



City of Carson

701 E. Carson St., Carson, CA 90745
 Telephone: (310) 830-7600; ci.carson.ca.us

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

SUPPLEMENTAL APPLICATION FOR COMMERCIAL CANNABIS OPERATION PERMIT (DISTRIBUTION)

Pursuant to Chapter 15 of Article VI of the City of Carson Municipal Code

DIRECTIONS: Complete the below supplemental application in its entirety. **Attach additional documents, sheets and applications as required or necessary.** When supplemental application is complete, turn in completed supplemental application with all necessary documentation to the City of Carson Community Development Director. A supplemental application must be accompanied by either an original, or updated, Main Application for Commercial Cannabis Operation Permit (Cannabis Center).

Inquiries and questions about this applications and the procedures involved should be directed to City of Carson Planning Manager Saied Naaseh who can be contacted at Carson City Hall by telephone at (310) 952-1770 or by email to snaaseh@carson.ca.us.

PLEASE BE ADVISED

STATE LICENSE - Commercial cannabis operations require a City issued permit and a state issued license.

DEPOSIT - A minimum \$25,000 deposit shall accompany a completed application turned into the City to cover City actual costs to review and process the application.

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 - Applicant has a continuing obligation to update the City of Carson Community Development Director within seven (7) days upon the change in status of any information submitted herein. (Carson Municipal Code § 15.120(Q)(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 Carson Community Development Director may be requested by the City for completion of application.

Check one only:

Check here if **NEW** Commercial Cannabis Operation Distribution Supplemental Permit

Check here if **RENEWAL** of a Commercial Cannabis Operation Distribution Supplemental Permit

Identify the associated cannabis center and provide either the completed contemporaneous, or updated subsequent, "main application for commercial cannabis operation permit (cannabis center)" related to this supplemental application:

A. PROPERTY INFORMATION:

STREET ADDRESS OF PROPERTY SUBJECT TO COMMERCIAL CANNABIS DISTRIBUTION:

LEGAL DESCRIPTION OF PROPERTY (INCLUDING A.P.N.): _____

B. APPLICANT AND OWNER 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(al) 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: _____

REQUIRED SUBMISSIONS

Please attach the following documents to your application.

C. INFORMATION REGARDING COMPLIANCE WITH STATE LAW

1. Identify all valid and current state license(s) possessed by applicant, or for which an application is pending, to engage in commercial cannabis (wholesale) distribution in the City of Carson pursuant to Division 10 of the Business & Professions Code.
2. Provide a copy of the current state license(s) identified pursuant to Item C(1), or proof of a pending application with the state for the state license(s) identified pursuant to Item C(1).

D. DISTRIBUTION SITE INFORMATION:

1. **OPERATION VISIBILITY.** Provide 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.
2. **ENTRANCE AND LOBBY.** Provide 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.
3. **STORAGE AREAS.** Provide a description and/or diagram identifying all cannabis storage areas by location within each building.
4. **STORAGE SECURITY.** Provide a description reflecting how 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.
5. **STORAGE SPACE.** Provide a description and/or diagram reflecting and detailing how each building in the site will have adequate cannabis storage space.
6. **CANNABIS SECURITY.** Identify with specificity the measures which will be taken to secure all cannabis and cannabis products at the site at all times so as to deter theft and unauthorized access.
7. **TRANSPORT PLAN.** Provide a description and/or diagram reflecting how, for each building which contains a cannabis storage area, there will be at least one area designed for the secure transfer of cannabis from a vehicle to the storage area for transportation, and identifying said transport area(s) with specificity.
8. **SANITATION PROCEDURES.** Provide 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.
9. **TRAINING.** Provide written procedures that provide for the highest industry standards of training for employees engaged in commercial cannabis distribution operations.
10. **VEHICLES.** Provide a list containing the year, make, model, license plate number, and VIN for all motor vehicles to be used for distribution activities.

E. AFFIRMATION

I, the undersigned, hereby certify and affirm as follows:

1. I will adhere to all approved plans, procedures and specifications as provided for by Section (D) above.
2. I will distribute cannabis and cannabis products only between licensed commercial cannabis operations.
3. I will not conduct retail sales of cannabis or cannabis products.

