



# OKLAHOMA Medical Marijuana Authority

## Processor Inspection Form

Updated October 2024 (Version 5.0)

### OMMA Information

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

### Business Information

OMMA License #	Facility Address:
Business Name:	
Trade Name (DBA):	City:
E-Mail:	Zip Code:
Is the license Hazardous or Non-Hazardous?	

### 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><b>1</b> 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) Mailing address</p> <p>(b) Contact information</p> <p>(c) Trade name or DBA</p> <p>(d) License classification matches physical property/process</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-5-1.1(7)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>2</b> Is the licensee operating under conditions of a material change prior to receiving Authority approval including but not limited to:</p> <p>(a) Physical address of licensed premises</p> <p>(b) Ownership information</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-5-2(e)(2)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>3</b> 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><b>4</b> 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><b>5</b> Is the inspector able to perform an inspection on the licensed premises?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-5-1.1(3); OAC 442:10-5-4(a); OAC 442:10-5-6(i)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>6</b> 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><b>7</b> 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><b>8</b> 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"/>	
<p><b>9</b> Are batch numbers easily identified on storage receptacles of medical marijuana &amp; medical marijuana products that are currently in use?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-7-1(g)(3)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>10</b> If the licensee is processing edible medical marijuana products, does the licensee operate out of any of the following areas?</p> <p>(a) A private home  (b) A room used as living or sleeping quarters  (c) An area directly opening into a room used as living or sleeping quarters  (d) Living or sleeping quarters located on the premises of a processor such as those provided for lodging registration clerks or resident managers that are not separated from rooms and areas used for food establishment operations by complete partitioning and solid self-closing doors.</p> <p>(If Yes, Potential Violation(s) Observed)  <i>OAC 442:10-5-8(f)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>11</b> Does the licensee operate or otherwise use any extraction equipment or processes utilizing butane, propane, carbon dioxide or any potentially hazardous material in or on residential property?</p> <p>(If Yes, Potential Violation(s) Observed)  <i>OAC 442:10-5-16(k)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

Inventory Tracking	Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable	Comments
<p><b>12</b> 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) OAC 442:10-5-6(d)-(f)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>13</b> Is an owner or manager of the OMMA license the inventory tracking system administrator?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-5-6(g)(1)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>14</b> Does the licensee maintain an accurate and complete list of all inventory tracking system administrators and employee users?</p> <p><b>Note:</b> The commercial licensee shall change or assign a new inventory tracking system administrator within thirty (30) business days.</p> <p><b>Note:</b> The licensee must remove access for any individual no longer using the State inventory tracking system or no longer employed by the licensee within three (3) business days.</p> <p><b>Note:</b> Within three (3) business days, commercial licensees must remove access for any inventory tracking system administrator or user from their accounts if any such individual no longer utilizes the State inventory tracking system or is no longer employed by the commercial licensee.</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-5-6(g)(3)-(4),(8)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>15</b> Do the licensee's inventory tracking system 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><b>16</b> Does the licensee ensure it has an adequate supply of inventory tracking system tags at all times?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-5-6(f)(3)(B)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>17</b> Does the licensee ensure its inventories are properly tagged and that each inventory tracking system tag is properly assigned to medical marijuana and medical marijuana products?</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><b>18</b> Are all inventory tracking system tags properly and securely affixed or fastened to plants and packages?</p> <p>(a) The inventory tracking system tag shall be placed on the container holding the medical marijuana plant and must remain physically near and clearly associated with the medical marijuana plant until the plant reaches twelve (12) inches in height.</p> <p>(b) When the plant reaches twelve (12) inches in height, the inventory tracking system tag shall be securely fastened to a lower supporting branch. The inventory tracking system 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 an inventory tracking system 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 an inventory tracking system tag; or medical marijuana products may only be combined in a single wholesale package using one inventory tracking system tag if all units are from the same production batch.</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-5-6(f)(3)(D)-(F); OAC 442:10-5-6(f)(4)</i></p>					
<p><b>19</b> Does the licensee replace inventory tracking system tags that get destroyed, stolen, or fall off of a medical marijuana plant with a new inventory tracking system tag and is the change of the inventory tracking system tag properly reflected in the State inventory tracking system?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-5-6(f)(3)(G)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p><b>Sampling and Testing</b></p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;">Potential Violation(s) Observed</td> <td style="width: 33%; text-align: center;">No Potential Violation(s) Observed</td> <td style="width: 33%; text-align: center;">Not Applicable</td> </tr> </table>	Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable	<p><b>Comments</b></p>
Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable			
<p><b>20</b> Does the licensee have COA's onsite and readily accessible for the last 7 years?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-8-1(h); OAC 442:10-5-4(h)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p><b>21</b> When collecting kief from multiple harvest batches, does the licensee homogenize into a new batch that does not exceed 15 pounds?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-8-1(l)(2)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p><b>22</b> When collecting shake &amp; trim from multiple harvest batches, does the licensee homogenize into a new batch that does not exceed 50 pounds?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-8-1(l)(3)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p><b>23</b> Does the licensee conduct all testing requirements of a final harvest batch for non-infused pre-rolls, kief, or shake &amp; trim prior to transfer or sale to a dispensary, patient or caregiver?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-8-1(l)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				

