Requirements for a Complete Planning Director’s
Issued Use Permit Application - COMMERCIAL CANNABIS VARIANCE RENEWAL APPLICATION

The following items are REQUIRED for a complete application:

- COMPLETED AND SIGNED APPLICATION FORM
- 8 ½” x 11” SITE PLAN drawn to scale showing proposed and existing development, particularly the location of buildings, driveways, wells, etc. and their distance from property lines. Indicate other information pertinent to the project (see example site plan). For sign permits also include location of the sign(s) on site plan and a separate detail drawing of the sign providing dimensions, construction materials, and graphic representation of text. (See examples)
- PROPERTY OWNERSHIP/LOCATION MAP with the subject property and all properties within a radius of 300 feet of the subject property clearly identified. Write the property owners names on the parcels. (See example)
- PROPERTY OWNERSHIP LIST providing the names and addresses of all property owners identified on the Property Ownership Map. (See example)
- STAMPED REGULAR #10 SIZE ENVELOPES Addressed to the individuals identified on the Property Ownership List.
- THREE STAMPED REGULAR #10 SIZE ENVELOPES addressed to project applicant/agent for which notices, staff reports, or other correspondence is to be sent.
- SIGNED AND DATED LAND USE ENTITLEMENT FORM (Please sign and date this form only)
- AGENT’S AUTHORIZATION FORM is required if the applicant authorizes someone else to act on their behalf, or is not the current owner of the subject site.
- APPLICATION FEE (Please see current fee schedule)
- MAINTAINING EXISTING SITE CONDITIONS ACKNOWLEDGMENT FORM

ADDITIONAL INFORMATION FOR MOBILE HOMES
Mobile homes manufactured prior to October, 1973 do not have a roof load rating and require a ramada constructed over them. A separate building permit is required for armadas.

ADDITIONAL INFORMATION FOR SIGN PERMITS
If the proposed sign is within 600 feet of any State Highway either:

a. A State sign permit for the proposed sign(s) must be included in this application; or

b. A letter from the California State Department of Transportation indicating that a State sign permit is not necessary for the proposed sign.
TRINITY COUNTY
PLANNING DEPARTMENT
61 AIRPORT ROAD
P.O. BOX 2819
WEAVERVILLE, CA 96093
(530) 623-1351  FAX (530) 623-1353

Application Form For:
PLANNING DIRECTOR'S
ISSUED USE PERMIT
☐ Mobile Home (Permanent)
☐ RV (90 day – year)
☐ Sign
☐ Accessory Bldg.
☒ Other: COMMERCIAL CANNABIS
☐ VARIANCE RENEWAL

APPLICANT
Name: ___________________________ Day Phone: ___________________________
Address: ___________________________
City: __________________ State: ________ Zip: ________

PROPERTY OWNER  ☐ Check if same as Applicant  (If more than one property owner is involved, attach list.)
Name: ___________________________ Day Phone: ___________________________
Address: ___________________________
City: __________________ State: ________ Zip: ________

PROPERTY DESCRIPTION
Property location/Address: ___________________________
Assessor’s parcel Number(s): ___________________________ Size: ________ (acres)
Property’s Approx. Elevation: ___________________________
Existing Land Use: ___________________________ Present Zoning: ___________________________ General Plan Designation: ___________________________

REQUEST/INFORMATION

INFORMATION REQUIRED FOR MOBILE HOME/RV PERMITS
Year of Manufacture: ___________________________ Roof Load: ___________________________
Living Area (Sq. Ft.): ___________________________ Dimensions: ___________________________

FOR OFFICE USE ONLY
Application Received by: ___________________________
Date: ___________________________
First Hearing: ___________________________
Application Fee: ___________________________
Receipt No.: ___________________________

I hereby certify that I am the owner of record of the property described above, or have authorization to act in behalf of the owner of the owner (note attached), and that this application and all other documents submitted are true and correct to the best of my knowledge and belief.

Applicant’s Signature ___________________________ Date ___________________________
REQUESTED INFORMATION

Please describe in detail what it is you want to do
<table>
<thead>
<tr>
<th>Drawn By:</th>
<th>APN:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date:</td>
<td>Zoning:</td>
</tr>
<tr>
<td>Scale:</td>
<td>Lot Area:</td>
</tr>
</tbody>
</table>
ACKNOWLEDGMENT
OF
MAINTAINING EXISTING SITE CONDITIONS

Application: ________________________ APN: _____________________________

As the Property Owner, I hereby acknowledge that until final approval of the above application by the County of Trinity, no work such as grading, site development, infrastructure placement, tree removal, construction, trenching, operations or activities requested in this application will be allowed.

