

# How do I apply for a Cannabis Administrative Development Permit (ADP)?

*(Cultivation canopies between 2,501sqft – 10,000sqft)*

- **First**, review through the Draft Nevada County Cannabis Cultivation Ordinance to ensure your project meets all requirements. You can view the Draft Ordinance online at <https://www.mynevadacounty.com/2185/Cannabis-Conversation>.
- **Second**, review the ADP Application Packet to ensure you have a complete permit submittal including all supplemental attachments and plans. *Incomplete submittals will not be accepted.* This packet is available online at <https://www.mynevadacounty.com/2185/Cannabis-Conversation> or in person at the Nevada County Community Development Agency (CDA) office.
- **Third**, schedule an application submittal appointment. You can schedule an appointment by calling (530) 265-1222 or in person at the CDA office starting at 8:00am on March 4, 2019. Appointments are scheduled on a first come, first serve basis. **These appointments are for complete application submittals only.** General questions and inquiries can be completed during normal Community Development Agency business hours.
- **Fourth**, submit your complete application, site plan, and associated documents for review. Be prepared to pay the required application submittal fees at this time.

## I have submitted my application. Now what?

- Your application and associated documents are anticipated to be reviewed within 30-45 days from the application submittal date.
- Within the anticipated 30-45 day review period, you will receive a letter stating that your application meets the requirements of the proposed draft ordinance OR you will receive an incomplete letter and be requested to submit revised documents to meet minimum requirements.
- If/when the draft ordinance is adopted and your application meets the requirements you will receive an approval letter, field set of plans/documents, conditions of approval, and pay any remaining fees (*if applicable*) at the CDA office. **Please keep in mind during the pre-application period no permits will be issued until the draft ordinance is adopted by the Nevada County Board of Supervisors.** During the pre-application review period staff will be reviewing your project based on the draft ordinance requirements as well as other County Ordinances. Applications submitted during the pre-application period are at the applicant's own risk as the draft ordinance is subject to change prior to adoption.
- Following approval of your ADP you will be contacted regarding the status and process to obtain your Annual Cannabis Permit (ACP). Once the ACP is obtained you will be required to schedule a pre-cultivation inspection within 30 days of issuance. An additional random cultivation inspection will be conducted by a Cannabis Compliance Officer at a later date during cultivation. Passing inspections are required to have a valid ACP and ADP.

**Nevada County Community Development Agency (CDA)**

950 Maidu Ave. Nevada City, CA 95959, Suite 170

(530) 265-1222

[ComDevAgency@co.nevada.ca.us](mailto:ComDevAgency@co.nevada.ca.us)



**NEVADA COUNTY COMMUNITY DEVELOPMENT AGENCY**  
**PLANNING DEPARTMENT**  
ERIC ROOD ADMINISTRATION BUILDING  
950 Maidu Avenue, Suite 170  
Nevada City, California 95959-8617  
(530) 265-1222 FAX (530) 265-9851

**APPLICATION PACKET**  
**CANNABIS ADMINISTRATIVE DEVELOPMENT PERMIT**

Pursuant to Sec. L-II 5.5.1 of Zoning Regulations, Administrative Development Permits (ADPs) provide an administrative review process for those smaller development projects that are consistent with Code standards. The Cannabis ADP review process is applicable and required for the following Commercial Cannabis operations:

- Commercial Cannabis Cultivation with a Canopy of 2,501 to 10,000 square feet.
- Commercial Cannabis Cultivation will only be permitted on parcels in the AG, AE, and FR zoning districts.
- Parcels of 10.00 acres up to 19.99 acres may have cannabis cultivation with up to 5,000 square feet of canopy.
- Parcels of 20.00 acres or greater may have a maximum of 10,000 square feet of canopy.
- Applications shall include all indoors, mixed-light and outdoor cultivation methods.
- Applications shall include all Cannabis Support Areas and Accessory Structures.

Projects that are authorized by an ADP must be determined to be in compliance with the County Land Use and Development Code, all applicable State laws, and ordinance requirements of any affected special districts. Administrative Development Permits are subject to Design Review by the Zoning Administrator unless specifically exempted from review by County Zoning Regulations. Please be aware that Administrative Development Permits are not transferrable or assignable to any other person, entity or property. The project must be denied if it is determined to be inconsistent with the Nevada County General Plan or does not comply with the provisions of all applicable County codes or other applicable laws.

Applications for an ADP must be filed in person in the Planning Department before 3:30 p.m. If all required application documents are attached and all forms completed, your application will be distributed to applicable agencies who will have 21 days to respond. Within 10 days of receiving agency comments, the Planning Department will determine if the application meets the required development standards by approving the project, approving it with conditions, or denying the application if not in conformance with applicable requirements. Prior to application submittal applicants are advised to contact all agencies which might have jurisdiction (County Departments of Public Works, Environmental Health, and the Building Department, Special Districts, Cal Trans, etc.) for conditions that may be incorporated within the project approval. ADP projects are subject to all relevant development fees at the time of construction, including those for roads, recreation and fire protection.



**COUNTY OF NEVADA**  
**COMMUNITY DEVELOPMENT AGENCY**  
 950 MAIDU AVENUE, SUITE 170, NEVADA CITY, CA 95959-8617  
 (530) 265-1222 ~ FAX (530) 478-5799 <http://mynevadacounty.com>  
 Brian Foss, Planning Director

## Nevada County Commercial Cannabis Application Information and ADP Checklist

### Project Site Information

<b>Site Address:</b>	<b>Site Assessor Parcel Number(s):</b>
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<b>Property Zoning:</b>	<b>Cultivation Activities:</b>
<input type="checkbox"/> AG - Agriculture	Total Cannabis Canopy in Square Feet (sf):
<input type="checkbox"/> AE – Agriculture Exclusive	Total Support Area in Square Feet (sf):
<input type="checkbox"/> FR – Forest Resources	# of Temporary Employees:      # of Fulltime Employees:
	Cultivation Type: <input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/> Mixed-Light
	Tax Identification Number:

### Forms, Applications & Attachments (required)

<input type="checkbox"/> Land Use Application	<input type="checkbox"/> Grant Deed
<input type="checkbox"/> Agreement to Pay Form	<input type="checkbox"/> Identification (Driver’s License, State ID, Passport, etc.)
<input type="checkbox"/> Notarized Landlord Agreement	<input type="checkbox"/> Limited Liability Corporation (LLC) Information (members/positions, contact information, etc)
<input type="checkbox"/> Cannabis Ordinance Questionnaire	<input type="checkbox"/> Current certificate(s) for weighing device(s) (Agricultural Commissioner’s Office)
<input type="checkbox"/> State License Application (if available)	<input type="checkbox"/> Light Control Plan
<input type="checkbox"/> Copy of Bond (\$5,000 from licensed banking institution)	<input type="checkbox"/> Site Plan (8 Copies) and One Reduced Copy (8 ½ X 11)
<input type="checkbox"/> Biological Resources Information (by applicant)	<input type="checkbox"/> Regional Water Quality Control Permits (copies)
<input type="checkbox"/> Security Plan	<input type="checkbox"/> Hazardous Waste Statement Form
<input type="checkbox"/> Dust Control Plan/Information	<input type="checkbox"/> Site Photos and Site Plan Reduction Indicating Where Photos Were Taken
<input type="checkbox"/> Payment of Applicable Fees	<input type="checkbox"/> North Central Information Center (NCIC) – Cultural Resources Sensitivity Letter. Request mailed with payment; visit: <a href="http://www.csus.edu/hist/centers/ncic/permits.html">www.csus.edu/hist/centers/ncic/permits.html</a>