4. I will not distribute cannabis or cannabis products to retail operations unless such cannabis or cannabis products have been properly tested and approved for retail sale pursuant to State law.
5. Upon demand by any Operation Officer, as defined in Carson Municipal Code Section 15.030(RR), I will make immediately available copies of any required shipping manifests as understood by Section 26070(f) of the Business & Professions Code.
6. The following signs, of at least 8 by 10 inches in size each, will be displayed conspicuously in the lobby of the site, so that each may be readily seen by persons entering the proposed commercial cannabis distribution site:
 - a. "This site is not open to the public"; and
 - b. "Retail sales of any goods and services is prohibited"; and
 - c. "Minors are prohibited from entering this site"; and
 - d. "Smoking, ingesting, or consuming cannabis on or within 20 feet of this site is prohibited".
7. The proposed commercial cannabis distribution site will be closed to the general public. No one will be allowed on the site except for employees or persons with bona fide business or regulatory purposes for being on the site. Minors will be prohibited at all times from entering the site.

NAME OF APPLICANT: _____

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

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

SIGNATURE OF BUSINESS OWNER(S): _____ **DATE:** _____

F. AUTHORIZATION FOR CITY VERIFICATION OF INFORMATION

I hereby authorize and consent to the Community Development Director of the City of Carson, including his or her designee(s), to seek verification of the information contained in this application and any attachments.

NAME OF APPLICANT: _____

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

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

SIGNATURE OF BUSINESS OWNER(S): _____ **DATE:** _____

G. TERMS AND CONDITIONS

I hereby affirm and certify that I have reviewed the contents of Chapter 15 of Article VI of the Carson Municipal Code, with the assistance of legal counsel of my choice, and I acknowledge, understand, and agree to be bound by its terms and conditions.

NAME OF APPLICANT: _____

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

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

SIGNATURE OF BUSINESS OWNER(S): _____ **DATE:** _____

H. FURTHER INFORMATION

I agree to submit any additional and further information as deemed necessary by the Community Development Director, including his or her designee(s), in order to process this application.

NAME OF APPLICANT: _____

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

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

SIGNATURE OF BUSINESS OWNER(S): _____ **DATE:** _____

I. AUTHORIZATION FOR CITY INSPECTIONS

I agree to permit the City's Operations Officers, as defined in Carson Municipal Code section 15.030(RR), to conduct reasonable unannounced inspections of the location of the commercial cannabis operation, at the discretion of the City, for the purpose of ensuring compliance with local and state laws, including but not limited to inspection of security, inventory, and written records and files pertaining to the commercial cannabis operation.

NAME OF APPLICANT: _____

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

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

SIGNATURE OF BUSINESS OWNER(S): _____ **DATE:** _____

J. INDEMNIFICATION

Applicant and Business Owner(s) of the commercial cannabis operation identified by this application, being the undersigned, 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 Carson, 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 commercial cannabis operation; 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.

NAME OF APPLICANT: _____

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

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

SIGNATURE OF BUSINESS OWNER(S): _____ **DATE:** _____

K. 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, and that the information contained herein is true and correct.

NAME OF APPLICANT: _____

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

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

SIGNATURE OF BUSINESS OWNER(S): _____ **DATE:** _____

CHECKLIST OF SUBMITTAL REQUIREMENTS

(Must be submitted at time of application submittal)

***INCOMPLETE APPLICATION SUBMITTALS WILL BE HANDLED IN ACCORDANCE WITH
CARSON MUNICIPAL CODE SECTION 15.080(B)***

SUBMITTED

YES

NO

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Identification of Cannabis Center and Submission of Main Application</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Street Address of Subject Property</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Legal Description of Subject Property</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Name and Contact Information</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Identification of State License(s) Possessed</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Copies of all State Licenses Identified</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Information regarding Non-Visibility of Cannabis</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Identification of Main Entrance and Lobby</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Identification of Cannabis Storage Areas</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Information regarding Separation and Security of Cannabis Storage Areas</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Information regarding Adequacy of Cannabis Storage Space</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Information regarding Security Measures for all Cannabis on Site</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Identification of Cannabis Transport Areas</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Sanitation Procedures</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Employee Training Procedures</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Affirmation</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Authorization</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Certification</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>Completed Main Commercial Cannabis Operation Permit Application including payment of Application Fees</u> |