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Grants Portal - Funding Opportunities

Gray & Black Market Marijuana Enforcement Grant Program Fiscal Year 24-25

Status: [Partially Complete](#)

Filed On: 2024-09-23T11:13:23

Filed By: [GRANTS_WEB](#)

Reviewed On: 2024-09-23T11:13:23

Reviewed By:

Reviewer Notes:

Application Overview

The purpose of this grant is to provide financial assistance grants annually to local law enforcement agencies and district attorneys through the local governments for the investigation and prosecution costs associated with unlicensed marijuana cultivation or distribution operations.

- If grantee did not expend grant funds in any given State Fiscal Year, they may not receive grant funds in the following year.
- Grantees that have been unable to annually expend their entire grant balance, may receive a reduced award.

A. APPLICANT/CONTACT INFORMATION



Save

1. Select Your Organization: *

The list is filtered to eligible organizations. If you do not see your organization listed, please contact DLG for further assistance. In the case of a multi-jurisdictional application, please select the lead organization.

Douglas County

2. Principal Representative:

(In the case of a multi-jurisdictional application, principal representative of the lead organization.)

Honorific: Chief Elected Official

First Name: * George

Middle Name:

Last Name: * Teal

Suffix:

Role: * Chief Elected

Mailing Address: * 100 Third St

Address 2:

City: * Castle Rock

State: * Colorado

Zip Code: * 80104

Phone Number: * 303-660-7494

Email Address: * bocc@douglas.co.us

3. Responsible Administrator (will receive all mailings) for the Application:

Same as Principal Representative Address

Honorific: Budget & Logistics Manage

First Name: * Diane

Middle Name:

Last Name: *

Suffix:

Role: *

Mailing Address: *

Address 2:

City: *

State: *

Zip Code: *

Phone Number: *

Email Address: *

Save

B. HONORIFIC / TITLE

Save

1. Confirm Name and Title of Chief Elected Official *

Confirm the **Honorific** (title) of the Principal Representative (Chief Elected Official, e.g. mayor, county commissioner chair, city council president) as identified in Section A, question 2 above. This would not include an elected sheriff position.

2. Confirm Responsible Administrator Title *

Confirm the title (**Honorific**) of the Responsible Administrator within the local government as identified in Section A, question 3 above.

Save

C. APPLICANT AFFIRMATIONS/AGREEMENT WITH TERMS AND CONDITIONS

Save

For each statement below, please confirm your agreement with the terms and conditions associated with the grant funds, should they be awarded to your local government.

1. Affirmation of Associated Costs *

Grant funds can ONLY be used for costs associated with the investigation and prosecution (including large-scale operations, organized crime, and operations that divert marijuana outside of Colorado) of unlicensed marijuana cultivation or distribution operations conducted in violation of state law. Recipient counties and municipalities who spend any grant funds outside of this statutory intent understand that any such funds must be returned to the Department of Local Affairs and agree to do so within 30 days of identification of improper fund use.

Confirm/Agree to Comply

2. Affirmation of Quarterly Reports *

Recipient counties and municipalities must provide DOLA with quarterly itemized reports on how grant funds were spent in that quarter. The reporting form is available for download on the program website.

- If a report is not received for any quarter, funds may be required to be returned to the Department of Local Affairs

Confirm/Agree to Comply

3. Affirmation of Monitoring *

Recipient counties and municipalities will be randomly selected for detailed monitoring of grant fund expenditures. Supporting documentation for grant fund expenditures must be provided promptly to DOLA, if requested, to conduct necessary monitoring.

Confirm/Agree to Comply

4. Affirmation of Funds Made Available to District Attorneys *

Recipient counties agree to cooperate with and make grant funds available to District Attorneys for costs associated with prosecution of unlicensed marijuana cultivation or distribution operations conducted in violation of state law.

***Select one only.**

Counties - Confirm/Agree to Comply Municipalities - N/A (DAs seek funding through counties only)

5. Affirmation of Return of Grant Funds

Recipient counties and municipalities acknowledge that, if NO grant funds are spent in any given state fiscal year, they may NOT receive grant funds in the following year. Due to appropriation limitations in statute, ANY grant funds not spent in a 2-year period must be returned to the Department of Local Affairs.

Confirm/Agree to Comply

Save

D. BOARD APPROVAL/TABOR

Save

1. Official Board Action *

Assurance of community priority. Applications cannot be submitted unless approved by the city/town/county Board, Council or Trustees. Provide the date official action was taken authorizing this application.

10/08/2024

2. TABOR Compliance *

The grant funds for the Gray & Black Market Marijuana Enforcement Grant program are state funds.

Does the applicant have voter authorization to receive and expend state grant funds without regard to TABOR revenue limitations?

Yes

If yes

If yes, explain:

In November 1997, Douglas County voters passed a ballot r

If no

If no, would receipt of these grant funds, if awarded, result in the local government exceeding revenue limitations, prompting a refund?

-- Select Answer --

Affirm local government Attorney has confirmed this TABOR statement. *

Yes

Save

E. STATE ACCEPTANCE OF APPLICATION

Save

The State, upon Acceptance of an Application submitted through the DOLA online grants portal system, agrees to provide financial assistance from the Gray & Black Market Marijuana Enforcement Grant program to the Applicant. The notification of award of financial assistance (Grant Award) indicates that Applicant has met all of the requirements to qualify for a portion of the Gray & Black Marijuana Enforcement Grant monies with such amount to be determined exclusively by the State and has affirmed and confirmed agreement with the stated terms and conditions associated with use of those grant funds.

Confirmation *

Please confirm that you have read the above statement.

I Have Read the Above Statement

Save

Application Footnotes

- Please ensure all information in the application is complete, correct, and current.

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