### Land-Use Permit(s) for:

<input type="checkbox"/> Primary Residence	<input type="checkbox"/> Accessory Structure(s) (list):
<input type="checkbox"/> Septic System	<input type="checkbox"/> Well Permit (or a will serve letter from water district)
<input type="checkbox"/> Electrical Service	<input type="checkbox"/> Grading (Profile showing cut and fill)
<input type="checkbox"/> Additional Permits (list):	

### Plans and Studies (provide if applicable)

<input type="checkbox"/> Restoration Plan Via Habitat Management Plan	<input type="checkbox"/> Dead End Road/Secondary Access Mitigation Measures Plan
<input type="checkbox"/> Parking Plan	<input type="checkbox"/> Cultural Resources Report
<input type="checkbox"/> 3-Acre Conversion/Timber Harvest Plan	<input type="checkbox"/> Water Resources Protection Plan (WRPP) Via Management Plan
<input type="checkbox"/> Property Line Setback Easement	<input type="checkbox"/> Pest Management Plan (Agricultural Commissioner Review)
	<input type="checkbox"/> Transition Plan (For resolving violations)

Fee's and Application Charges:	
<input type="checkbox"/>	Application/Filing Fee (\$1923.94)

Property Ownership and Resident Information			
<b>Property Owner:</b>		<b>Applicant/Agent:</b>	
Name:		Name:	
Address:		Address:	
City/State/Zip:		City/State/Zip:	
Phone:	Fax:	Phone:	Fax:
e-mail:		e-mail:	
Resident at Cannabis Cultivation		Resident at Cannabis Cultivation	
Location?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Location?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Property Residents:</b>		<b>Property Residents:</b>	
Name:		Name:	
Address:		Address:	
City/State/Zip:		City/State/Zip:	
Phone:		Phone:	
e-mail:		e-mail:	
<input type="checkbox"/> Owner	<input type="checkbox"/> Renter <input type="checkbox"/> Family	<input type="checkbox"/> Owner	<input type="checkbox"/> Renter <input type="checkbox"/> Family
Additional Individuals/Entities with Financial Interest			
Name:		Name:	
Address:		Address:	
City/State/Zip:		City/State/Zip:	
Phone:		Phone:	
e-mail:		e-mail:	
Nature/Extent of Financial Interest:		Nature/Extent of Financial Interest:	
Additional Parcels with Financial Interest in Businesses (list all):		Additional Parcels with Financial Interest in Businesses (list all):	

## SITE PLAN REQUIREMENTS

<p>The entire property must be shown on the site plan (including all property lines and dimensions). If the property is too large then a smaller scale may be used; however, a second site plan will need to be provided of the area of development at a recognized scale. <i>Minimum sheet size 11"x17" with minimum 8 sets of plans.</i></p>	
<p><b>Site Plan Recognized Scales: 1"= 10', 1"= 20', 1"= 30', 1"= 40', 1"= 50', 1"= 60'</b></p>	
<p><b>GENERAL INFORMATION TO BE INCLUDED ON SITE PLAN</b></p>	
<ul style="list-style-type: none"> <li>➤ Owner's Name, Phone Number, Mailing Address</li> <li>➤ Project Site Address</li> <li>➤ Assessor's Parcel Number (APN)</li> <li>➤ Parcel Zoning &amp; Acreage</li> <li>➤ Vicinity Map</li> <li>➤ North Arrow &amp; Scale</li> <li>➤ Statement of Compliance (Cannabis Ordinance 2467)</li> <li>➤ Impervious Surface Coverage Calculation</li> <li>➤ Preparer's Name/Address/Signature</li> <li>➤ Date of Preparation/Revision Dates</li> <li>➤ Architect/Engineer Name/Address (if applicable)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Square Footage/Clear Use of Each Structure</li> <li>➤ Cultivation type (outdoor, indoor, and/or mixed-light)</li> <li>➤ Contiguous Canopy Cultivation Area(s) Shown with Clear Dimensions, Square Footage Listed, and is easily measurable</li> <li>➤ Cannabis Support Areas with Clear Use(s) and Square Footage Listed</li> <li>➤ Site Plan to Match Aerial Imagery</li> <li>➤ Identify Compost Area and Method</li> <li>➤ Distance from Well to Canopy Area, Hazardous Material storage area (100' setback required)</li> <li>➤ Slope Contours if Greater than 10%</li> <li>➤ Project Description/Scope of Work</li> </ul>
<p><b>Identify all existing and proposed structures and ground-mounted equipment.</b> Please note on the site plan if the existing structures were built with the benefit of a permit or were built prior to 1962. (AS-BUILT permits are required for structures that were not built with a permit after 1962 and do not qualify for an exemption per County Ordinance.)</p>	
<p><b>Location of all wells, water storage tanks, bodies of water, year round or seasonal watercourses, drainage ditches, NID ditches, agricultural/ irrigation lines, and 100 year flood plains.</b> Include distance from the cultivation area to any well/water source. Water storage tanks used for fire prevention require a permit and Fire Dept. approval.</p>	
<p><b>Residential Well Setbacks from commercial cannabis grow footprint.</b> All commercial growing operations shall maintain a 100' set back from the existing residential well upon the property. In addition, the 100' setback also applies to ephemeral creeks, streams and rivers (to include seasonal drainage ditches).</p>	
<p><b>Location of all utilities</b> (above and underground sources &amp; lines) including water, sewage, grease interceptors, electrical and phone lines. Include details for underground utilities prepared by the Civil Engineer of Record.</p>	
<p><b>Indicate location and layout of existing septic system.</b> Include leach lines, septic and pump tanks, clean-outs, distribution system, and layout and location of the 100% repair area. Show setbacks to septic tanks and leach lines from the cultivation area.</p>	
<p><b>Indicate the location and surfacing of all existing conforming and/or permitted driveways and roadways.</b></p>	
<p><b>Identify all easements</b> (PG&amp;E, telephone, water (NID), road, driveway, "No Access", etc.).</p>	
<p><b>Characterization of slope and topography:</b></p> <ul style="list-style-type: none"> <li>• The characterization of slope in the cultivation area may be provided by the owner if the slope is less than 10% and a note is placed on the plans that the topography is depicted as per owner's representation.</li> <li>• Contour intervals should be at a two (2') feet minimum and extend 50' feet beyond the proposed area of cultivation.</li> </ul>	

- If the slope in the area of cultivation exceeds 10%, provide a topographic survey prepared by a licensed Land Surveyor or Civil Engineer. If a professional survey is conducted, the surveyor or engineer must provide a wet stamp of certification on the site plan.

**Indicate any grading activities being completed.** Indicate disturbed area in square feet, amount of cut/fill and total amount of cubic yards. (A grading permit may be required based on grading activity being completed per County Ordinance). If no grading is purposed, provide statement on site plan.

**Indicate location of storage of any hazardous and/or flammable materials.** Identify the location of structure and setback from hazardous materials to the cultivation site, structures, wells, water tanks, bodies of water, watercourses, drainage ditches, irrigation lines and 100 year floodplains.

**Landmark Trees:** Indicate any areas where landmark trees, landmark groves, and heritage trees and indicate if any of these areas will be affected by improvements completed onsite or removed.

**Burning:** The following note shall be placed on the site plan, "The burning of any part of the cannabis plant or plant materials that is considered in excess or waste is prohibited from being burned." Sec. (G)(1)(d)(xii).

**Archeological Features:** Include the archeological statement on site plan per Draft Cannabis Ordinance Sec. (G)(1)(d)(xv).

**Dust Control:** Provide a statement on the site plan that the proposed project shall comply with dust control requirements as applicable state and federal air pollution control laws and regulations of NSAQMD. Sec. (G)(1)(d)(xi).

