



City of Morro Bay

Community Development Department
 955 Shasta Ave
 Morro Bay, CA 93442
 (805) 772-6261 www.morro-bay.ca.us

OFFICE USE ONLY	
Case No.	
Application Submittal Date	
Fee	
Accepted By	

COMMERCIAL MEDICAL CANNABIS OPERATION PERMIT APPLICATION

Pursuant to City of Morro Bay Municipal Code Chapter 5.50

DIRECTIONS: Complete the below application in its entirety for a commercial medical cannabis operation permit. **Attach additional documents, sheets and applications as required or necessary.**

- Upon receipt of a completed application and payment of the application fee, the Community Development Director (“Director”) will determine whether an applicant meets the minimum qualifications for issuance of a Commercial Cannabis Operation Permit.
- If the Director makes a positive determination, then the application will be deemed compliant. The application will then be eligible for review by the Cannabis Permit Committee to determine whether to recommend the permit should issue, as determined by thoroughness of applicant’s adherence to Merit List criteria specified in MBMC Section 5.50.090(C). Upon conclusion of this review, the Cannabis Permit Committee shall make a recommendation to City Manager as to whether or not a permit should be issued.
- The City Manager will then decide whether a permit will issue based upon adherence to Merit List criteria specified in MBMC Section 5.50.090(C).

The purpose of the application process is to ensure that medical cannabis operations maintain and promote the health, safety and welfare of the residents and visitors of the City of Morro Bay, and to ensure that medical cannabis operations will be conducted in a secure, safe and business-like manner, consistent with all applicable local and state laws, rules and regulations governing medical cannabis operations (including without limitation the Compassionate Use Act of 1996 (Proposition 215); the Control, Regulate and Tax Adult Use of Marijuana Act of 2016 (Proposition 64), the Medicinal and Adult Use Cannabis Regulation and Safety Act of 2017, and Morro Bay Municipal Code Chapter 5.50).

APPLICATION FEE: Attach a check or other acceptable form of payment for application filing initial deposit of \$_____.

PLEASE BE ADVISED:

- **OPERATION REQUIREMENTS** - Commercial medical cannabis operations require: 1) a current and valid City of Morro Bay Commercial Medical Cannabis Operation Permit; and 2) the equivalent State License for such commercial medical cannabis operation as provided for by Division 10 of the Business & Professions Code (and as amended) and associated State regulations.
- **OTHER PERMITS/LICENSES** - A permit issued pursuant to this application is not a substitute for any other applicable or required permit or license. Applicant is required to secure all other required permits or licenses, including, but not limited to, for new construction or for tenant improvements.
- **OBLIGATION TO UPDATE** - A commercial medical cannabis operation permittee has a continuing obligation to

update the City of Morro Bay Community Development Director immediately upon the change in status of any information submitted herein. (MBMC § 5.50.110(P)(1))

- PUBLIC RECORDS ACT - This application and any associated documents submitted to the City are subject to public disclosure as may be required by the California Public Records Act.
- ADDITIONAL INFORMATION - Further information and documentation at the sole discretion of the City of Morro Bay Community Development Director may be requested by the City for completion of application.

TYPE OF COMMERCIAL CANNABIS OPERATION

MEDICAL RETAIL MEDICAL (WHOLESALE) DISTRIBUTION

Check one only.

____ Check here if **NEW** Commercial Medical Cannabis Operation Permit

____ Check here if **RENEWAL** of a Commercial Medical Cannabis Operation Permit

PROJECT LOCATION: _____

LEGAL DESCRIPTION (A.P.N.): _____

EXISTING LAND USE OF PROPERTY: _____

ZONING: Permitted medical cannabis operations may locate and/or operate in the Central Business (C-1) Zone, General Commercial (C-2) Zone or the Light Industrial (M-1) Zone, as defined more fully in Title 17 (Zoning), Chapter 17.24 (Primary Districts) of the Morro Bay Municipal Code.

EXISTING ZONING OF PROPERTY: _____

Is the site and/or property located within 600 hundred feet of a school, daycare or youth center (with distance measured as the shortest horizontal distance measured in a straight line from the property line of one site to the property line of another site) as these terms are defined in MBMC § 5.50.030?

YES NO

Is the site and/or property located within 100-feet of a park (with distance measured as the shortest horizontal distance measured in a straight line from the property line of one site to the property line of another site) as this term is defined in MBMC § 5.50.030?

