



Cannabis Supplemental Application

Applicants must complete and submit this supplemental application along with an application for a Land Use Permit (LUP), Coastal Development Permit (CDP), Conditional Use Permit (CUP), and/or Development Plan (DVP) for commercial cannabis activities. Commercial cannabis activities must comply with Section 35.42.193 (Cannabis Regulations) of the Land Use and Development Code or Section 35-144U (Cannabis Regulations) of the Coastal Zoning Ordinance.

The applicant must submit the following materials:

CHECK ALL ACTIVITIES BEING APPLIED FOR:

- Cultivation
- Nursery
- Non-volatile manufacturing
- Volatile manufacturing
- Testing
- Retail
- Distribution
- Microbusiness

SITE INFORMATION

Parcel Number

South County Office
123 E. Anapamu Street
Santa Barbara, CA 93101
Phone: (805) 568-2000
Fax: (805) 568-2030

Website: <http://www.countyofsb.org/plndev>

CHECK ALL THAT APPLY AND ARE INCLUDED IN THIS SUPPLEMENTAL APPLICATION SUBMITTAL:

To see what applies to your activity type(s) see our checklists at <http://cannabis.countyofsb.org>.

- Archaeological and paleontological surveys for lots (1) that have not been subject to prior surveys and (2) on which ground disturbance is proposed in areas that have not been previously disturbed
- Compliance with the avoidance of prime soils
- Compliance with Cannabis Waste Discharge Requirements General Order
- Compliance with cultivation limits for manufacturing and/or distribution
- Fencing and security plan
- Landscape and screening plan
- Lighting plan
- Compliance with lighting prohibition in hoop structures
- Noise plan
- Odor abatement plan
- Compliance with signage standards
- Tree protection, habitat protection, and wildlife movement plans
- Site transportation demand management plan
- Volatile manufacturing employee training plan
- Compliance with water efficiency standards
- Energy Conservation Plan (in accordance with Chapter 50 – Licensing of Cannabis Operations)

EXEMPTION AND PERMIT LEVEL VERIFICATION

The following items require verification to assure the parcel is located in an area where the activity is permitted and then to determine what type of land use entitlement (e.g., LUP, CDP, CUP, and/or DVP) is required. Check each item below after submitting information to verify compliance.

- Sensitive Receptors.** Cannabis cultivation, distribution, retail, testing, and microbusiness shall not be located within 750 feet from a school providing instruction in kindergarten or any grades one through 12, day care center, or youth center.
Cannabis nurseries shall not be located within 600 feet from a school providing instruction in kindergarten or any grades one through 12, day care center, or youth center.
The distances specified in this section shall be the horizontal distance measured in a straight line from the property line of the lot on which the sensitive receptor is located to the premise, without regard to intervening structures.
- Outdoor Cultivation on AG-I Lots 20 acres or less; Lots zoned AG-I-5; and/or Lots zoned AG-I-10.** Outdoor cultivation, including cultivation in hoop structures, is prohibited in these zones and, in the case of AG-I zones, on lots that are 20 acres or less in size (35.42.075.D.1.a Cannabis Regulations).
- Cannabis cultivation within Existing Developed Rural Neighborhood (EDRN).** Cannabis cultivation located within an EDRN or cultivation that requires the use of a roadway located within an EDRN as the sole means of access to the cultivation lot requires the approval of a CUP.
- Cannabis cultivation adjacent to an EDRN.** Cultivation located on lots zoned AG-II, adjacent to an EDRN and/or the Urban-Rural boundary shall require the approval of a CUP.

24-HOUR CONTACT (excluding those who are not required to have odor plans)
 The 24-Hour Contact is the person who will be responsible to respond to odor complaints. Please provide the following information regarding the person to be designated as the 24-hour contact, if it is known at the time of submittal of this supplemental application. If you have not determined who will be designated as the 24-hour contact, you will be required to provide the following contact information prior to issuance of the LUP and/or CDP required for the proposed project.

Name	
Address	
City	
Cell Phone	
Email	

Information to be submitted prior to issuance of permit:

- If the 24-hour contact information requested above will not be provided at, or changes following, the time of submittal of this supplemental application, the 24-hour contact information will be required prior to issuance of the permit for the proposed cannabis operation.
- A copy of the postcard containing the phone number of the local contact that has been sent to the property owners of all properties within 1,000 feet of the cannabis activity.

AFFIDAVIT

I, as the cannabis activity applicant, hereby certify to the best of my knowledge, the information contained in this application and all attached materials is correct, true, and complete.

_____	_____	_____
Owner Printed Name	Signature	Date
_____	_____	_____
Applicant Printed Name	Signature	Date
_____	_____	_____
Agent Printed Name	Signature	Date



Applicants must complete and submit this affidavit at approval of their Land Use Permit, Coastal Development Permit, Development Plan, and/or Conditional Use Permit for Cannabis activities. Cannabis activities must comply with Section 35.42.075 (Cannabis Regulations) of the Land Use and Development Code or Section 35-144U (Cannabis Regulations) of the Coastal Zoning Ordinance.

The applicant must submit the following materials:

OCCUPANT/OWNER NOTIFICATION

- A copy of the postcard containing the phone number of the 24-hour contact that has been sent to the property owner and current resident of all properties within 1,000 feet of the cannabis activities.
Attached list of notified owner/occupants.

Activity Address, Apartment/Unit #, City, State, ZIP, Home Phone, Cell Phone

Per Section 35.42.075 (Cannabis Regulations) of the Land Use and Development Code or Section 35-144U (Cannabis Regulations) of the Coastal Zoning Ordinance. You are required to notify neighbors within 1,000 feet of your property of your local contact.

AFFIDAVIT

I, as the cannabis activity(ies) applicant, hereby certify the information contained in this application and all attached materials is correct, true, and complete.

Owner Printed Name, Signature, Date

Applicant or Agent Printed Name, Signature, Date

South County Office
123 E. Anapamu Street
Santa Barbara, CA 93101
Phone: (805) 568-2000
Fax: (805) 568-2030

North County Office
624 W. Foster Road, Suite C
Santa Maria, CA 93455
Phone: (805) 934-6250
Fax: (805) 934-6258