



**Commercial Cannabis Business
Application
City Of Oxnard
RETAIL AMENDED**

City of Oxnard

Planning Department
214 South "C" Street, Oxnard, CA 93030
Phone: 805.385.7858
oxnard.org/cannabis

APPLICANT (ENTITY) INFORMATION

APPLICANT (ENTITY) NAME: _____ DBA: _____

Physical Address: _____ City: _____ State: _____ Zip: _____

PRIMARY CONTACT (Same as above? Yes No): _____

Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

HAS ANY INDIVIDUAL IN THIS APPLICATION APPLIED FOR ANY OTHER PERMIT IN THE CITY OF OXNARD: Yes No

Retail (Non-Storefront) Retail (Store-front) Testing Lab

Business Formation Documentation: Describe how the business is organized (attach to the Business Plan)

Sole Partnership Corporation General Partnership Limited Liability Partnership
 Limited Partnership Limited Liability Company

PROPOSED LOCATION

PROPERTY OWNER NAME: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Zoning Clearance/Verification Letter (Please attach): Yes No

Assessor's Parcel Number (APN): _____

Proposed Location Square Footage: _____

APPLICATION SUBMITTAL CHECKLIST

Applicants failing to submit all of the following items will be determined ineligible and will not move forward to Phase 2 of the application process. A complete application packet will contain all of the following items:

- One (1) hard copy of the commercial cannabis application (pages 1 –7)*
- Evaluation Criteria items outlined in the Appendix A. (This sections shall not exceed 125 pages)*
- Application and Evaluation Criteria saved in PDF format on a single USB Flash Drive AND sent to HdL by deadline (see application guidelines for address)
- Proof of comprehensive general liability insurance (minimum \$1M per occurrence)**
- Signed and notarized Property Owner Consent form (Page 4)
- Signed Limitations on City Liability (page 5)
- Application Zoning Clearance/Zoning Verification Letter (page 7)
- Phase 1 Commercial Cannabis Business fee (\$2,329.68)

(*Request for background check should be submitted directly to the City's consultant, HdL. Information regarding the background check process can be secured via the application procedures guidelines and also accessible via: https://hdlcompanies.formstack.com/forms/bc_oxnard. Submittal to HdL of the Background check materials is required immediately after submitting an application for Phase 2 (payment of fees). CCB Application, proof of capitalization and background check data are not included in the 125 page limit.)

**Must show evidence prior to the approval of regulatory permit issuance.

SUPPORTING INFORMATION

List all fictitious business names that the Applicant is operating under, including the address where each business is located (within or outside of the City of Oxnard):

Has the Applicant or any of its owners ever been the subject of any administrative action, including but not limited to suspension, denial, or revocation of a cannabis business license/type? If so, please list and explain:

Is the Applicant or any of its owners currently involved in a CCB Application process in any other jurisdiction?

Has the Applicant(s) been subject to any prior code enforcement action whether in or out of the City of Oxnard? Is there a code enforcement action present on the subject building location?

APPLICATION CERTIFICATION

I hereby certify, under penalty of perjury, on behalf of myself and all owners, managers and supervisors identified in this application that the statements and information furnished in this application and the attached exhibits present the data and information required for this initial evaluation to the best of my ability, and that the facts, statements, and information presented are true and correct to the best of my knowledge and belief. I understand that a misrepresentation of fact is cause for rejection of this application, denial of the permit, or revocation of a permit issued.

In addition, I understand that the filing of this application grants the City of Oxnard permission to reproduce submitted materials for distribution to staff, Committees, Commission, and City Council Members to process the application. Nothing in this consent, however, shall entitle any person to make use of the intellectual property in plans, exhibits, and photographs for any purpose unrelated to the City's consideration of this application.

Furthermore, by submitting this application, I understand and agree that any business resulting from an approval shall be maintained and operated in accordance with requirements of the City of Oxnard City Code and State law.

Under penalty of perjury, I hereby declare that the information contained within and submitted with the application is true, complete, and accurate. I understand that a misrepresentation on the facts is cause for rejection of this application, denial of a license or revocation of an issued license.

