assembly District

THE ASSEMBLY
STATE OF NEW YORK
ALBANY

CHAIR
Subcommittee on
Volunteer Emergency Services

COMMITTEES
Economic Development, Job Creation,
Commerce and Industry
Higher Education
Aging
Energy
Veterans' Affairs
Local Governments

May 19, 2015

Howard A. Zucker, M.D., J.D.
Commissioner
Department of Health, State of New York
Corning Tower, Empire State Plaza
Albany, NY 12237

Dear Commissioner Zucker:

I am writing in support of PalliaTech (www.palliatech.com) as an applicant to become a registered organization in the New York Medical Marijuana Program (MMP).

PalliaTech is a New York-based company founded to bring pharmaceutical-standard medicines and forms of administration to patients with serious diseases and conditions that can be treated with medical *Cannabis*. The company takes a medicinal and scientific approach to growing, manufacturing, distributing, dispensing, laboratory testing and securing cannabinoid medicines.

Led by a team of professionals with extensive healthcare, pharmacology, medical device and business experience, PalliaTech is uniquely qualified to meet the letter and spirit of the law, comprising the New York Compassionate Care Act and the implementing MMP regulations:

- An experienced operator of medical *Cannabis* facilities and a testing laboratory in New Jersey, Illinois, Colorado and Montana;
- The developer of an FDA-standard medical device for metered, single-dose administration of vaporized medical *Cannabis*, as mandated by the MMP;
- The leading advocate of the medical model of *Cannabis* care adopted in New York;
- Is well positioned to meet the operational timelines established by the program.

PalliaTech believes that New York has set a national standard for the safe and effective administration of medical *Cannabis*. I believe that the company can contribute to making the MMP a successful program in keeping with the legislative intent of the Compassionate Care Act.

I urge you to give PalliaTech's application your full and favorable consideration.

Sincerely,


Anthony Brindisi
Member of Assembly



THE ASSEMBLY
STATE OF NEW YORK
ALBANY

HARRY B. BRONSON
Assemblymember
138th District

CHAIR
Commission on Skills Development
and Career Education

COMMITTEES
Agriculture
Economic Development, Job Creation,
Commerce and Industry
Labor
Local Governments
Steering
Transportation

May 28, 2015

Howard A. Zucker, M.D., J.D.
Commissioner
New York State Department of Health
Albany, NY 12237

**Re: Letter in Support of PalliaTech NY LLC Application for Registration as a
Registered Organization in the Medical Marijuana Program**

Dear Commissioner Zucker:

I am writing in support of PalliaTech (www.palliatech.com) as an applicant to become a registered organization in the New York Medical Marijuana Program (MMP).

PalliaTech is a New York-based company founded to bring pharmaceutical-standard medicines and forms of administration to patients with serious diseases and conditions that can be treated with medical Cannabis. The company takes a medicinal and scientific approach to growing, manufacturing, distributing, dispensing, laboratory testing and securing cannabinoid medicines.

Led by a team of professionals with extensive healthcare, pharmacology, medical device and business experience, PalliaTech is uniquely qualified to meet the letter and spirit of the law comprising the New York Compassionate Care Act and the implementing MMP regulations. PalliaTech is an experienced operator of medical Cannabis facilities and a testing laboratory in New Jersey, Illinois, Colorado and Montana and the developer of an FDA-standard medical device for metered, single-dose administration of vaporized medical Cannabis, as mandated by the MMP. They are a leading advocate of the medical model of Cannabis care adopted in New York and well positioned to meet the operational timelines established by the program.

PalliaTech believes that New York has set a national standard for the safe and effective administration of medical Cannabis. I believe that the company can contribute to making the MMP a successful program in keeping with the legislative intent of the Compassionate Care Act.

I urge you to give PalliaTech's application every appropriate consideration.

Sincerely,

Harry B. Bronson
Member of Assembly

TOWN OF CHAZY PLANNING BOARD

P.O. Box 219

Chazy, New York 12921

May 19, 2015

Mr. Podd,

This letter is to inform you that the Town of Chazy Planning Board approved your Application No. 2015-003. Enclosed are copies of the signed approvals from the Town of Chazy Planning Board and Clinton County, as well as the completed Environmental Assessment Form.



