

Planning and Building Agency  
 Planning Division  
 20 Civic Center Plaza  
 P.O. Box 1988 (M-20)  
 Santa Ana, CA 92702  
 (714) 647-5804  
 www.santa-ana.org

2021



## Commercial Cannabis Business Phase 1/Registration Application

*This application is a public record.*

### Submittal Checklist

Submittals are **only accepted in digital format** on a USB flash drive or CD. Paper submittals are not accepted. Please submit **two (2) USB flash drives or CDs** of the application in person to the Planning Division public counter located at 20 Civic Center Plaza (1st Floor, Ross Annex). All documents on must be formatted to letter size (8.5 by 11-inch) sheets on the USB flash drive or CD.

The following are the submittal items necessary for the **Non-Retail** (Cultivation, Distribution, and/or Manufacturing, or Testing Laboratory) Commercial Cannabis Business Phase 1/Registration Application. In order for your application to be deemed complete and entered into the permit database, all items referenced below must be submitted. Please e-mail the City at [cannabis@santa-ana.org](mailto:cannabis@santa-ana.org) should you have any questions regarding the submittal requirements or need additional information.

Item	Date Submitted
<b>General Information Form.</b>	
<b>Use Disclosure/Submittal Affidavit Form.</b> Please use the form included in this packet. <i>The form must be notarized.</i>	
<b>Map/Aerial Photo.</b> Instructions are included in this packet.	
<b>Location Affidavit.</b> The Location Affidavit, included in this packet, verifies that the proposed location of the business meets all applicable zoning, buffers, and distance criteria established in Chapters 18 and 40 of the Santa Ana Municipal Code.	
<b>Submittal Fee.</b> The submittal fee is payable in cashier's check, money order, or cash only. <i>Credit cards and/or personal checks will not be accepted.</i>	
<b>All items above, except payment, must be submitted in digital format.</b>	

*For office use only:*

CCAN No. \_\_\_\_\_ Accepted by: \_\_\_\_\_

Note: This is not a Regulatory Safety Permit (RSP) to legally operate a Commercial Cannabis Business. DO NOT OPERATE unless a valid Permit is issued.



Commercial Cannabis Business  
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**General Information Form**

I. Applicant Information

- a. Business Name: \_\_\_\_\_
- b. Type(s) of non-retail commercial cannabis business (select all that apply):
  - i. Cultivator: \_\_\_\_\_
  - ii. Manufacturer: \_\_\_\_\_
    - 1. Volatile: \_\_\_\_\_
    - 2. Non-Volatile: \_\_\_\_\_
  - iii. Distributor: \_\_\_\_\_
  - iv. Testing laboratory: \_\_\_\_\_
  - v. Microbusiness: \_\_\_\_\_
- c. Applicant entity structure (corporation, unincorporated association, or other): \_\_\_\_\_

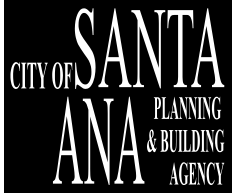
II. Location/Property Information

- a. Business Address: \_\_\_\_\_
- b. Assessor's Parcel Number (APN): \_\_\_\_\_
- c. Map coordinates (latitude/longitude) of business' front door. (See attachment for instructions on obtaining map coordinates.)
  - i. Latitude: 33. \_\_\_\_\_
  - ii. Longitude: -117. \_\_\_\_\_

III. Primary Applicant Information

- a. Contact person (please print): \_\_\_\_\_
- b. Address: \_\_\_\_\_
- c. City, State, and Zip: \_\_\_\_\_
- d. Telephone: \_\_\_\_\_
- e. Email: \_\_\_\_\_

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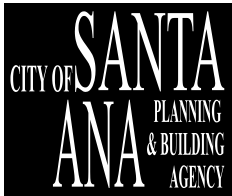
**General Information Form**

IV. Property Owner Information

- a. Property Owner Name (please print): \_\_\_\_\_
- b. Address Line 1: \_\_\_\_\_
- c. Address Line 2: \_\_\_\_\_
- d. City, State, and Zip: \_\_\_\_\_
- e. Telephone: \_\_\_\_\_
- f. Email: \_\_\_\_\_

V. Surrounding Land Uses: Identify all contiguous land uses for properties and/or units abutting the subject location (i.e., residential, school, warehousing, etc.):