**Fire Access:** Provide a compliant fire access roadway or driveway as required by the local fire district to all commercial cannabis structures onsite. This shall include information for roadway slopes, widths, vegetation clearances, etc.

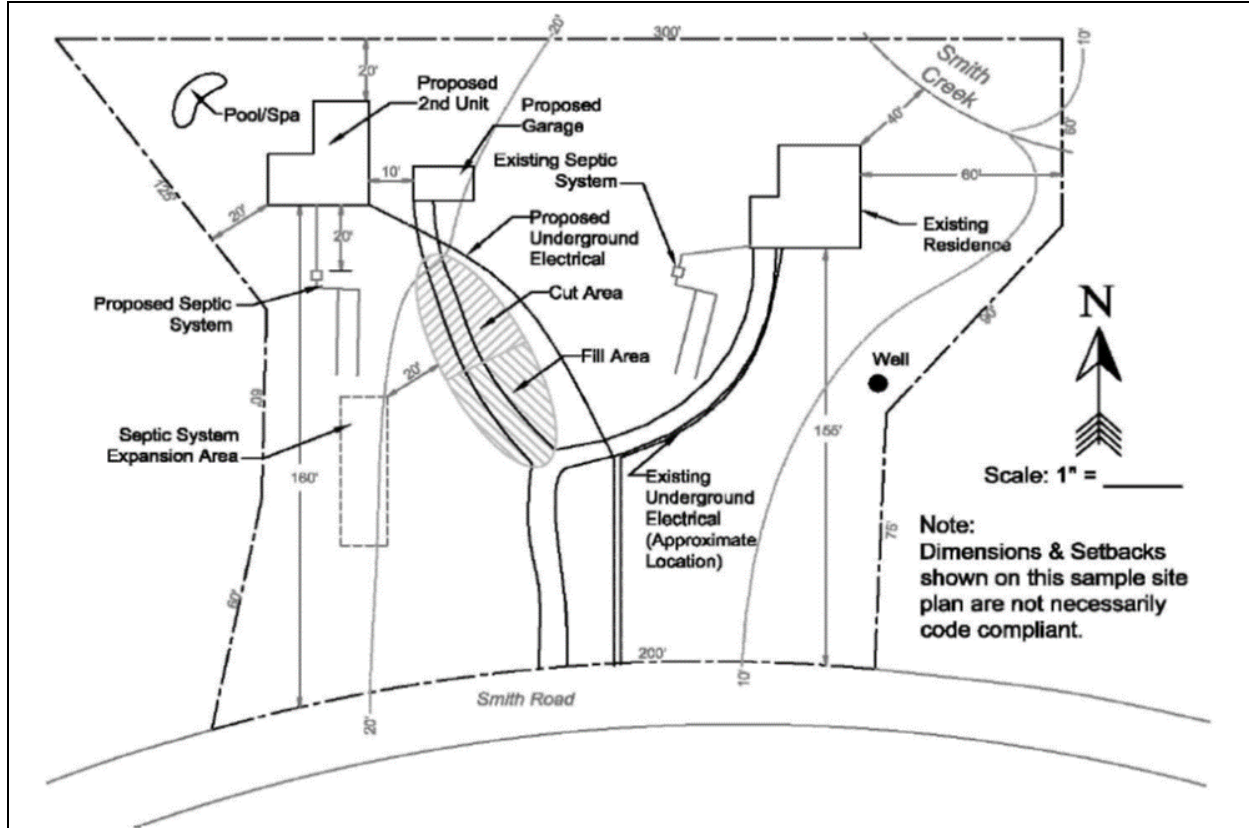
**Fire Water Flow:** Location, type, and size of onsite water storage meeting fire flow and fire department connection requirements per the California Fire Code.

**Cannabis Cultivation & Support Areas:**

- Indicate total demarcated mature canopy square footage area and location of plants to be cultivated
- Indicate specific use(s), square footage, and location of cannabis support areas
- Indication if the cultivation is indoor, mixed-light, or outdoor
- Indicate setbacks from the cultivation site to structures, driveways/roadways, property lines, and easements
- Indicate the setbacks from the cultivation area to any school, church, park, child or day care center, or youth-oriented facility, if within 1,000 feet.
- Indicate setback from Federal and State Parks, if within 1,000 feet.
- Provide a clear description how the cultivation area will be adequately screened from a public right-of-way or publicly traveled private road
- Location, construction, and height of secure fencing for all outdoor cultivation areas including locations of secured entry gates and locks.

### Sample Site Plan:

Additional information will need to be added showing all site plan submittal requirements including cultivation location(s), cultivation size, cultivation setbacks, security measures, screening measures, etc.



# NEVADA COUNTY PLANNING DEPARTMENT LAND USE APPLICATION

*Please print or type in black ink*

Type of application(s) for which you are applying:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Tentative Map              | <input type="checkbox"/> Ordinance Amendment    | <input type="checkbox"/> Certificate of Compliance   |
| <input type="checkbox"/> Use Permit                 | <input type="checkbox"/> Zone Change            | <input type="checkbox"/> Voluntary Merger            |
| <input type="checkbox"/> Development Permit         | <input type="checkbox"/> General Plan Amendment | <input type="checkbox"/> Home Business               |
| <input type="checkbox"/> Administrative Dev. Permit | <input type="checkbox"/> Variance               | <input type="checkbox"/> Temporary Commercial Permit |
| <input type="checkbox"/> Boundary Line Adjustment   | <input type="checkbox"/> Setback Easement       | <input type="checkbox"/> Management Plan             |
| <input type="checkbox"/> Other (specify): _____     |   |  |

**PROJECT DESCRIPTION:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Assessor's Parcel No(s): \_\_\_\_\_

Applicant Name(s): \_\_\_\_\_

Applicant Mailing Address: \_\_\_\_\_

Telephone #: ( ) \_\_\_\_\_ E-Mail: \_\_\_\_\_ FAX#: \_\_\_\_\_

Property Owners Full Names: \_\_\_\_\_

Property Owner Mailing Address: \_\_\_\_\_

Telephone #: ( ) \_\_\_\_\_ E-Mail: \_\_\_\_\_ FAX#: \_\_\_\_\_

Name of Representative (if applicable): \_\_\_\_\_

Address of Representative: \_\_\_\_\_

Telephone #: ( ) \_\_\_\_\_ E-Mail: \_\_\_\_\_ FAX#: \_\_\_\_\_

Site address(es): \_\_\_\_\_ Acreage(s): \_\_\_\_\_

Water Source: \_\_\_\_\_ Method of Sewage Disposal: \_\_\_\_\_

\*\*\*\*\*

I hereby acknowledge that I have read the instructions for filing this application and state under penalty of perjury that the information provided on all attached documents is correct.

Signature of ( ) Property Owner(s) or ( ) Authorized Representative\*

\_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

**\*Representative may sign application if a Letter of Authorization from the owner(s) is provided.**



## AGREEMENT TO PAY FORM

Nevada County Community Development Agency fees are based on Board of Supervisor approved fee schedules. Hourly fees and fees for services in excess of a minimum fee collected, including re-inspections, are billed to the applicant based on the Board approved fee schedule in effect at the time the work is performed by staff. This *Agreement To Pay Form* must be signed and original signatures submitted to the NCCDA along with the completed permit forms and the initial payment of fees. Copies of current fee schedules are available from our Customer Service Staff or on the web at <http://www.mynevadacounty.com>

I/We understand that the NCCDA will bill as services are rendered, and I/We agree to pay such billing within thirty (30) days of the mailing of such billing for the project/permit. If payments on outstanding invoices are not made within thirty (30) days after the date of the invoice, County staff may cease work on the project until the required payment is made, subject to any other provisions of the law. All fees must be paid prior to the granting of any permits, approvals, or any land use entitlement for which services are required. The collection of fees, however, does not guarantee the granting of any permits, approvals, or land use entitlements for which I/We are applying.