Heather Giuliano
Planning Board Secretary
Town of Chazy

TOWN OF CHAZY
APPLICATION TO PLANNING BOARD

For Zoning Enforcement Officer's Use:

PLANNING BOARD NO. 2015-003

DATE RECEIVED: 4/7/15

Application for: Map No. 78.- Block No. 1 Parcel No. 13.1

RECEIVED
APR 7 2015
BY: [Signature]

1. Applicant's Name: Northstar 41 LLC
Address: 1 Lincoln Boulevard
City, State, Zip: Rouses Point, NY 12979

2. Attach three (3) copies of a site plan map, drawn to scale, which include:
- (A) Title of drawing, including name and address of applicant and person responsible for preparation of such drawing;
 - (B) North arrow, scale and date;
 - (C) Boundaries of the property plotted to scale;
 - (D) Existing water-courses and bodies of water;
 - (E) Location of any slopes of 5% or greater;
 - (F) Proposed grading and drainage;
 - (G) Location, proposed use and height of all buildings and site improvements including culverts, drains, retaining walls and fences;
 - (H) Location, design and construction materials of all parking and truck loading areas showing points of entry and exit from the site;
 - (I) Location of outdoor storage, if any;
 - (J) Description of the method of sewage disposal and location of the facilities;
 - (K) Identification of water sources; if well, location;
 - (L) Location, size and design and construction materials of all proposed signs;
 - (M) Location and proposed development of all buffer areas, including existing vegetative cover;
 - (N) Location and design of outdoor lighting facilities;
 - (O) If required by the zoning law, a landscaping plan designed to screen neighboring Residential properties from adverse visual impacts.

3. Complete Page 1 of the attached Short Environmental Assessment Form.

4. Attach any pertinent certification or approvals by other agencies.

FOR PLANNING BOARD USE:

This application has been deemed to be completed on:

Date: 5/18/15

[Signature]
Signature of Chairman

This application is: Approved
 Approved with modifications or conditions
 Disapproved

Modifications, conditions or reasons for disapproval:

[Signature]
Chairman, Town of Chazy
Planning Board

Date: 5/18/15

18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____	NO	YES
_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____	NO	YES
_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____	NO	YES
_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE Applicant/sponsor name: <u>Sedner Road Northstar 41 LLC</u> Date: <u>4/3/2015</u> Signature: _____		

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing: a. public / private water supplies? b. public / private wastewater treatment utilities?	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

	No, or small impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action create a hazard to environmental resources or human health?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.

Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.

Town of Chazy Planning Board 6/18/15
 Name of Lead Agency Date

Gina Fazio Gratton Chairwoman
 Print or Type Name of Responsible Officer in Lead Agency Title of Responsible Officer

Gina Fazio Gratton _____
 Signature of Responsible Officer in Lead Agency Signature of Preparer (if different from Responsible Officer)

PRINT

RESET

**TOWN OF CHAZY
OFFICE OF TOWN CLERK**

(518) 846-7544 Ext. 2

9631 Rte 9
PO Box 219
Chazy, New York 12921-0219

Fax: (518) 846-8981

May 18, 2015

CERTIFICATION

STATE OF NEW YORK)
COUNTY OF CLINTON) SS:
TOWN OF CHAZY)

This is to certify that I, the undersigned, Clerk of the Town of Chazy have compared the foregoing of the Medical Marijuana Resolution - #15-65 dated 5/11/2015 with the original now on file, and that the same is a correct and true transcript of such original docket and of the whole thereof.

IN WITNESS WHEREOF, I have hereunto set my hand the official seal of the Town of Chazy this May 18, 2015.



Philip F. Beauharnois
Town Clerk



RESOLUTION MEDICAL MARIJUANA

Resolution: 15-65 05/11/2015

Motion by: Councilor Cathy Devins

WHEREAS, on July 5, 2014, Governor Cuomo signed into law the New York Medical Marijuana Law; and

WHEREAS, the New York State Department of Health has established specific regulations under which businesses are licensed as Registered Organizations for medical marijuana cultivation, production and sale; and

WHEREAS, the American Nurses Association, American Academy of Family Physicians, Lymphoma Foundation of America, American Preventive Medical Association, American Public Health Association, Gray Panthers, and the New England Journal of Medicine have endorsed the medical use of marijuana; and

WHEREAS, New York State Licensed Registered Organizations provide skilled and living wage jobs; and

WHEREAS, The town of Chazy will receive a portion of Clinton County's 22.5% share of all excise tax collected from the activities of growing medical marijuana; and

