



OKLAHOMA
Medical Marijuana
Authority

Grower Inspection Form

Updated July 2023 (Version 4.0)

OMMA Information

Primary Inspector:	Inspection Date:
Secondary Inspector:	Arrival Time:
Tertiary Inspector:	Inspection Type: Compliance CEI # BC #
Other Personnel Present:	

Business Information

OMMA License #	Facility Address:
Business Name:	
Trade Name (DBA):	
Indoor, Outdoor, or Both?	City:
E-Mail:	Zip Code:

Contact Information of Business Representative Present at Inspection

First Name:	Contact Phone:
Last Name:	Contact E-mail:

NOTES

- When potential violation(s) are observed, evidence of such potential violation should be collected, unless it is not possible.
- Not Applicable includes not at the time of inspection, licensee doesn't perform or hasn't performed action at the time of inspection.

General Observations & Premises	Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable	Comments
<p>1 Are the records and information maintained in the licensee's online OMMA license account correct, including, but not limited to, the following:</p> <p>(a) Physical address of licensed premises (b) Mailing address (c) Contact information (d) Ownership information (e) Certificate of Compliance (f) Using a different trade name or DBA</p> <p>(If No, Potential Violation(s) Observed) <i>OAC 442:10-5-1.1(7); OAC 442:10-5-3(d)(2)-(7)</i></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>2 Is the current OMMA license conspicuously posted on the premises?</p> <p>(If No, Potential Violation(s) Observed) <i>OAC 442:10-5-1.1(1)</i></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

<p>3 Is the required signage at the site of the commercial grow facility?</p> <p>Does the required signage include the following:</p> <p>(a) Business name (b) Physical address of the licensed business (c) Phone number of the licensed business (d) Medical marijuana business license number</p> <p>Does the required signage meet the following guidelines:</p> <p>(e) Visible from the road (f) At the primary entrance to the grow facility (g) Dimensions measuring no less than eighteen (18) inches by twenty-four (24) inches (h) Font size of no less than two (2) inches (i) In black standardized font on a white background</p> <p>(If No, Potential Violation(s) Observed) <i>OAC 442:10-6-1(c)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>4 Does the licensee have security measures to deter and prevent unauthorized entrance into areas containing marijuana and the theft and diversion of marijuana?</p> <p>(If No, Potential Violation(s) Observed) <i>OAC 442:10-6-1(a)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>5 Is all medical marijuana onsite being stored under conditions in a manner that protects it from physical and microbial contamination and deterioration?</p> <p>(If No, Potential Violation(s) Observed) <i>OAC 442:10-7-1(g)(1)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>6 When not in use, is all medical marijuana onsite being stored in receptacles that are capable of being fully closed and sealed and are kept fully closed and sealed?</p> <p>(If No, Potential Violation(s) Observed) <i>OAC 442:10-7-1(g)(2)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
Inventory Tracking	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center; padding: 2px;">Potential Violation(s) Observed</td> <td style="width: 33%; text-align: center; padding: 2px;">No Potential Violation(s) Observed</td> <td style="width: 33%; text-align: center; padding: 2px;">Not Applicable</td> </tr> </table>	Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable	Comments
Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable			
<p>7 Does the licensee use the state inventory tracking system or a system that is integrated with the state inventory tracking system that is reporting to the Authority accurately and in real time or after each individual sale?</p> <p>(If No, Potential Violation(s) Observed) <i>OAC 442:10-5-6(d)-(f)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>8 Is an owner or manager of the OMMA license the inventory tracking system administrator?</p> <p>(If No, Potential Violation(s) Observed) <i>OAC 442:10-5-6(g)(1)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				

