HARINDER GREWAL, PH.D., MBA Agricultural Commissioner/Sealer



Permit#:
Accepted By:
Date: (Office Use Only)
(Office Ose Offiy)

CANNABIS CULTIVATION AND OPERATIONS PLAN

Applicant Name:		Peri	mit Type:	
Cultivation				
Site Address:	City:	State:	Zip:	·
NOTE: If this document is used and additional space is needed in any section, reference and attach additional pages as necessary.				
	W	ATER USE		
Water Source:				
☐ on-site well(s)	☐ horizontal well	☐ spring	☐ pond	☐ municipal/county
☐ irrigation district	☐ rainwater catchment	☐ river/creek	□ other (sp	ecify below)
What is water use	ed for?			
☐ irrigation ☐ Ii	ivestock	☐ other (spec	cify below)	
Type of irrigation	system:			
☐ drip ☐ flood	☐ micro-spray ☐ hand w	vatering □ oth	er (specify be	low)
Is water stored or	n-site? □ Yes □ No			
If yes, how is water	stored? (List the number of	water storage tai	nks and INDIN	VIDUAL sizes)
Are ALL water sou	urces and storage facilities	s shown on the	accompanyi	ng site plan? ☐ Yes ☐ No
Is water use moni	itored? ☐ Yes ☐ No			

If yes, how? What is the anticipated yearly water use?

Are inputs	s and/or cleaning	g products applied through th	e irrigation system?	Yes □ No
If <u>yes</u> , list	all inputs/cleaning	products on the Inputs table on	Page 11.	
		ENERGY USE		
What are	the on-site power	er sources?		
□ grid	☐ solar	☐ generator (see below)	☐ other (specify)	
What is th	ne PRIMARY pow	er source for cultivation activ	rities?	
□ grid	□ solar	☐ generator (see below)	☐ other (specify)	
If a gener	ator is used, ans	wer the following:		
What meas	sures are taken to	suppress the sound?		
How are le	aks and spills man	aged? Identify any containment	structure and its dime	nsions.
If the gene	erator is the PRIMA	RY source of power, has an alter	native source been ins	stalled? ☐ Yes ☐ No
Are the Ov	vner's Manual and/	or Operation Manual kept on-site	e and available for revi	iew? □ Yes □ No
How are sp	oent oil, used oil fil	ters, expired batteries and other	hazardous materials o	generated from the
	of the generator m			
		SEWAGE DISPOSA	1	
How is se	wage currently d			
	ed existing septic	unpermitted existing septic	☐ portable toilet	☐ composting toilet
☐ municipa		□ other (specify below)		. 5

If a septic system is used, answer the following:

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Have primary AND	secondary leach fie	elds been identified	l? 🗆	Yes □ No	
Have plans for a	PROPOSED sewag	ge disposal syste	m bee	en developed? ☐ Yes ☐ No	
If <u>yes</u> , have prima	ry and secondary le	ach fields been ide	ntified	d? □ Yes □ No	
Are all sewage d accompanying si		existing and prop □ No	oosed) accurately shown on the	
		STRUCTUR	RES		
Are any of the fo	llowing structures	s currently EXIS	ΓING	on the property? □Yes □No	
If yes, check all th	at apply:				
☐ greenhouse(s) ☐ barn ☐ garage/shop	☐ hoop house(s) (☐ hoop house(s) (☐ storage contain	(1000 ft ² or more)	□sto	orage shed(s) (under 120 ft ²) orage shed(s) (120 ft ² or more) oner (specify below)	cabin residence
*Uses may include	es on the property	ocessing, cloning, i	nurser	y, residential, etc.	
Stru	cture	Approximate S	oize	*Use	
_		_		mpanying site plan? Yes Ing, leaf removal, curing, drying	☐ No , etc)?

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If yes, please describe the ac	tivities and indicate in the table above w	where they are proposed to occur.
Will there be any employe	es onsite? 🗆 Yes 💢 No	
If yes, how many?		
n yes, new many.		
	SEED AND CLONE STOCK	
List the source(s) of seeds	, cuttings, or tissue cultures.	
If clones are purchased, are of	clones quarantined after purchase?□ Ye	s □ No
If clones are grown and/or se	eds are started on-site, describe the inf	rastructure of the clone room (i.e.
type and size, supplemental l	ights, watering system): Not applie	cable
How are seedling diseases	and/or insect problems prevented?	•
	SOIL MANAGEMENT	
What general soil/media t	ypes are used?	
List all soil/media types and t	heir source on the Inputs table on Page	11.
How are soil/nutrient deficien	cies determined?	
☐ soil testing	☐ microbiological testing	☐ tissue testing
\square observation of soil	□ observation of crop health	☐ crop quality testing
☐ comparison of crop yields	☐ other (specify below)	