WHEREAS, the 386,000 square foot Northstar Technology Center, located in the Town of Chazy is ideally situated and equipped for the production of medical marijuana, it's downstream processing and ancillary services and its owners are actively seeking to locate licensed growers at said location of 641 Ridge Road, Chazy, New York; and

Now therefore, it is hereby RESOLVED; in accordance with the request therefore, the Chazy Town Board supports New York Assembly Bill 6357 signed into law by Governor Andrew Cuomo on July 5, 2014; and it is further

RESOLVED: that the Town of Chazy welcomes and encourages appropriately licensed, registered and regulated medical marijuana businesses, including cultivation, and processing facilities at the Northstar Technology Center, 641 Ridge Road, Chazy, New York; and it is further

RESOLVED; that the Town of Chazy's current laws and codes do not prohibit medical marijuana businesses, including cultivation or processing facilities from locating at the Northstar Technology Center.

Seconded by: Councilor Jerry Deno

Discussion: Yes

	<u>Yes</u>	<u>No</u>
Roll Call: Willie Giroux	x	
Jerry Deno	x	
Cathy Devins	x	
Daniel Vesco	x	
Mark Henry	x	

Carried: YES

RESOLUTION #395 – 05/27/15

SUPPORTING THE MEDICAL MARIJUANA STATUTE AND LOCATING A PROCESSING AND DISPENSING FACILITY WITHIN CLINTON COUNTY – LEGISLATURE

BY: Mr. Hall

WHEREAS, on July 7, 2014, Governor Cuomo signed into law, Chapter 90 of 2014 titled the Compassionate Care Act, and in so doing, created New York State’s first medical marijuana program; and

WHEREAS, the New York State Department of Health has established specific regulations under which businesses are licensed as Registered Organizations for medical marijuana cultivation, production and sale; and

WHEREAS, several reputable organizations including the American Nurses Association, American Academy of Family Physicians, Lymphoma Foundation of America, American Preventive Medical Association, American Public Health Association, Gray Panthers, and the New England Journal of Medicine have endorsed the medical use of marijuana; and

WHEREAS, licensed Registered Organizations under this program would provide skilled and living wage jobs and enhance the economy of the region in which it is located; and

WHEREAS, the Clinton County Legislature is aware of two legitimate applicants seeking to be selected as a Registered Organization that would locate both a medical marijuana manufacturing facility and a dispensary within Clinton County; and

WHEREAS, should one of these applicants become a Registered Organization, Clinton County would realize a revenue stream as outlined in the statute; now, therefore,

BE IT RESOLVED, the Clinton County Legislature hereby supports New York State’s medical marijuana statute and the locating of a processing facility and a dispensary within Clinton County.

SECONDED BY: Mr. Read
ADOPTED

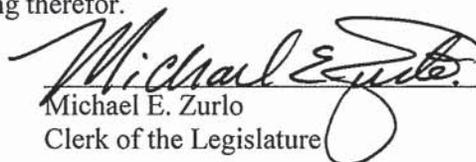
“Yes”	10
“No”	0
Absent	0

STATE OF NEW YORK)
COUNTY OF CLINTON) SS:
LEGISLATIVE CHAMBERS)

I HEREBY CERTIFY, that the foregoing is a true copy of a resolution acted upon by the County Legislature in Regular Session on May 27, 2015.

A quorum being present, and a majority voting therefor.

(SEAL)


Michael E. Zurlo
Clerk of the Legislature



CLINTON COUNTY PLANNING DEPARTMENT

135 Margaret Street, Suite 124 · Plattsburgh, New York 12901-2980
Planning (518) 565-4711 • C.A.R.T. (518) 565-4713 • Facsimile (518) 565-4885

CLINTON COUNTY PLANNING BOARD DECISION ON 239M REFERRAL

TO: Town of Chazy

REFERRAL NUMBER: 23-15

SUBJECT: Town of Chazy, Applicant North Star 41 LLC, Special Permit for Medical Marijuana Farm, 641 Ridge Road.

The following action was taken by the Clinton County Planning Board regarding this zoning referral, in compliance with New York State General Municipal Law, Article 12B, Section 239M. This decision is not binding upon the local municipality, but may impact the local board's voting requirements to act contrary to the County decision. A County Decision of Disapproval or Approval With Modifications may only be overturned by the local municipal board by a majority plus one vote of the full membership of the board (4 votes for 5 member board, 5 votes for 7 member board).

