



Marijuana-Infused Edible Endorsement Application

Please Type or Print Clearly

Business Name (Must match legal name)		Owner(s) of Business		
Does Business As				
WSLCB License Number		UBI		
Phone Number	Fax Number	Email Address (required)		
Physical Address of Processing Facility		City	State	Zip Code
<input type="checkbox"/> Mailing Address is the same as the Physical Address.				
Mailing Address for Business		City	State	Zip Code

Firm Operates as: <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Cooperative <input type="checkbox"/> Corporation <input type="checkbox"/> LLC		
List the name and address of all partners and/or officers:		
Name	Title	Address (Include City, State, Zip Code)
If firm is out of state, provide name and address of individual residing in Washington State who is authorized to receive and accept service of summons and legal notice.		
Name	Address	

Applicant Statement (Signature is required for processing application)		
<ul style="list-style-type: none"> I certify that the above information is correct. I agree to inspections by WSDA food safety officials at the site address shown above. 		
_____	_____	_____
Signature of Individual or Corporate Officer	Date	Phone Number

<u>WSDA Office Use Only</u>	
Food Safety Compliance Specialist :	Region Manager:

MIE Endorsement Application Checklist

1. Completed Application Cover Page (page 1)
2. Completed Attachment A – MIE Items to be Approved for Processing
3. Completed Attachment B – Ingredient and Processing Information
4. Completed Attachment C – MIE Labeling and Packaging
5. Completed Attachment D – Floor Plan
6. Completed Attachment E – Sanitation Schedule
7. Completed Attachment F – Water Supply Testing Requirements
8. Attached Copy of Business License (required)
9. Attached Copy of WSLCB License (required)
10. Enclosed documentation verifying potable (fit for drinking) water supply system (if required under attachment F for your type of MIE processing operation).
11. E-mail completed application to foodsafety@agr.wa.gov or alternatively you may mail completed application to:
Washington State Department of Agriculture
Food Safety Program
PO Box 42560
Olympia, WA 98504-2560

Upon receipt of the application and review by the Olympia office, a local Food Safety Compliance Specialist will contact you at the phone number provided on your application.

Please note that the processing time from the receipt of your application to the time of an inspection can take approximately 4-6 weeks. It will take longer if you do not complete and attach all the documentation required for Endorsement. Include additional sheets as necessary.



MIE Endorsement Application Attachment A – Items to be Approved for Processing

Please provide a list of the marijuana-infused edible products for which you are applying.

No.	Name of Product	WSDA Use Only Product Approved	
		Yes	No
1.		<input type="checkbox"/>	<input type="checkbox"/>
2.		<input type="checkbox"/>	<input type="checkbox"/>
3.		<input type="checkbox"/>	<input type="checkbox"/>
4.		<input type="checkbox"/>	<input type="checkbox"/>
5.		<input type="checkbox"/>	<input type="checkbox"/>
6.		<input type="checkbox"/>	<input type="checkbox"/>
7.		<input type="checkbox"/>	<input type="checkbox"/>
8.		<input type="checkbox"/>	<input type="checkbox"/>
9.		<input type="checkbox"/>	<input type="checkbox"/>
10.		<input type="checkbox"/>	<input type="checkbox"/>
11.		<input type="checkbox"/>	<input type="checkbox"/>
12.		<input type="checkbox"/>	<input type="checkbox"/>
13.		<input type="checkbox"/>	<input type="checkbox"/>
14.		<input type="checkbox"/>	<input type="checkbox"/>
15.		<input type="checkbox"/>	<input type="checkbox"/>
16.		<input type="checkbox"/>	<input type="checkbox"/>
17.		<input type="checkbox"/>	<input type="checkbox"/>
18.		<input type="checkbox"/>	<input type="checkbox"/>
19.		<input type="checkbox"/>	<input type="checkbox"/>
20.		<input type="checkbox"/>	<input type="checkbox"/>
21.		<input type="checkbox"/>	<input type="checkbox"/>
22.		<input type="checkbox"/>	<input type="checkbox"/>
23.		<input type="checkbox"/>	<input type="checkbox"/>
24.		<input type="checkbox"/>	<input type="checkbox"/>
25.		<input type="checkbox"/>	<input type="checkbox"/>



MIE Endorsement Application Attachment B – Ingredient and Processing Information

Provide the following information for the types of products (i.e., Cookies, Confections, Carbonated Beverages, etc.) you intend to process:

- A flow diagram/chart of each step of the process and a complete ingredient list for each product.
- Include in your diagram time and temperatures the product stays at for each step of the process.

Process details should include:

Receiving: List all ingredients.

Storage: Where and how ingredients are stored in your facility.

Processing: Describe the basic preparation. Include a general flow diagram/chart.