<p>9 Does the licensee maintain an accurate and complete list of all inventory tracking system administrators and employee users?</p> <p><i>Note: The commercial licensee shall change or assign a new inventory tracking system administrator within thirty (30) business days.</i></p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-5-6(g)(3)-(4)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>10 Do the licensee's RFID tags contain the legal name and correct license number of the commercial licensee that ordered and is using them?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-5-6(f)(3)(C)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>11 Does the licensee ensure its inventories are properly tagged and that each RFID tag is properly assigned to medical marijuana and medical marijuana products?</p> <p>(a) Clones removed from a wholesale package must be tagged individually with an RFID plant tag.</p> <p>(b) If any medical marijuana or medical marijuana products are removed from a wholesale package, each individual unit or new wholesale package must be separately tagged.</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-5-6(f)(3)(A), OAC 410:10-5-6(f)(7)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>12 Are all RFID tags properly and securely affixed or fastened to plants and packages?</p> <p>(a) Prior to a plant reaching a point where it is able to support the weight of the RFID tag and attachment strap, the RFID tag may be securely fastened to the stalk or other similarly situated position approved by the Authority.</p> <p>(b) When the plant becomes able to support the weight of the RFID tag, the RFID tag shall be securely fastened to a lower supporting branch. The RFID tag shall remain affixed for the entire life of the plant until disposal.</p> <p>(c) Mother plants must be tagged before any cuttings or clones are generated therefrom.</p> <p>(d) Inventory must have a RFID tag properly affixed to all medical marijuana products during storage and transfer in one of the following manners: individual units of medical marijuana products shall be individually affixed with a RFID tag; or medical marijuana products may only be combined in a single wholesale package using one RFID tag if all units are from the same production batch.</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-5-6(f)(3)(D)-(F), OAC 442:10-5-6(f)(4)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>13 Does the licensee replace RFID tags that get destroyed, stolen, or fall off of a medical marijuana plant with a new RFID tag and is the change of the RFID tag properly reflected in the State inventory tracking system?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-5-6(f)(3)(G)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

Sampling and Testing	Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable	Comments
<p>14 Does the licensee obtain copies of all COA's for tests conducted on each harvest batch prior to accepting any sale or transfer of medical marijuana?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-8-1(h)(1)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>15 Does the licensee have COA's onsite and readily accessible for harvest batches for the last 7 years?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-8-1(h)(5); OAC 442:10-5-4(h)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>16 When testing non-infused pre-rolls or kief made from a single harvest batch that has passed full compliance testing, does the licensee test for heavy metals, filth & contaminants, and potency?</p> <p>Note: See the Testing Procedures Guide for required testing details.</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-8-1(a); OAC 442:10-8-1(s)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>17 When testing non-infused pre-rolls or kief made from a single harvest batch that has not been tested, does the licensee test for pesticide, heavy metals, microbials, foreign material & filth, water activity, moisture content, THC potency, terpene type and concentration?</p> <p>Note: See the Testing Procedures Guide for required testing details.</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-8-1(a); OAC 442:10-8-1(s)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>18 When testing non-infused pre-rolls or kief made from multiple harvest batches, does the licensee create a new batch and test for pesticide, heavy metals, microbials, foreign material & filth, water activity, moisture content, THC potency, terpene potency?</p> <p>Note: See the Testing Procedures Guide for required testing details.</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-8-1(a); OAC 442:10-8-1(s)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>19 Does the licensee have access to a copy of the laboratory's sampling standard operating procedures while they are collecting the samples?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-8-3(a)(1)(c)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>20 Does the licensee maintain documentation onsite and readily accessible of all employee training on the sampling standard operating procedures for each laboratory it uses for testing?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-8-3(a)(10)-(11); OAC 442:10-5-4(h)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

