



TRINITY COUNTY COMMERCIAL CANNABIS MANUFACTURING APPLICATION

This form must be typed

SECTION A - APPLICANT/BUSINESS INFORMATION Please provide the below business information for your Cannabis License.

License Type Designation (Please check one):

- Adult-Use (A-license)
 Medicinal (M-license)
 Both Adult and Medicinal Use

Business Organizational Structure (Please check ONE)

- Sole Proprietorship
 Limited Liability Company
 General Partnership
 Corporation (or foreign corporation)
 Limited Partnership
 Limited Liability Partnership

Name (sole proprietor first and last, all other business types legal business name) _____ Doing Business As (DBA) _____

Business Physical Address	City	State	Zip Code
Mailing Address (if different from premises address)	City	State	Zip Code
Trinity County Physical Address (if different from those above)	City	State	Zip Code
Trinity County Mailing Address (if different from those above)	City	State	Zip Code

Business Website _____ Email Address _____ Phone Number _____

Parcel Number(s): Put a comma between each parcel number _____ General Plan Designation _____ Zoning _____

SECTION B - PRIMARY CONTACT PERSON This will be the contact for any questions regarding this application, including the business's compliance with the track and trace program.

Name	Title	Phone Number	Email Address
------	-------	--------------	---------------

SECTION C - DECLARATIONS

- Is the proposed premises located within a 1000-foot radius of a school (K-12), day care center, or youth center [315-838 (4)(B)]? Yes No
- the proposed premises located within a 500-foot radius of an authorized school bus stop [315-838(4)(B)]? Yes No
- Has the applicant registered this site with Certified Unified Program Agencies ("CUPA") [315-838(4)(G)]? Yes No
- Has the applicant been convicted of a serious felony or a Schedule I, II, or III Felony [315-838(4)(I)]? Yes No
- If applying for a Type 7: Is the proposed premises located within a 100-foot feet from all adjacent property lines [315-838(4)(J)(iii)]? Yes No

SECTION D - LIST OF OWNERS An owner is defined as a person with an aggregate ownership interest of 20% or more, chief executive officer, member of the board of directors of a nonprofit, or an individual participating in the direction, control, or management of the applicant. All business owners must be listed, including yourself. Attach additional pages if needed.

Name	Email	Ownership %	Title	
Mailing Address	City		State	Zip Code
Name	Email	Ownership %	Title	
Mailing Address	City		State	Zip Code
Name	Email	Ownership %	Title	
Mailing Address	City		State	Zip Code
Name	Email	Ownership %	Title	
Mailing Address	City		State	Zip Code

SECTION E - NON-OWNERS WITH A FINANCIAL INTEREST IN THE BUSINESS 5%-19.9% Ownership (attach additional pages if needed)

Name	Date of Birth
Government ID Type	Government ID Number
Name	Date of Birth
Government ID Type	Government ID Number
Name	Date of Birth
Government ID Type	Government ID Number
Name	Date of Birth
Government ID Type	Government ID Number

SECTION F - FICTITIOUS BUSINESS NAMES

Business Name

Address	City	State	Zip Code
Business Name			
Address	City	State	Zip Code

SECTION G - OPERATIONAL ACTIVITIES

Product Types	M	A	Activities	M	A	Extraction Methods	M	A
Edibles			Extraction			Butane/Hexane/Propane		
Concentrates			Infusion			Ethanol		
Topicals			Packaging/Labeling			Carbon Dioxide (CO2)		
Capsules						Water/Food-grade Dry Ice		
Vape Cartridges						Food-grade Butter/Oil		
Tinctures						Mechanical		
Other:						Other:		

SECTION H - LICENSING FEES

Type 6: \$5,000.00 plus \$1,000 towards the General Plan update. Transfer Fee from entity to another: \$1,000
 Type 7: \$6,000.00 plus \$1,000 towards the General Plan update. Transfer Fee to another site: 50% of initial fee plus
 Type N: \$2,000.00 plus \$500 towards the General Plan update. the general plan update fee
 Type P: \$2,000.00 plus \$500 towards the General Plan update.
 Type S: \$2,000.00 for non-cultivators; No fee for Trinity County Cultivators (**not available at this time**)

AFFIRMATION AND CONSENT

Under penalty of perjury, I hereby declare that the information contained within and submitted with the application is complete, true, and accurate. I understand that a misrepresentation of fact is cause for rejection of this application, denial of a license, or revocation of a license issued.