DATE OF COUNTY ACTION:

5/6/15

ACTION TAKEN ON REFERRAL:

APPROVAL

APPROVAL WITH MODIFICATION

DISAPPROVAL

LOCAL ISSUE

SEE ENCLOSED COMMENTS REGARDING THIS REFERRAL

VOTE RECORDED:

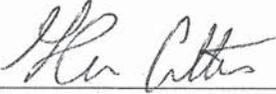
6 YES

0 NO

4 ABSENT

1 ABSTAINED

5/8/15
DATE


CLINTON COUNTY PLANNING DEPARTMENT

PLEASE RETURN A COPY OF THE FINAL DECISION BY YOUR BOARD TO THE CLINTON COUNTY PLANNING DEPARTMENT WITHIN 30 DAYS OF DECISION.

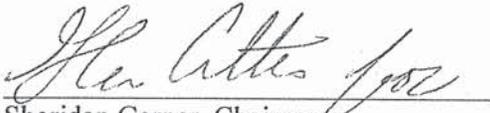
Clinton County Planning Board
135 Margaret St, Suite 124
Plattsburgh, NY 12901

May 7, 2015

Decision Regarding Referral 23-15, Town of Chazy, Applicant Northstar 41 LLC, Special Permit for Medical Marijuana Plan, 641 Ridge Rd.

The Clinton County Planning Board, at its May 6, 2015 meeting, voted 6-1 to Approve this request, but to provide the following comments to the Town / Applicant:

The proposed use should also involve the Clinton County Health Department regarding water and sewer requirements / permits.


Sheridan Garner, Chairperson

cc: County Planning Department Files



OFFICE OF THE BROOKLYN BOROUGH PRESIDENT

ERIC ADAMS
President

6/4/2015

Howard A. Zucker, M.D., J.D.
Commissioner
New York State Department of Health
Corning Tower, Empire State Plaza
Albany, NY 12237

Re: Letter in Support of Medical Marijuana Dispensaries in Brooklyn

Dear Commissioner Zucker:

I am writing in support of the Medical Marijuana Program (MMP) created under the provisions of the New York Compassionate Care Act to bring pharmaceutical-standard medicines and forms of administration to patients with serious diseases and conditions.

With passage of the Compassionate Care Act and the promulgation of implementing regulations, I believe that New York has created a safe and effective program for the administration of medical Cannabis. I also believe that Brooklyn would be an ideal site in which to locate a medical marijuana dispensary under the MMP.

A number of applicants for a license to become a registered organization under the MMP have approached this office eager to locate in Brooklyn. I urge the Department to act favorably upon applicants who plan to open and operate medical marijuana dispensaries within Brooklyn. As the most populous and centrally-located Borough of the City of New York—easily accessible by numerous modes of transportation—locating dispensaries here would ensure access to medical marijuana for NYC-based certified patients. In addition, the operation of such dispensaries in Brooklyn would enhance my Administration's local economic development goals by producing a number of high-quality and good-paying jobs for my residents.

I urge you to give your full and favorable consideration to qualified applications that would locate a medical marijuana dispensary within the confines of the Borough of Brooklyn. Thank you for your consideration in this matter. If you have any questions, please contact my policy director Ryan Lynch at 718.802.3849 or ryanlynch@brooklynbp.nyc.gov.

Sincerely,

Eric L. Adams
Brooklyn Borough President

ELA/rl

COMMITTEE CHAIRMAN
ENERGY & TELECOMMUNICATIONS
MEMBER
CODES
COMMERCE, ECONOMIC DEVELOPMENT
& SMALL BUSINESS
CRIME VICTIMS, CRIME AND CORRECTION
CULTURAL AFFAIRS, TOURISM, PARKS & RECREATION
FINANCE
HIGHER EDUCATION
RACING, GAMING & WAGERING
VETERANS, HOMELAND SECURITY & MILITARY AFFAIRS
SELECT COMMITTEE ON
SCIENCE, TECHNOLOGY, INCUBATION & ENTREPRENEURSHIP



THE SENATE
STATE OF NEW YORK
JOSEPH A. GRIFFO
SENATOR, 47TH DISTRICT

ALBANY OFFICE:
ROOM 612
LEGISLATIVE OFFICE BUILDING
ALBANY, NEW YORK 12247
PHONE: (518) 495-3334
FAX: (518) 426-6921

UTICA OFFICE:
207 GENESSEE STREET
UTICA, NEW YORK 13501
PHONE: (315) 793-9072
FAX: (315) 793-0298

EMAIL ADDRESS:
griffo@ny.senate.gov

May 29, 2015

Howard A. Zucker, M.D., J.D.
Commissioner
Department of Health, State of New York
Corning Tower, Empire State Plaza
Albany, NY 12237

Dear Commissioner Zucker:

I write in support of PalliaTech as an applicant to become a registered organization in the New York Medical marijuana Program (MMP).

PalliaTech is a New York-based company founded to bring pharmaceutical-standard medicines and forms of administration to patients with serious diseases and conditions that can be treated with medical *Cannabis*. The company takes a medicinal and scientific approach to growing, manufacturing, distributing, dispensing, laboratory testing and securing cannabinoid medicines.

Led by a team of professionals with extensive healthcare, pharmacology, medical device and business experience, PalliaTech is qualified to meet the letter and spirit of the law, comprising the New York Compassionate Care Act and the implementing MMP regulations.

PalliaTech believes the New York has set a national standard for the safe and effective administration of medical Cannabis in keeping with the intent of the Compassionate Care Act.

I hope you give PalliaTech's application your consideration.

Sincerely,

A handwritten signature in black ink that reads "Joseph A. Griffo".

Joseph A. Griffo
Senator

CHAIRMAN
LABOR
COMMITTEES
FINANCE
HEALTH
INSURANCE
BANKS
CIVIL SERVICE & PENSIONS
CORPORATIONS, AUTHORITIES
& COMMISSIONS
SELECT COMMITTEE ON LIBRARIES
SOCIAL SERVICES
TRANSPORTATION

THE SENATE
STATE OF NEW YORK



JACK M. MARTINS
SENATOR
7TH DISTRICT

ALBANY OFFICE
ROOM 915
LEGISLATIVE OFFICE BUILDING
ALBANY, NEW YORK 12247
PH: (518) 455-3265
FAX: (518) 426-6739
DISTRICT OFFICE
252 MINEOLA BLVD.
MINEOLA, NEW YORK 11501
PH: (516) 746-5924
FAX: (516) 746-0439

June 3, 2015

Howard A. Zucker, M.D., J.D.
Commissioner
Department of Health, State of New York
Corning Tower, Empire State Plaza
Albany, New York 12237

Re. Letter in Support of PalliaTech NY LLC Application for Registration as a Registered Organization Medical Marijuana Program

Dear Commissioner Zucker:

I am writing in support of PalliaTech (www.palliatech.com) as an applicant to become a registered organization in the New York Medical Marijuana Program (MMP).

PalliaTech is a New York-based company founded to bring pharmaceutical-standard medicines and forms of administration to patients with serious diseases and conditions that can be treated with medical Cannabis. The company takes a medicinal and scientific approach to growing, manufacturing, distributing, dispensing, laboratory testing and securing cannabinoid medicines.

It's my understanding that PalliaTech is led by a team of professionals with extensive healthcare, pharmacology, medical device and business experience, and that it is well qualified to meet the letter and spirit of the law, comprising the New York Compassionate Care Act and implementing MMP regulations:

- An experienced operator of medical Cannabis facilities and a testing laboratory in New Jersey, Illinois, Colorado, and Montana;
- The developer of an FDA-standard medical device for metered, single-dose administration of vaporized medical Cannabis, as mandated by the MMP;
- The leading advocate of the medical model of Cannabis care adopted in New York;
- Is well positioned to meet the operational timelines established by the program.

New York has set a national standard for the safe and effective administration of medical Cannabis. PalliaTech can contribute to making the Medical Marijuana Program successful, in keeping with the legislative intent of the Compassionate Care Act.

I urge you to give PalliaTech's application your consideration.

Sincerely,

A handwritten signature in black ink, appearing to read "Jack M. Martins". The signature is written in a cursive style with a large, stylized initial "J".

JACK M. MARTINS
Senator



JANET L. DUPREY
Assemblywoman 115th District
Clinton, Franklin, St. Lawrence Counties

THE ASSEMBLY
STATE OF NEW YORK
ALBANY

RANKING MINORITY MEMBER
Committee on Governmental Operations

COMMITTEES
Correction
Higher Education
Rules
Ways and Means

May 26, 2015

Howard A. Zucker, M.D., J.D.
Commissioner
Department of Health, State of New York
Corning Tower, Empire State Plaza
Albany, NY 12237

Re: PalliaTech NY LLC

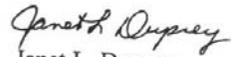
Dear Commissioner Zucker,

I am pleased to support the PalliaTech application to become a registered organization in the New York Medical Marijuana Program. Based on the facts I have been provided, PalliaTech is an experienced operator of medical Cannabis facilities and a testing laboratory in four other states.