YES NO

If the application is for a medical cannabis retail operation, is the site and/or property located within 100-feet of another medical cannabis retail operation (with distance measured as the shortest horizontal distance measured in a straight line from the property line of one site to the property line of another site)?

YES NO

A. APPLICANT INFORMATION:

APPLICANT: _____

Mailing Address: _____ Phone No. _____

City, State, Zip: _____ E-Mail: _____

BUSINESS OWNER(S) (IF DIFFERENT FROM APPLICANT) (Note: any person or entity meeting the definition of "owner" as understood by Section 26001(a) of the Business and Professions Code is considered a business owner and must be listed on this application): _____

Mailing Address: _____ Phone No. _____

City, State, Zip: _____ E-Mail: _____

LEGAL REPRESENTATIVE: _____

Mailing Address: _____ Phone No. _____

City, State, Zip: _____ E-Mail: _____

(Attach additional sheets as necessary)

B. PROPERTY OWNER CONSENT:

In the event that neither the applicant or representative are the legal owners of the subject property contemplated by this application, the application must be accompanied with a "MEDICAL COMMERCIAL CANNABIS OPERATIONS CONSENT OF PROPERTY OWNER STATEMENT" form, stating and acknowledging that a commercial medical cannabis operation will be operated on the subject property contemplated by this application and containing the notarized signature from the legal owner of the property.

If either applicant or owner are the legal owners of the subject property contemplated by this application, then evidence of such legal ownership shall be submitted in a form that is satisfactory to the Director.

PROPERTY OWNER: _____

Mailing Address: _____ Phone No. _____

City, State, Zip: _____ E-Mail: _____

(Attach additional sheets as necessary)

C. BUSINESS OPERATIONS:

If the application is for a medical cannabis retail operation:

- Estimated Number of annual Qualified Patients and Primary Caregivers (as defined in MBMC Section 5.50.030): _____
- Delivery Service to be provided: ___ Yes ___ No
- Hours of Delivery Service: _____

Owners, employees, and managers, as defined in MBMC Section 5.50.030 **(attach additional sheets if necessary):**

1. MANAGERS. Number of anticipated managers: _____

List the name, address, e-mail and phone number of any person who is or will be responsible for management and/or supervision of the commercial medical cannabis operation. (MBMC § 5.50.070(B)(2a)) Applicant has a continuing duty to update City with subsequently determined individuals and information. (MBMC § 5.50.110(P)(1))

Name: _____

Mailing Address: _____ Phone No. _____

City, State, Zip: _____ E-Mail: _____

Name: _____

Mailing Address: _____ Phone No. _____

City, State, Zip: _____ E-Mail: _____

2. EMPLOYEES. Number of anticipated employees: _____

List the full names of all current and prospective employees of the commercial medical cannabis operation. (MBMC § 5.50.070(B)(2c)) Applicant has a continuing duty to update City with subsequently determined individuals and information. (MBMC § 5.50.110(P)(1))

Name: _____

Name: _____

Name: _____

Name: _____

3. COMMUNITY OUTREACH MANAGER. List the full name, e-mail address, and phone number of an employee of the commercial medical cannabis operation, to be designated as a Community Outreach Manager, who will be responsible for outreach and communication with the surrounding community, including the neighborhood and nearby businesses. (MBMC § 5.50.070(B)(2b)) Applicant has a continuing duty to update City with subsequently determined individuals and information. (MBMC § 5.50.110(P)(1))

Name: _____

Phone No.: _____ E-Mail: _____

D. APPLICANT AUTHORIZATION

I hereby authorize and consent to the Community Development Director of the City of Morro Bay, including his/her designees, to seek verification of the information contained in this application and any attachments.

NAME OF APPLICANT: _____

SIGNATURE OF APPLICANT: _____ **DATE:** _____

NAME OF OWNER (IF DIFFERENT FROM APPLICANT): _____

SIGNATURE OF OWNER: _____ **DATE:** _____

E. TERMS AND CONDITIONS

I hereby certify that I have reviewed the contents of Chapter 5.50 of the City of Morro Bay Municipal Code and

acknowledge, understand, and agree to be bound by its terms and conditions.

NAME OF APPLICANT: _____

SIGNATURE OF APPLICANT: _____ DATE: _____

NAME OF OWNER (IF DIFFERENT FROM APPLICANT): _____

SIGNATURE OF OWNER: _____ DATE: _____

F. FURTHER INFORMATION

I agree to submit any additional and further information as deemed necessary by the Community Development Director, including their designees, in order to process this application.

