



# Licensing Application Portal Instructions

## Note to Businesses Owners:

Please be sure to speak to the Licensing Administrator **before** submitting a license application to ensure you are applying for all of the correct licenses.

[Licensing@southportland.gov](mailto:Licensing@southportland.gov)

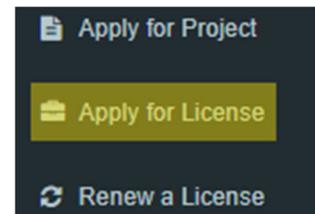
(207) 767-7628

Navigate to [southportland.gov](https://www.southportland.gov) for your **Business License Application!**  
OR

Enter this link into a browser <https://www.southportland.gov/180/Business-License-Applications>

## How to Apply for Business License:

1. Once logged in, select “Apply for License” on left hand menu.  
**ALL BUSINESSES NEED TO APPLY FOR LICENSE IN 2025.**
2. Select desired license application from the list by clicking on “Apply Online” located to the far right of your screen.



Business Type ^	Business Application / Use ↕	Checklist ↕	Details ↕	Apply Online ↕
Adult Use Establishment (18+ Store)	Adult Use Establishment (18+ Store)			<a href="#">Apply Online</a>
Adult Use Marijuana Establishments	Adult Use Marijuana Cultivation Facility			<a href="#">Apply Online</a>

**Helpful Hint:**  
Locate the application faster  
by using features like  
**FILTER** or **SEARCH**.

Filter By:

Business Type ▼

Enter search terms here...

3. A pop up will display asking, if the business is located within SOUTH PORTLAND

**Helpful Hint:**  
To find parcel Number, please refer to the  
**ASSESSORS ONLINE DATABASE:**  
<https://gis.vgsi.com/southportlandme/>

**Parcel Association** ✕

Is your business physically located in South Portland ?



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## Follow the steps provided for application :

4. Search for and select the appropriate parcel, building or suite location.

### ▶ Step 1: Select Land, Building or Suite Location

To search for land records or buildings and suites (stores/classrooms/offices or areas within a building), users can enter any field information below and generate the search.

Once the location is identified, clicking the live link id number will create the business application at the location selected.

If the user cannot find the required location, please contact the municipality for assistance.

Building Name	Land Address
<input type="text"/>	<input type="text" value="ADDRESS"/>
Suite Name	Parcel Number
<input type="text"/>	<input type="text"/>
Owner Name	
<input type="text"/>	

[Generate Search Results](#)

5. Select business type and business sub-type

### ▶ Step 2: Select Business Type & Subtype

Business Type \*  Business Subtype \*

6. Enter any business information and click “Create”.

**IMPORTANT NOTICE:** At this point that the application has been created and assigned an application number.

### ▶ Step 3: Business Information

Primary Contact Information			
First Name *	<input type="text"/>	Last Name *	<input type="text"/>
Email Address *	<input type="text"/>	Home Phone	<input type="text"/>
Business Information			
Legal Business Name *	<input type="text"/>	Business Trade Name *	<input type="text"/>
Business Email *	<input type="text"/>	Phone *	<input type="text"/>
Description	<input type="text"/>	Legal Structure *	<input type="text" value="Corporation"/>
EIN/Tax Number *	<input type="text"/>	City *	<input type="text"/>
Business Address *	<input type="text"/>	Zip *	<input type="text"/>
State *	<input type="text" value="Select State"/>	Mailing City	<input type="text"/>
Mailing Address	<input type="text"/>	Mailing Zip	<input type="text"/>
Mailing State	<input type="text" value="Select State"/>		

[Create](#)



## 7. Add any additional contacts

▶ Step 4: Additional Contacts

Add additional contacts, or click the button to continue to next step.

First Name	<input type="text"/>	Last Name	<input type="text"/>
Phone	<input type="text"/>	Email	<input type="text"/>

## 8. Continue with required information for the application.

**THIS IS AN EXAMPLE ONLY.**

*Read application requirements carefully to provide necessary information. If an application is incomplete it will delay the process and may result in a denial for lack of information.*

## ▶ Step 5: Enter the Required Information in the Fields Below

1) Portal Application - License - Adult Use Marijuana Establishment

### **Portal Application - License - Adult Use Marijuana Establishment**

#### Adult Use Marijuana Establishment

A description of the premises for which the Local License is sought (attach floor plan)

**\*\*\* All of the below must be received and complete to the satisfaction of the City Clerk prior to submission to City staff/City Council for approvals\*\*\***

- State of Maine Office of Marijuana Policy Request for Local Authorization form (DO NOT SUBMIT THIS UNTIL YOU ARE READY TO SCHEDULE FINAL INSPECTION)
- State of Maine Office of Marijuana Policy license application and supporting documents
- State of Maine Office of Marijuana Policy Conditional License Proof of Land Use Approvals (from Code/Planning & Development)
- Complete City License Application (with fee)
- Real Estate taxes paid to date
- Attested copies of By-laws/Articles of Incorporation attached (if not included with State license)
- Floor plan
- Security plan
- Operations manual
- Odor control plan



# Licensing Application Portal Instructions

9. Upload any documents necessary. such as , but not limited to, proof of insurance, floor plans, **current State Licenses if required for your license.**

▶ Step 6: Documents

[Click here to attach files to the case record](#)

Only jpg, pdf, png, gif, tif, doc, docx, ppt, pptx, xls, xlsx, txt, eml, mbox, msg, ogg, mp3, wma, wav, mp4, mkv, avi, mpeg, webm, mov, zip are allowed.