PalliaTech has a proposed lease agreement to grow medical marijuana in a former pharmaceutical research facility located in the Town of Chazy in my Assembly District. The reuse of this facility fits well in the state's program of economic development and job creation in a small rural community that has lost jobs and real property tax revenue. The Town of Chazy and the William H. Miner Agricultural Research Institute, SUNY Plattsburgh educational and research facility located on adjacent property, are supporting PalliaTech's application.

I request you give consideration to the benefit of a North Country growth facility when reviewing the PalliaTech application. Thank you.

Sincerely,


Janet L. Duprey
Member of Assembly

JLD/cak

ELIZABETH O'C. LITTLE
SENATOR, 45TH DISTRICT

ROOM 310
LEGISLATIVE OFFICE BLDG.
ALBANY, NY 12247
(518) 455-2811
5 WARREN STREET
GLENS FALLS, NY 12801
(518) 743-0968
WEB ADDRESS:
LITTLE.NYSENATE.GOV



THE SENATE
STATE OF NEW YORK

CHAIR
CULTURAL AFFAIRS, TOURISM,
PARKS & RECREATION
COMMITTEES
CRIME VICTIMS, CRIME & CORRECTION
EDUCATION
ENERGY & TELECOMMUNICATIONS
ENVIRONMENTAL CONSERVATION
FINANCE
HEALTH
RULES

May 28, 2015

Howard A. Zucker, M.D., J.D.
Commissioner
Department of Health, State of New York
Corning Tower, Empire State Plaza
Albany, New York 12237

Dear Commissioner Zucker:

I am writing in support of PalliaTech (www.palliatech.com), one of four in the 45th Senate District, wishing to become a registered organization in the New York Medical Marijuana Program (MMP).

PalliaTech is a New York-based company founded to bring pharmaceutical-standard medicines and forms of administration to patients with serious diseases and conditions that can be treated with medical Cannabis. The company takes a medicinal and scientific approach to growing, manufacturing, distributing, dispensing, laboratory testing and securing cannabinoid medicines.

Led by a team of professionals with extensive healthcare, pharmacology, medical device and business experience, PalliaTech is uniquely qualified to meet the letter and spirit of the law, comprising the New York Compassionate Care Act and the implementing MMP regulations.

New York has set a national standard for the safe and effective administration of medical Cannabis. I believe this company can contribute to making MMP a successful program in keeping with the legislative intent of the Compassionate Care Act.

It is my sincere hope that at least one of the five growing licenses is awarded to one of the companies in Clinton, Washington, Warren or Franklin Counties.

Sincerely,

A handwritten signature in cursive script that reads "Elizabeth O'C. Little".

Elizabeth O'C. Little
Senator



May 11, 2015

Northstar Private Capital, LLC
Attn: Stephen Podd, President
One Lincoln Boulevard
Rouses Point, New York 12979

Dear Mr. Podd:

Home of:

North Country
Small Business
Council

Adirondack Coast
Visitors & Convention
Bureau

North Country
Industrial Council

Québec-New York
Corridor Coalition

New York's
Tech Valley

S.C.O.R.E.

Essex County
Business Council

Plattsburgh-
North Country
Service Corp.

Serving:

Clinton
Essex
Franklin
Warren
Hamilton
Southern Québec

As you know, the North Country Chamber of Commerce is the largest business and economic development organization in northern New York, representing more than 4,200 employers across five counties. The future of the former Pfizer research facilities at Chazy have been a keen interest and economic development priority for us since their closure by Pfizer, and we were pleased to have been able to play a leading role in facilitating their preservation with support from Empire State Development and Governor Cuomo, resulting in your acquisition of the site for positive redevelopment.

As we have discussed in the past, the unique nature of the former vivarium facilities makes them a very logical candidate for the potential production of pharma grade products from marijuana.

With the foregoing in mind, we are pleased that a substantial portion of the site is being proposed to house the production operations of Pallia Tech New York, and we are certainly supportive of this potential reuse of the Chazy facilities, fulfilling in part the state's intention that the site see appropriate and positive reuse.

We are pleased to support and call for the siting of one of the state's medical marijuana production and dispensing operations in the North Country, and we are fully committed to the success of such a venture here in terms of workforce recruitment and training and other ingredients for success.

