



THC Beverage Endorsement Application

Application Form | Page 1 of 5

Use this form to apply for an infused beverage endorsement under 4 Del. C. § 1335E.

SUBMISSION INFORMATION

Submit the completed application and required documents by email to OMCTHCBeverages@delaware.gov or by mail to:

Office of the Marijuana Commissioner | 1128 South Bradford Street | Dover, Delaware 19904

Payment must be made by check and mailed to the address above.

Phone: (302) 244-3662 | Email: OMCTHCBeverages@delaware.gov | Website: OMC.Delaware.Gov

APPLICATION TYPE

☐ Initial Application☐ Renewal Application

Application Date *

Submit one application per applicant entity. The endorsement is valid for two years unless suspended, revoked, or canceled.

APPLICANT ENTITY INFORMATION

Applicant Entity Name *

Trade Name / DBA *

Federal Tax ID (EIN)

Social Security Number (sole proprietor only)

Delaware Business Registration ID

Website (if applicable)

Business Type

Select one business type:

☐ Statutory Trust☐ Limited Liability Company☐ General Partnership☐ Limited Partnership☐ Sole Proprietorship☐ Corporation*If another business type applies, describe it in the Business Type field above.*

CONTACT INFORMATION

Primary Contact Name *

Primary Contact Phone *

Primary Contact Email *

Primary Contact Mailing Address *

Applicant Mailing Address (if different)

Business Location / Manufacturing Facility Address *



THC Beverage Endorsement Application

Application Form | Page 2 of 5

Identify the licensing basis for this endorsement and provide the requested proof of active licensure.

ELIGIBILITY AND UNDERLYING LICENSE

Select all license categories that apply to the applicant:

Licensed by the Delaware Alcohol Beverage Control Commission

- ☐ Supplier ☐ Importer / Distributor / Wholesaler
☐ Manufacturer - Winery, brewery, microbrewery, or distiller

Licensed by the Office of the Marijuana Commissioner

- ☐ Marijuana Product Manufacturer ☐ Marijuana Product Micro Manufacturer
☐ Marijuana Product Manufacturer (Conversion)

LICENSE DETAILS

Issuing Agency / State *

License Number *

License Issue Date *

License Expiration Date *

Name on Underlying License (if different from applicant)

ENDORSEMENT FEE AND APPLICANT STATUS

Initial application fee: \$1,500, except \$600 for an eligible social-equity licensee-owned manufacturer or microbusiness.

- ☐ \$1,500 standard application fee ☐ \$600 eligible application fee
☐ Applicant is a marijuana product manufacturer owned by a social equity licensee
☐ Applicant is licensed as a marijuana product manufacturing microbusiness

Renewal fee information: \$1,000 standard; \$400 for eligible social-equity licensee-owned manufacturers or microbusinesses.



THC Beverage Endorsement Application

Application Form | Page 3 of 5

This page reproduces the statutory THC source requirements applicable to manufacturers of infused beverages.

MANUFACTURER THC SOURCE REQUIREMENTS

4 Del. C. § 1335F(4)

(4) The manufacturer may not obtain any THC for the purpose of manufacturing an infused beverage unless the THC is a delta-9 extract, and no manufacturer may use any THC product other than a delta-9 extract to manufacture an infused beverage. The delta-9 extract used to manufacture an infused beverage must meet the following requirements:

a. The delta-9 was extracted from hemp grown by 1 of the following:

1. A hemp producer, as evidenced by a certificate of authenticity issued by the hemp producer and a copy of the hemp grower's state-issued license.
2. A licensed hemp grower regulated by a state, territory, or federally recognized Indian tribe, and in accordance with a state or tribal plan approved by the United States Department of Agriculture, as evidenced by a certificate of authenticity issued by the licensed hemp grower.

b. The delta-9 extract meets all of the following criteria:

1. The delta-9 extract was extracted by a person who is actively credentialed by a state or federally recognized Indian tribe to extract hemp, as evidenced by a certificate of authenticity issued by the person who is actively credentialed to extract hemp and a copy of the hemp grower's state-issued license.
2. The delta-9 extract was extracted in a facility that is credentialed by a state or federally recognized Indian tribe, as evidenced by a certificate of authenticity issued by the facility that is credentialed to extract hemp and a copy of the hemp grower's state-issued license.

REQUIRED SOURCE DOCUMENTATION

Include records demonstrating compliance. Provide the hemp license or, if the jurisdiction does not issue hemp licenses, state or USDA confirmation that the grower is authorized under the USDA Domestic Hemp Production Program or an approved state or tribal plan. This may also be documentation that is compliant with 7 CFR 990.71(d).

Applicant Acknowledgment

☐ If applicable, I acknowledge the manufacturer THC source requirements stated above.

Authorized Representative Name *

Date *

This acknowledgment does not replace any documentation or compliance obligations required by law or the Commissioner.

IMPORTER / DISTRIBUTOR / WHOLESALER APPLICANT NOTICE

For importer, distributor, and wholesaler applicants: provide the active underlying license, a complete inventory list, and Certificates of Analysis for each listed beverage. Infused beverages may not contain alcoholic liquor or non-delta-9 THC and may not exceed applicable delta-9 limits. See the Applicant Guide for delivery, warehouse, testing, and approval requirements before distribution.



THC Beverage Endorsement Application

Application Form | Page 4 of 5

Please attach supporting materials and complete the certification before submitting this application.

REQUIRED SUBMISSION MATERIALS

Check each item included with this application. The OMC may request additional information or documentation.

- | | |
|---|---|
| ☐ Copy of active underlying ABC, OMC, or out-of-state license | ☐ Application fee payment / receipt |
| ☐ Business registration or organizational documentation | ☐ Social equity eligibility proof, if applicable |
| ☐ Out-of-state license verification and Delaware importer documentation, if applicable | |
| ☐ Full infused beverage inventory list | |
| ☐ Certificates of Analysis for each beverage listed in the inventory in compliance with the 5003 Rules of the Office of the Marijuana Commissioner | |
| ☐ Documentation in compliance with 7 CFR 990.71(d) | |
| ☐ Other supporting documents (if applicable) | |

Description of Other Supporting Documents

AUTHORIZED REPRESENTATIVE CERTIFICATION

I certify that the information in this application and its attachments is true, complete, and correct to the best of my knowledge.
I understand that the applicant must maintain eligibility and comply with applicable Delaware law and OMC requirements.

☐ I certify and agree to the statement above.

Authorized Representative Name *

Title *

Authorized Representative Signature *

Date Signed *

Do not enter full Social Security numbers in this form unless specifically directed by the Office of the Marijuana Commissioner.

OFFICE OF THE MARIJUANA COMMISSIONER

State of Delaware

THC Beverage Endorsement Application

Application Form | Page 5 of 5

OFFICE OF THE MARIJUANA COMMISSIONER USE ONLY

OMC Application / Tracking Number

Received Date

Application Fee Payment Received?

☐

Yes

☐

No

Payment Date / Reference No.

Review Completion Date

Reviewing Staff Member

Disposition

☐

Approved

☐

Denied

☐

Pending / Additional information requested

Approval / Denial Date

Endorsement Number / Effective Date

Conditions, Deficiencies, or Notes