<p>21 Does the sample field log contain all required information below for each sample:</p> <p>(a) Laboratory's name, address, and license number; (b) Title and version of the laboratory's standard operating procedure(s) followed when collecting the sample; (c) Sampler's name(s) and title(s); (d) Date and time sampling started and ended; (e) Grower's, processor's, or dispensary's name, address, and license number; (f) Batch number of the batch from which the sample was obtained; (g) Sample matrix; (h) Total batch size, by weight or unit count; (i) Total weight or unit count of the primary sample; (j) Total weight or unit count of the reserve sample; (k) The unique sample identification number for each sample; (l) Name, business address, and license number of the person who transports the samples to the laboratory; (m) Requested analyses; (n) Sampling conditions, including temperature; (o) Problems encountered and corrective actions taken during the sampling process, if any; and (p) Any other observations from sampling, including major inconsistencies in the medical marijuana color, size, or smell.</p> <p>(If No, Potential Violation(s) Observed) <i>OAC 442:10-8-3(a)(8)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>22 Does the licensee maintain an onsite and readily accessible sample field log required for at least 7 years?</p> <p>(If No, Potential Violation(s) Observed) <i>OAC 442:10-8-3(a)(11); OAC 442:10-5-4(h)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>23 Does the licensee separate all usable medical marijuana into harvest batches that do not exceed:</p> <p>(a) 15 pounds or (b) 50 pounds for plant material to be sold to a licensed processor for the purposes of turning the plant material into concentrate.</p> <p>(If No, Potential Violation(s) Observed) <i>OAC 442:10-8-1(b)(1); OAC 442:10-8-1(s)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>24 Does the licensee have inspection records onsite and readily accessible indicating that each production batch has been physically inspected for contaminants and filth?</p> <p>(If No, Potential Violation(s) Observed) <i>OAC 442:10-8-1(i)(7)(D); OAC 442:10-5-4(h)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>25 Does the licensee have documentation onsite and readily accessible for all instances in which any of the following occurred, as applicable?</p> <p>(a) Re-sampling; (b) Re-testing; (c) Decontamination; and/or (d) Remediation</p> <p>(If No, Potential Violation(s) Observed) <i>OAC 442:10-8-1(k)(4)(C); OAC 442:10-5-6(b)(2); OAC 442:10-5-4(h)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

<p>26 If the licensee remediates and/or decontaminates medical marijuana, does the licensee have detailed procedures for remediation and decontamination processes?</p> <p><i>Note: If the licensee does not remediate/decontaminate medical marijuana, select Not Applicable.</i></p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-8-1(k)(4)(A); OAC 442:10-5-6(b)(2)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>27 If the licensee remediates medical marijuana, were the remediation methods or remediation solvents used on medical marijuana or medical marijuana products disclosed to the testing laboratory?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-8-1(k)(3)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>28 Has the licensee transferred or sold any medical marijuana, other than for decontamination or remediation, from a harvest batch that did not pass all required testing?</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-8-1(d)(1)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p align="center">Packaging & Labeling: Sale/Transfer to a Processor/Grower</p>	<table border="1"> <tr> <td>Potential Violation(s) Observed</td> <td>No Potential Violation(s) Observed</td> <td>Not Applicable</td> </tr> </table>	Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable	<p align="center">Comments</p>
Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable			
<p>29 Do labels for sale to growers or processors contain all of the following information: (a) Name and license number of transferring/selling licensee; (b) Batch # of medical marijuana; (c) Date of harvest; and (d) A statement that the medical marijuana has passed testing or that it has failed testing and is being transferred to a processor for remediation.</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-7-1(f)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p align="center">Packaging & Labeling: Sale/Transfer to a Dispensary</p>	<table border="1"> <tr> <td>Potential Violation(s) Observed</td> <td>No Potential Violation(s) Observed</td> <td>Not Applicable</td> </tr> </table>	Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable	<p align="center">Comments</p>
Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable			
<p>30 Does licensee package, sell or transfer pre-rolls that exceed 1 gram?</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-5-16(o)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>31 Does licensee package, sell or transfer infused pre-rolls?</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-5-16(n)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				

<p>32 Do all labels observed for sale to dispensaries contain at least the following information:</p> <p>(a) Accurate name and license number of licensee who transferred or sold the medical marijuana or medical marijuana products</p> <p>(b) Name of the medical marijuana or medical marijuana product</p> <p>(c) Batch # of medical marijuana or medical marijuana product</p> <p>(d) Net quantity or weight of contents</p> <p>(e) Ingredients list</p> <p>(f) The Oklahoma Uniform Symbol in color and printed at least one half inch by one half inch in size</p> <p>(g) THC potency that is plus or minus fifteen percent (15%) of the percentage on the COA</p> <p>(h) Terpenoid potency</p> <p>(i) The statement "This product has been tested for contaminants"</p> <p>(j) The statement "Keep out of reach of children."</p> <p>(k) The warning statement "Women should not use marijuana or medical marijuana products during pregnancy because of the risk of birth defects."</p> <p>(l) The statement "For use by licensed medical marijuana patients only."</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-7-1(e)(1)(A)-(I); OAC 442:10-1-4; OAC 442:10-5-8(d)(6)-(7); OAC 442:10-7-1(d)(2),(4),(13)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>33 Do any packages contain relabeling where all prior labels are not removed in entirety prior to the new label being applied?</p> <p>Note: <i>Covering an initial label with an updated label is prohibited.</i></p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-7-1(d)(11)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>34 Do any packages, labels, or containers contain content that appears to target children?</p> <p>Note: <i>Examples of this are toys, cartoon characters, and similar images.</i></p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-7-1(d)(1); OAC 442:10-7-2(a)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>35 Does packaging meet the following Child-Resistant rules?</p> <p>(a) Designed or constructed to be significantly difficult for children under five (5) years of age to open and not difficult for normal adults to use properly</p> <p>(b) Resealable to maintain its child-resistant effectiveness for multiple openings for any product intended for more than a single use or containing multiple servings</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-1-4; OAC 442:10-7-1(d)(3)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>36 Do any packages depict images other than the business name, logo, and an image of the product?</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-7-1(d)(1)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

