Mono County Community Development Department

PO Box 347 Mammoth Lakes, CA 93546 (760) 924-1800, fax 924-1801 commdev@mono.ca.gov

Planning Division

PO Box 8 Bridgeport, CA 93517 (760) 932-5420, fax 932-5431 www.monocounty.ca.gov

COMMERCIAL CANNABIS ACTIVITY

HER DEDMIT

			APPLICATION	N # FEE \$				
APP	LICATION		DATE RECEIV	VED				
			RECEIPT #	CHECK # or CASH 🗖				
			RECEIVED B	Υ				
APPLICANT/AGE	NT Eric Edgerton	'			_			
-								
ADDRESS 100432	пму зээ		CII	Y/STATE/ZIP Coleville, Ca 96107				
TELEPHONE (_		E-MA	IL					
PROPERTY OWNI	ER , if other than a	applicant <u>Edgerto</u>	n Family Trust					
ADDRESS 108432 F	Hwy 395 / P.O. Box 20	7	CIT	Y/STATE/ZIP Coleville, CA 96107				
TELEPHONE (775) 291-1480	E-MA	AIL _					
Copy of Title of	r Deed							
OR								
Signed statem	ent of consent and	d a copy of the re	ental agreem	ient				
PROPERTY DESC	RIPTION:							
		0	1 D1 I	and the Decimation Acto				
Assessor's Parcel #	002-430-024-000	Gene	erai Pian Lar	nd Use Designation Ag10				
TYPE OF ACTIVIT	•	nded use on the	property):					
☑ Nursery	☑ Cultivation	☐ Processing		☑ Distribution				
Manufacturing '			0 01	☐ Manufacturing Type 7				
☐ Testing	☑ Retail	Retail						
□ Other								
				ning additional sheets if necessary. N				
incomplete or inad to write or refine t		scription may de	lay project p	processing and/or require additional	staff time			
See attached project of	-							
See attached project (description							

Will the activity take place in an	existing structure?	☐ YES	™ NO	□ N/A	
If NO, have you applied for	a Building Permit?	☐ YES	₫ NO		
WATER CONSERVATION MEAS water systems or other measures					ems, grey
N/A					
ATTACHMENTS: The following d	ocuments are requ	ired for thi	is application to	be deemed complete	e:
☑ Vicinity Map					
Site Plan					
☑ Floor Plan					
☑ Odor Mitigation Plan					
☑ Sign Plan					
☑ Visual Screening Plan					
☑ Lighting Plan					
☑ Parking Plan					
Fire Prevention Plan					
☐ Documentation for any "fi	ixed noise sources"				
DISTRIBUTION ✓ Storage and handling plan	ns				
TESTING FACILITY Certificate of accreditation	n from approved acc	crediting bo	ody		
I CERTIFY UNDER PENALTY OF having an ownership interest in corporation, or \square owner's legal a document must accompany the a	n the property mus gent having Power	st sign, \square of Attorney	corporate offic y for this action	er(s) empowered to a (a notarized "Power	sign for the of Attorney"
E. Edgerton.	01/10/2021 Date	Signature		Date	
orginature	Date	oignaune		Date	
Signature	Date	Signature		Date	
Signature	Date	Signature		Date	
orginature	Date	Jignature		Date	