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**Use Disclosure/Submittal Affidavit**

Property Address: \_\_\_\_\_

Assessor's Parcel Number(s) : \_\_\_\_\_

Business Name: \_\_\_\_\_

I, as current legal owner, landlord, or lessor of the property identified above and in the attached application(s), acknowledge the submittal of the above application(s). I authorize the commercial cannabis business referenced above to use this property as a Non-Retail Commercial Cannabis Business, as those terms are defined in Chapters 18 and 40 of the Santa Ana Municipal Code, should this Non-Retail Commercial Cannabis Business be selected and approved by the City of Santa Ana for a Regulatory Safety Permit. I further understand that I am responsible for, and also subject to, enforcement actions regarding any violations and/or nuisance activity which may occur at this property. I certify that the information contained in the application package is true and correct to the best of my knowledge.

Recorded Property Owner Signature: \_\_\_\_\_

Printed Name and Title: \_\_\_\_\_ Date: \_\_\_\_\_

Recorded Property Owner Signature: \_\_\_\_\_

Printed Name and Title: \_\_\_\_\_ Date: \_\_\_\_\_

Recorded Property Owner Signature: \_\_\_\_\_

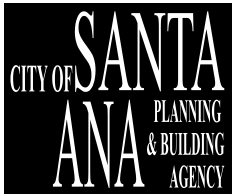
Printed Name and Title: \_\_\_\_\_ Date: \_\_\_\_\_

I certify under penalty of perjury that the foregoing information is true and correct.

Executed on (date): \_\_\_\_\_ in (write location): \_\_\_\_\_.

*Note: An original signature is required on this form as part of the application. An agent for the property owner may sign the application provided that a signed original letter of authorization from the property owner accompanies this affidavit.*

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### Sample Notary Format

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )  
 County of \_\_\_\_\_ )

On \_\_\_\_\_ before me, \_\_\_\_\_,  
*Date Here Insert Name and Title of the Officer*

personally appeared \_\_\_\_\_  
*Name(s) of Signer(s)*

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature \_\_\_\_\_  
*Signature of Notary Public*

*Place Notary Seal Above*

**OPTIONAL**

*Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.*

**Description of Attached Document**

Title or Type of Document: \_\_\_\_\_ Document Date: \_\_\_\_\_

Number of Pages: \_\_\_\_\_ Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: \_\_\_\_\_  
 Corporate Officer -- Title(s): \_\_\_\_\_  
 Partner --  Limited  General  
 Individual  Attorney in Fact  
 Trustee  Guardian or Conservator  
 Other: \_\_\_\_\_  
 Signer Is Representing: \_\_\_\_\_

Signer's Name: \_\_\_\_\_  
 Corporate Officer -- Title(s): \_\_\_\_\_  
 Partner --  Limited  General  
 Individual  Attorney in Fact  
 Trustee  Guardian or Conservator  
 Other: \_\_\_\_\_  
 Signer Is Representing: \_\_\_\_\_

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### **Map/Aerial Photo**

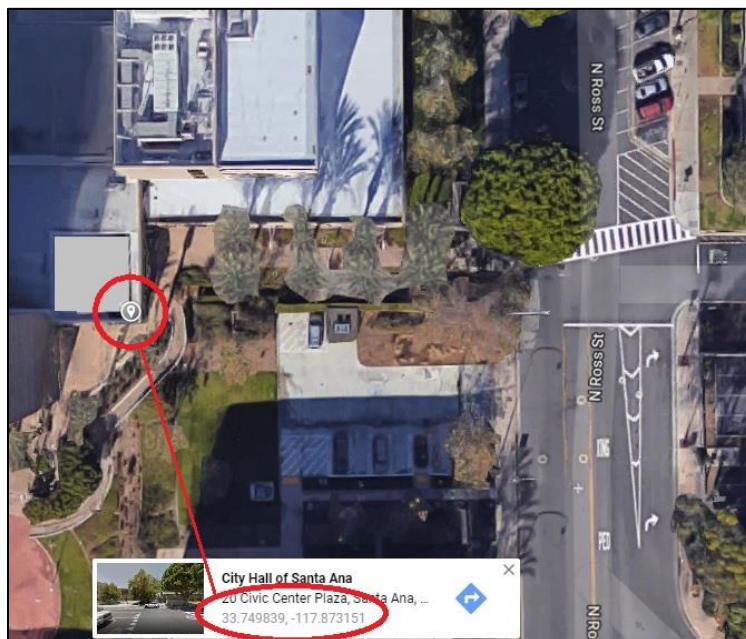
The Santa Ana Municipal Code (SAMC) specifies that no commercial cannabis business, retail or non-retail, shall be located within 1,000 feet of property zoned or used for residential, park, or school purposes, as measured from the property line of the sensitive land use to the footprint of the building in which the commercial cannabis business is proposed. Additional information on this requirement is available in the maps posted online at <http://santa-ana.org/cannabis/> or in the Santa Ana Municipal Code.

