



# CANNABIS COMPLIANCE BOARD STATE OF NEVADA

ccb.nv.gov  
1550 College Parkway, Suite 142  
Carson City, Nevada 89706  
Phone: (775) 687-6299

HON. MICHAEL DOUGLAS  
*Chair*

STEVE SISOLAK  
*Governor*

Grant Sawyer Office Building, Suite 4200  
555 E. Washington Avenue  
Las Vegas, Nevada 89101

TYLER KLIMAS  
*Executive Director*

## Facility, Menu, Equipment Modification Request

Instructions: Complete and submit this form to [AuditInspections@CCB.nv.gov](mailto:AuditInspections@CCB.nv.gov)  
with the subject: "Modification of Facility."

This form is for changes to menu, equipment, infrastructure, hydroponics, lighting technology, pods or other contained growing methods; expansion, demolition, new construction, plumbing, electrical, heating, ventilation, air conditioning; changes that affect operating capability including the installation or removal of an extraction device. Some changes require inspection and approval prior to operation per NCCR 6.060. Replacements of pods that are identical to previously approved pods do not require approval. Failure to notify the Cannabis Compliance Board may be a Category III violation leading to civil penalties and/or license revocation. (NCCR 6.060; 4.050).

Date: \_\_\_\_\_ Establishment ID #s (ex: C901): \_\_\_\_\_

Establishment Name: \_\_\_\_\_

Point of Contact (POC) Name: \_\_\_\_\_

**The cannabis establishment will not make certain modifications without CCB approval.**

POC Signature (hand-signature required): \_\_\_\_\_ Date: \_\_\_\_\_

Please check the type of modification(s) and include the required documentation when submitting this form.

\_\_\_\_ Facility: Include floor plan with changes highlighted.

\_\_\_\_ Cultivation expansion: Current square footage: \_\_\_\_\_ expanding to: \_\_\_\_\_sf

\_\_\_\_ Menu: Include new menu, standard operating procedure, ingredient list.

\_\_\_\_ Equipment change: Include equipment specification sheets, locations of equipment.

Additional description if necessary:  
\_\_\_\_\_

### For Internal Use Only

Received by/date:	Approved: Yes / No
E-filed & hard copy in establishment folder: Yes/No	Approval/Denial date:
Inspection Required: Yes / No	CCB Agent Signature: