



(Oct 2024)

CERTIFICATE OF OCCUPANCY - CANNABIS ESTABLISHMENTS – PERMIT PACKET TO CHANGE, ESTABLISH OR LEGALIZE USE

+ The New York State, Office of Cannabis Management (OCM) requires selected, eligible applicants to obtain a Certificate of Occupancy to operate a Cannabis Establishment in the City of Rochester.

Per section §120-208 – DEFINITIONS CANNABIS ESTABLISHMENT

Premises used for the cultivation, processing, distribution, delivery, retail sale, or on-site consumption of cannabis in a manner that requires a license under the NYS Cannabis Law.

ADULT-USE RETAIL DISPENSARY

Adult-Use retail dispensaries are the principal license to conduct retail sales of adult-use cannabis products to consumers over twenty-one (21) years old. Retail dispensaries are allowed to acquire, possess, sell, and deliver adult-use cannabis products from their own licensed premises and licensed distributors, in addition to other select items including paraphernalia. Licensed retailers provide an environment for consumers to become informed about and purchase adult-use cannabis products grown, processed, and lab tested in New York State.

ON-SITE CONSUMPTION LOUNGES

Premises where customers are permitted to smoke, vape, or otherwise consume marijuana and marijuana products and therefore, must meet the Building and Zoning requirements for restaurants to obtain a Certificate of Occupancy.

HELPFUL INFORMATION:

- Requests involving the “use” of property will require review and approval from both the Zoning Division for compliance with the Zoning Code and the Buildings Division to determine compliance with the NYS Building Code.
- If signage is associated with a new use, a separate sign permit is required.
- CANNBIS ESTABLISHMENTS require a Business Permit.
- Plumbing or electrical work requires a separate permit by a licensed contractor.
- Based on scope of project, an instrument survey map, stamped plans, façade drawings may also be required as determined by staff.



MINIMUM SUBMISSION REQUIREMENTS:

- ✓ Completed permit application (attached)
 - ✓ Floor Plan drawn to scale (sample attached)
 - ✓ Completed Certificate of Occupancy (C of O) application (attached)
 - ✓ Insurance Certificates (information sheet attached-only if request involves work)
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HOW TO SUBMIT: Your completed permit application package can be submitted by:

- Email: Melissa.Phillips@CityofRochester.Gov
- Drop box provided at City Hall A Building lobby
- Mail: The Bureau of Zoning & Permitting
30 Church Street, Room 121B
Rochester, NY 14614

If you have questions, email: Melissa.Phillips@CityofRochester.Gov or call (585) 428-7054 for additional instructions. **Incomplete application submissions will be returned.** Thank you.



BUILDING PERMIT APPLICATION and ZONING COMPLIANCE REQUEST

PROPERTY ADDRESS: _____

USE: RESIDENTIAL (1 or 2 Family) COMMERCIAL MIXED USE

APPLICANT INFORMATION:

YOUR NAME: _____ YOUR PHONE NUMBER: _____
(not a company name)

YOUR EMAIL ADDRESS: _____

YOUR MAILING ADDRESS: _____

PROPERTY OWNER:

Check if same as applicant above

Name: _____

Address: _____
(Cannot be a PO Box) (include City or Town)

Zip: _____ Phone: _____

Email: _____

CONTRACTOR: (check if same as:)

Owner Applicant (check both if applicable)

Name: _____

Address: _____
(Cannot be a PO Box) (include City or Town)

Zip: _____ Phone: _____

Email: _____

ARCHITECT: _____
OR ENGINEER

PERMIT REQUEST:

DESCRIPTION: _____

ADDITION/NEW CONSTRUCTION INTERIOR RENOVATIONS EXTERIOR RENOVATIONS

CHANGE/ESTABLISH USE DECK POOL/HOT TUB SHED/GARAGE/CARPORT

HVAC/MECHANICAL/ELECTRICAL SYSTEMS OTHER: _____

PROJECT COST ESTIMATE: (excluding plumbing & electrical) \$ _____

YOUR SIGNATURE: _____

DATE: _____