Name

Signature

Title

Date

For details about the information required as part of the application process, see the Application Procedure Guidelines, City of Oxnard Ordinance Nos. 2972, 2965, 2960 and Resolution No. 15,134. Any information regarding the requirements to complete the application process can be found online at www.oxnard.org/cannabis. For questions please contact the Planning Division at cannabisinfo@oxnard.org

OWNER(S) INFORMATION AND NON-OWNER(S) WITH A FINANCIAL INTEREST IN THE BUSINESS

Identification of all ownership percentage should total 100%. A "financial interest" means an investment into a cannabis business, a loan provided to a cannabis business, or any other equity in a cannabis business but not qualified as an owner. The applicant must provide the following information for all non-owners with a financial interest: their name, date of birth, and ownership percentage (if any).

If an owner resides in the City of Oxnard please identify by indicating "yes".

I declare under the penalty of perjury that the information provided on this disclosure form is true and accurate to the best of my knowledge.

Ownership % _____ **Local Applicant (City Resident):** _____

Name: _____ Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Background Information Included as required? Yes No

Signature: _____ Date: _____

I declare under the penalty of perjury that the information provided on this disclosure form is true and accurate to the best of my knowledge.

Ownership % _____ **Local Applicant (City Resident):** _____

Name: _____ Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Background Information Included as required? Yes No

Signature: _____ Date: _____

I declare under the penalty of perjury that the information provided on this disclosure form is true and accurate to the best of my knowledge.

Ownership % _____ **Local Applicant (City Resident):** _____

Name: _____ Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Background Information Included as required? Yes No

Signature: _____ Date: _____

I declare under the penalty of perjury that the information provided on this disclosure form is true and accurate to the best of my knowledge.

Ownership % _____ **Local Applicant (City Resident):** _____

Name: _____ Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Background Information Included as required? Yes No

Signature: _____ Date: _____

I declare under the penalty of perjury that the information provided on this disclosure form is true and accurate to the best of my knowledge.

Ownership % _____ **Local Applicant (City Resident):** _____

Name: _____ Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Background Information Included as required? Yes No

Signature: _____ Date: _____

Add more pages as necessary to accommodate all Commercial Cannabis Business Owners

PROPERTY OWNER CONSENT FORM

Commercial Cannabis Business

PROPERTY OWNER INFORMATION:

Name	Title		
Business Name (if applicable)	Phone Number		
Mailing Address	City	State	Zip Code
Business Name (if applicable)	Phone Number		

PREMISES LOCATION INFORMATION:

Physical Address	City	State	Zip Code
Tenant Applicant (Business Name)			

If applicant is other than the property owner(s), the owner(s) must provide a signed statement consenting to filing pursuant to Chapter 11, Article XVI of the City of Oxnard City Code. **Original signatures only.**

I/We, as the owner(s) of the subject property, consent to the filing of this application and use of the property for the purposes described herein. We further consent and hereby authorize City representative(s) to enter my property for the purpose of examining and inspecting the property in preparation of processing the application request and/or required environmental review for the processing of the application(s) being filed.

Name	Signature
Title	Date

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.

Subscribed and sworn to before me this _____ day of _____, 20_____, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me _____.
(Name, Notary Public)

Notary Signature	Date of Notarization
------------------	----------------------



Limitations on City Liability and Certifications, Assurances and Warranties

(Must be completed by all applicants)

A. WAIVER AND RELEASE OF LIABILITY AND AGREEMENT TO INDEMNIFY THE CITY OF OXNARD

The undersigned, on behalf of himself/herself and any entity in which he/she has an ownership interest, hereby waives and releases the City of Oxnard and its officers, officials, employees and agents from any and all liability for monetary damages related to or arising from the application for a permit to authorize a person or entity to operate or engage in a cannabis business within the City of Oxnard pursuant to Oxnard City Code Chapter 11, Article XVI, the issuance of the such permit, or the enforcement of the conditions of such permit. The undersigned certifies that he/she and/or any entity in which he/she has an ownership interest shall not file or cause the filing of any claims, acts or proceedings for monetary damages against the City of Oxnard and/or its officers, officials, employees and agents as a result of this permit application, the issuance of the permit and/or the enforcement of the conditions of the permit.