Applicant Signature	Printed Name	Date Signed
---------------------	--------------	-------------

REQUIRED ATTACHMENTS

Please attach the following documents to this application:

1. Security Plan [315-838(4)(D)]
2. Materials List (attached)
3. Application from the appropriate Use Permit
4. Type 7 Required Additional Documentation [315-838(4)(J)]
 - A) Proof of closed loop system
 - B) Proof of Wastewater Disposal System
 - C) Proof that all buildings have operational automatic fire sprinklers
 - D) Proof of 100' setback from all property lines or variance application

See Disclosures on the Next Page

DISCLOSURES

Mandatory Submission

Submission of the requested information is mandatory unless otherwise noted on the application. Trinity County will use the provided information to determine qualification for licensure, per Ordinance 315-838. Failure to provide any of the requested information will result in the application being deemed incomplete by the Bureau. The Bureau will also use this information to enforce licensing standards set by law and regulation, update and maintain current licensee information, and for mailing purposes.

Social Security Number/Individual Taxpayer Identification Number

Section 30 of the Business and Professions Code and Public Law 94-455 (42 U.S.C.A. 405 (c)(2)(C)) authorizes the collection of an owner's Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN). The disclosure of an owner's SSN or ITIN is mandatory. The information will be used exclusively for tax enforcement purposes and for purposes of compliance with section 17520 of the Family Code. If a SSN or ITIN is not provided, the Bureau will not process the application and you will be reported to the Franchise Tax Board, which may assess a \$100 penalty.

State Tax Obligation

Pursuant to Business and Professions Code section 31(e), the California Department of Tax and Fee Administration (formerly the Board of Equalization (BOE)), and the Franchise Tax Board may share taxpayer information with the Bureau. A licensee or applicant must pay its state tax obligation; an applicant's license may be suspended if the state tax obligation is not paid.

Owner(s) Mailing Address(es)

Trinity County sends all official correspondence to an owner's mailing address. This mailing address may be the owner's primary place of employment, residence, post office box, or mail drop. Mailing addresses are considered public information and are disclosable pursuant to the California Public Records Act (Government Code section 6250 et seq.). Owner names, mailing addresses, licensing statuses, as well as formal disciplinary actions may be accessed on the Bureau website through the License Lookup feature. Please consider this, especially when listing a mailing address.

Premises Location

Ordinance No. 315-838 Section (2) Subsection (4)(B) provides that a licensed premises "shall not be within a 1000-foot radius of a school providing instruction in kindergarten or any grades 1 through 12, day care center, or youth center that is in existence at the time the license is issued.

Access to Personal Information

You may review the records maintained by Trinity County that contain your personal information, as permitted by the Information Practices Act.

Public Information

Trinity County makes every effort to protect the personal information provided by license applicants. Application information may be disclosed, however, as permitted in response to a California Public Records Act request (Government Code section 6250 et seq.), as permitted by the Information Practices Act (Civil Code section 1798 et seq.), to another government agency as required by state or federal law, in response to a court or administrative order, a subpoena, or a search warrant.