**Site Information:**

**Invoices and/or notices to be mailed to:**

APN: _____	Name: _____
Property Owner/Business Name (if applicable): _____	Address: _____
Address: _____	Telephone: _____
Email: _____	Email: _____

I would like to opt out of receiving County emails related to this project.

NCCDA Staff is authorized to consult with necessary governmental agencies concerning this project. They are also authorized to consult with the following individuals concerning my project:

*I certify under proof of perjury that I am the property owner or that I am authorized to enter into this fee agreement on his/her behalf. I have read the conditions concerning Nevada County Community Development Agency Fees and I understand that in the event that the billing party I have indicated does not pay required fees, I will be responsible for payment. I further agree to advise the department in writing should I no longer be associated with the above referenced project/property, rendering this agreement invalid as of the change of the date that the letter is received by the Nevada County Community Development Agency.*

\_\_\_\_\_ Dated: \_\_\_\_\_ CDL# \_\_\_\_\_  
 Signature  
 \_\_\_\_\_ Tel #: \_\_\_\_\_  
 Printed Name

**THIS SECTION FOR OFFICE USE ONLY**

Service: \_\_\_\_\_ Program: \_\_\_\_\_ Job No: \_\_\_\_\_  
 DPW #: \_\_\_\_\_ Project File #: \_\_\_\_\_ Billing Code: \_\_\_\_\_  
 Amount Collected: \$ \_\_\_\_\_ Receipt #: \_\_\_\_\_ Date of Receipt: \_\_\_\_\_

Service: \_\_\_\_\_ Program: \_\_\_\_\_ Job No: \_\_\_\_\_  
 DPW #: \_\_\_\_\_ Project File #: \_\_\_\_\_ Billing Code: \_\_\_\_\_  
 Amount Collected: \$ \_\_\_\_\_ Receipt #: \_\_\_\_\_ Date of Receipt: \_\_\_\_\_

**NEVADA COUNTY**

**HAZARDOUS MATERIALS / WASTE STATEMENT**

APN: \_\_\_\_\_ Property Owner: \_\_\_\_\_

**Hazardous sites:** General Plan policy requires the County pursue the cleanup of sites contaminated by mine waste or other hazardous materials prior to approving land use projects. Where hazardous waste or hazardous materials may occur on a project site, a Phase I site assessment may be required prior to processing or approving your project. Respond to the following questions and provide the requested information:

1. Is there evidence of any past, potentially hazardous use on or near the project site, including underground fuel storage tanks, dumpsites, artillery ranges, surface or subsurface mining activity?  
 **Yes Provide a Memo from the County Dept. of Environmental Health that adequate information is on file to accept the project for processing.**  
 **No List the research and/or source of information justifying your response.**

\_\_\_\_\_  
\_\_\_\_\_

**Hazardous use.** It is the applicant’s responsibility to understand the definition of “hazardous material” and “hazardous waste,” as defined in the California Health & Safety Code, Chapter 6.5. The storage of hazardous materials and the generation of hazardous waste are regulated under federal, state and county codes. The storage of hazardous materials in quantities equal to or greater than, a total weight of 500 pounds, or a total volume of 55 gallons, or 200 cubic feet at standard temperature and pressure for compressed gas; or the generating of hazardous wastes in any quantity, requires a permit from the Nevada County Department of Environmental Health.

2. **Will hazardous materials be used, or will hazardous waste be generated from the facility resulting from this project? Check the appropriate response and provide the listed information.**  
 **Yes** A Hazardous Materials Inventory Statement (HMIS), obtained from the Department of Environmental Health, must be filed with this project application.  
 **No** Explain why no hazardous materials are used for the proposed use or business:

\_\_\_\_\_  
\_\_\_\_\_



**COUNTY OF NEVADA**

**COMMUNITY DEVELOPMENT AGENCY**

950 MAIDU AVENUE, SUITE 170, NEVADA CITY, CA 95959-8617

(530) 265-1222 ~ FAX (530) 478-5799 <http://mynevadacounty.com>

Brian Foss, Planning Director

**Application Materials and Instruction for issuance of a Commercial Cannabis Cultivation Permit from Nevada County.**

**Dear Cannabis Cultivation Applicant,**

Thank you for your interest in obtaining a Commercial Cannabis Cultivation permit. This series of documents has been created to assist you and the County in streamlining the permitting process. Please refer to the "Next Steps," below.

**Next Steps:**

- 1: Thoroughly complete the questions and check boxes in the tables below. This will help the County evaluate your project and ensure that all required environmental documentation and protection measures are included. Your project will need to comply with all applicable County Codes and ordinances, and state agencies requirements the Regional Water Quality Control Board (RWQCB) and California Department of Fish and Wildlife (CDFW), etc.
2. As you will see, there are a number of questions related to your project site, persons residing at the site, needed plans and studies, applicable fees, and detailed questions about the cultivation activities. When applicable, the tables provide web-site links and references to Agency web-sites. **Please note:** there are other forms and applications regarding agency processes and these may need to be processed depending on the characteristics of your project and resources on the project site. Please take the time to completely review the information within the table, and on the linked pages as if the information is omitted or not provided, it will delay the processing of your application.
3. After you have completed the application, you may schedule a time with County staff to submit your application. County staff will review your application for completeness and any additional needed materials or clarifications will be discussed at that time. The more thorough and complete the information you provide for the review, the more promptly the County will be able to begin processing your project.
4. If additional studies or documentation is needed, you will be given the time you need to provide that information or coordinate with specialists or experts in those fields to have those steps completed. Once all application materials are completed, another appointment can be made with County staff to submit the application.
5. Once the application is satisfactorily complete, County staff will refer your project to a planner who will begin the process of distributing the application to the appropriate departments and agencies, and completing the review of the project.
6. Within 30-45 days, the Planning Department will notify you if the application meets the requirements of the proposed ordinance or if the application is incomplete and additional information is required.

Sincerely,  
Nevada County Community Development Agency

## Nevada County Cannabis Ordinance Questionnaire

### Instructions:

The following table lists circumstances under which project elements must be included and shown on the site-plan and within the project description (Cultivation Plan). In some instances, the table will reference sections and titles of the Nevada County Development Code, State Codes, and California resource Agency website and documents such as the Regional Water Quality Control Boards (RWQCB) or California Department of Fish and Wildlife (CDFW) that prescribes certain development standards and permitting requirements. This will include but not be limited to electrical standards, plumbing code, fire code, etc. In some locations lines are provided to explain how your cultivation project would be in conformance with the requirements.

Some sections will only require checking the “yes/no” box. Because projects are diverse, some questions will not apply to you project. In these instances, you can write in “not applicable,” or “N/A”. It is important that all the information you provide is included on the Site Plan, the Cultivation Plan, or sometimes both.

This information must be provided with submittal of an Administrative Development Permit (ADP) and maintained and updated as needed for the first and continued issuance of the Annual Permit. To assist in the process:

- Please use this table to ensure your project is consistent with Nevada County zoning ordinance requirements, building codes and standards, and other State Agency policy documents and standards.
  
- Please provide thorough and complete information describing how your project will be consistent with the Nevada County Cannabis Ordinance, Nevada County General Plan, and other land use planning documents. This will help streamline the permitting process.
  
- Please refer to referenced sections of the Land Use Development Code to ensure that all conditions are satisfied. When needed, additional forms, related applications, descriptions of project elements, may be included as attachments to this form.