NAME OF APPLICANT: _____

SIGNATURE OF APPLICANT: _____ DATE: _____

NAME OF OWNER (IF DIFFERENT FROM APPLICANT): _____

SIGNATURE OF OWNER: _____ DATE: _____

G. INSPECTIONS

I agree to permit the City of Morro Bay Operations Officers (City Manager, Community Development Director, Fire Chief, Police Chief, Finance Director) and their respective designees to conduct reasonable unannounced inspections of the location of the commercial cannabis operation, including but not limited to inspection of security, inventory, recordings made by security cameras, and written records and files pertaining to the commercial cannabis operation, for the purpose of ensuring compliance with local and State laws, pertaining to the medical commercial cannabis operation at the discretion of the City.

NAME OF APPLICANT: _____

SIGNATURE OF APPLICANT: _____ DATE: _____

NAME OF OWNER (IF DIFFERENT FROM APPLICANT): _____

SIGNATURE OF OWNER: _____ DATE: _____

H. INDEMNIFICATION AND RELEASE

I release the City of Morro Bay, its elected officials, employees, agents, officers, and representatives, and each and all of them individually, from any and all claims, injuries, damages, or liabilities of any kind arising from (a) any repeal or amendment of Chapter 5.50 of the Morro Bay Municipal Code or any provision of the Planning and Development Code relating to commercial medical cannabis operations and/or deliveries, and (b) any arrest or

prosecution of me, my managers, employees, or members for violation of State or federal laws; and, I hereby agree to indemnify, defend and hold harmless (at Applicant's and Business Owner's sole expense (joint and several), the ability to do so demonstrated through proof of sufficient insurance coverage to the satisfaction of the City the City of Morro Bay, its elected officials, employees, agents, officers, and representatives, and each and all of them individually, from all liability or harm arising from or in connection with all claims, damages, attorney's fees, costs and allegations arising from or in any way related to the operation of the commercial medical cannabis operation (including, but not limited to, (a) brought by adjacent or nearby property owners or any other parties for any damages, injuries, or other liabilities of any kind arising from operations at the subject property contemplated by this application, and (b) brought by any party for any problems, injuries, damages, or other liabilities of any kind arising out of the distribution of cannabis dispensed or sold at the subject property contemplated by this application); and, to reimburse the City for any costs and attorney's fees that the City may be required to pay as a result of such action. Applicant and Business Owner(s) agree that the City may, at its sole discretion, participate at its own expense in the defense of any such action.

Prior to operation of the business, the Business Owner of the Commercial Medical Cannabis Operation approved to operate in the City shall take out and maintain, at its own expense, insurance covering The City, its officers, agents, elected officials, employees, and representatives which shall at all times be maintained while the Business is in operation. The required insurance coverage may part of a Commercial General Liability policy as naming the City as additional insured with minimum insurance limits not less than \$1,000,000, or as a separate owner's policy. Insurance limits in excess of \$1,000,000 may be required by the Director after review and evaluation of the operational characteristics of the Commercial Medical Cannabis Operation.

NAME OF APPLICANT: _____

SIGNATURE OF APPLICANT: _____ DATE: _____

NAME OF BUSINESS OWNER (IF DIFFERENT FROM APPLICANT): _____

SIGNATURE OF BUSINESS OWNER: _____ DATE: _____

I. APPLICANT CERTIFICATION

I certify under penalty of perjury, under the laws of the State of California, that I have personal knowledge of the information contained in this application and its attachments, if any, and that the information contained herein is true and correct.

NAME OF APPLICANT: _____

SIGNATURE OF APPLICANT: _____ DATE: _____

NAME OF OWNER (IF DIFFERENT FROM APPLICANT): _____

SIGNATURE OF OWNER: _____ DATE: _____

GENERAL SUBMITTAL REQUIREMENTS

(Must be submitted at time of application submittal)

INCOMPLETE APPLICATION SUBMITTALS WILL NOT BE ACCEPTED

SUBMITTED

YES NO

1. Fee. Payment for the application fee.

2. Property Owner's Statement of Consent. A statement and acknowledgement from the legal owner of the subject property contemplated by this application consenting to the proposed operation of a medical commercial cannabis operation at his/her property as contemplated by this application shall be submitted.

