



COUNTY OF MENDOCINO
CANNABIS DEPARTMENT

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[https://www.mendocinocounty.org/departments/
cannabis-department](https://www.mendocinocounty.org/departments/cannabis-department)

CANNABIS CULTIVATION BUSINESS LICENSE APPLICATION WITHDRAWAL

APPLICANT INFORMATION

Applicant Name(s): _____

Application Number: CAN_____ - _____ CCBL Type: _____

Assessor Parcel Number: _____

Cultivation Site Address: _____

City: _____ State: _____ Zip Code: _____

REASON FOR WITHDRAWAL

I, _____ (applicant name) wish to withdraw the above-referenced
cannabis cultivation application because:

AFFIDAVIT

I declare under penalty of perjury, under the laws of the State of California, that the information provided
herein is true and correct and that I agree to act in accordance with the statements herein.

DISCLAIMER : Once the withdrawal is processed, licensees/applicants are unable to remain in program. Please be aware that you
may not be able to reapply under the same conditions as original CCBL in the future due to zoning restrictions with Phase III licenses.

Applicant Signature: _____ Date: _____