



FEE: \$50.00

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

CITY OF WEED

(530) 938-5020
(530) 938-5096 (FAX)

www.ci.weed.ca.us

PLANNING & COMMUNITY DEVELOPMENT DEPARTMENT

MEDICAL MARIJUANA CULTIVATION USE PERMIT APPLICATION

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. Assessor's Parcel Number(s): _____

D. Site Area (acres/sq. ft.): _____

E. Current Zoning: _____ F. Existing Use of Property: _____

G. Attach Description of Proposal: Applicant will describe proposed cultivation facility including size, number of plants, screening, security, structure materials, heating, electricity, water, etc. (see page 3)

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.

II. APPLICANT CERTIFICATION

A. APPLICANT: In signing this application, 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.

Signature: _____ Date: _____

Telephone Number: _____

Mailing Address: _____

City: _____ Zip: _____ E-mail: _____

III. AUTHORIZATION AND CONSENT OF PROPERTY OWNER

A. 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. 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: _____

For City use only:

Application Requirements:

_____ 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.

_____ \$50 fee received : Date: _____ Receipt # _____

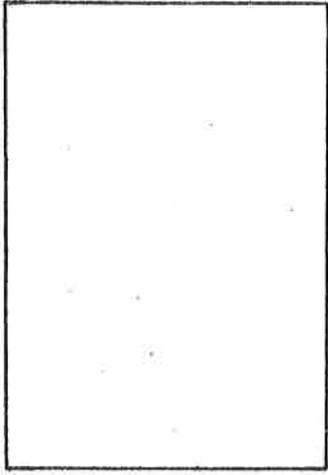
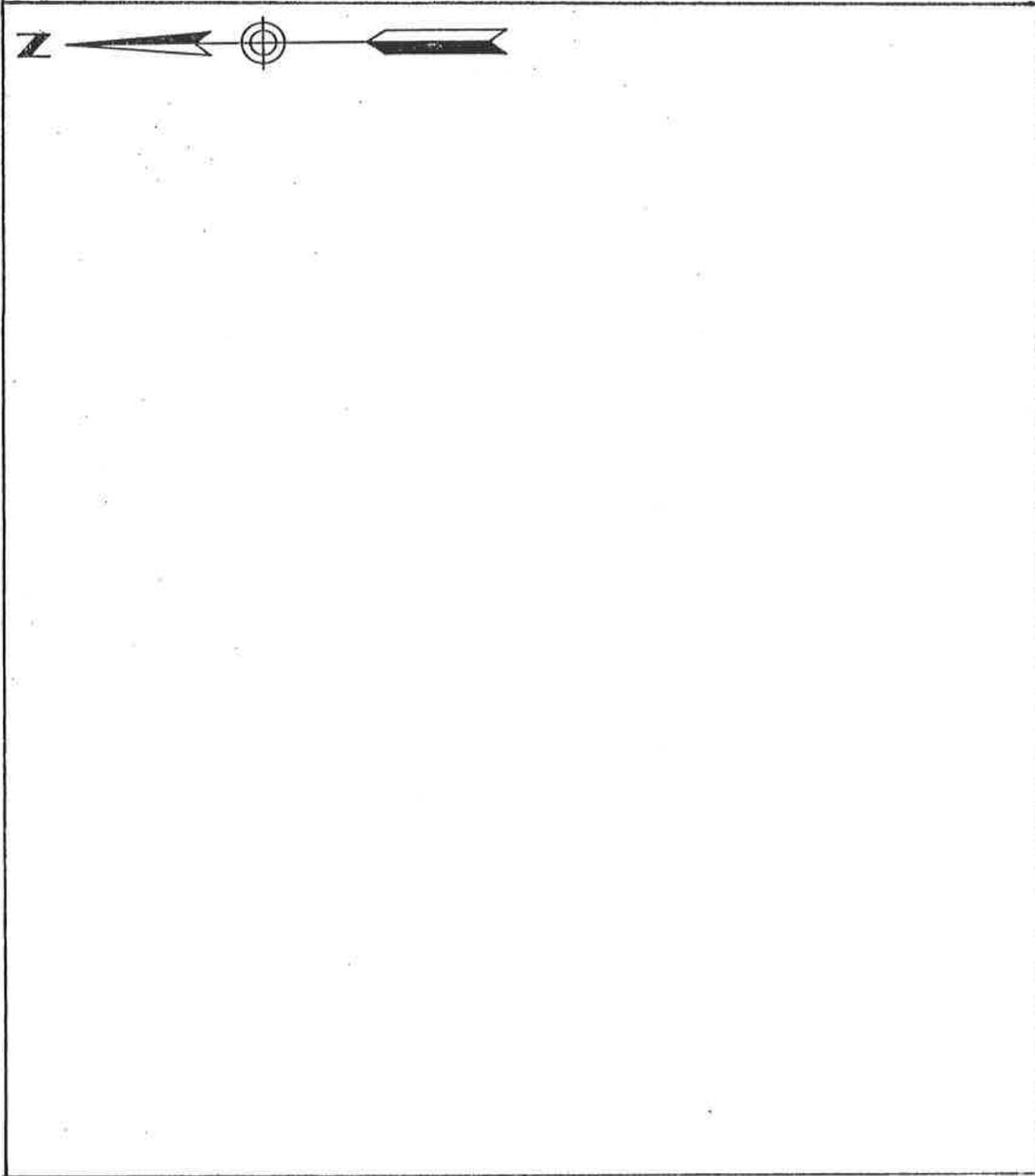
Application is: Approved Denied

City's Administrator Date: _____

P L O T P L A N

(Type or Print in BLACK Ink)

Scale: 1" =



Township _____ Range _____ Section _____

L O C A T I O N S K E T C H

Drawn relative to roads, creeks and other landmarks, so that it may be located in the field. Distance must be shown to the nearest 1/10 of a mile.