<p>37 Do any packages/labels contain the logo of the Oklahoma Medical Marijuana Authority?</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-7-1(d)(9)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>38 Do any packages/labels contain false or misleading statements or make any claims/statements that the medical marijuana provides health or physical benefits to a patient?</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-7-1(d)(5); OAC 442:10-7-1(d)(8)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>39 Do packages/labels contain any of the following: (a) Universal symbols from another state (b) Statements that the medical marijuana was grown in another state (c) Any depictions, symbols, or other information that could cause a reasonable patient to be confused as to the state of origin of the medical marijuana or medical marijuana product</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-7-1(d)(10)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>40 Does the licensee intentionally or knowingly package or label medical marijuana or medical marijuana products that would cause a reasonable patient confusion as to whether it is a trademarked product?</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-7-1(d)(6)-(7)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
Transportation & Vehicles	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center; font-size: 8px;">Potential Violation(s) Observed</td> <td style="width: 33%; text-align: center; font-size: 8px;">No Potential Violation(s) Observed</td> <td style="width: 33%; text-align: center; font-size: 8px;">Not Applicable</td> </tr> </table>	Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable	Comments
Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable			
<p>41 Is each transport vehicle equipped with GPS trackers that are capable of storing and transmitting GPS data?</p> <p><i>Note: The use of cell phones for GPS tracking does not meet this requirement.</i></p> <p>(If No, Potential Violation(s) Observed) 63 O.S. § 427.16(J)(1); OAC 442:10-3-2(b)(1)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>42 Does the licensee maintain updated and accurate transportation and GPS records onsite and readily accessible?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-3-2(c); OAC 442:10-5-4(h)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>43 Do the licensee and transporter agent(s) implement security measures to deter and prevent theft/diversion of marijuana during transportation?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-3-2(e); OAC 442:10-6-1(b)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				

<p>44 Are all medical marijuana and medical marijuana products transported:</p> <p>(a) In a locked shipping container (b) Shielded from public view (c) Clearly labeled "Medical Marijuana or Derivative" (d) In a secure area of the vehicle that is not accessible by the driver during transit</p> <p>Note: <i>With the exception of a lawful transfer between medical marijuana businesses that are licensed to operate at the same physical address.</i></p> <p>(If No, Potential Violation(s) Observed) 63 O.S. § 427.16(J)(2)-(3); OAC 442:10-3-2(a)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>45 Does the licensee utilize the state inventory tracking system to create and maintain shipping/transfer manifests?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-3-6(a)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>46 Does the licensee have shipping manifests for each instance of shipping, transferring or receiving medical marijuana to or from other licensees that include all of the following:</p> <p>(a) Printed names, signatures, and transporter agent license numbers of personnel accompanying the transport; (b) Notation of the commercial transporter, grower, processor, dispensary, laboratory, research facility, or education facility authorizing the transport.</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-3-6(b)(1)-(2)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>47 Excluding the below permitted changes, do any transportation manifests appear to have been altered after departure from the originating licensed premises?</p> <p>Permitted Changes:</p> <p>(a) Name(s) of personnel receiving transport (b) Title(s) of personnel receiving transport (c) Signature(s) of personnel receiving transport (d) Documented refusal to accept delivery (e) Documented impossible to deliver</p> <p>(If Yes, Potential Violation(s) Observed) 63 O.S. § 427.16(U)(3); OAC 442:10-3-6(g); OAC 442:10-3-6(i)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>48 If a licensee refuses to accept delivery or if delivery is impossible of medical marijuana and medical marijuana products, did the licensee document the following:</p> <p>(a) The license number, business name, address, and contact information of the licensee to which the medical marijuana or medical marijuana products were to be delivered; (b) A complete inventory of the medical marijuana or medical marijuana products being returned, including batch number; (c) The date and time of attempted delivery and the refusal; (d) Documentation establishing the medical marijuana or medical marijuana products were returned in accordance with OAC 442:10-3-6(i).</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-3-6(g)(2); OAC 442:10-3-6(i)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