<p><b>24</b> When testing final product infused pre-rolls, does the licensee test for microbials, mycotoxins, residual solvents, heavy metals, pesticide residue, THC &amp; cannabinoid concentration, terpenoid type &amp; concentration, foreign material &amp; filth, and water activity &amp; moisture content?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-8-1(l)(1)(B)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>25</b> When testing final product medical marijuana concentrate and medical marijuana infused products (excluding infused pre-rolls), does the licensee test for microbials, mycotoxins, residual solvents, heavy metals, pesticide residue, THC &amp; cannabinoid concentration, terpenoid type &amp; concentration, and foreign material &amp; filth?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-8-1(l)(4)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>26</b> Does the licensee maintain documentation onsite and readily accessible to show that all individuals designated as Samplers have been trained how to collect samples in accordance with the sampling standard operating procedures for each laboratory it uses for testing?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-8-3(a)(1)(B); OAC 442:10-8-3(a)(10)-(11); OAC 442:10-5-4(h)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>27</b> Does the Sampler 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)  <i>OAC 442:10-8-3(a)(1)(C); OAC 442:10-1-4</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>28</b> Do Samplers collect samples at the location of the licensed premises and affix the samples with a tamper-proof seal at the time of collection?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-8-3(a)(2)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>29</b> Are all samples delivered to the laboratory the day of collection?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-8-3(a)(3)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