<b>Sensitive Sites:</b> The edge of the cannabis canopy and/or support areas must be at least 1,000 feet from any Sensitive Sites. Verify below the distance is 1,000 feet or greater, or provide the distance in the spaces below, and check the box for variance required and include in the application package for parks ONLY:			
Is the Cultivation Canopy greater than 1,000 feet from:			
School	<input type="checkbox"/> Yes	<input type="checkbox"/> No, distance _____ ft.	
School evacuation site	<input type="checkbox"/> Yes	<input type="checkbox"/> No, distance _____ ft.	
School Bus top	<input type="checkbox"/> Yes	<input type="checkbox"/> No, distance _____ ft.	
Child Care Center	<input type="checkbox"/> Yes	<input type="checkbox"/> No, distance _____ ft.	
Youth-Oriented Facility	<input type="checkbox"/> Yes	<input type="checkbox"/> No, distance _____ ft.	
Church (place of worship)	<input type="checkbox"/> Yes	<input type="checkbox"/> No, distance _____ ft.	
Park	<input type="checkbox"/> Yes	<input type="checkbox"/> No, distance _____ ft.	
Variance required?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
* If the edge of the canopy is less than 1,000 feet from any park, a variance will be required.			
<b>Setbacks:</b> All cannabis cultivation areas are required to be set back at least 100 feet from the edge of the cannabis canopy to the property line. List the setback distance in each direction below.			
North _____ ft.	East _____ ft.	South _____ ft.	West _____ ft.
If the distance is less than 100 feet, list the direction, the distance and setback easement information.			
<b>Visual Project Elements:</b>			
List all public rights-of-way, publicly travelled roadway, or publicly traveled private roads and confirm all cultivation activities will not be visible from these locations. If applicable, list and described all measures, which are or will be used as a visual screen. Provide a timeline for installation of all visual screening materials or provide a plan of how views of cannabis cultivation activities will be blocked from public view.			
Adjacent Roadways/Highways: _____, _____, _____			
Visual Screening Measures: _____, _____, _____			
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Cannabis activities are not visible from any public-right-of-way, publicly travelled roadway, or publically traveled private road.	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	2. Illumination of cultivation areas conform to lighting requirements of Section L-II 4.2.8 – Lighting of the Land Use and Development Code.	
		Other Requirements:	
		<input type="checkbox"/> Lighting is Fully Shielded and Directed Downward	<input type="checkbox"/> 15' foot maximum light pole height
<input type="checkbox"/> Yes	<input type="checkbox"/> No	The project site is located less than 0.25 miles from a scenic highway?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	The project would block or obstruct views of a scenic resource?	
<b>Agricultural Resources: Indicate the value of existing agricultural resources and land use consistency.</b>			
<input type="checkbox"/> Yes	<input type="checkbox"/> No	The proposed cultivation area or proposed structures would be located on Prime Farmland, Farmland of Statewide importance, and/or Unique Farmland?	
If yes, a management plan application is required.			
<input type="checkbox"/> Yes	<input type="checkbox"/> No	The proposed cultivation area or proposed structures would conflict with a Williamson Act Contract?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	The proposed project would require removal of timber resources? Or, an unpermitted previous timber harvest has occurred on the project site?	
If yes, provide a Less-Than-Three-Acre Timber Conversion completed by a registered professional forester (RPF). Completed: _____			



<b>Noise: Indicate construction and operational project elements that could produce noise that exceeds standards.</b>			
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Construction and operation of the project would use machinery that will create noise (List below).	
		____,greenhouse fans,_____,_____	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	The operation plan includes measures that would reduce noise (list below).	
		Fan baffles, etc. Operational time limits 7:00 a.m. to 7:00 p.m.	
<b>Utilities and Public Services: Provide details regarding the use of electricity for cultivation activities.</b>			
Project conforms to the California Electrical Code adopted by Section L-V 12.0 of the Nevada County Code?			
<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Electrical Permits issued?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> No	Electricity Provider Pacific Gas and Electric (PG&E) or permitted alternative source: <input type="checkbox"/> Solar
Electrical Service Verification?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> Other: _____
Provide information how non-hazardous waste materials, including organic wastes, will be handled and disposed of? If composting will be used, show location(s) on site plan.			
Waste Hauler: _____	Composting:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Water Quality:</b>			
The proposed project is located in:			
<input type="checkbox"/> Central Valley Regional Water Quality Control Board (CVRWQCB)		<input type="checkbox"/> Lahontan Regional Water Quality Control Board (LRWQCB)	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	The applicant has completed the Notice of Intent (NOI) to enroll as a <input type="checkbox"/> Tier 1, <input type="checkbox"/> Tier 2, or <input type="checkbox"/> Tier 3 Discharger in accordance with (CVRWQCB) <sup>1</sup> <a href="https://www.waterboards.ca.gov/centralvalley/water_issues/cannabis/general_order/r5-2015-0113_att_b.pdf">https://www.waterboards.ca.gov/centralvalley/water_issues/cannabis/general_order/r5-2015-0113_att_b.pdf</a> , or with the LRWQCB <sup>2</sup> in accordance with <a href="https://www.waterboards.ca.gov/centralcoast/water_issues/programs/cannabis_cultivation/docs/faq_cannabis_general_order.pdf">https://www.waterboards.ca.gov/centralcoast/water_issues/programs/cannabis_cultivation/docs/faq_cannabis_general_order.pdf</a> . The permit has been issued WDID# _____	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	The applicant applied for all other permits listed as part of the NOI including (check if applicable):	
		<input type="checkbox"/> Army Corps of Engineers Section 404 Permit	<input type="checkbox"/> California Department of Fish and Wildlife 1602 Streambed Alteration Agreement.
		<input type="checkbox"/> State Water Resources Control Board Construction General Permit No. 2009-0009-DWQ	
		<input type="checkbox"/> Timber Conversion Permit (see Agricultural Resources above).	<input type="checkbox"/> A Local Grading Permit (see Section 5, Environmental Compliance Assessment for New or Expanded Growers) listed in the NOI required Water Quality Permits section.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	The applicant has been issued WDID# _____, Or, expected date of issuance: _____	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	A Water Resources Protection Plan (WRPP) has been developed for the project site?, Or the WRPP is expected to be completed by: _____	
<b>Water Supply: Indicate the water source(es) that are proposed to be used be used for cultivation purposes and provide the information in the blanks as requested. If the information is not applicable, write, "N/A."</b>			
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Well(s): refer to Chapter X: Water Supply and Resources Article 2 Water Wells (Section L-X 2.1 through Section L-X 2.29) of the Land Use and Development Code for additional information or definitions terms if needed.	
Well Permit #*:	Well Completion Log:	Estimated gallons per minute (gpm):	Hydrologic Connectivity Determination:
_____	_____	_____	

For all new well application(s) that are in process; have you provided a copy of the complete well application forms and documentation submitted to the County?			
<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Water Diversion(s): Is the water source proposed to be used for cultivation sourced from a spring or stream?			
<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, circle one: Spring _____; Stream _____	
<b>Public Water Source:</b> Is the water source a municipal or other public source?			
<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Has a will serve letter been provided?			
<input type="checkbox"/> Yes	<input type="checkbox"/> No		
<b>Security Plan includes the following measures:</b>			
<input type="checkbox"/> Fencing Type: _____ Height: _____	<input type="checkbox"/> Locked Facilities	<input type="checkbox"/> Video Monitoring	<input type="checkbox"/> Other Measures:
<input type="checkbox"/> Gated Access	<input type="checkbox"/> Security Company	<input type="checkbox"/> Lighting	

**REVIEW AND INITIAL ALL OF THE FOLLOWING:**

**Initial:**

\_\_\_\_\_ I certify that the project parcel is in full compliance with all regulations shown in the County's Commercial Cannabis Ordinance.