File Name	Uploaded Date
No results found.	

10. Be sure to review the application in detail before submitting.

**IMPORTANT NOTICE:** Once submitted the portal will notify the Licensing Administrator it is available for review.

▶ Step 7: Review and submit

We have received your license application #A25-0008. The application will be reviewed shortly.

11. You will be notified on your portal Dashboard once the application has been reviewed by the Licensing Administrator. Upon review, **an invoice shall be created.**

**IMPORTANT NOTICE:**  
The invoice must be paid in full prior to application being processed.

**Monitor the Status of the Application on the Portal Dashboard throughout the process.**

**License application timelines vary based on type of application from 7 business days to 45 business days**

**If you have any questions, it is best to contact the Licensing Administrator at :**

[Licensing@southportland.gov](mailto:Licensing@southportland.gov)

(207) 767-7628



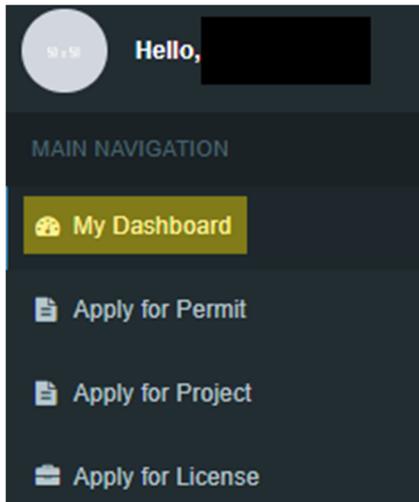
# Licensing Application Portal Instructions

**IMAGE ::: Submit>Review>Invoice>Process>Action**

## **END OF PROCESS**

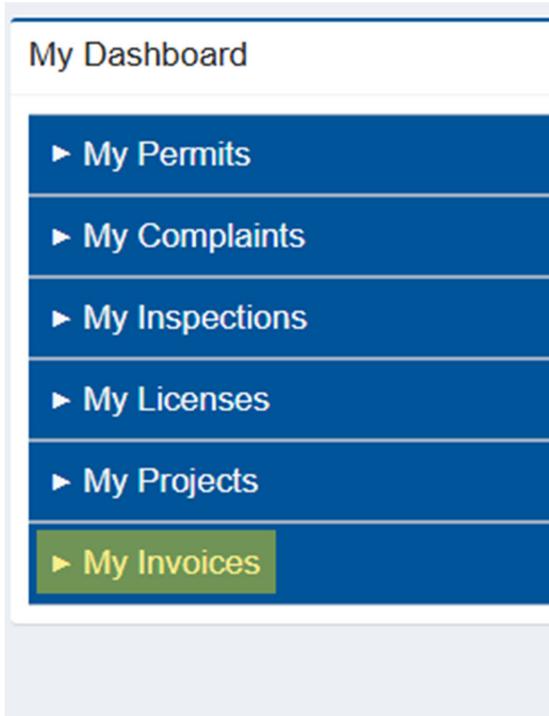
### **Payment:**

1. Once an application is received, staff will review it and create an invoice.
2. Invoices can be viewed under your dashboard.





# Licensing Application Portal Instructions



3. Select "Pay Invoice" on right hand side

▶ My Invoices

Displaying 1-10 of 17 results.

Invoice Number	Assigned To	Assigned To Address	Invoice Date	Due Date	Balance	Actions
25-0013	█	█	2025-02-04	2025-03-21	5620.00	<a href="#">Pay Invoice</a>

4. Make a payment.



# Licensing Application Portal Instructions

## Make a Payment

### Payment Details

Kindly note that if the payment transaction fails for any reason, you will need to file a fresh application.

Fee Type	Description	Case #	Details	Date	Debit	Credit	Balance
License Fees							
-- Adult Use Marijuana Cultivation Facility License Fee	DEFAULT FEE CHARGE			February 04,2025	\$600	\$0	\$600
License Fees		A25-0013					
-- Processing Fee	DEFAULT FEE CHARGE			February 04,2025	\$20	\$0	\$20
	Total Invoice	1		Total	\$620	\$0	\$620

### Invoices

Invoice Date	Invoice Number	Billed To	Due Date	Invoice Amount	Paid Amount	Balance
February 04, 2025	25-0013	test	March 21,2025	\$620	\$0	\$620

Print

Make Payment »

Cancel

5. You can pay online with a credit card. If you prefer to pay with a check or money order, you may mail to;

South Portland City Hall  
Attn: Licensing Administrator or Business License  
PO BOX 9422  
South Portland, ME 04106

Check can be made payable to the City of South Portland and in the memo line include the invoice number.



# Licensing Application Portal Instructions

**CITY OF SOUTH PORTLAND PERMITS** ✕

PAYMENT METHOD

Credit or debit card

Card number

Exp date(MM YYYY)

Security code

eCheck

6. Payment needs to be received before the application shall be sent for review and final action by City Clerk or City Council.