



CITY OF BANNING
 Community Development Department
 99 East Ramsey Street
 Banning, CA 92220
 (951)922-3125

**Marijuana
 Cultivation
 Permit
 Part 1**

APPLICATION INFORMATION (Please type or print clearly using ink.)

Residential Site Address:		Staff Use Only File No:
Assessor's Parcel No(s):	Is the Site Your Full-time Residence? Y/N	Related Files
Legal Description (attach exhibits if necessary):		
Applicant's Name (permit holder):		Phone Number: Email:
Address, City, Zip:		
Legal Property Owner's Name (if different from above):		Phone Number: Email:
Address, City, Zip:		
Applicant's Date of Birth	Applicant's Driver's License Number	

The applicant is responsible for reading, understanding, and complying with the regulations and requirements for Marijuana Cultivation from all government agencies. Please attest to the following facts:

- The Cultivation of Marijuana at this location is for personal use only; not more than six (6) living marijuana plants.
- The location listed on this application is your full-time residence.
- The permit holder is 21 years of age or older (applicant shall provide adequate proof).

LOCATION OF CULTIVATION ON PROPERTY:

Provide a detailed Description including Site Plan and Floor Plan attached to this Application

APPLICANT-OWNER CERTIFICATION / ATTESTATION: I acknowledge the filing of this application and certify that all of the above information is true and correct. Further, I certify that I am presently the legal resident of the above-described property. (If the undersigned is different from the legal property owner, a notarized letter of authorization from the property owner must accompany this form).

Date:	Signature:
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Print Name and Title:

Date Received	Time Received	Fees Received \$	Receipt No.	Received By

OPERATING STANDARDS:

Marijuana Cultivation shall comply with all of the following operating standards and parameters:

1. Non-commercial cultivation of small amounts of marijuana for personal use is only permitted in the Ranch Agriculture (R/A), Ranch Agriculture-Hillside (R/A/H), Rural Residential (RR), Rural Residential-Hillside (RR/H), Very Low Density Residential (VLDR), Low Density Residential (LDR), Medium Density Residential (MDR), and High Density Residential (HDR) zones. (per Ch. 5.34.030)
2. Marijuana cultivation is permitted only on parcels with residential units where the Marijuana Cultivation Permit Holder resides full-time. (per Ch. 5.34.030, Section A)
3. Marijuana Cultivation Permit Holder must have adequate proof that he/she is 21 years or older. (per Ch. 5.35.050, Section A)
4. Marijuana Cultivation Permit Holder shall not participate in marijuana cultivation in more than one location within the City. (per Ch. 5.34.030, Section A)
5. Marijuana cultivation activities may only occur within a residential unit, garage or self-contained accessory structure that is secured, locked and fully enclosed. (per Ch. 5.34.030, Section A)
6. Any accessory structure used for marijuana cultivation must have a valid building permit issued by the City Building Official. The accessory structure shall be no smaller than 120 square feet in size. The accessory structure shall be located within the rear yard area (per Ch. 5.34.030, Section C)
7. The residential unit shall, at all times, maintain a kitchen, bathroom, and primary bedroom(s) for their intended use. (per Ch. 5.34.050, Section B)
8. The structure shall maintain adequate mechanical or electronic security systems, approved by the enforcement officer, and shall install such system prior to the commencement of cultivation.
9. From the public right-of way, there shall be no exterior evidence of Marijuana cultivation. (per Ch. 5.34.030, Section A)
10. The marijuana cultivation area shall not adversely affect the health or safety of the nearby residents by creating dust, glare, excessive light, heat, noise, noxious gases, odors, smoke, traffic, vibration, or other impacts, and shall not be hazardous due to the use of storage of materials, process, products or waste.(per Ch. 5.34.030, Section A)
11. In residential units, any marijuana cultivation activities shall not create humidity, mold, or other nuisance condition.
12. Cultivation shall not exceed six (6) marijuana plants of any size per Marijuana Cultivation Permit Holder. The maximum number of plants shall be limited regardless of the number of qualified patients or primary caregivers residing on the property.(per Ch. 5.34.030, Section A)
13. Marijuana cultivation shall not be upon any property or parcel containing a childcare center, school, or church. Furthermore, the marijuana cultivation activities shall not take place within 1,000 feet of any school, childcare center, public park, government building or church.(per Ch. 5.34.030, Section A)
14. If the Marijuana cultivation is to be conducted on rental property, the property owner's written authorization for the proposed use shall be obtained prior to the submittal for a Marijuana Cultivation Permit.
15. The Director may require any special condition to be made part of the permit.



