



Misuse of Drugs (Cannabis) Data Processing) Regulations 2022 section 3

Details of the Ultimate Parent Company of the Applicant Company

This form should be completed by the Ultimate Parent Company of the Applicant Company applying to the GSC for a licence associated to medicinal cannabis.

This form should be completed in conjunction with the GSC's medicinal cannabis licence [integrity guidance](#).

The information supplied to the GSC must be accurate, and any changes to it must be communicated to the GSC as they occur. Inaccuracies may affect the processing of an application and undeclared changes may affect the final licence issue.

1. Name of Applicant Company

2. Nominated Contact Person

All correspondence from the GSC during the application process will be directed to this person

Full Name

Relationship to Applicant
Company

Are you acting in a
professional capacity
on behalf of a
Corporate Service
Provider (CSP) – if so
please state CSP

Home Address

Contact number

E-mail Address

3. The Ultimate Parent Company of the Applicant Company

Full legal name of the UPC of the Applicant Company

Any other name by which the company has been previously known

Trading Name *(if different)*

Registered Office Address

Business address in the Isle of Man *(if different to registered office address)*

Company Number

Date of Incorporation

4. Shareholding of the Ultimate Parent Company of the Applicant Company

Please list the name and shareholding details of all shareholders with equal or more than 5 % (private company) and shareholders with equal to or more than 20% (public company)

4.1 Total Issued Share Capital (number)

Made up of:

Name	Type of Share	Number of Shares	Total Value	Paid up Value

4.2 Number of Shareholders with 5% or less of the issued share capital of the Ultimate Parent Company of the Applicant Company:

5. Details of Company Officers and persons with a direct or indirect financial interest *(e.g. Beneficial Owners, Operations Manager, Investors or other - continue on a separate sheet if required)*

Full Name	Description of Role

6. Background Information of the Ultimate Parent Company

If the answer to any of the questions in this Part is YES, please provide full details on a separate sheet

Has the parent of the Ultimate Parent Company ever been:

Convicted of any Offence	YES / NO
Cautioned for any Offence	YES / NO
The subject of any recorded judgement	YES / NO
The subject of any litigation	YES / NO
The subject of an investigation by law enforcement of any other statutory, regulatory or government body	YES / NO
Is the Ultimate Parent Company of the Applicant Company the subject of any current investigation or enquiry by law enforcement or any other statutory, regulatory or government body?	YES / NO
Is the Ultimate Parent Company of the Applicant Company part of a wider group of companies or any other style of corporate structure	YES / NO

7. Check List

- Certified Certificate of Incorporation of the Ultimate Parent Company
- Certified Memorandum and Articles of Association of the Ultimate Parent Company
- A Corporate and Group Applicant Company structure diagram
- Certified Audited Accounts for the Ultimate Parent Company of the Applicant Company for the preceding two years (or since incorporation if less than that time), or if start-up company, financial projections for the next two years
- Completed Personal Declaration Forms for Approved roles
- Register of Members
- Register of Directors

8. Declaration

The Ultimate Parent Company of the Applicant Company is party to an application to the GSC for a Licence under section 4 of the Misuse of Drugs (Cannabis) Regulations 2020. .

We declare that the information supplied in this application is correct to the best of our knowledge.

We agree to provide the GSC with and further information that it may require when considering this application.

We agree to inform the GSC of any other information and changes after submission of the application which is material to this application.

We understand that the GSC will make enquiries, during the application process and on a continuing basis.

We confirm that we have read and understood the:

- Legislation relating to the Isle of Man Cannabis Sector;
- The guidance notes for making the application; and
- The [Integrity Guidance](#) for Canna applications.

The below representatives of the company, certify that the information provided in this application is, to the best of their knowledge and belief, complete and correct.

Signed (*Director of the Ultimate Parent Company of the Applicant Company*)

[Redacted signature area]

Name of the person signing the form

[Redacted name area]

Date of Signature

[Redacted date area]

Signed (*Director or Secretary of the Ultimate Parent Company of the Applicant Company*)

[Redacted signature area]

Name of person signing this form

[Redacted name area]

Date of Signature

[Redacted date area]



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