Onward and upward!

Sincerely,

Garry Douglas
President and CEO



ACCREDITED
U.S. CHAMBER OF COMMERCE



A Strong Partner for Strong Business in the North Country

P.O. Box 310, 7061 Rt. 9, Plattsburgh, NY 12901-0310 Tel: 518-563-1000 Fax: 518-563-1028
Email: chamber@westelcom.com Web Site: northcountrychamber.com
Lake Placid Office: 216 Main St., Lake Placid, NY 12946 Tel: 518-523-4906 Fax: 518-523-2605



THE CITY OF UTICA

OFFICE OF THE MAYOR
1 KENNEDY PLAZA • UTICA, NEW YORK 13502

ROBERT M. PALMIERI
Mayor

Phone: 315-792-0100
Fax: 315-734-9250
e-mail: mayor@cityofutica.com

June 1, 2015

Howard A. Zucker, M.D., J.D.
Commissioner
Department of Health, State of New York
Corning Tower, Empire State Plaza
Albany, NY 12237

Re: Letter in Support of PalliaTech NY LLC
Application for Registration as a Registered Organization
Medical Marijuana Program

Dear Commissioner Zucker:

I'm writing in regards to the Compassionate Care Act and to express my support for PalliaTech an applicant to become a registered organization in the New York Medical Marijuana Program (MMP).

While the City of Utica has made great strides over the past three years to improve its financial standing, the challenge of many upstate City's in achieving financial sustainability is real. Welcoming new businesses to our community like PalliaTech, would create good paying jobs and help us to achieve that financial sustainability.

In addition, this business will undoubtedly help our local economy and the economies of the greater Utica area.

I respectfully request you give PalliaTech's application your full and favorable consideration.

If you have any questions please don't hesitate to contact my office at 315-792-0100 x3 or via e-mail at mayor@cityofutica.com.

Sincerely,

Robert M. Palmieri
Mayor
City of Utica

FRANK K. SKARTADOS
Assemblyman 104th District

Dutchess, Orange, and
Ulster Counties

**THE ASSEMBLY
STATE OF NEW YORK**



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Development and Farmland Protection

June 2, 2015

Commissioner Howard A. Zucker, M.D., J.D.
Commissioner
Department of Health, State of New York
Corning Tower, Empire State Plaza
Albany, NY 12237

Re: Letter in Support of PalliaTech NY LLC
Application for Registration as a Registered Organization
Medical Marijuana Program

Dear Commissioner Zucker:

I am writing in support of PalliaTech (www.palliatech.com) as an applicant to become a registered organization in the New York Medical Marijuana Program (MMP).

PalliaTech is a New York-based company founded to bring pharmaceutical-standard medicines and forms of administration to patients with serious diseases and conditions that can be treated with medical *Cannabis*. The company takes a medicinal and scientific approach to growing, manufacturing, distributing, dispensing, laboratory testing and securing cannabinoid medicines.

Led by a team of professionals with extensive healthcare, pharmacology, medical device and business experience, PalliaTech is uniquely qualified to meet the letter and spirit of the law, comprising the New York Compassionate Care Act and the implementing MMP regulations:

- An experienced operator of medical *Cannabis* facilities and a testing laboratory in New Jersey, Illinois, Colorado and Montana;
- The developer of an FDA-standard medical device for metered, single-dose administration of vaporized medical *Cannabis*, as mandated by the MMP;
- The leading advocate of the medical model of *Cannabis* care adopted in New York;
- Is well positioned to meet the operational timelines established by the program.

PalliaTech believes that New York has set a national standard for the safe and effective administration of medical *Cannabis*. I believe that the company can contribute to making the MMP a successful program in keeping with the legislative intent of the Compassionate Care Act.

I urge you to give PalliaTech's application your full and favorable consideration.

Best regards,

A handwritten signature in black ink, appearing to read "Frank Skartados". The signature is written in a cursive style with a large initial "F" and "S".