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**Marijuana
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Part 2**

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DESCRIPTION & IDENTIFICATION OF ANY MATERIALS TO BE STORED AS PART OF CULTIVATION PROCESS

*List and Describe any and all materials used in the process of personal cultivation
(Attach additional sheets if necessary)*

DESCRIPTION of LOCATION SECURITY MEASURES

*List and Describe any and all Mechanical, Electrical, and Locking Devices Used to SECURE LOCATION
(Attach additional sheets if necessary)*

FIRE SERVICES REVIEW

Site Approved (Y/N)	Date:	Reviewed By Fire Department:
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Comment:

ENFORCEMENT OFFICER REVIEW

Site Approved (Y/N)	Date:	Reviewed By Enforcement Officer:
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Comment:



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**Marijuana
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 Part 3**

(Please type or print clearly using ink.)

REASONS FOR REVOCATION:

A Marijuana Cultivation Permit may be revoked or modified by the Director if any one (1) of the following findings can be made:

1. The use or combination of uses on the property, have become detrimental to the public health, safety, welfare or traffic, or constitute a nuisance.
2. The permit was obtained by misinformation, misrepresentation or fraud.
3. The use for which the permit was granted has ceased or was suspended for six (6) or more consecutive calendar months.
4. The condition of the home, or the area of which it is a part, has changed so that the use is no longer justified under the meaning and intent of Municipal Code Chapter 5.34.
5. One (1) or more of the conditions of the Marijuana Cultivation Permit have not been met.
6. The use is in violation of any statute, ordinance, law, or regulations.

ADDITIONAL CONDITIONS FOR APPROVAL

ACKNOWLEDGEMENT:

As legal resident and/or owner of the property, or duly authorized agent, I/we acknowledge that I/we have read and considered the operating standards listed above and that this permit is approved with the conditions listed herein and may be revoked in accordance with the meaning of Municipal Code Chapter 5.34.060.

Date:	Signature:
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Applicant Print or type Name:

Date:	Signature:
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Owner Print or type Name:

MARIJUANA CULTIVATION PERMIT APPROVAL:

Location/Zoning	Reviewed Planning:
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Date:	Signature:
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Community Development Director, City of Banning

Letter of Authorization

APPLICATIONS FOR ZONING/LAND USE ENTITLEMENTS

TO: *Community Development Department
City of Banning
P.O. Box 998
Banning, CA 92220*

RE:

Property Address:	
Assessor's Parcel Number(s):	Zoning:

I/We, the owner(s) of the above described real property, authorize _____
_____, located at _____
_____, to participate in the personal cultivation of Marijuana/Cannabis
for the sole purpose of personal use, as permitted in Chapter 5.34 of the Banning Municipal Code and by
California State Law. I/We agree to authorize enforcement officers to conduct an inspection of the premises.
I/We acknowledge that any application may be denied, modified, or approved with conditions, and that such
conditions or modifications shall be complied with by the owner prior to issuance of any permits or project
approval. Further, the owner agrees to notice the City of Banning immediately should this authorization be
revoked for any reason.

The undersigned hereby certifies to being the fee owner(s) of the property described herein; that to the
best of my/our knowledge the information contained within this authorization is true and correct.

Date _____

(Signature)

(Print name)

State of _____)

ss.

County of _____)

On _____ before me, _____ personally appeared
(Name and title of officer)

_____. 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 this
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 _____

(Notary seal)

Letter of Authorization

ENFORCEMENT OFFICER INSPECTION FOR MARIJUNANA CULTIVATION PERMIT

TO: *Community Development Department
City of Banning
P.O. Box 998
Banning, CA 92220*

RE:

Property Address:	
Assessor's Parcel Number(s):	Zoning:

I, the resident of the above described real property, authorize

The CITY OF BANNING ENFORCEMENT OFFICER, to inspect the above described real property for the purpose of verifying proper use of the property in conformance and compliance with marijuana cultivation for personal use, as permitted in Chapter 5.34 of the Banning Municipal Code by California State Law. I acknowledge that any application may be denied, modified, or approved with conditions, and that such conditions or modifications shall be complied with by the resident prior to issuance of any permits or project approval. Further, I agree to notice the City of Banning immediately in writing should this authorization be revoked for any reason.

The undersigned hereby certifies to being the resident of the property described herein; that to the best of my knowledge the information contained within this authorization is true and correct.

Date _____

(Signature)

(Print name)

State of _____)

ss.

County of _____)

On _____ before me, _____ personally appeared
(Name and title of officer)

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 this 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 _____

(Notary seal)