If either applicant or owner are the legal owners of the subject property contemplated by this application, then evidence of such legal ownership shall be submitted in a form that is satisfactory to the Director.

3. Activities. A general description of the proposed operation, including how the proposed operation will operate in compliance with this Code and state law, plans for handling cash and transporting cannabis and cannabis products to and from the premises, and the proposed use of all areas on the premises, including but limited to specific activities, storage, lighting and signage. (MBMC 5.50.070(B)(1a))

4. Security. A Security plan detailing measures to the satisfaction of the Director that all applicant security related requirements under State or local law, including but not limited to the requirements of Section 5.50.110(B), are and will be met.

5. Development Agreement. Applicants seeking to enter into a development agreement with the City pursuant to Government Code sections 65864, *et seq.*, are encouraged to propose terms and conditions, including but not limited to applicant benefits, public outreach and education, community service, and payment of fees and other charges as mutually agreed. (MBMC 5.50.070(B)(1c))

6. Odor Control. An odor control plan detailing odor control measures in accordance with Section 5.50.110(C), to the satisfaction of the Director. (MBMC 5.50.070(B)(1d))

7. Ownership. Ownership. A description of the statutory entity or business form that will serve as the legal structure for the applicant, the ownership structure of the applicant as filed with the California Secretary of State (e.g. limited liability company, joint partnership, S-Corporation) (an applicant that is a foreign corporation shall include in its application the certificate of qualification issued by the Secretary of State of California), and a copy of the entity's formation and organizing documents, including, but not limited to, articles of incorporation, certificate of amendment, statement of information, articles of association, bylaws, partnership agreement, operating agreement, and fictitious business name statement. (MBMC 5.50.070(B)(1e))

8. Seller's Permit. The seller's permit number issued by the California Department of Tax and Fee Administration (formerly known as the board of equalization) or evidence that

the applicant has applied for a seller's permit from the board of equalization, as applicable. (MBMC 5.55.070(B)(1f))

9. _____ Other Licenses and Permits. Identification of any other licenses or permits for commercial cannabis operations, whether for the city of Morro Bay or for any other licensing or permitting authority:
i. Held currently by the applicant;
ii. Pending approval for the applicant; or
iii. Denied to, revoked from or suspended for the applicant.
(MBMC 5.50.070(B)(1g))
10. _____ Physical. A general description of the proposed operation, including the street address, parcel number, the total square footage of the site, and the characteristics of the surrounding area. (MBMC 5.50.070(B)(1h))
11. _____ Floor Plan. A scaled floor plan for each level of each building that is part of the business site, including the entrances, exits, walls, and operating areas. The floor plan must be professionally prepared by a licensed civil engineer or architect. (MBMC 5.50.070(B)(1i))
12. _____ Site Plan. A scaled site plan of the business site, that will include at a minimum all buildings, structures, driveways, parking lots, landscape areas, and boundaries. The site plan must be professionally prepared by a licensed civil engineer or architect. (MBMC 5.50.070(B)(1j))
13. _____ Hours of Operation. Proposed hours and days of operation. (MBMC 5.50.070(B)(1k))
14. _____ Consent of Criminal Investigation. Written consent from all employees to fingerprinting and a criminal background investigation by the city, upon a form provided by the city, accompanied with payment of appropriate fees to city to cover the costs of performing such criminal background check. At the discretion of the city and in compliance with state law, the city may use live scan to perform criminal background checks. (MBMC 5.50.070(B)(2d))
15. _____ Identification. For each manager and employee (including community outreach manager), a color photocopy of either a valid California Driver's License or equivalent identification approved by the Director. (MBMC 5.50.070(B)(2e))
16. _____ Land Owner. The name, address, e-mail and phone number of the owner and lessor of the real property upon which the commercial cannabis operation is to be conducted. In the event the applicant is not the legal owner of the property, the application must be accompanied by a notarized acknowledgement from the owner of the property that a commercial cannabis operation will be operated on his/her property. (MBMC 5.50.070(B)(2f))
17. _____ Compliance with State Law. Evidence satisfactory to the Director of compliance with all local and state law requirements governing commercial cannabis operations. (MBMC

18. _____ Insurance. Evidence satisfactory to the Director of compliance with all applicable insurance requirements as provided for by this chapter, local law and state law. Minimum insurance levels shall be determined by the Director after an assessment of the risks posed by the commercial cannabis operation, including provision for meeting the requirements of Section 5.50.080(D)(2). (MBMC 5.50.070(B)(3c))