<p><b>30</b> Does the sample field log contain all required information below for each sample:</p> <ul style="list-style-type: none"> <li>(a) Laboratory's name, address, and license number;</li> <li>(b) Title and version of the laboratory's standard operating procedure(s) followed when collecting the sample;</li> <li>(c) Sampler's name(s) and title(s);</li> <li>(d) Date and time sampling started and ended;</li> <li>(e) Grower's, processor's, or dispensary's name, address, and license number;</li> <li>(f) Batch number of the batch from which the sample was obtained;</li> <li>(g) Sample matrix;</li> <li>(h) Total batch size, by weight or unit count;</li> <li>(i) Total weight or unit count of the primary sample;</li> <li>(j) Total weight or unit count of the reserve sample;</li> <li>(k) The unique sample identification number for each sample;</li> <li>(l) Name, business address, and license number of the person who transports the samples to the laboratory;</li> <li>(m) Requested analyses;</li> <li>(n) Sampling conditions, including temperature;</li> <li>(o) Problems encountered and corrective actions taken during the sampling process, if any; and</li> <li>(p) Any other observations from sampling, including major inconsistencies in the medical marijuana color, size, or smell.</li> </ul> <p>(If No, Potential Violation(s) Observed) OAC 442:10-8-3(a)(8)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>31</b> Does the licensee have sampling documentation onsite and readily accessible for at least 7 years?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-8-3(a)(11); OAC 442:10-5-4(h)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>32</b> Does the licensee separate all usable medical marijuana into production batches that do not exceed:</p> <ul style="list-style-type: none"> <li>(a) 4 liters of liquid medical marijuana concentrate</li> <li>(b) 9 pounds for nonliquid medical marijuana products</li> <li>(c) 1,000 grams of total THC for medical marijuana infused final products</li> </ul> <p>(If No, Potential Violation(s) Observed) OAC 442:10-8-1(b)(1); OAC 442:10-8-1(l)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>33</b> Does the licensee have documentation onsite and readily accessible for all instances in which any of the following occurred after a test failure, as applicable?</p> <ul style="list-style-type: none"> <li>(a) Re-sampling;</li> <li>(b) Re-testing;</li> <li>(c) Decontamination; and/or</li> <li>(d) Remediation</li> </ul> <p>(If No, Potential Violation(s) Observed) OAC 442:10-8-1(k)(2); OAC 442:10-5-6(b)(2); OAC 442:10-5-4(h)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

<p><b>34</b> 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); OAC 442:10-5-6(b)(2)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p><b>35</b> If the licensee remediates or decontaminates medical marijuana, did the licensee provide documentation to the testing lab, before retesting, that specifies how the product was remediated or decontaminated?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-8-1(k)(4)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p><b>36</b> Has the licensee transferred or sold to a dispensary, licensed patient, or licensed caregiver any medical marijuana or medical marijuana product that did not pass all required testing?</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-8-1(d)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p><b>Packaging &amp; Labeling: Sale/Transfer to a Processor/Grower</b></p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center; vertical-align: middle;">Potential Violation(s) Observed</td> <td style="width: 33%; text-align: center; vertical-align: middle;">No Potential Violation(s) Observed</td> <td style="width: 33%; text-align: center; vertical-align: middle;">Not Applicable</td> </tr> </table>	Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable	<p><b>Comments</b></p>
Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable			
<p><i>Note: Edible medical marijuana products must also meet additional requirements, which are listed in the next section.</i></p>					
<p><b>37</b> Do all labels on medical marijuana and medical marijuana products sold or otherwise transferred between growers and/or processors contain the following information:</p> <p>(a) Name and license number of transferring/selling licensee; (b) Batch # of medical marijuana or medical marijuana product; (c) Date of harvest or production</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-7-1(f)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				

<b>Packaging &amp; Labeling: Sale/Transfer to a Dispensary</b>	<b>Potential Violation(s) Observed</b>	<b>No Potential Violation(s) Observed</b>	<b>Not Applicable</b>	<b>Comments</b>
<p><b>38</b> Do all labels on medical marijuana and medical marijuana products being transferred or sold to dispensaries or by dispensaries contain the following information:</p> <p>(a) The name and license number of the licensee who sold or otherwise transferred the medical marijuana or medical marijuana products to the dispensary</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 on the COA for that batch</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 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); 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><b>39</b> If any package or immediate container of medical marijuana or medical marijuana product is relabeled, are all prior labels removed in entirety prior to the new label being applied?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-7-1(d)(11)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>40</b> Are any labels, packages, or containers attractive to minors or contain any content that reasonably appears to target children, including toys, cartoon characters, and similar images?</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><b>41</b> 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>(c) If the child-resistant container is clear, the child-resistant container is placed in an opaque exit package at the point of sale or other transfer to a patient, a patient's parent or legal guardian if patient is a minor or a caregiver.</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><b>42</b> 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)  <i>OAC 442:10-7-1(d)(1)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>43</b> Do any packages/labels contain the logo of the Oklahoma Medical Marijuana Authority?</p> <p>(If Yes, Potential Violation(s) Observed)  <i>OAC 442:10-7-1(d)(9)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>44</b> Do any packages/labels contain deceptive, false or misleading statements or make any claims/statements that the medical marijuana or medical marijuana products provides health or physical benefits to a patient?</p> <p><i>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.</i></p> <p>(If Yes, Potential Violation(s) Observed)  <i>OAC 442:10-7-1(d)(5); OAC 442:10-7-1(d)(8)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>45</b> Do packages/labels contain any of the following:</p> <p>(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)  <i>OAC 442:10-7-1(d)(10)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>46</b> Is any medical marijuana or medical marijuana product intentionally or knowingly packaged or labeled that would cause a reasonable patient confusion as to whether it is a trademarked product?</p> <p>(If Yes, Potential Violation(s) Observed)  <i>OAC 442:10-7-1(d)(6)-(7)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

