

FEE: \$50.00 New/Renewal

# **CITY OF WEED**

550 Main Street P. O. Box 470 Weed, CA 96094

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www.ci.weed.ca.us

### PLANNING & COMMUNITY DEVELOPMENT DEPARTMENT

#### MEDICAL MARIJUANA CULTIVATION USE PERMIT APPLICATION AND PERMIT FORM

Pursuant to Section 18.60.010 of the Weed Municipal Code: The purpose of this chapter is to regulate the cultivation of medical marijuana for personal use in a manner that protects the health, safety, and welfare of the community and minimizes or eliminates the potential nuisances associated with marijuana cultivation in a manner which is consistent with applicable state and federal laws and regulations.

# I. APPLICANT DATA

A. Name of Applicant (Please Print):			
B. Address or Location of Property:			
C. Property Owner Name: (Please Print):			
D. Owner Mailing Address:			
E. Owner phone #: Owner e-mail:	_		
F. Assessor's Parcel Number(s):			
D. Site Area (acres/sq. ft.):			
E. Current Zoning: F. Existing Use of Property:			
G. Description of Proposal: Applicant will describe proposed cultivation facility including size, number plants, screening, security, structure materials, heating, electricity, water, etc. (see page 2)	r of		

- H. Attach a scaled diagram showing the location of the facilities and indicating the size, and distance from adjoining structures and property lines. (see sample)
- I. Attach a copy of doctor recommendation.

A Permit under this chapter shall not issue unless at least one (1) occupant of the property where the cultivation is to take place executes and delivers to the city, in a form acceptable to the city clerk, written irrevocable permission for law enforcement or other officials of the city to enter, inspect, and photograph the premises at reasonable times and intervals without the necessity of prior notice or probable cause to inspect the cultivation for compliance with this chapter and any other applicable code provisions and state laws. The permittee shall cooperate with the official in arranging for allowing the inspection. The said written permission shall remain in effect for 180 days following the expiration or revocation of the permit and shall be binding upon any persons who occupy the property during its effective period.

#### II. APPLICANT CERTIFICATION

By signing this application, I hereby declare under penalty of perjury that I reside on the above listed premise, and that this application and all information submitted as part of this application are true and accurate to the best of my knowledge. I agree to be bound by conditions of approval. I certify that the information and exhibits submitted are true and correct. I understand that my permit can be revoked or denied if found to be in violation of any of the regulations. I understand that my signature below is written irrevocable permission for law enforcement or other officials of the City to enter, inspect, and photograph the premises at reasonable times and intervals without the necessity of prior notice or probable cause to inspect the cultivation for compliance with any applicable code provisions and State laws. I certify I have read and fully understand WMC 18.60.010.

Signature: Date:
Signature: Date:
Telephone Number: Email:
Mailing Address:
If the information provided above, becomes incorrect, the applicant, within thirty (30) days, shall file with the city clerk an amended application or such other form as the city clerk may then require.
PROPOSED FACILITY DISCUSSION:

## III. AUTHORIZATION AND CONSENT OF PROPERTY OWNER

In signing this application, I, as property owner, have full legal capacity to, and hereby do, authorize the filing of this application. I understand that conditions of approval are binding and agree to be bound by those conditions, subject only to the right to object at the hearings or during the appeal period. I hereby certify that the facts, statements, and information presented within this application form are true and correct to the best of my knowledge and belief. I hereby understand and certify that any misrepresentation or omissions of any information required in this application form may result in my application being delayed or not approved by the City. I hereby certify that I have read and fully understand all the information required in this application form. I further agree and grant authorization to enter said property to the City for the limited purpose of examining the property with respect to the proposed land use. Further, I do do not agree and grant authorization to State and federal agencies to enter said property for the limited purpose of examining the property with respect to the proposed land use. The authorization is valid from the date of this application until the date of project determination or withdrawal. In applying for this application(s), I also agree to diligently process and complete all requirements necessary for said application(s) to be considered complete and ready for processing and I hereby do agree that failure to do so in accordance with City Code constitutes an abandonment of said application(s) and my desire to withdraw said application(s).  I FURTHER AGREE TO DEFEND, INDEMNIFY AND HOLD HARMLESS CITY OF WEED, ITS AGENTS, OFFICERS AND EMPLOYEES FROM ANY LEGAL CHALLENGE RESULTING FROM THIS APPLICATION AND ANY PERMIT ISSUED HEREON. I FURTHER STIPULATE THAT IF I FAIL TO COMPLY WITH ANY CONDITIONS ATTACHED TO CITY APPROVAL I AGREE AND CONSENT TO
THE CITY RESCINDING ANY AND ALL APPROVALS THAT ARE SUBJECT TO THIS APPLICATION.  Name (Pls. Print): Telephone:
Address:
City: Zip:
E-mail:
Signature: Date:
•
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.
STATE OF CALIFORNIA ) ) ss
COUNTY OF SISKIYOU )
On before me,, Notary Public,
Onbefore me,, Notary Public, personally appeared who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
WITNESS my hand and official seal.
[seal]
Notary Public

	IV. For City use only
Application Re	equirements:
	Scaled diagram indicating the location of the cultivation facilities, the size of the cultivation area, and distance from adjoining structures and property lines
	Project description: Includes number of plants and description of cultivation area including screening, security, structure materials, and electrical, water, and heating connections (if any).
	Doctor's recommendation copy(ies). (1 recommendation = 6 plants maximum)
	\$50 fee received: Date: Receipt #
Compliance ch	neck:
	Remarks:
Date	Terrains.
Date	Remarks:
	Remarks:
Date	
	Remarks:
Date	
Planning Depa	artment Findings
☐ No cultivatio	on shall take place in a residence.
Permissible	structure is detached garage; greenhouse; other outbuilding;
	alls are wood; metal; plastic; translucent plastic sheeting;; other (explain);
Setbacks _	(minimum 5 feet from any property boundary line);
Permissible	structure is detached garage; greenhouse; other outbuilding;
	alls are wood; metal; plastic; translucent plastic sheeting; other (explain);
☐ Electrical lin	es and fixtures do not constitute a safety hazard.
☐ Heating equ	ipment does not constitute a safety hazard.
	s screened or fenced with solid materials in such a manner that the medical marijuana is ble from any adjacent public or private right of way, or adjacent public or private property;

Cultivation area demonstrates reasonable means to prevent access to the plants by the public.  Comment:
☐ Cultivation area is not within 300 feet of any public city park playground, school, or public library.
Date: Planning/Zoning Department Reviewer
The city manager shall determine whether the permit shall issue, based upon whether it complies with City regulations and shall issue written findings in the event a permit is denied. The city manager may designate a person to exercise his or her authority in his or her absence.
Cultivation is
APPROVED, (Date of approval): DENIED, (Date of denial):
Permit Conditions: (where checked)
☐ 6 PLANTS MAXIMUM ☐ 12 PLANTS MAXIMUM
Cultivation shall not adversely affect the health or safety of any nearby resident, nor cause physical annoyance or discomfort to any nearby resident, nor cause physical annoyance or discomfort to any nearby resident in any manner, whether by the creation or release of noxious gas, smoke, noise, or odor, nor be hazardous to the public due to the use or storage of materials, processes, products, or waste.
☐ A violation constitutes a public nuisance for which the City or any adversely affected member of the public may seek relief through the courts, in addition to such penalties as may be specified in the Weed Municipal Code.
A use permit issued pursuant to this section may be revoked or suspended by the city council, upon prior notice to the issuee and an opportunity for the issuee to be heard. The hearing shall be in closed session if permitted by law.
Any person who violates any provision of this chapter shall, in the discretion of the city attorney, be guilty of either an infraction or a misdemeanor, and upon conviction shall be punished in the manner then specified by this code or state law. Alternatively, an administrative citation may be issued, as provided in this code.
☐ In addition to criminal penalties, the City may seek a court order to enjoin any activity prohibited by the Weed Municipal Code, or to require the performance of any activity mandated hereby.
Date:
City Manager