I understand that if the project site is altered prior to project approval, the review of the project by the County will be more difficult and potentially expensive and that additional mitigation measures and/or conditions of approval may be imposed. Further, unauthorized work may cause enforcement by other agencies and/or the denial of the application.

I have also instructed my agent and/or the project applicant of the importance of maintaining existing site conditions.

Exception to the above may be approved by the Planning Department upon a written request.

Signed: ________________________ Date: _____________________________
SAMPLE PROPERTY OWNERSHIP LIST

1. APN: 000-00-000
   Jean M. Doe
   P.O. Box 123
   Weaverville, Ca.
   96093

2. APN: 12-34-567
   Paula C. Anderson
   1600 Stoddard Ave.
   Sacramento, Ca.
   95801

3. APN: 023-33-12
   Jay D. Smith
   P.O. Box 456
   Hayfork, Ca.
   96041

4. APN: 10-110-30
   Any Name
   222 Front Street
   Red Town, Ca.
   92817

5. APN: 26-09-09
   Henry Q. Smith
   P.O. Box 789
   Lewiston, Ca.
   96052

6. APN: 15-23-37
   Same Somebody
   85 Fifth Avenue
   New York, NY
   72812

And so forth.

NOTE:

THE PROPERTY OWNERSHIP LIST MUST BE CLEARLY PRINTED OR TYPED ON THE MAILING LABEL. IF YOU NEED ADDITIONAL LABELS, THEY MAY BE OBTAINED AT THE PLANNING DEPARTMENT.
PLANNING LAND USE ENTITLEMENT(S)

Project No.: ___________________________ APN: _________________

Project Location: ______________________________________________

Applicant: ___________________________ Owner: ___________________________
Address: ____________________________________________________________________________

Date: ____________________________________________________________________________

Requested Entitlement(s):

Reviewed By:

☐ Board of Supervisors
☐ Planning Commission
☐ Subdivision Review Committee
☐ Planning Director
☐ Architecture Review Committee

Action Taken: ____________________________________________

☐ Approved  ☐ Denied

Entitlement(s) Granted & Conditions:

Effective Date: ___________________________  LESLIE J. HUBBARD, Deputy Director of Planning

Notes: (1) Approval does not constitute a Building Permit. The Building Department may not issue a permit until the effective date.
(2) A use for which a permit is granted must be established within two years after such permit is issued. If such use is not so established, the use permit shall be deemed to have expired and shall be null and void.
Agent's Authorization Form
(Required only if Applicant is other than the property Owner)

I, the undersigned, state that I am (one of) the owner(s) of the proposed:

__________________________________________________________ (type of proposal)
on Assessor's Parcel Number # __________________________. I do hereby authorize and
empower ___________________________________________ to act on my behalf on all
matters relating to said project in connection with its filing, processing, approval, conditional
approval or disapproval by Trinity County, its boards and commissions, officers, employees and
agents. Should I revoke this authorization it is my responsibility to serve written notice of said
revocation to the County of Trinity by delivery to the Secretary to the Planning Commission.

1. 
Signature
Owner (Print)
Address
Phone
Date: __________________________

2.
Signature
Owner (Print)
Address
Phone
Date: __________________________

RETURN WITH YOUR APPLICATION FORM
Authorization to Enter Private Property

The Trinity County Planning Department as the lead agency performs the environmental evaluation for the California Environmental Quality Act (CEQA). Other State and local agencies also provide responsible and trustee roles under CEQA. The comments received from these agencies assist the Planning Department in preparing the environmental document for your project. In order for the Department to perform the evaluation on your proposed project we will need your permission to allow entry to your property for Planning and any reviewing agency that may need to actually view the property before providing comments.

By signing this authorization to enter your property you are granting the reviewing agencies access to your property for the purpose of evaluating your proposed project. The authorization is valid from the date the Department receives notice of your proposed project and any monitoring periods thereafter.

---

Print Name

Signature

Date
**Director's Use Permit**

<table>
<thead>
<tr>
<th>Service</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use Permit Application</td>
<td>550.00</td>
</tr>
<tr>
<td>GP Maintenance Fee</td>
<td>50.00</td>
</tr>
<tr>
<td>Building Dept. Fee (RV)</td>
<td>75.00</td>
</tr>
<tr>
<td>Environmental Health Fee</td>
<td>76.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>751.00</strong></td>
</tr>
</tbody>
</table>