Frank Skartados
104th Assembly District

DISTRICT OFFICE
410 ATLANTIC AVENUE
BROOKLYN, NY 11217
(718) 875-5200
Fax: (718) 643-6620

CITY HALL OFFICE
250 BROADWAY, ROOM 1820
NEW YORK, NY 10007
(212) 788-7348
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slevin@council.nyc.gov



THE COUNCIL OF
THE CITY OF NEW YORK
STEPHEN T. LEVIN
COUNCIL MEMBER, 33rd DISTRICT, BROOKLYN

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GENERAL WELFARE

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INTERNATIONAL INTERGROUP RELATIONS
EDUCATION
ENVIRONMENTAL PROTECTION
LAND USE
TRANSPORTATION

SUB-COMMITTEE
LANDMARKS, PUBLIC SITING & MARITIME USES

June 4, 2015

Howard A. Zucker, M.D., J.D.
Commissioner
Department of Health, State of New York
Corning Tower, Empire State Plaza
Albany, NY 12237

Re: Letter in Support of PalliaTech NY LLC
Application for Registration as a Registered Organization
Medical Marijuana Program

Dear Commissioner Zucker:

I am writing to express my support of PalliaTech (www.palliatech.com) as an applicant to become a registered organization in the New York Medical Marijuana Program (MMP). PalliaTech is a New York-based company founded to bring pharmaceutical-standard medicines and forms of administration to patients with serious diseases and conditions that can be treated with medical Cannabis. The company takes a medicinal and scientific approach to growing, manufacturing, distributing, dispensing, laboratory testing and securing cannabinoid medicines.

PalliaTech is a well-established firm that has experience operating Cannabis facilities and testing laboratories in other states, including New Jersey, Illinois, Colorado and Montana. With the New York MMP continuing to roll out, I feel we would benefit from having experienced players like PalliaTech involved. I am confident that PalliaTech has the expertise and professional resources to comply with the letter and spirit of the law, comprising the New York Compassionate Care Act and the implementing MMP regulations.

I hope that you will give PalliaTech's application your full and fair consideration.

Best regards,

A handwritten signature in black ink that reads "Stephen T. Levin".

Stephen T. Levin
Council Member, 33rd District



PALLIATECH™

ReliefCenters™

ABILITY TO COMPLY



Attachment M – Ability to Comply



Advancing The Science of Palliative Care

STATEMENT OF COMPLIANCE

As President and Chief Executive Officer of PalliaTech, I hereby certify that PalliaTech is able to and will comply with all applicable state and local laws and regulations relating to the activities in which it intends to engage under the registration including, but not limited to (i) the Compassionate Care Act (Title V-a of the New York State Public Health Law) and regulations promulgated pursuant thereto (10 NYCRR Part 1004), (ii) State law concerning controlled substances (Article 33 of the Public Health Law) and regulations promulgated pursuant to these laws (10 NYCRR Part 80), and (iii) applicable local law, such as county and municipal land use and zoning laws that apply to the manufacturing and distribution facility locations. Information regarding how PalliaTech has and will comply with such laws can be found elsewhere in this application for registration, including in the sections concerning the siting of the various facilities (see Attachment C), in PalliaTech's Operating Plan (Attachment D), and in PalliaTech's security plan (Attachment H). PalliaTech is ready, willing and able to comply with all laws and regulations that apply to the privilege of serving as a registered organization in the New York Medical Marijuana Program (MMP) based on our founding mission, our people, operations and business model, processes and SOPs.

A handwritten signature in black ink, appearing to read 'R. Taney', written in a cursive style.

Richard Taney

President and Chief Executive Officer

Letters of Compliance – Resolutions

Brooklyn - Dispensary

The Honorable Eric L. Adams
Brooklyn Borough President

The Honorable Stephen P. Levin
Council Member, 33 District

Newburgh - Dispensary

The Honorable Frank K. Skartados
Assembly Member, 104 District

Utica - Dispensary

The Honorable Joseph Griffo
Senator, 47 District

The Honorable Anthony J. Brindisi
Assembly Member, 119 District

The Honorable Anthony J. Picente, Jr.
Oneida County Executive

The Honorable M. Palmieri
Mayor, City of Utica

Rochester - Dispensary

The Honorable Harry B. Bronson
Assembly Member, District 138

Chazy - Manufacturing

The Honorable Elizabeth O’C. Little
Senator, District 45

The Honorable Janet L. Duprey
Assembly Member, District 115

Resolution #395-05/27/15: Clinton County Legislature

Clinton County Planning Department: Referral Number 23-15

Resolution of Support: Town of Chazy

Application Decision: Town of Chazy Planning Board, Environmental Impact

North Country Chamber of Commerce: Garry Douglas, President & CEO

Statewide

The Honorable Phil Boyle
Senator, District 4

The Honorable Jack Martins
Senator, District 7

The Honorable Andrew P. Raia
Assembly Member, District 12