<p>49 Has the licensee sold, purchased, obtained, transferred, or otherwise accepted medical marijuana from the following:</p> <p>(a) an out-of-state individual/entity or (b) an individual/entity that does not have a current, valid OMMA license</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-5-16(l); 63 O.S. § 427.13(A)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>50 Does the licensee maintain copies on site and readily accessible of all transportation manifests for medical marijuana for at least 7 years from the date of receipt?</p> <p>Note: This includes originating manifests for items transported by the licensee and received manifests for items transported to the licensee.</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-3-6(f); 63 O.S. § 427.16(U)(4); OAC 442:10-5-4(h)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Waste	<div style="display: flex; justify-content: space-around; font-size: 0.8em;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">Potential Violation(s) Observed</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">No Potential Violation(s) Observed</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">Not Applicable</div> </div>	Comments
<p>51 Does the licensee engage in the disposal of root balls, stems, fan leaves, seeds, and the mature stalks or fiber produced from such stalks in one of the following ways?</p> <p>(a) Open burning (b) Incineration (c) Burying (d) Mulching (e) Composting (f) Any other technique approved by the DEQ</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-5-10(b)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>52 Does the licensee maintain a disposal log for root balls, stems, fan leaves, seeds, and the mature stalks or fiber produced from such stalks, for the past 5 years that contains the following information?</p> <p>(a) Name and license number of the commercial licensee; (b) A description of the plant material being disposed; (c) A brief description of the method used for disposal; (d) Date and time of the disposal; (e) Names of employee(s) conducting the disposal; and (f) A signed statement from the commercial licensee or authorized representative attesting to lawful disposal of the plant parts under penalty of perjury</p> <p>Note: Acceptable methods of disposal for non-medical marijuana waste are open burning, incineration, burying, mulching, composting, or any other technique approved by the DEQ.</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-5-10(b)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

<p>53 Is all medical marijuana waste being reported in the state inventory tracking system and properly packaged with RFID tags?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-5-6(f)(8)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
<p>54 Does the licensee dispose of medical marijuana waste within 90 days using an OMMA-licensed waste disposal facility and maintain disposal records for 5 years?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-9-6(b); OAC 442:10-9-9(a)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
<p>55 Does the licensee dispose of all medical marijuana waste in a locked, secure waste receptacle that is stored in a safe and secure location with limited access?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-9-6(b)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
<p>Advertising</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">Potential Violation(s) Observed</td> <td style="width: 50%; text-align: center;">No Potential Violation(s) Observed</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	Potential Violation(s) Observed	No Potential Violation(s) Observed	<input type="checkbox"/>	<input type="checkbox"/>	<p>Comments</p>
Potential Violation(s) Observed	No Potential Violation(s) Observed					
<input type="checkbox"/>	<input type="checkbox"/>					
<p>OAC 442:10-1-4 Definitions "Advertising" means the act of providing consideration for the publication, dissemination, solicitation, or circulation of visual, oral, or written communication to induce directly or indirectly any person to patronize a particular medical marijuana business or to purchase any particular medical marijuana or medical marijuana products. This includes marketing but does not include packaging and labeling.</p>						
<p>56 Is any advertising deceptive, false, or misleading which includes any indication the product is organic or pesticide-free?</p> <p>Note: "Organic", "organix" and "organique" must be authorized by the National Organic Program. "Pesticide-free" must be grown, harvested, processed and dispensed without any pesticides.</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-7-3(b)(1); OAC 442:10-7-3(c)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
<p>57 Does any advertising represent that the use of medical marijuana has curative or therapeutic effects?</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-7-3(b)(4)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					