**Please provide: 1. Map coordinates, and 2. A digital color aerial photo** with your submittal. Map coordinates may be obtained from Google Maps using the following steps:

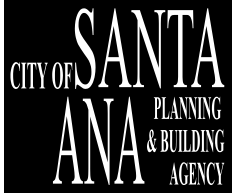
**Step 1** - Open Google from your internet browser and then enter the proposed commercial cannabis business location's address.

**Step 2** - Open the resulting map and zoom in as necessary. Left (single) click where the location of the facility's front door is located.

**Step 3** - The map coordinates will then be displayed near the bottom of the screen in the following format: 33.XXXXXX , -117.XXXXXX. These will be the numbers entered in Section II of the General Information Form.



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**Location Affidavit**

Property Address: \_\_\_\_\_

Assessor's Parcel Number(s) : \_\_\_\_\_

Business Name: \_\_\_\_\_

Primary Applicant Name: \_\_\_\_\_

I, as primary applicant of the commercial cannabis business proposed as noted above, hereby affirm that the commercial cannabis business proposed at the location noted above complies will all applicable separation criteria and sensitive land use buffers required by Chapters 18 and 40 of the Santa Ana Municipal Code.

I acknowledge that an exhibit prepared by a licensed surveyor will be required if the 1,000-foot buffer line from sensitive land uses (schools, parks, and/or existing residential zoned or used property) touches or crosses the property on which the proposed non-retail commercial cannabis business is located, and that the survey must be signed and stamped by a licensed surveyor.

I certify that the information contained in the application package is true and correct to the best of my knowledge.

Primary Applicant's Signature: \_\_\_\_\_

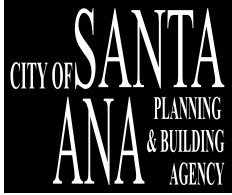
Printed Name and Title: \_\_\_\_\_ Date: \_\_\_\_\_

I certify under penalty of perjury that the foregoing information is true and correct.

Executed on (date): \_\_\_\_\_ in (write location): \_\_\_\_\_

*Note: An original signature is required on this form as part of the application. An agent for the applicant may sign the application provided that a signed original letter of authorization from the property owner accompanies this affidavit.*

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### **Additional Phase 1/Registration Application Information**

#### *Completing the Application*

Phase 1/Registration Application Packets are available online at <http://santa-ana.org/cannabis/>. All components of the application must be submitted at the same time. Partial applications will not be accepted. Applications are **only accepted digitally** on USB flash drive or on CD. The digital application and fee **must be submitted in person** to the Planning counter.

#### *Site Eligibility*

NOTE: Property / Building Eligibility – If any portion of the proposed building is within the 1,000 separation buffer from a park, school, or existing residential zone, that entire building is ineligible for a commercial cannabis business. If the proposed property contains multiple buildings (i.e. industrial park), provided that the building being requested for a commercial cannabis business is not within the 1,000 foot separation buffer, that building is eligible.

Commercial cannabis retail establishments are required to maintain a 500-foot separation from each other, measured directly from main entrance to main entrance. This 500-foot separation **does not apply to non-retail commercial cannabis businesses** (testing laboratories, or cultivation, distribution, and/or manufacturing facilities).

If the 1,000-foot buffer line crosses through or touches a property, a survey stamped and signed by a licensed surveyor is required for additional verification.

#### *Making Your Submittal*

Applications will be accepted at the Planning Counter (20 Civic Center Plaza) during regular business hours only. E-mailed, faxed or mailed applications will not be accepted. Payment for Registration Applications may be made by cashier's check, money order or cash only. Credit cards or personal checks will not be accepted.

Please direct any questions about the application to staff using the information provided online or at the Planning Division public counter.

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