

**INSTRUCTIONS
FOR COMPLETION OF THE
COMMERCIAL CANNABIS REGISTRATION APPLICATION**

1. Incomplete or late applications will be rejected.
2. Questions regarding the completion of this form should be directed to Cannabis@stancounty.com.
3. Each registration application is for one property. The property shall be identified by a single Assessor Parcel Number (APN) and single site address. Indicate all the activities you plan to conduct on the property. If your activities will be conducted on more than one property complete a registration form for each property indicating the activities to be conducted on each property on their respective registration forms. (See License Classifications table in paragraph 9 below.)
4. Assessor Parcel Numbers for your property, size of the property, and zoning designation may be found at: http://gis.stancounty.com/giscentral/public/js/Public_app.html
5. Complete the Property Owner and Applicant information completely, listing all owners of the property and all owners of the commercial cannabis activity to be conducted at that property. Attach a separate page if additional space is needed for owner or applicant information.
6. All property owners and applicants shall sign the Registration Application.
7. All property owners and applicants shall complete the Cannabis Background Investigation Questionnaire and submit with this registration application.
8. NOTE: Please DO NOT contact the County Sheriff Department at this point in the screening process. If your application advances – you will be notified regarding the appropriate process.
9. License Classifications are those defined in Business and Professions Code §§ 26050 and 26061:

A-Type	Adult-use cannabis activity
M-Type	Medicinal cannabis activity
Type 1A	Cultivation; indoor max 5,000 sq.ft.
Type 1B	Cultivation; mixed-light max 5,000 sq.ft.
Type 1C	Cultivation; “Specialty Cottage”
Type 2A	Cultivation; indoor 5,001 -10,000 sq.ft
Type 2B	Cultivation; mixed-light 5,001 -10,000 sq.ft
Type 3A	Cultivation; indoor 10,001 – 22,000 sq.ft
Type 3B	Cultivation; mixed-light 10,001 – 22,000 sq.ft
Type 4	Nursery
Type 5A	Cultivation; indoor large; greater than 22,000 sq.ft.
Type 5B	Cultivation; mixed-light large; greater than 22,000 sq.ft.
Type 6	Manufacturer using nonvolatile solvents
Type 7	Manufacturer using volatile solvents
Type 8	Testing Laboratory
Type 10	Retailer (Storefront and Delivery)
Type 11	Distributor
Type 12	Microbusiness

10. Each M-Type or A-Type license is a separate activity. For example, if you plan a Type- 2B Mixed Light Greenhouse activity and you will be engaging in Medical cannabis as well as Adult-Use cannabis activities at the property, select both M and A Type 2B, and count two (2) permits requested.
11. Microbusiness shall also indicate all activities that are planned to be conducted, such as cultivation type, distributor, manufacturer, and retailer type. Count each activity to be conducted within the microbusiness separately, do not count the microbusiness itself as a separate activity.
12. **The \$4,359 fee is non-refundable.**



Commercial Cannabis Registration Application

**Registration applications accepted
October 2, 2017 at 8:30 a.m. to October 20, 2017 at 3:00 p.m.**

TREASURER/TAX COLLECTOR • COUNTY OF STANISLAUS
1010 10TH STREET, SUITE 2500 • MODESTO • C A • 95354 • (209) 525-6388

PROPERTY INFORMATION OF PROPOSED LOCATION

Assessor Parcel Number(s): _____ Size of Parcel: _____ Zoning: _____
Area to be occupied (sq.ft.): _____
Address: _____

PROPERTY OWNER(s) / APPLICANT INFORMATION

Property Owner Name _____ Phone: _____
 Mailing Address _____
 Email Address _____

 Applicant Name _____ Phone: _____
 Mailing Address _____
 Email Address _____

Property owner consent and background check is required when the Applicant is not the property owner.

Commercial Cannabis Activity Type Requesting

(Please fill out this section completely; check or mark all that apply)

Check **M** for Type M-License and/or for **A** for Type A-License (See instructions for description of license types)

Type 10 – Retailer: **M** **A** Store Front **M** **A** Non-Store Front Type 8- Laboratory ____
Manufacturing: ____ Type 6 (Non-Volatile) ____ Type 7 (Volatile)
Type 11- Distributor ____ ____ Type 12 – Microbusiness

Cultivation Type:

M **A** Type 1A **M** **A** Type 2A **M** **A** Type 3A **M** **A** Type 4
 ____ Type 1B ____ Type 2B ____ Type 3B
 ____ Type 1C

Cultivation Type:

- Indoor
- Greenhouse
 - Mixed Light
 - Natural

Cultivation building size (square feet): _____
Cultivation canopy size(square feet): _____

Total No. Activities Requested: _____

REGISTRATION NUMBER (STAFF ONLY): CCRA 2018-_____

DATE RECEIVED: _____

- \$4,359 Non-Refundable Deposit** **Cash** **Check**

BY MY SIGNATURE BELOW, I CERTIFY TO EACH OF THE FOLLOWING:

- I am the property owner or am authorized to act on the property owner's behalf, and/or applicant and the information I have provided above is correct. I acknowledge that I have read and understand the information contained herein.
- I authorize representatives of this county to enter the above-identified property for inspection purposes during normal business hours.
- My commercial cannabis business registration application is public record. All references to names, addresses, telephone numbers, and project information will be part of this public record and I acknowledge that the County has informed me that I may use an alternate contact address and telephone number.
- I acknowledge my registration does not grant me the authorization to conduct commercial cannabis activity on the identified property until I am issued a Commercial Cannabis Business permit from the County of Stanislaus.
- I understand that registration does not entitle me to commence or continue the operation of a commercial cannabis business in the County nor does it guarantee that I will be issued a permit under Stanislaus County Code or under any state or local law.
- I hereby consent to and authorize the Stanislaus County Sheriff's Office (Sheriff) to conduct a background investigation pursuant to California Penal Code Sections 11105(b)(11) and 13300(b)(11), which authorizes County authorities to access state and local summary criminal history information for employment, licensing, or certification purposes; and authorizes access to federal level criminal history information by transmitting fingerprint images and related information to the Department of Justice to be transmitted to the Federal Bureau of Investigation, every person listed as a property owner, and/or applicant of the commercial cannabis business must submit fingerprints and other information deemed necessary by the Sheriff or his/her designee(s) for a background check by the Stanislaus County Sheriff's Office. Pursuant to California Penal Code Sections 11105(b)(11) and 13300(b)(11), which requires that there be a requirement or exclusion from employment, licensing or certification based on specific criminal conduct on the part of the subject of the record. No person shall be issued a permit to operate a Commercial Cannabis Activity unless they have first cleared the background check, as determined by the County Sheriff or his/her designee(s), as required by this section. I will reimburse the County for the costs of the background investigation, which shall be the actual cost to the Stanislaus County to conduct the background investigation as it deems necessary and appropriate.

Signature of Property Owner

Date

Signature of Property Owner

Date

Signature of Property Owner

Date

Signature of Applicant

Date

Signature of Applicant

Date

Signature of Applicant

Date