CONTACT INFORMATION

PHONE: 707-234-6680

For Office Use Only

mcdpod@mendocinocounty.gov

Accepted by:

Date:

CCBL #: \_

https://www.mendocinocounty.org/departments/cannabis-department

## MENDOCINO COUNTY CULTIVATION AFFIDAVIT

CANNABIS CULTIVATION CCBL APPLICATION PURSUANT CHAPTERS 10a.17 AND 20.242

By affixing my signature to this affidavit, I hereby declare that:

named applicant must complete an affidavit

- I have submitted an application to the Mendocino Cannabis Department for a Cannabis Cultivation Business License (CCBL) to cultivate cannabis pursuant to Mendocino County Code chapters 10A.17 and 20.242.
- 2. I affirm that I have obtained a California Department of Cannabis Control (DCC) annual license to cultivate cannabis within the boundaries of Mendocino County and I shall immediately provide a copy of the issued license to the Mendocino Cannabis Department, or that I am actively working on securing a DCC annual license to cultivate cannabis within the boundaries of Mendocino County, and upon receipt of the issued license I shall immediately provide a copy of the issued license to the Mendocino Cannabis Department.
- 3. I understand that this CCBL may be issued before I obtain a DCC license and that I may not cultivate under this CCBL until I have obtained the appropriate state license.
- 4. I understand and affirm that commercial cultivation of cannabis is not allowed to occur on the cultivation site for which I am applying by myself, my agents, or employees in excess of the amounts licensed by the exemptions listed in Mendocino County Code Section 10A.17.030 without a valid Mendocino County and State of California cultivation license.
- 5. I affirm that my application packet for a CCBL pursuant to Mendocino County Code chapters 10A.17 and 20.242 either meets the requirements to obtain such a cultivation CCBL or that I am actively in the process of fulfilling such requirements.
- 6. Any cannabis cultivation activities conducted by me, my agents, or employees shall be done in conformance with the requirements of the Mendocino County Code chapters 10A.17 and 20.242 and with the California medical and Adult-Use Cannabis Regulations and Safety Act.
- 7. All cannabis or cannabis products under my control or the control of my agents, or employees, cultivated pursuant to Mendocino County Code chapters 10A.17 and 20.242 and the California medical and Adult-Use Cannabis Regulations and Safety Act will be distributed within the State of California.
- 8. By signing this affidavit, I give the Mendocino Cannabis Department authorization to conduct a compliance inspection of the licensed site at any time to satisfy the requirements of the MCCO.
- 9. Unless otherwise provided in my application (initial or renewal), I affirm that all cultivation activities remain the same as originally applied for or licensed and that all information, disclosures, consent, certifications and indemnification in the original application remain the same and are fully applicable to both the initial and the Renewal CCBL.
- 10. I affirm that if any cultivation activities change, I will immediately submit a new Site Plan and a new Cultivation & Operations Plan to the Mendocino Cannabis Department.

I declare under penalty of perjury, under the laws of the State of California, that the information provided on this affidavit is true and correct and that I am authorized to sign on behalf of the entity listed below.

Lacii named applicant must complete a	iii aiiiuavit.	
Affiant Signature↑	Printed name <b>↑</b>	
Official Representative signing for all mem	nbers of entity (if applicable):↑	
Date:		