<p>58 Does any advertising depict either of the following? (a) A child or other person under legal age consuming marijuana (b) Objects such as toys, cartoons, cartoon characters, or similar images that suggest the presence of a child</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-7-3(b)(5)-(6)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>59 Do any advertisements have a manner or design that would be especially appealing to children or other persons under (18) years of age and/or induce such people to consume marijuana?</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-7-3(b)(6)-(7)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
Final Observations	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center; font-size: small;">Potential Violation(s) Observed</td> <td style="width: 33%; text-align: center; font-size: small;">No Potential Violation(s) Observed</td> <td style="width: 33%; text-align: center; font-size: small;">Not Applicable</td> </tr> </table>	Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable	Comments
Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable			
<p>60 Were you given access to enter and inspect the licensed premises?</p> <p>(If No, Potential Violation(s) Observed) 63 O.S. § 427.6(E)(7); OAC 442:10-5-1.1(3); OAC 442:10-5-4(a)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>61 Did you observe or encounter any evidence of onsite consumption of alcohol or the smoking/vaping of medical marijuana or medical marijuana products?</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-5-16(a)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>62 Are all employees observed at least 18 years of age or older?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-5-16(b)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>63 Were any minors under eighteen (18) present at the licensed premises without a parent or legal guardian?</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-5-15</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>64 Did you observe any evidence of retail sales to patients?</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-1-4</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>65 Did you observe any evidence of medical marijuana products being processed onsite except non-infused pre-rolls?</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-1-4</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p>66 If the licensee has medical marijuana or medical marijuana products present on site, does the licensee have a valid OBND registration?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-1-5(c)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				

<p>67 If the licensee operates an outdoor medical marijuana production facility, does the licensee have valid registration with the Oklahoma Department of Agriculture, Food, and Forestry (ODAFF) as an environmentally sensitive crop owner?</p> <p>(If No, Potential Violation(s) Observed) <i>OAC 442:10-5-1.1(11)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p>68 Were you threatened or harmed in any way?</p> <p>(If Yes, Potential Violation(s) Observed) <i>OAC 442:10-5-16(h)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

The questions and selected responses within this inspection form pertain solely to the medical marijuana and documents observed, requested, and inspected by OMMA and/or its agents while at the licensed premises. They are not intended to be representative of any items not reviewed.

Post-Inspection Assessment	Comments
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<p>Were potential violation(s) observed? (List Question #s of potential violation(s) observed.)</p>	<p>YES NO</p>	
<p>Does the licensee submit monthly reporting each month in the manner prescribed by the department?</p>	<p>YES NO</p>	

Additional comments, concerns, observations, or other issues:

Inspector Signature:	Inspection Completion Time:
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By signing below, either electronically or otherwise, I hereby attest, affirm and/or acknowledge the following.

1. I am a duly authorized representative of the OMMA licensee identified herein. I acknowledge that an OMMA licensed business inspection was conducted at the premises, date, and time identified above.
2. I acknowledge that the signing of this form does not indicate that I agree evidence exists of a possible violation.
3. I acknowledge that I may request a copy of this inspection report by submitting an Open Records Request to OMMA. I acknowledge that such request may be submitted in writing by email to OMMAOpenRecords@omma.ok.gov. I acknowledge OMMA has made available an Open Records Request form on its website.
4. I acknowledge the findings in this inspection report relate to the collection of evidence of potential violations and this report does not make legal conclusions as to whether a violation or violations exist(s).
5. I acknowledge that any Compliance Inspector who performed the inspection conducted at the premises, date, and time identified above lacks the authority to make unauthorized commitments or promises of any kind purporting to bind OMMA, including, but not limited to, any commitments or representations:
 - a. Regarding the existence of any violation or potential violation or providing any interpretation of law;
 - b. Regarding the correctable nature and/or method to correct any violation or potential violation;
 - c. Regarding the type, nature, and/or potential resolution of any administrative action related to any violation or potential violation; and/or
 - d. The type, scope, and/or nature of any potential penalty, fine or other administrative action related to any violation potential violation.

<input type="checkbox"/> Signature witnessed by authorized OMMA representative	<input type="checkbox"/> Refusal to sign witnessed by authorized OMMA representative
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Facility Contact Signature:	Facility Contact Name (Printed):
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