\_\_\_\_\_ I recognize that this Administrative Development Permit for commercial cannabis only remains active with a finalized and current Annual Cannabis Permit (ACP).

\_\_\_\_\_ I recognize that this permit may be revoked at any time at the discretion of the Community Development Agency Director or their designee.

\_\_\_\_\_ I recognize that all aspects not in compliance with the Nevada County Municipal Codes on the parcel that qualify for the transition period shall be in full compliance within two years from this permit application date.

\_\_\_\_\_ I hereby authorize the County of Nevada Community Development Agency employees and/or any other appropriate County or State Agency or local districts to enter the property to conduct site inspections and investigations as set forth in this permit that may be issued on the basis of this application. I further agree to pay any fee for such inspection or investigation that occurs on the subject property.

\_\_\_\_\_ I understand that the use of the primary residence well water supply for any cannabis related activities could impair the amount of water supplied to the residence for living purposes. The County of Nevada is not responsible for any reduction in water availability to the applicant's residence as a result of use for the other than residential living purposes.

**APPLICANT'S DECLARATION**

By my signature below, I certify that I am the property owner or authorized to act on the property owner's behalf. I have read this permit application and the information I have provided is true and correct. I agree to comply with all applicable County ordinances and State laws.

Signature: \_\_\_\_\_

Print: \_\_\_\_\_

Date: \_\_\_\_\_





**COUNTY OF NEVADA  
COMMUNITY DEVELOPMENT AGENCY  
Cannabis Compliance Division**

950 MAIDU AVENUE, SUITE 170, NEVADA CITY, CA 95959-8617  
(530) 265-1222 ~ FAX (530) 478-5799 <http://mynevadacounty.com>

Craig Griesbach, Director

**COMMERCIAL CANNABIS PERMIT SECURITY/OPERATION PLAN CHECKLIST**

**THE FOLLOWING ITEMS ARE REQUIRED FOR A COMPLETE APPLICATION SUBMITTAL OF A SECURITY PLAN.  
INCOMPLETE SUBMITTALS WILL NOT BE ACCEPTED; PLEASE READ CAREFULLY!**

**EIGHT (8) SETS OF SECURITY PLANS ARE REQUIRED TO BE SUBMITTED**

	<b>Perimeter Security:</b> Provide a complete and clear description of perimeter security components including fencing, gates, locking hardware, doors, component heights, etc.
	<b>Cultivation Area Screening:</b> Indicate how the cultivation area will be screened from the public-right-of way or publicly traveled private roads. Indicate materials used, construction, etc.
	<b>Hazardous Materials:</b> Include an itemized list showing the amount and type of hazardous and/or flammable materials used onsite. Include information regarding locations of storage and use areas.
	<b>Access:</b> Indicate how the cultivation area and all habitable structures are accessed by emergency personnel. Indicate the widths and lengths of driveways and locations of access gates.
	<b>Exterior Noise:</b> Indicate how exterior noise will be limited in accordance with the Nevada County Zoning Ordinance applicable to the Land Use Category and Zoning District where cultivation activities will occur. ( <i>Nevada County Land-Use and Development Code L-II 4.1.7</i> )
	<b>Building Security:</b> Specify any building safety and security components associated to access to buildings, door docking hardware, wall construction, exterior wall opening access points, etc.
	<b>Exterior Lighting:</b> Indicate the type and location of any exterior lighting installed at cultivation areas as a deterrent for trespassing. Indicate placement of lighting associated to placement of security/surveillance systems. Indicate lighting installed will be downcast and full shielded as to not create light pollution. ( <i>Nevada County Land-Use and Development Code L-II 4.2.8</i> )
	<b>Surveillance:</b> Indicate any types of video surveillance systems or alarm systems installed. Indicate placement locations and types of cameras, alarms, etc.
	<b>Onsite Presence:</b> Indicate how the cultivation area will be monitored by onsite personnel. Specify the frequency and location of persons' onsite overseeing cultivation activities. Indicate types of safety and security training provided to onsite personnel.
	<b>Security of Valuables:</b> Indicate the approach to keeping currency and valuables that are located onsite in a secure and safe location.
	<b>Operation Plan:</b> Types of activities conducted onsite, specific uses/business activities in each applicable structure, number and type of employees, hours of operation, equipment operation onsite, number of anticipated vehicle trips per day, and any other activity applicable to the commercial operation onsite.



**COUNTY OF NEVADA  
COMMUNITY DEVELOPMENT AGENCY**

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Sean Powers, Agency Director

Agricultural Commissioner      Building      Code Compliance      Environmental Health      Farm Advisor      Planning      Public Works

**ADMINISTRATIVE DEVELOPMENT CANNABIS PERMIT  
AGENT AUTHORIZATION LETTER**

IF YOU ARE NOT THE PROPERTY OWNER....

But are a representative for the property owner, and you are not on the Grant Deed as the legal owner, you are required to provide a **notarized letter** of authorization to the County of Nevada at time of submittal of your Administrative Development Cannabis Permit Application. Please fill out the following form and have this document signed by the appropriate person(s), notarized, and returned to the County of Nevada Community Development Agency (CDA).

**AUTHORIZATION**

I, \_\_\_\_\_ owner(s) of property located at, \_\_\_\_\_  
\_\_\_\_\_

Assessors Parcel Number (APN) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_, do hereby authorize:

\_\_\_\_\_  
(Authorized Person)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State & Zip Code)

\_\_\_\_\_  
(Telephone Number)

To act as my agent/representative in obtaining a Administrative Development Cannabis Permit from the County of Nevada Community Development Agency (CDA) for commercial cannabis cultivation activities conducted at the above address. I authorize commercial cannabis operations to be completed on the subject property and I am aware that the commercial cannabis operations will occur on my property.

**Description of Project:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Property Owner

*It is unlawful to alter the substance of any official form or document of Nevada County*



**COUNTY OF NEVADA  
COMMUNITY DEVELOPMENT AGENCY**

Sean Powers, Director

**ENVIRONMENTAL HEALTH DEPARTMENT**

Amy Irani, REHS, Director

950 MAIDU AVENUE, SUITE #170  
NEVADA CITY, CA 95959

PH: (530) 265-1222  
FAX: (530) 265-9853

[Env.Health@co.nevada.ca.us](mailto:Env.Health@co.nevada.ca.us)

<http://mynevadacounty.com>

## **COMMERCIAL CANNABIS CULTIVATION APPLICATION PACKET FOR TEMPORARY PORTABLE RESTROOM USE**

***THIS APPLICATION APPLIES TO OPERATIONS WITH 2-5 EMPLOYEES ONLY FOR TWO (2) HARVEST SEASONS PER YEAR. OPERATIONS WITH 6 + EMPLOYEES MUST APPLY FOR THE INSTALLATION OF A PERMANENT RESTROOM FACILITY UPON THE BUSINESS PROPERTY.***

The proper maintenance, monitoring and commercial contractual agreement for the temporary portable restroom is important for use approval. It assures that you will meet all structural and operational requirements of the applicable State Health Laws, and at the same time, meet the objective of protecting the public health and welfare as well as the environment.

