

DEPARTMENT OF AGRICULTURE/WEIGHTS & MEASURES

Andrew F. Smith
Agricultural Commissioner
Sealer of Weights & Measures



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MEDICAL CANNABIS CULTIVATION ZONING PERMIT RENEWAL APPLICATION

TYPE OF CULTIVATION (check one):

Permit #: APC _____

Issue Date: _____ Exp Date: _____

Cultivate Type: Cottage (C25)
 Specialty Outdoor (SPO)
 Small Outdoor (SMO)

Site Address: _____

City: _____

APN: _____

OFFICE USE ONLY

Date Received: _____

Permit Type: C25 SPO SMO

Total At-Cost Fee: \$ _____

Date Paid: _____

Permit #: APC _____

Issued Date: _____

Expiration Date: _____

Issued By: _____

By submitting this application to the Sonoma County Department of Agriculture/Weights & Measures (AWM), I understand this application, and all information included in this application, will become public record and may be provided in response to public records requests.

APPLICANT INFORMATION

Applicant/Operator Legal Name: _____

DBA: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Cell: _____

Email: _____

Property Owner Name: _____

Property Owner Phone: _____ Fax: _____ Cell: _____

Property Owner Email: _____

Site Address: _____

City: _____ State: _____ Zip: _____

Site Assessor Parcel Number(s): _____

Are you the owner of the property? Yes No

Current Lease Expiration Date: _____

RENEWAL PERMIT INFORMATION

Has Operator been convicted of a felony? Yes No

Has Operator applied for or obtained any other cannabis permits in Sonoma County? Yes No

Are any modifications to current operations proposed? Yes No

If yes, please describe proposed modifications below.

Proposed Modifications (modifications may include, but not limited to: any changes to filed site plans, new structures, increased size of area/cultivation, onsite processing, changes to water supply, grading, new roads, security modifications, or any other changes to the Cannabis Ordinance Exhibit A-2 requirements):

PROJECT AUTHORIZATION DECLARATION

I/We, _____, declare under penalty of perjury that the information provided in connection with this application is true and correct to the best of my/our knowledge. I/we understand that issuance of a cannabis cultivation zoning permit does not relieve me/us of the obligation to comply with other federal, state, or local laws or regulations, or from liability for violations of those laws and regulations. I/we acknowledge that the County of Sonoma is not authorizing a take of any federal or state endangered species by issuance of the cannabis cultivation zoning permit, and I/we further declare under penalty of perjury that a biological assessment of study has been prepared for the site by a qualified expert with respect to impacts on endangered species. I/we have reviewed the opinion of the qualified expert and will take all steps necessary, based on this opinion, to comply with any applicable provisions of the state and federal endangered species acts, and all other applicable state and federal laws. I/we waive any claims of liability for damages against the County of Sonoma and its contractors and agree to indemnify the County of Sonoma and its contractors from and against any claims, suits, or liabilities, arising out of activities I/we undertake based on the issuance of this cannabis cultivation zoning permit.

I/We authorize entry by the Department of Agriculture/Weights & Measures and its contractors onto any and all areas where cannabis cultivation or development is occurring under this cannabis cultivation zoning permit at all reasonable times or whenever an emergency exists to determine whether I/we are complying with zoning permit terms.

Application for Cannabis Cultivation Zoning Permit must be authorized by the owner of the property. The Property Owner Liability form on page 4 must be signed by the owner and submitted as part of the application.

Applicant Name (please print)

Property Owner Name (please print)

Applicant Signature

Property Owner Signature

Title

Title

Date

Date

The renewal application fee will be billed "at-cost" based on the number of staff hours expended to determine approval or denial of the application and may include a site inspection billed at ¼ hour increments. The renewal application fee will also include our annual monitoring fee. The current hourly rate and annual monitoring fee can be found on our website at <https://sonomacounty.ca.gov/AWM/fees>. An invoice will be issued upon completion of the review and prior to issuance of the renewal permit. Payment is required prior to or at the time of renewal permit issuance. Changes authorized by this permit renewal shall not take place until permit renewal is approved.

PROPERTY OWNER LIABILITY

ATTENTION: A property owner will be held responsible, along with a cannabis operator, for any unpaid charges incurred by an operator associated with commercial cannabis activities located on the property, regardless of whether the property owner and operator contract otherwise. Such charges include abatement costs and civil penalties for code violations (and responsibility for abating violations), cannabis business taxes, and penalties/interest/fees for non-payment of cannabis business taxes. In addition to any other remedies available under federal, state, or local law to collect an unpaid amount required to be paid to the County, the County may record on the property a certificate of lien for taxes and associated penalties, interest, and fees, or an abatement lien for abatement costs associated with a code violation. For more information, see Sonoma County Code Section 1-7 et seq. (Enforcement) and Chapter 35 (Cannabis Business Tax Ordinance).

Property Owner Name (please print)

Cultivation Site Address

Property Owner Signature

Assessor Parcel Number

Date

Cannabis Cultivation Applicant Name (please print)