Packaging: Describe the packaging details such as bulk pack or retail size, and type of packaging.

Distribution: Type of transportation.

**** Do not send your recipes or trade secrets with this application ****

Copy of a flow diagram/chart can be attached to application or you may include it here:



MIE Endorsement Application Attachment C – Labeling and Packaging

Submit a copy of the proposed ingredient label for **each** marijuana-infused edible with this application for review. The proposed label may not be used without written approval from the WSDA Food Safety Program.

MIE product labels **must** comply with the WSLCB's packaging and labeling requirements under [Chapter 314-55 WAC](#) and for the purposes of the MIE endorsement additionally display:

A statement of ingredients as specified under [21 CFR 101.4](#). The ingredient statement must identify sulfites, if present, as required under [21 CFR 101.100](#) and the names of Food and Drug Administration certified color additives (i.e., FD&C Yellow 5) if present. Allergens (Milk, egg, fish, crustacean shellfish, tree nuts, wheat, peanuts, soybeans) as specified under the Food Allergen Labeling and Consumer Protection Act of 2004 ([Public Law 108-282, Title II](#)).

The following sample label illustrates the ingredient and allergen labeling requirements:

Chocolate Peanut Butter Walnut Brownie

Ingredients: Brown Sugar (Sugar, Invert Sugar, Cane Molasses), All-Purpose Flour (Wheat Flour, Niacin, Reduced Iron, Thiamine mononitrate, Riboflavin, Folic acid), Milk Chocolate (Sugar, Whole Milk Powder, Cocoa Butter, Cocoa Mass, Soy Lecithin, Vanilla), Peanut Butter (Peanuts, Sugar, Molasses, Hydrogenated Vegetable Oil, Mono- and diglycerides, Salt), Chopped Walnuts, Dextrose, Salt, Artificial Flavoring, Leavening (Sodium bicarbonate), Cannabis Extract.

Contains: Milk, Peanuts, Soy, Walnuts, Wheat



MIE Endorsement Application Attachment D – Floor Plan

Provide a copy or sketch of the floor plan for your processing facility. Please identify the following items:

- Fixtures (sinks, counters, etc.)
- Equipment (refrigeration units, range/stove, oven, stand-alone processing equipment, etc. – general terms only, no model numbers or brand names)
- Storage shelves/racks (for edible ingredients, utensils, packaging supplies, cleaning supplies)
- Floor drain(s) (if applicable)
- Restrooms
- Room dimensions
- Identify finished surfaces of the ceiling, walls, and floor (this can be completed in diagram or in a separate document)

**** A close examination of processing equipment will be done at time of inspection ****

Copy of a floor plan can be attached to application or you may include a sketch here:



MIE Endorsement Application Attachment E – Sanitation Schedule

Please list sanitation practices and schedule for facility and equipment.

- List the equipment and utensils used for processing of marijuana-infused edibles.
- How the equipment and utensils will be cleaned, sanitized, and how frequently.

Items used	How the item is used	How item will be cleaned	Method of Sanitization	Frequency

Briefly describe how walls, floors, ceilings, and like surfaces will be cleaned, sanitized, and maintained.

Briefly describe how restrooms, hand washing sinks, and equipment-washing facilities will be supplied and used.



MIE Endorsement Application Attachment F – Water Supply Testing Requirements

To determine the water supply testing requirements for your facility, please complete this questionnaire and refer to the requirements on the following pages.

Type of water system used at processing facility

- City Municipal Water Association Well Spring Other Private Water Supply

Your water supply must meet the Washington State Department of Health (DOH) requirements for potable water.

- If you are on a public water supply (city, municipal water supply, or water association), it meets these requirements. If you are using a well or other private water supply you must meet DOH requirements for a Group A or Group B water system... A single family MIE processor using a private water system with no outside employees must meet equivalent water testing requirements required by WSDA.

- 1. Is any of your facility's water supplied from a well, spring, or other private water system? 2. Does your business employ 25 or more people for 60 or more days per year? 3. Is your processing facility located at your single-family residence, where you employ only immediate family members?

Washington State Department of Health Division of Drinking Water Contacts

Northwest Drinking Water Operations

20425 72nd Avenue South • Building 2 • Suite 310 Kent, WA 98032-2358 Phone: (253) 395-6750 Fax: (253) 395-6760 Counties: Island, King, Pierce, San Juan, Skagit, Snohomish, Whatcom

Southwest Drinking Water Operations

243 Israel Road SE 1st floor PO Box 47823 Tumwater, WA 98501 Olympia, WA 98504-7823 Phone: (360) 236-3030 Fax: (360) 236-3029 Counties: Clallam, Clark, Cowlitz, Grays Harbor, Jefferson, Kitsap, Lewis, Mason, Pacific, Skamania, Thurston, Wahkiakum