### **Application Submittal Requirements:**

1. **Application Cover Sheet. (Page 2)** This is the only page from this packet that is required to be completed and submitted to the Environmental Health Department. All other pages are to act as guidelines or templates for submittal requirements. Portable Toilet must meet all ADA requirements per State and Local Laws.
2. **COMPLETE SITE PLAN to include the following:**
  - a. Location of the portable toilet facility and portable hand washing station. Portable toilet shall be installed to prevent spillage, or collapse of the unit.
  - b. Plans shall be easily readable and drawn to scale. *Recommended scale of 1/4"=1' and shall include residential well, septic tank and disposal field locations.*
3. **COMPLETE AND SIGNED AGREEMENT WITH A LICENSED, COMMERCIAL PORTABLE TOILET BUSINESS.** Agreement shall include:
  - a. Weekly service agreement for the maintenance and sanitation of the portable toilet and hand washing station.
  - b. Delivery for Summer Harvest (June – August) and Fall Harvest (October – November). After each harvest time frame, the portable toilet and hand washing station will be removed from the property. The contractual agreement shall specify this requirement.
  - c. Portable hand washing station supplied with water, soap and paper towels.



**COUNTY OF NEVADA  
COMMUNITY DEVELOPMENT AGENCY**

Sean Powers, Director

**ENVIRONMENTAL HEALTH DEPARTMENT**

Amy Irani, REHS, Director

950 MAIDU AVENUE, SUITE #170  
NEVADA CITY, CA 95959

PH: (530) 265-1222  
FAX: (530) 265-9853

Env.Health@co.nevada.ca.us

http://mynevadacounty.com

# COMMERCIAL CANNABIS CULTIVATION PORTABLE TOILET USE APPLICATION

Buisness/Facility Name: \_\_\_\_\_ APN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Site Address: (street, city, zip) \_\_\_\_\_

Residence Water Source:     Private Well     Public Water - Agency: \_\_\_\_\_

Residence Sewage Disposal:  Private Septic     Public Sewer: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone No. \_\_\_\_\_

Mailing Address: (street, city, zip) \_\_\_\_\_

Building Permit No: \_\_\_\_\_

**Please check the following that apply and include in your Plan Check Submittal:**

- Submit a detailed plan drawn to scale.
- This Business will be harvesting two (2) times per year
  - June – August
  - October - November
- This Business has 2-5 employees.
- Contract with licensed, commercial portable toilet company is enclosed
- Contract with licensed, commercial portable toilet company includes hand washing station and weekly maintenance agreement.

**\*\*\*APPROVAL OF PERMIT VALID FOR ONE YEAR FROM DATE OF APPROVAL\*\*\***

*I have read the above "checklist" and ALL items checked are completed or marked not applicable. Further, I recognize that an incomplete or inaccurate permit application will result in delaying the processing and issuing of my permit and may incur additional fees at the current hourly rate above the initial deposit. I also agree to and understand that the approval of this permit is valid for one year from the approval date, and I agree to apply annually to renew this permit with the applicable fees.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name and Title (if any)

\_\_\_\_\_  
Date

**OFFICE USE ONLY**

Approved     Denied, Reason: \_\_\_\_\_

By: \_\_\_\_\_, REHS

Date: \_\_\_\_\_

# CANNABIS

PESTICIDES THAT ARE **LEGAL** TO USE



**Protecting workers, the public, and the environment from adverse effects of pesticide use in cannabis cultivation is critical to the mission of the California Department of Pesticide Regulation (DPR).** DPR and the County Agricultural Commissioners (CAC) enforce the use and sale of pesticides under Divisions 6 and 7 of the California Food and Agricultural Code (FAC), and Title 3 of the California Code of Regulations (CCR). These laws and regulations apply to all pesticide use; cannabis is no exception.

All pesticide product labels include a warning statement, precautionary statements for protecting human and environmental health, storage and disposal statements, and directions for use. By law, all pesticide users must follow these statements.

When using pesticide products in cannabis cultivation, applicators must not use a rate that is higher than the rates listed on the label and follow the agricultural use requirements including method of application, restricted entry interval, personal protective equipment, and pre-harvest interval.

Some pesticide products are never allowed in cannabis cultivation under any circumstances (see DPR's document: [Pesticides that Cannot be Used on Cannabis](#)).

---

## Always read the label prior to using any pesticide.

---

### PRODUCTS THAT CAN BE LEGALLY APPLIED TO CANNABIS IN CALIFORNIA

A pesticide product can legally be applied to cannabis under state law if the active ingredients found in the product are exempt from residue tolerance requirements and the product is either exempt from registration requirements or registered for a use that is broad enough to include use on cannabis.

Residue tolerance requirements are set by U.S. EPA for each pesticide on each food crop and are the amount of pesticide residue allowed to remain in or on each treated crop with "reasonable certainty of no harm." Some pesticides are exempt from the tolerance requirement when they are found to be minimal risk.

Active ingredients exempt from registration requirements are mostly food-grade essential oils such as peppermint oil or rosemary oil.

Cannabis cultivators who are licensed by the California Department of Food and Agriculture are required to comply with pesticide laws and regulations as enforced by DPR and the CAC's.

For more information:  
[www.cdpr.ca.gov/cannabis](http://www.cdpr.ca.gov/cannabis)

# PESTICIDES THAT ARE LEGAL TO USE ON CANNABIS

The following are examples of pesticide active ingredients that are exempt from tolerance requirements and either exempt from registration requirements or have labels broad enough to include use on cannabis. This is not an exhaustive list of active ingredients that may fit the legal use criteria. The active ingredients are organized by the intended target.

## Insecticides and Miticides

- Azadirachtin
- *Bacillus thuringiensis* sub. *kurstaki*
- *Bacillus thuringiensis* sub. *israelensis*
- *Beauveria bassiana*
- *Burkholderia* spp. strain A396
- Capsaicin
- Cinnamon and cinnamon oil
- Citric acid
- Garlic and garlic oil
- Geraniol
- Horticultural oils (petroleum oil)
- Insecticidal soaps (potassium salts of fatty acids)
- Iron phosphate
- *Isaria fumosorosea*
- Neem oil
- Potassium bicarbonate
- Potassium sorbate
- Rosemary oil
- Sesame and sesame oil
- Sodium bicarbonate
- Soybean oil
- Sulfur
- Thyme oil

## Fungicides and Antimicrobials

- *Bacillus amyloliquefaciens* strain D747
- Cloves and clove oil
- Corn oil
- Cottonseed oil
- *Gliocladium virens*
- Neem oil
- Peppermint and peppermint oil
- Potassium bicarbonate
- Potassium silicate
- Rosemary and rosemary oil
- Sodium bicarbonate
- *Reynoutria sachalinensis* extract
- *Trichoderma harzianum*

## Vertebrate Repellants

- Castor oil
- Geraniol

# CANNABIS

## PESTICIDES THAT **CANNOT** BE USED



Protecting workers, the public, and the environment from adverse effects of pesticide use in cannabis cultivation is critical to the mission of the California Department of Pesticide Regulation (DPR). DPR and the County Agricultural Commissioners (CAC) enforce the use and sale of pesticides under Divisions 6 and 7 of the California Food and Agricultural Code (FAC), and Title 3 of the California Code of Regulations (CCR). These laws and regulations apply to all pesticide use; cannabis is no exception.

All pesticide product labels include a warning statement, precautionary statements for protecting human and environmental health, storage and disposal statements, and directions for use. By law, all pesticide users must follow these statements.

When using pesticide products in cannabis cultivation, applicators must not use a rate that is higher than the rates listed on the label and follow the agricultural use requirements including method of application, restricted entry interval, personal protective equipment, and pre-harvest interval.