<p><b>47</b> Do all labels on <b>edible</b> medical marijuana products being transferred or sold to dispensaries or by dispensaries contain the following information:</p> <p>(a) The name, address and license number of licensee who sold or otherwise transferred the medical marijuana or medical marijuana products to the dispensary</p> <p>(b) Name of the food, medical marijuana or medical marijuana products</p> <p>(c) Batch # of medical marijuana or medical marijuana product</p> <p>(d) Lot code</p> <p>(e) Net quantity or weight of contents</p> <p>(f) Ingredients list</p> <p>(g) List of cannabis ingredients</p> <p>(h) Food allergen information</p> <p>(i) Nutrition labeling (if applicable)</p> <p>(j) The Oklahoma Uniform Symbol in color and printed at least one half inch by one half inch in size</p> <p>(k) THC potency on the COA for that batch</p> <p>(l) Total terpenoid content in the manner prescribed by the Authority</p> <p>(m) THC dosage in milligrams per unit</p> <p>(n) The statement "This product has been tested for contaminants"</p> <p>(o) The statement "Keep out of reach of children."</p> <p>(p) The statement "For use by licensed medical marijuana patients only."</p> <p>(q) The statement "Women should not use marijuana or medical marijuana products during pregnancy because of the risk of birth defects or while breastfeeding."</p> <p>(r) The statement "For accidental ingestion call 1-800-222-1222"</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-7-1(e)(1); OAC 442:10-1-4;  OAC 442:10-5-8(d); OAC 442:10-7-1(d)(2),(4)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p style="text-align: center;"><b>Patient Transactions</b></p>	<table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 33%;">Potential Violation(s) Observed</td> <td style="width: 33%;">No Potential Violation(s) Observed</td> <td style="width: 33%;">Not Applicable</td> </tr> </table>	Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable	<p style="text-align: center;"><b>Comments</b></p>
Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable			
<p><b>48</b> If the licensee processes medical marijuana into medical marijuana concentrate on behalf of patients, does the licensee utilize an OMMA provided system to verify and ensure that all medical marijuana transactions are conducted with individuals holding valid, unexpired licenses issued by OMMA?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-5-12(c)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p><b>49</b> Does the licensee verify that all medical marijuana transactions conducted with medical marijuana patients or caregivers include:</p> <p>(a) Name</p> <p>(b) Valid, unexpired license number</p> <p>(c) Expiration date</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-1-4; OAC 442:10-5-12(c)</i></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				

