**Residential Cannabis Grow Compliance Checklist – OH**

*Use this checklist to verify your setup complies with state regulations and best practices.*

**Plant Limits**

\_\_\_\_\_ I am 21 or older.

\_\_\_\_\_ I grow no more than 6 plants, with a maximum of 12 per household.

\_\_\_\_\_ All cultivation takes place at my primary residence.

\_\_\_\_\_ Plants include all flowering, vegetative, and seedlings—they count toward my plant total.

**Location & Visibility**

\_\_\_\_\_ My plants are grown indoors or in a secured, enclosed area (closet, shed, greenhouse) at home that is locked to anyone under 21.

\_\_\_\_\_ The grow area is not visible from public spaces under normal vision.

\_\_\_\_\_ I have permission from the property owner if I'm renting.

\_\_\_\_\_ I do not grow outdoors in open yards, patios, balconies, or any areas visible to neighbors or the public.

**Security & Access**

\_\_\_\_\_ The grow space is locked or secured to limit access.

\_\_\_\_\_ No minors (under 21) or unauthorized individuals may access the grow area

\_\_\_\_\_ Only adult household members (21+) may interact with the plants or grow space.

**Safety Measures**

\_\_\_\_\_ I use code-compliant electrical setups (proper wiring, outlets, surge protection).

\_\_\_\_\_ All water and humidity systems are kept away from electrical outlets and equipment to reduce hazards.

\_\_\_\_\_ My setup includes adequate ventilation and odor control to minimize mold and public nuisance risks.

\_\_\_\_\_ A working fire extinguisher or smoke alarm is installed near the grow area.

**Legal Compliance & Possession**

\_\_\_\_\_ I grow cannabis only for personal use, not for sale or trade.

\_\_\_\_\_ I may transfer up to 6 plants to another adult (21+) without payment or advertising.

\_\_\_\_\_ I possess no more than 2.5 oz flower or 15 g concentrate—at home or in public.

\_\_\_\_\_ Any cannabis over 2.5 oz in public is kept in a sealed container, stored securely out of public view.

\_\_\_\_\_ I comply with local lease terms, HOA rules, or ordinances that may restrict cultivation.

***🖊️ Acknowledgment***

I have reviewed this checklist and understand the legal requirements for personal cannabis cultivation in the state of Ohio. I acknowledge that staying within these guidelines is my responsibility.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_