Notification to Municipality OCM-06009

RE:	Notification of adult-use retail dispensary license applicatio		
License Type:	New Establishment	□	
Previous DBA:			
License Number:			
Applicant Name:	Elvia Olveda	RECEIVED	
Phone Number:	559-557-9430	NOV 2 0 2023	
Email Address:	joetvusa@gmail.com	1404 Z U Z023	
		BY COMMUNITY BOARD 8	
Dear Municipal	Clerk/NYC Community Board:		
This serves as r	notification that I (name) Elvia	Olveda	
of (dba) Ganja	Grove Shops Corp		
have obtained a	provisional license from the C	annabis Control Board and intend to file an application for full	
licensure with the	ne Office of Cannabis Manager	nent to open a	
	retail dispensary on-site consumption busines	s	
in (county name	New York County	. This business, once the license is approved, shall be located	
at:			
Address Line 1:	16 40 York as	R	
Address Line 2:			
City	New York		
Zip code:	10028		
_	ress is (if different from busines	s location):	
Address Line 1:	234 8th ave		
Address Line 2:			
City/Town/Villag	e: New York		
State: N	Υ Zip code: <u>1001</u>	<u>1_</u>	

	me of business if different from above) has _ services of (attorney or representative)	
Name:		
Address Line 1:		
Address Line 2:		
City/Town/Village:		
State:	Zip code:	
Telephone with ar	ea code:	
within 30 days by	•	entrol Board please respond to this notification s@ocm.ny.gov. This expressed opinion must
their opinion, or if municipalities@oo [Insert your munic of the Notification	you have any comments, concerns, or ques cm.ny.gov with "Notification to Municipalities cipality name here]" in the subject line. Pleas	Municipality Opinion 30 Extension Request – e be sure to provide proof of the date of receipt extension of time for submitting a municipality
Signed	t lial	Today's date: <u>11/16/2023</u>
Print Elvia Olv	reda	