



OREGON LIQUOR & CANNABIS COMMISSION
Labor Peace Agreement Attestation

What is this form?

Oregon voters passed Measure 119 on November 5, 2024, which requires certain cannabis applicants and licensees or certificate holders to submit to OLCC certain information related to labor peace agreements. A labor peace agreement is defined as an agreement that the applicant or licensee, or certificate holder will remain neutral when labor organizations communicate with employees about collective bargaining rights. Any applicant or licensee applying for or renewing a Recreational Marijuana Processor, Retailer, Laboratory license or a Research Certificate will be required to submit at initial licensure and in conjunction with their yearly renewal:

1. A signed labor peace agreement entered into between the applicant and a bona fide labor organization actively engaged in representing or attempting to represent the applicant’s employees; or
2. An attestation signed by the applicant and the bona fide labor organization stating that the applicant and the bona fide labor organization have entered into and will abide by the terms of a labor peace agreement.

An applicant or licensee for a cannabis license or certificate required to comply with Measure 119 **that has entered into a labor peace agreement** and wishes to provide an attestation rather than the signed agreement may use this form to complete the attestation statement required by Measure 119. This attestation **must be** signed by an applicant, licensee, or research certificate holder who is identified and disclosed on the current license or license application and a bona fide labor organization.

Failure to provide a signed labor peace agreement or attestation or to abide by the terms of a labor peace agreement is grounds for the Commission to deny an application for licensure/certification or renewal.

Section 1 – Marijuana Business Information

Business Name:		Application/License Number:	
Tradename:		Premises Address:	

Section 2 – Bona Fide Labor Organization

Labor Organization:		Labor Organization Representative’s Name:	
Contact Email:		Contact Phone Number:	

Section 3 – Attestation

We have entered into and will abide by the terms of a labor peace agreement. By signing this attestation, I verify that I am an applicant, licensee or certificate holder with the above listed business and that all information in this document is true and accurate.

Print Name of Applicant, Licensee, or Certificate Holder:			
Contact Email:		Contact Phone Number:	
Applicant, Licensee or Certificate Holder Signature:		Date:	
Labor Organization Representative Signature:		Date:	