---

**Always read the label prior to using any pesticide.**

---

---

### **Some pesticides cannot be used in cannabis cultivation.**

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While there are some pesticide products that are legal to use on cannabis under state law, (see DPR's document: [Pesticides that are Legal to Use on Cannabis](#)) other products are never allowed in cannabis cultivation. The following criteria identify pesticide products that cannot be used in California cannabis cultivation under any circumstances. The use of any pesticides meeting any one of these criteria on cannabis will be strictly enforced as a violation of the FAC and could result in civil or criminal penalties (FAC sections 12996 and 12999.5):

- Not registered for a food use in California
- California Restricted Material including Federal Restricted Use Pesticides (3CCR section 6400)
- Signal word "DANGER"
- On the groundwater protection list (3CCR section 6800)

Cannabis cultivators who are licensed by the California Department of Food and Agriculture are required to comply with pesticide laws and regulations as enforced by DPR and the CAC's.

For more information:  
[www.cdpr.ca.gov/cannabis](http://www.cdpr.ca.gov/cannabis)

# PESTICIDES THAT **CANNOT** BE USED ON CANNABIS

The following are criteria for identifying pesticides that cannot be used in cannabis cultivation and examples of active ingredients meeting these criteria. This is a representative list of active ingredients and not intended to be exhaustive. The fact that an active ingredient is not listed does not authorize its use on cannabis in California.

## Pesticides Not Registered for Food Use in California

If a pesticide product does not have directions for use on a food crop, it cannot be used in cannabis cultivation. Examples of active ingredients that do not have food uses include:

- Aldicarb
- Carbofuran
- Chlordane
- Chlorfenapyr
- Coumaphos
- Daminozide
- DDVP (Dichlorvos)
- Etofenprox
- Fenoxycarb
- Imazalil
- Methyl parathion
- Mevinphos
- Paclobutrazol
- Propoxur
- Spiroxamine
- Thiacloprid

## California Restricted Materials

DPR designates certain pesticides as California restricted materials (3 CCR section 6400). A pesticide can be considered a restricted material for many reasons including designation as a federal Restricted Use Pesticide. Many of these products have product labels that clearly state "Restricted Use Pesticide." Consult your local CAC to determine whether a product is a restricted material. Examples of California restricted materials include:

- Abamectin
- Bifenthrin
- Brodifacoum
- Bromodiolone
- Cyfluthrin
- Difenacoum
- Difethialone
- Fipronil
- Naled

## Pesticides on the Groundwater Protection List

Active ingredients that are on the Groundwater Protection List (3CCR section 6800) have chemical characteristics that make them likely to move into groundwater. Examples of active ingredients on the groundwater protection list include:

- Acephate
- Azoxystrobin
- Boscalid
- Carbaryl
- Chlorantraniliprole
- Diazinon
- Dimethoate
- Dimethomorph
- Ethoprop(hos)
- Fludioxonil
- Imidacloprid
- Malathion
- Metalaxyl
- Methiocarb
- Methomyl
- Myclobutanil
- Propiconazole
- Tebuconazole
- Thiamethoxam

## Pesticide Products with the Signal Word "DANGER"





**COUNTY OF NEVADA  
COMMUNITY DEVELOPMENT AGENCY  
AGRICULTURAL COMMISSIONER**

950 Maidu Avenue, Nevada City CA 95959-8617  
(530) 470-2690 FAX (530) 470-2939 [www.mynevadacounty.com](http://www.mynevadacounty.com)

---

Sean Powers  
Community Development Agency Director

Chris De Nijs  
Agricultural Commissioner, Sealer of W&M

### **Cannabis FAQs and Application for Ag, Weights and Measures**

This application must be submitted with your Commercial Cannabis Application. If you failed to submit these documents, you will be prompted to submit them.

The following Ag and Weights and Measures documents must be included:

- Pest Management Plan (included)
- Operator ID Number Application (included)
- Device Registration Application (included)

#### **What needs to be included on my Pest Management Plan?**

The complete name of the products(s), and if applicable, the EPA Registration Number(s) from the product. Submitting only an active ingredient, ie neem oil, does not allow us to evaluate the product for possible compliance.

#### **Why do I need to include the Pest Management Plan?**

- State Law requires you seek this review from the County Agricultural Commissioner prior to the application of any pesticides. BPC 8106(a)(3)(c)
- The review process allows us to confirm the product has an allowed active ingredient, that the label is broad enough to interpret for use on cannabis, and is intended for use in agricultural production. FAC 12973
- The review also allows us to determine if you will need an operator id number, ie a pesticide permit. CCR 6622

#### **Additional information may be found on our website at:**

<https://www.mynevadacounty.com/2185/Cannabis-Conversation>  
<https://www.mynevadacounty.com/2653/Cannabis-Ag-Weights-Measures>

#### **What are the next steps?**

The Agriculture Department will contact you to set up an appointment for an operator id number as determined by our review of your pest management plan.

Weighing devices that need to be certified will be processed once we have received the Device Registration Application.



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Sean Powers  
Community Development Agency Director

Chris De Nijs  
Agricultural Commissioner, Sealer of W&M

**PEST MANAGEMENT PLAN**

NAME:	PHONE:	CELL PHONE:
DBA:	EMAIL:	

The complete name of the products(s), and if applicable, the EPA Registration Number(s) from the product. Submitting only an active ingredient, ie neem oil, does not allow us to evaluate the product for possible compliance.

	PRODUCT NAME	EPA REG. NO.	ACTIVE INGREDIENT
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			



**COUNTY OF NEVADA  
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Sean Powers  
Community Development Agency Director

Chris De Nijs  
Agricultural Commissioner

**OPERATOR IDENTIFICATION NUMBER APPLICATION**

**Applicant Information**

NAME:	PHONE:	CELL PHONE:
DBA:	EMAIL:	
MAILING ADDRESS:		
PHYSICAL ADDRESS:		

**Pests – check all that apply**

<input type="checkbox"/> Terrestrial weeds	<input type="checkbox"/> Insects
<input type="checkbox"/> Aquatic weeds/pests	<input type="checkbox"/> Disease/Mildew
<input type="checkbox"/> Vertebrates	<input type="checkbox"/> Other

**Commodity – enter acreage for all that apply**

Pasture (irrigated) _____ ac	Uncultivated, non-ag _____ ac	Pond or ditch _____ ac
Rangeland (non-irrigated) _____ ac	Timber _____ ac	Grapes _____ ac
Other: _____ ac	Stone Fruit (peach, plum, nectarine) _____ ac	Pome Fruit (apple, pear) _____ ac
Vegetables, list: _____ ac		

**Who will be applying pesticides?**     Myself     Employees

**I understand I will have to file a report each month I use a commercial-grade pesticide. I plan to report by:**

Free online use reporting, must include email above     Paper form; faxed, mailed or walked in

**I am the landowner of the above identified property, or I have been authorized by the landowner and have attached the letter of authorization form as required.**

Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

<b>Op ID Number:</b>	<b>APN:</b>
<b>Issue Date:</b>	<b>MSTR:</b>
<b>Prepared By:</b>	
v. 3/19	



**COUNTY OF NEVADA  
COMMUNITY DEVELOPMENT AGENCY  
AGRICULTURAL COMMISSIONER**

950 Maidu Avenue, Suite 170 Nevada City, CA 95959  
(530) 470-2690 FAX (530) 470-2939 www.mynevadacounty.com

**APPLICATION FOR DEVICE REGISTRATION**

**Location Specific Information**

Business Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_  
*Street, City, ZIP Code*

Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Business Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

**Corporate/Business Mailing Information – If same as above check here**

Corporate Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
*Street, City, State, ZIP Code*

Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Business Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

**Weighing or Measuring Device Information – use additional sheet if necessary**

Device Type(s)	Make/Model	Serial Number	Equipment No, if applicable, ie truck #0001

Start-Up Date (If already in use): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_