Pursuant to the California Public Records Act (Title 1, Division 7, Chapter 3.5, Government Code sections 6250-6277), on request, Trinity County discloses licensee information including, but not limited to:

- Name
- Mailing address
- License number
- License status
- Original license issue date
- Last license renewal date
- License expiration date
- Disciplinary action
- Copy of license renewal applications
- Copy of license application (excluding personal information such as birth date and social security number)

ACKNOWLEDGEMENT OF DISCLOSURES

I agree to the forgoing disclosures under perjury,

Applicant Signature

Printed Name

Date Signed

Agent's Authorization

If you wish for another party other than the Applicant(s) and Property Owner(s) to edit and/or view yourfile please have them print and sign below. Agents may need to show some form of ID when requesting to view or alter your application. If you do not have any agents, please state "NONE"

Name	Signature

*Applicant(s) and Property Owner(s) please sign below
Please sign in blue ink to distinguish that this is an original document*

Signature_____

Date_____

Signature_____

Date_____

Signature_____

Date_____

Trinity County Planning Department

Cannabis Division

Acknowledgement Form

The applicant(s) and property owner(s) acknowledge that:

1. The Applicant(s) will only employ individuals at least twenty-one (21) years of age, require a Federal or State issued proof of identification be carried at all times on property, and will comply will all applicable state and federal requirements for payment of payroll taxes, including federal and state income taxes and/or contribution for unemployment insurance, state workers' compensation liability law.
2. Applicant(s) and property owner(s) have reviewed Ordinance No. 315-838. Applicant(s) and property owner(s) understand the requirements, will comply with the requirements, and understand the consequences of Non-Compliance.
3. Applicant(s) and property owner(s) will comply with Local, State and Federal regulator agencies.
4. Applicant(s) and property owner(s) consent to on-site inspections of their parcel by Trinity County officials and any other reviewing agencies.
5. Applicant(s) and property owner(s) consent that all structures and buildings on parcel will be built in accordance with applicable Trinity County Building Codes, Environmental Health Codes, and any permit requirements.
6. Applicant(s) and property owner(s) acknowledge that the information provided with my application may be released as required by law, judicial order, or subpoena, and could be used in a criminal prosecution.
7. Applicant(s) and property owner(s) acknowledge that approval of this application does not provide any property rights or entitlements, and it does not guarantee that a license will be issued years following.
8. Applicant(s) and property owner(s) acknowledge that the application fee is non-refundable even the land use request is canceled, if it is denied during the Planning permit review process, or a condition letter is issued.
9. Applicant(s) and property owner(s) acknowledge that without a complete application the application will be delayed.
10. Applicant(s) and property owner(s) acknowledge that the Planning Department reserves the right to request additional information if necessary to complete review or processing of the application and confirm or promote conformance to ordinance-specific requirements and standards.
11. **The Applicant(s) acknowledges that no site development or operations will occur before a the appropriate Use Permit is obtained pursuant to Ordinance No. 315-838.**

I agree to the forgoing acknowledgments under perjury under the State of California:

*Applicant(s) and Property Owner(s) please sign below
Please sign in blue ink to distinguish that this is an original document*

Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____

Trinity County Planning Department
Cannabis Division

Indemnification Form

I, hereby agree to the following:

1. I have applied with the County of Trinity for permission to manufacture Commercial Cannabis pursuant to Trinity County Ordinance No. 315-838 (hereafter “Project”)
2. Nothing in this Agreement shall be construed to limit, direct, impede or influence the Trinity County’s review and consideration of the project.
3. I shall defend, indemnify, save and hold harmless the Trinity County, its elected and appointed officials, officers, employees, agents, contractors and volunteers from any and all claims, actions, proceedings or liability of any nature whatsoever (including, but not limited to; any approvals issued in connection with any of the above described application(s) by County; any action taken to provide related environmental clearance under the California Environmental Quality Act (“CEQA”) by County’s advisory agencies, boards or commissions, appeals boards, or commissions, Planning Commissions, or Board of Supervisors; and attorneys’ fee and costs awards) arising out of, or in connection with the County’s review or approval of the project or arising out of or in connection with the acts or omissions of the Applicant, its agents, employees or contractors. With respect to review or approve, this obligation shall also extend to any effort to attack, set aside, void, or annul the approval of the project, including any contention the project or its approval is defective because a County ordinance, resolution, policy, standard or plan is not in compliance with local, state or federal law. With respect to acts or omissions of the Applicant, its agents, employees or contractors, its obligation, hereunder shall apply regardless of whether the County of Trinity prepared, supplied or approved plans, specifications or both.
4. The obligations of Property Owner(s) and Applicant(s) under this Indemnification shall apply regardless of whether any permits or entitlements are issued.
5. Trinity County shall have the absolute right to approve any and all counsel employed to defend the County. To the extent the Trinity County uses any of its resources to respond to such claim, action or proceeding, or to assist the defense, Applicant(s) will reimburse the County upon demand. Such resources include but are not limited, staff time, court costs, County Counsel’s time at its regular rate for non-County agencies, or any other direct or indirect cost associated with responding to, or assisting in defense of, the claim, action or proceedings.
6. For any breach of this obligation the Trinity County may rescind its approval of the project.
7. Applicant(s) shall not be required to pay or perform any settlement unless the settlement is approved in writing by Applicant(s), which approval shall not be unreasonably withheld. The County of Trinity must approve any settlement affecting the rights and obligations of the County.
8. This agreement shall be construed and enforced in accordance with the laws of the State of California.
9. In any legal action or other proceeding brought by either party to enforce or interpret this Agreement, the appropriate venue is the Trinity County Superior Court.
10. Applicant(s) shall pay all court ordered costs and attorney fees
11. The defense and indemnification of Trinity County set forth herein shall remain in full force and effect throughout all stages of litigation including appeals of any lower court judgments rendered in the proceedings.

After review and consideration of all of the foregoing terms and conditions, those who sign below hereby agree to be bound by, fully and timely comply, with all of the foregoing terms and conditions under perjury under the State of California.

***Applicant(s) and Property Owner(s) please sign below
Please sign in blue ink to distinguish that this is an original document***

Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____

Trinity County Planning Department
Cannabis Division

Authorization to Enter Private Property

The Trinity County Planning Department as the lead agency performs the environmental evaluation for the California Environmental Quality Act (CEQA). Other State and local agencies also provide responsible and trustee roles under CEQA. The comments received from these agencies assist the Planning Department in preparing the environmental document for your project. In order for the Department to perform the evaluation on your proposed project we will need permission to allow entry to your property for Planning and any reviewing agency that may need to actually view the property before providing comments.

By signing this authorization to enter your property you are granting the reviewing agencies access to your property for the purpose of evaluating your proposed project. The authorization is valid from the date the Department receives notice of your proposed project and any monitoring periods thereafter.

*Applicant(s) and Property Owner(s) please sign below
Please sign in blue ink to distinguish that this is an original document*

Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____

Trinity County
Planning and Building Department
Commercial Cannabis Cultivation

Material Use Acknowledgement Form:

List any fertilizers, pesticides, rodenticides, herbicides, fuels, petroleum, solar batteries, or any other concerning product being stored on the property.

Type <small>Fuel, Fertilizer, etc.</small>	Name of Material <small>(ex. Mendo Mix, Royal Gold)</small>	Amount Stored Onsite <small>(15 lbs)</small>	Active Ingredients <small>(nitrogen, phosphorus, potassium)</small>

By signing below, I agree that all used materials are properly listed above, stored and labeled correctly
I declare under penalty of perjury that the foregoing is true and correct.

***Applicant(s) and Property Owner(s) please sign below
Please sign in blue ink to distinguish that this is an original document***

Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____



Trinity County Commercial Cannabis Manufacturing-Security Plan

(Required pursuant to Ordinance No. 315-838 Section 2, Subsection 4(B))

- What measures will be used to prevent access to the premises and limited-access areas by unauthorized personnel?
- How will theft or loss of cannabis and cannabis products be prevented?
- What methods will be used to limit access of personnel to those areas of the premises necessary to complete job duties?
- Include descriptions of physical barriers used to secure perimeter access and all points of entry into the manufacturing premises, alarm system, sign in/out procedures, and video surveillance system.
- How will electronic records be secured and backed up?
- How will surveillance footage be stored?