B. RELEASE CITY OF OXNARD FROM LIABILITY FOR ISSUING THE APPLICANT A PERMIT

By applying for a permit pursuant to the Oxnard City Code Chapter 11, Article XVI and by accepting such a permit from the City of Oxnard, the undersigned – on behalf of himself/herself and any entity in which he/she has an ownership interest – waives and releases City of Oxnard, and its officers, officials, employees and agents, from any claims, acts or proceedings for injuries, damages, costs and expenses of any nature whatsoever that result or relate to the investigation, arrest or prosecution of business owners, operators, employees, clients or customers of the applicant/permittee for a violation of state or federal laws, rules or regulations relating to cannabis activities.

C. AGREEMENT TO INDEMNIFY CITY OF OXNARD

By applying for a permit pursuant to the Oxnard City Commercial Cannabis Permit Program and by accepting a permit from the City of Oxnard, the undersigned– on behalf of himself/herself and any entity in which he/she has an ownership interest – agrees to indemnify, defend and hold harmless the City and its officers, officials, employees and agents against all liability, claims and demands of any nature whatsoever arising out of or in any manner related to the issuance of the permit and/or the operation of the commercial cannabis business that is the subject of the permit.

D. LIVE SCAN/BACKGROUND CHECK

I understand Live Scan and a background check is required and will submit documents in accordance with the Application Procedures Guidelines.

E. PERMIT RENEWAL CERTIFICATION

For renewals, the undersigned – on behalf of himself/herself and any entity in which he/she has an ownership interest – represents and certifies that he/she continue to hold in good standing any permit/license required by the State of California where applicable for a commercial cannabis business operation.

F. PROSECUTION UNDER FEDERAL LAW

The applicant understands that operators, employees and members of the commercial cannabis business may be subject to prosecution under Federal Laws.

G. AUTHORIZED TO SIGN

The person whose signature appears below is authorized to sign this application on behalf of the business and has submitted this information and all attachments as required by the application process to obtain a commercial cannabis permit from the City of Oxnard.

I declare under penalty of perjury that the information provided on this form is true and correct and do hereby apply for a permit pursuant to Oxnard City Code Chapter 11, Article XVI.

Applicant Signature Printed Name and Title

Date

CALIFORNIA ACKNOWLEDGEMENT

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 Ventura

On _____ before me, _____
date 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 signatures on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

Place notary seal and/or stamp above

I certify under PENALTY OF PURJURY 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



Zoning Clearance/Zoning Verification
Letter (ZV/ZVL)
Commercial Cannabis Business

City of Oxnard

Planning Department
214 South 'C' Street, Oxnard, CA 93030
Phone: 805.385.7858
www.oxnard.org/cannabis

Name of Applicant:

1. Property Address (One ZV/ZVL per property address):

2. Do you own the Building or are you a tenant/lessee? (Please specify) _____

3. Intended use of the building: (Circle one) Retail or Testing

4. Are you applying for a single cannabis license or multiple licenses for different locations ? (One application is required per property) (Please specify) _____

5. Will chemicals be stored on site (Yes/No)? And if Yes, what are the approximate volume of chemicals to be stored/contained on site?

6. Are you aware of a sensitive use within 600 feet of the property line of the property address? Sensitive use is defined as: The State of California stipulates that cannabis-related uses cannot be located closer than 600-feet from a sensitive use, which is defined by state law as K-12 schools (including private and charter schools), daycare centers, youth centers, and public parks. Local governments, however, are allowed to designate smaller, or larger, buffer zones if these buffer zones are codified in an ordinance. State law mandates the 600-foot distance be calculated, parcel to parcel (boundary line to boundary line). This means if 600 feet touches any part of a legal parcel, the entire area cannot contain cannabis-related uses. State law is silent on the buffer zone from cannabis use to residential properties; setting that buffer is entirely up to the local government. In October 2018, Council determined that the City should adhere to the state-mandated 600-foot buffer and not impose a more stringent distance separation requirement. (Circle one) Yes No

7. Are the walls of the property address framed out of wood or metal or concrete/masonry? (Please specify) _____

8. Are you aware of any code enforcement violations on the property address for which a cannabis license is being sought? (Circle one) Yes No

9. Are any of the applicant(s) currently subject to any code enforcement action(s) within the City of Oxnard or any other jurisdiction? (Circle one) Yes No
If so, explain.
