

# Host Community Agreement Waiver Form

## Instructions

Pursuant to G. L. c. 94G, §3(d)(4), 935 Code Mass. Regs. (“CMR”) § 500.180(3) and/or 935 CMR 501.180(3), all initial license and license renewal applications submitted or resubmitted to the Commission on or after March 1, 2024, require a compliant Host Community Agreement (“HCA”) or compliant HCA Waiver to be included as part of the submission. A Host Community may waive the regulatory requirement to have a compliant HCA by submitting an HCA Waiver to the Commission that complies with 935 CMR 500.180(5) and/or 935 CMR 501.180(5). If an HCA Waiver is executed, the Host Community shall satisfy the submission requirement of the statute by providing the license applicant or licensee with the fully executed HCA Waiver Form for the license applicant and/or licensee to include as part of the initial license and/or license renewal application.<sup>1</sup>

Please note that an executed HCA Waiver constitutes a total relinquishment of the HCA requirement between the Host Community and license applicant or licensee. An HCA Waiver that is executed and recorded with the Commission remains in full force and effect until such time as it is rescinded. An HCA Waiver may only be rescinded upon Commission approval of an executed HCA.

## Required Information

### I. License Applicant / Licensee Section

1. **License Applicant / Licensee’s Business Name** (*The business name shall be registered with the Secretary of the Commonwealth, which must also be the same business name on the initial license application or license record.*):

Toroverde (Massachusetts) II, Inc.

<sup>1</sup> Under 935 CMR 500.002 definition, “Host Community Agreement (HCA) Waiver means a written statement executed by a Host Community and a License Applicant, or by a Host Community and a Marijuana Establishment or MTC, which expresses the parties’ mutual intent to waive the regulatory requirement to have a Host Community Agreement”.



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3. **Signature of the Host Community's Authorized Representative** *(By signing this document, the named person above attests that they are an Authorized Representative of the Host Community and that the HCA Waiver was mutually agreed upon by both parties and executed in good faith.):*



4. **Signature Date of the Host Community's Authorized Representative:**





2. **Application / License Number Covered by the HCA Waiver** *(If the HCA Waiver is being executed by a license applicant only, please include the initial license application number(s) as provided in the Massachusetts Cannabis Industry Portal ("MassCIP"). If the HCA Waiver is being executed by a licensee, please include the license number(s) as provided in MassCIP—do not provide the license renewal application(s). If the HCA Waiver is being executed for a business that is applying for a new license but already has other license(s), the business may enter both the initial license application number(s) and license number(s).):*

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3. **Name of the License Applicant / Licensee's Authorized Representative:**

Pathik Patel

4. **Signature of the License Applicant / Licensee's Authorized Representative** *(By signing this document, the named person above attests that they are an Authorized Representative by the License Applicant or Licensee's Business and that the HCA Waiver was mutually agreed upon by both parties and executed in good faith.):*

Pathik Patel

5. **Signature Date of the License Applicant / Licensee's Authorized Representative:**

6/10/2024

## II. Host Community Section

1. **Name of Host Community:**

City of Greenfield

2. **Name of the Host Community's Authorized Representative:**

Virginia Desorgher