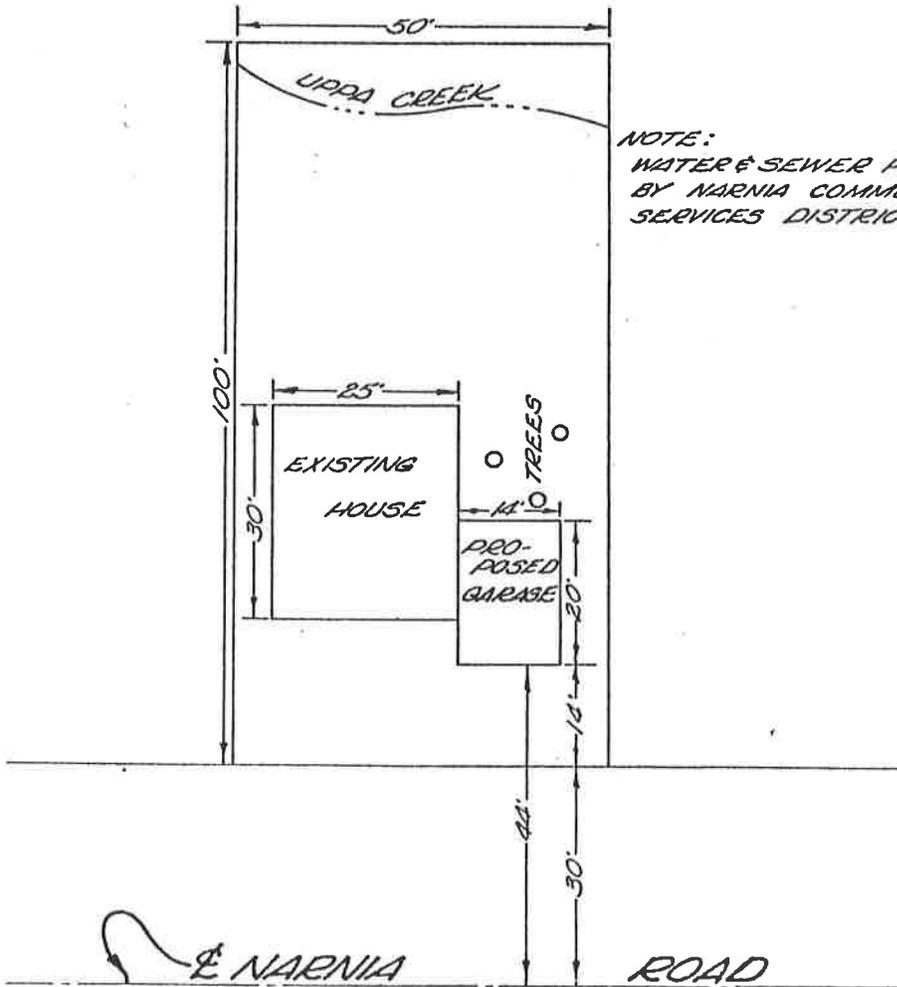
ALL of the following information must be illustrated on the map.

1. Outlines and dimensions of parcel.
2. Location and name of roads fronting on or running through the parcel.
3. Approximate location of existing and proposed buildings and structures. (Label each according to present and proposed use.)
4. If application is for a setback Variance indicate the distance of the proposed structure from the centerline of the County road.
5. Approximate location of any water courses or impoundments.
6. Indicate any easements of record through the property.
7. Location of any existing wells and septic systems.
8. Other topographic features which may affect project.

SAMPLE

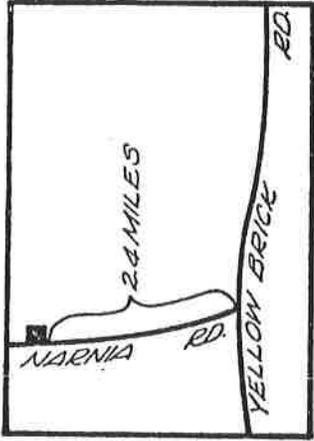
PLOT PLAN

(Please type or Print Neatly in Black Ink)



NOTE:
WATER & SEWER PROVIDED
BY NARNIA COMMUNITY
SERVICES DISTRICT.

Twp. 49N Rn. 21W Sec. 25



LOCATION SKETCH

Drawn relative to roads, creeks, and other landmarks, so that it may be located in the field. Distance must be shown to the nearest 1/10 of a mile.

1"=20' All of the following information must be illustrated on the Map.

1. Outline and approximate dimensions of parcel.
2. Location and name of roads fronting on or running through the parcel.
3. Approximate location of existing and proposed buildings and structures. (Label each according to present and proposed use.)
4. If application is for a setback Variance indicate the distance of the proposed structure from the center-line of the County Road
5. Approximate location of any water courses or impoundments.
6. Indicate any easements of record through the property.
7. Location of any existing wells and septic systems.
8. Other topographical features which may affect project.