MEDICAL RETAIL SUBMITTAL REQUIREMENTS

(Must be submitted at time of application submittal)

INCOMPLETE APPLICATION SUBMITTALS WILL NOT BE ACCEPTED

SUBMITTED

YES NO

1. Dispensing and Storage Areas. A description and/or diagram explaining how the entrance to the dispensing area and any storage areas shall be locked at all times, and under the control of employees. (MBMC 5.50.120(H))

2. Interior Lighting. A description and/or diagram reflecting that the premises within which the commercial cannabis operation is operated shall be equipped with and, at all times during which is open to the public, shall remain illuminated with overhead lighting fixtures of sufficient intensity to illuminate every place to which members of the public or portions thereof are permitted access with an illumination of not less than two foot-candles as measured at the floor level. (MBMC 5.50.120(J))

3. Sanitation Procedures. Written procedures that maintain the highest industry standards of sanitation and cleanliness for the operation, so as to ensure at all times that the distribution of cannabis remains free from harmful contaminants. (MBMC 5.50.120(M))

4. Training. Written procedures that provide for the highest industry standards of training for employees engaged in commercial cannabis distribution operations. (MBMC 5.50.120(N))

5. Public Information. The written information that will be made available to customers containing a list of the rules and regulations governing medical cannabis use and consumption within the City and recommendations on sensible medical cannabis etiquette. (MBMC 5.50.120(S))

MEDICAL (WHOLESALE) DISTRIBUTION SUBMITTAL REQUIREMENTS

(Must be submitted at time of application submittal)

INCOMPLETE APPLICATION SUBMITTALS WILL NOT BE ACCEPTED

SUBMITTED

YES NO

1. Operation Visibility. A description and/or diagram reflecting how no cannabis or cannabis products on the site will be visible at any time from the public right-of-way, the unsecured areas surrounding the buildings on the site, or the site's main entrance and lobby. (MBMC 5.50.130(E)(1))

2. Entrance and Lobby. A description and/or diagram reflecting that the site will have a building with a main entrance that is clearly visible from the public street or sidewalk, that the main entrance will be maintained clear of barriers, landscaping and other obstructions, and that inside of the main entrance, there will be a lobby to receive persons into the site and to verify whether they are allowed in the operation areas. (MBMC 5.50.130(E)(2))

3. Product Security. A description as to how all cannabis and cannabis products at the site shall be kept in a secured manner at all times. (MBMC 5.50.130(E)(3))

4. Transport Area. A description and/or diagram identifying that each building with a storage area shall have an area designed for the secure transfer of cannabis from vehicles to the storage area. (MBMC 5.50.130(E)(4))

5. Storage Area. A description and/or diagram reflecting how each building shall have adequate storage space for cannabis, each cannabis storage area will be separated from the main entrance and lobby on the site, and how such areas will be secured by lock accessible only to employees of the commercial cannabis distribution operation. (MBMC 5.50.130(E)(5))

6. Sanitation Procedures. Written procedures that maintain the highest industry standards of sanitation and cleanliness for the operation, so as to ensure at all times that the distribution of cannabis remains free from harmful contaminants. (MBMC 5.50.130(F))

7. Training. Written procedures that provide for the highest industry standards of training for employees engaged in commercial cannabis distribution operations. (MBMC 5.50.110(G))

**MEDICAL COMMERCIAL CANNABIS OPERATIONS PERMIT APPLICATION
PROPERTY OWNER'S STATEMENT OF CONSENT**

If the applicant/owner is not the property owner of record of the subject site, the following Statement of Consent must be completed by the property owner of record or the property owner's authorized representative, granting the applicant permission to apply for a medical commercial cannabis operations permit. This form must be notarized.

To: City of Morro Bay
Community Development Director
955 Shasta Ave.
Morro Bay, CA 93442

I, the undersigned legal owner of record, hereby grant permission to:

Applicant: _____ **Phone:** _____

Mailing Address: _____

to operate a medical commercial cannabis operation on the property described below

The subject property is located at: _____

Assessor's Parcel Number: _____

Printed Name of Owner of Record: _____

Address of Owner of Record: _____

Phone: _____ **Email address:** _____

Signature of Owner of Record: _____ **Date:** _____