Eastern Drinking Water Operations

River View Corporate Center 16201 East Indiana Avenue • Suite 1500 Spokane Valley, WA 99216 Phone: (509) 329-2100 Fax: (509) 329-2104 Counties: Adams, Asotin, Benton, Chelan, Columbia, Douglas, Franklin, Ferry, Garfield, Grant, Kittitas, Klickitat, Lincoln, Okanogan, Pend Oreille, Spokane, Stevens, Walla Walla, Whitman, Yakima

TTY Relay Service for all offices: 1-800-833-6388

https://www.doh.wa.gov/CommunityandEnvironment/DrinkingWater/OfficesandStaff



MIE Endorsement Application Attachment F – Water Supply Testing Requirements, continued

1. MIE processors with water supplied from a City, Community, or other Municipal Water System:

MIE processors on any of these water supply systems do not need to test their water supply.

2a. MIE processors with water supplied from a Well, Spring, or Other Private Water System that employ 25 or more people each for day for 60 or more days per year:

These processing facilities must comply with the Department of Health's Group A Water System requirements. Contact the DOH Division of Drinking Water for approval of the water system. Written approval from the DOH Division of Drinking Water is required before an MIE processor endorsement can be issued.

2b. MIE processors with water supplied from a well, spring, or other water system that employs less than 25 people each day excluding immediate family members and/or operate for less than 60 days per year:

These processing facilities meet the Department of Health's definition of a Group B Water System. Contact the DOH Division of Drinking Water or the County Health Department for approval of the water system. Written approval from the DOH Division of Drinking Water or the County Health Department is required before an MIE processor endorsement can be issued. See contact information listed above.

2c. MIE processors with water supplied from a well, spring, or other private water system that operate in a single-family residence and only employ immediate family members:

The water systems for these MIE processing facilities are regulated by the Washington State Department of Agriculture and must meet the Department of Health's Group B requirements for a satisfactory bacteriological analysis. These MIE processors must submit a recent (within one month) satisfactory bacterial analysis report for their water supply before endorsement can be given and every 12 months thereafter. See next page for bacteriological water analysis requirements. If the water is used as an ingredient in the processed product, see 2d below.

2d. Water from a private water system used as an ingredient in processed marijuana-infused edibles:

If an MIE processor uses water as an ingredient in their processing, the water supply must also meet the Department of Health's Group B inorganic chemical and physical requirements for potable water. This includes water used in brine and glazing solutions or water used to reconstitute concentrates or dehydrated products. These processors are required to submit a recent (within one month) satisfactory inorganic chemical and physical analysis report for their water supply before endorsement can be given. A satisfactory Nitrate analysis is also required every three years thereafter. See next page for inorganic chemical and physical characteristic water analysis requirements.



MIE Endorsement Application

Attachment F – Water Supply Testing Requirements, continued

Bacteriological

Water samples taken for bacteriological analysis must be sampled from the furthest end of the water distribution system. The Maximum Containment Level (MCL) for coliform is the presence of coliform in the water sample ([Chapter 246-291-170 WAC](#)). A satisfactory bacteriological water analysis is required prior to endorsement and every 12 months thereafter.

Inorganic Chemical

Water samples taken for inorganic chemical analysis (primary and secondary chemicals) must be collected at the water source or well field before treatment. Review tables below for the Maximum Containment Levels (MCLs) allowed for each primary and secondary chemical ([Chapter 246-291-170 WAC](#)). If the water is used as an ingredient in the processed MIE, a satisfactory inorganic chemical analysis is required prior to endorsement.

Primary Chemicals

Substance	Primary Chemical MCLs (mg/L)
Antimony	0.006
Arsenic	0.05
Barium	2.0
Beryllium	0.004
Cadmium	0.005
Chromium	0.1
Cyanide	0.2
Fluoride	4.0
Mercury	0.002
Nickel	0.1
Nitrite	1.0
Selenium	0.05
Sodium	No MCL established
Thallium	0.002

Secondary Chemicals

Substance	Secondary Chemical MCLs (mg/L)
Chloride	250.0
Fluoride	2.0
Iron	0.3
Manganese	0.05
Silver	0.1
Sulfate	250.0
Zinc	5.0

Nitrate

The Maximum Containment Level for Nitrate is 10.0 mg/L. A satisfactory nitrate water analysis is required prior to endorsement and every three years thereafter.

Physical Characteristics

If the water is used as an ingredient in the processed MIE, a satisfactory physical characteristic analysis is required prior to approval. After initial satisfactory analysis, the Department of Health determines the monitoring frequency on a case-by-case basis.

Substance	MCL
Turbidity	1-0 NTU
Color	15 color units
Hardness	No MCL established
Specific Conductivity	700 umhos/cm
Total Dissolved Solids	500 mg/L