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How are used soils disp	osed of?			
Does the site experie	ence any problems wi	ith soil erosio	on? □ Yes □ No	
-				
II yes, wily and on will	ich sites? Describe any i	miligation enoi	15.	
How is soil conserva	tion managed?			
☐ terraces	□ contour farming	I	☐ strip cropping	☐ winter cover crops
☐ firebreaks	☐ undersowing/int	terplanting	☐ conservation t	illage ☐ retention ponds
☐ windbreaks	☐ tree lines		☐ permanent wa	iterways
☐ riparian managemer	nt 🔲 maintain wildlife	e habitat	□ other (specify	below)
	WEED AND	D PEST MANA	GEMENT	
What weed control n	nethods are used?			
☐ hand-pulling ☐ m	ulch weed eating	☐ chemicals	☐ other (specify	below)
Is the cultivation site	e affected by any kno	own pests and	l/or pathogens?	☐ Yes ☐ No
If yes, describe below:				
If yes, are pests mana	ged with a pest control	advisor? ☐ Yes	s □ No	
Pest Control Advisor Na	ame:			
Contact Information:				
What strategies are	used to control pest o	damage to cre	ops?	
☐ crop rotation	☐ genetic resistance	☐ habitat fo	r natural enemies	☐ timing of planting
companion planting	· ·	☐ bat house	S	☐ bird houses
☐ hand picking	☐ monitoring	☐ trap crops	;	☐ physical barriers
□ trans	□ nhysical removal			

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☐ animal repellents	□ lures	use of chemicals	☐ other (specify below)
Elaborate, if needed:			
What strategies are	used to control pathog	gen damage to crops?	
☐ crop rotation	☐ field sanitation	☐ plant spacing	☐ genetic resistance
☐ timing of planting	□ vector management	☐ soil balancing	☐ solarization
\square companion planting	☐ compost/tea use	☐ use of chemicals	☐ other (specify below)
Elaborate, if needed:			
How is the effectiver	ness of the pest manag	gement program monitored?	•
Attach copies of any te	est results, if applicable.		
☐ crop quality testing	☐ insect monitorin	a with trans □ observation of	fcrop health
☐ microbiological testing			
☐ monitoring records k			crop yields
Information in greecords is	tept		
5	- T	s, riparian zones, special hal	bitats, or species of
special concern beer	n identified on the prop	perty? ☐ Yes ☐ No	
If yes, describe below:			
	MATERIA	ALS MANAGEMENT	
Will any of the follow	ving equipment be use	ed on the property?	
☐ Diesel Engine ☐ Non-diesel el ☐ Odor Control ☐ Drying Equip ☐ Gasoline fuel	or other equipment (excluses – 50 hp or grater or mingines – 250 hp or great ((Abatement) Devices (I) (Abatement) Bevices (I) (Abatement) Bevices (I) (Abatement) Bevices (I) (Abatement) Bevices	nultiple engines that total 90 hpter ss ing equipment	
		vidually or cumulatively grater t	
Will any of the follow	ving operations be per	formed as part of cannabis of	cultivation? ∐Yes ∐No

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cable
cable
not used
not u

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Contracted Security Company	☐ Yes ☐ No	
Hours present: to	Days/week	
Onsite Staff	☐ Yes ☐ No	
Hours present: to	Days/week	
Guard Dog	☐ Yes ☐ No	
If yes, will it be constrained for inspections?	☐ Yes ☐ No	
List any other Security Measures:		
	tions Calendar	
Describe all cultivation	activities with approxima January	te dates
Activity		Approximate Date
	February	
Activity		Approximate Date
	March	
Activity		Approximate Date
	April	
Activity		Approximate Date
	May	
Activity		Approximate Date

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June	
Activity	Approximate Date
1.1.	
Activity July	Approximate Date
Activity	Approximate Date
August	
Activity	Approximate Date
September	
Activity	Approximate Date
October	
Activity	Approximate Date
November	
Activity	Approximate Date
December	
Activity	Approximate Date
	Approximate Date

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INPUTS

List all soil mix ingredients, rooting hormones, fertility products, foliar sprays, and weed, disease and pest management inputs used.

Name and Formulation	Brand Name/Source	Reason for Use

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