<p><b>50</b> Does the licensee maintain a log documenting each instance in which the processor processed medical marijuana received from a licensed patient into a concentrate form on behalf of the licensed patient, which shall include, but is not limited to, the following information:</p> <p>(a) The patient and, if applicable, caregiver license number;</p> <p>(b) The date the processor received the medical marijuana from the patient or caregiver;</p> <p>(c) The weight of medical marijuana received from the patient;</p> <p>(d) The weight or amount of concentrate produced, along with the weight of any excess medical marijuana, if applicable; and</p> <p>(e) The date the concentrate was returned to the patient or caregiver.</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-5-6(b)(4)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p><b>51</b> Does the licensee limit a single transaction to one (1) ounce (28.3 grams) of medical marijuana concentrate?</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-5-12(b)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p><b>52</b> Does the licensee:</p> <p>(a) Allow for or provide the delivery of medical marijuana or medical marijuana products to licensed patients or caregivers</p> <p>(b) Allow retail sales to licensed patients or caregivers</p> <p><b>Note:</b> Processors may charge a fee for the service of making a concentrate only.</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-5-16(c); OAC 442:10-1-4</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<b>Transportation &amp; Vehicles</b>	<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	<b>Comments</b>
Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable			
<p><b>53</b> Are all vehicles used to transport medical marijuana and medical marijuana products equipped with active GPS trackers capable of storing and transmitting GPS data?</p> <p><b>Note:</b> The use of cell phones for GPS tracking does not meet this requirement.</p> <p>(If No, Potential Violation(s) Observed) OAC 442:10-3-2(b)(1)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p><b>54</b> Does the licensee maintain updated and accurate transportation and GPS records onsite records and information on all vehicles engaged in the transport of medical marijuana and medical marijuana products, including GPS data and records, at the licensed premises 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><b>55</b> Do the licensee and transporter agent(s) implement appropriate security measures to deter and prevent the theft and 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><b>56</b> 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 secured area of the vehicle that is not accessible by the driver during transit</p> <p><i>Note: 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)  OAC 442:10-3-2(a)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>57</b> Does the licensee utilize the state inventory tracking system to create and maintain inventory manifests documenting all transport of medical marijuana and medical marijuana products?</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><b>58</b> Does the licensee have inventory manifests from each originating and receiving licensee at the time the product changes hands, that includes 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><b>59</b> Excluding the below permitted changes, do any inventory manifests appear to have been altered after departure from the originating licensee's premises?</p> <p><b>Allowable Changes:</b></p> <p>(a) The addition of the printed names, titles, and signatures of any personnel accepting delivery on behalf of the receiving licensee; or  (b) Documenting any refusal to accept delivery or if delivery is impossible</p> <p>(If Yes, Potential Violation(s) Observed)  OAC 442:10-3-6(g); OAC 442:10-3-6(i)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>60</b> If a licensee refuses to accept delivery or if delivery is impossible, is the following documented:</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><b>61</b> Has the licensee sold, purchased, obtained, transferred, or otherwise accepted medical marijuana or medical marijuana products from the following:</p> <p>(a) An out-of-state individual or entity  (b) An individual or entity that does not have a current, valid OMMA license</p> <p>(If Yes, Potential Violation(s) Observed)  OAC 442:10-5-16(I)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<p><b>62</b> Does the licensee maintain copies onsite and readily accessible of all inventory manifests and inventory records logging the quantity of medical marijuana or medical marijuana products received or transferred for at least 7 years from the date of receipt?</p> <p>(If No, Potential Violation(s) Observed)  OAC 442:10-3-6(f); OAC 442:10-5-6(b)(3)(G)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
<b>Waste</b>	<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	<b>Comments</b>
Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable			
<p><b>63</b> If the licensee disposes of root balls, stems, fan leaves, seeds, and the mature stalks or fiber produced from such stalks at the licensed premises, does the licensee create and maintain a disposal log 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 of the commercial licensee attesting to the lawful disposal of these plant parts under penalty of perjury</p> <p><i><b>Note:</b> Acceptable methods of disposal for non-medical marijuana waste are open burning, incineration, burying, mulching, composting, or any other technique approved by the DEQ.</i></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><b>64</b> Do all packages of medical marijuana waste have an inventory tracking system tag affixed and the contents of the waste package reported in the State inventory tracking system?</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><b>65</b> Does the licensee dispose of medical marijuana waste within 90 days using an OMMA-licensed waste disposal facility and maintain disposal records for 7 years?</p> <p>(If No, Potential Violation(s) Observed)  OAC 442:10-5-6(b); OAC 442:10-9-9(a)</p>					
<p><b>66</b> Does the licensee dispose of all medical marijuana waste in a secure waste receptacle that is locked with commercial-grade locks and kept 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"/>				

Advertising	Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable	Comments
<p align="center"><i>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.</i></p>				
<p><b>67</b> Does advertising contain any statements, illustrations, or other material that:</p> <p>(a) Is deceptive, false, or misleading which includes any indication the product is organic or pesticide-free?</p> <p>(b) Represents that the use of medical marijuana has curative or therapeutic effects?</p> <p>(c) Promotes overconsumption?</p> <p>(d) Could cause a reasonable patient to believe the medical marijuana was grown in another state or to be confused as to the state of origin of the medical marijuana or medical marijuana product?</p> <p><b>Note:</b> "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),(3),(4),(8); OAC 442:10-7-3(c)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>68</b> Does any advertising contain any statements, illustrations, or other material that:</p> <p>(a) Depicts a child or other person under legal age consuming marijuana?</p> <p>(b) Depicts objects such as toys, cartoons, cartoon characters, or similar images which suggest the presence of a child or any other depiction designed in any manner to be especially appealing to children or other person under legal age to consume marijuana?</p> <p>(c) Has any manner or design that would be especially appealing to children or other persons under eighteen (18) years of age?</p> <p>(If Yes, Potential Violation(s) Observed) OAC 442:10-7-3(b)(5)-(7)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Final Observations	Potential Violation(s) Observed	No Potential Violation(s) Observed	Not Applicable	Comments
<p><b>69</b> Were you given access to enter and inspect the entire licensed premises and any vehicles on the licensed premises used for the transportation of medical marijuana and medical marijuana products?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-5-1.1(3); OAC 442:10-5-4(a); OAC 442:10-5-6(i)</i></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>70</b> Did you observe or encounter any evidence of consumption of alcohol or the smoking or vaping of medical marijuana or medical marijuana products on the licensed premises?</p> <p>(If Yes, Potential Violation(s) Observed)  <i>OAC 442:10-5-16(a)</i></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>71</b> Are all employees over the age of eighteen (18)?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-5-16(b); OAC 442:10-5-16(v)</i></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>72</b> Do all employees have an active, unexpired credential?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-5-16(v); OAC 442:10-5-1.1(13)</i></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>73</b> Do all employees wear or display their active, unexpired credential on their person during their hours of work?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-5-16(v); OAC 442:10-5-1.1(13)(C)</i></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>74</b> Does the licensee associate all employee credentials with the corresponding commercial license?</p> <p>(If No, Potential Violation(s) Observed)  <i>OAC 442:10-5-16(v); OAC 442:10-5-1.1(13)(C)</i></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>75</b> Did any minors under the age of eighteen (18) enter the licensed premises without being under the supervision of his or her parent or legal guardian at all times while on the licensed premises?</p> <p>(If Yes, Potential Violation(s) Observed)  <i>OAC 442:10-5-15</i></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>76</b> 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 Observations**

**Comments**

<b>A.</b> Were potential violation(s) observed? (List Question #s of potential violation(s) observed.)	YES    NO	
<b>B.</b> Did you observe animals onsite that are a potential safety concern?	YES    NO	
<b>C.</b> Did you observe any other potential safety concerns during the field visit?	YES    NO	
<b>D.</b> Was there state cell phone service at the licensed premises? (Include coverage notes in comments.)	YES    NO	

Additional comments, concerns, observations, or other issues:

<b>Inspector Signature:</b>	<b>Inspection Completion Time:</b>
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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](mailto: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 or potential violation.

Signature witnessed by authorized OMMA representative

Refusal to sign witnessed by authorized OMMA representative

**Facility Contact Signature:**

**Facility Contact Name (Printed):**