



**COUNTY OF MENDOCINO**  
**DEPARTMENT OF PLANNING AND BUILDING SERVICES**

860 NORTH BUSH STREET • UKIAH • CALIFORNIA • 95482  
120 WEST FIR STREET • FT. BRAGG • CALIFORNIA • 95437

BRENT SCHULTZ, DIRECTOR  
TELEPHONE: 707-234-6650  
FAX: 707-463-5709  
FB PHONE: 707-964-5379  
FB FAX: 707-961-2427  
pbs@mendocinocounty.org  
www.mendocinocounty.org/pbs

April 24, 2019

Department of Transportation  
Environmental Health - Ukiah  
Building Inspection - Ukiah  
Forestry Advisor

Air Quality Management  
Sonoma State University  
CalFire - Prevention  
CalFire - Resource Management

Department of Fish and Wildlife  
Cloverdale Rancheria  
Redwood Valley Rancheria  
Sherwood Valley Band of Pomo Indians

**CASE#:** AP\_2019-0025

**DATE FILED:** 3/20/2019

**OWNER/APPLICANT:** EILEEN FRANCES RUSSELL

**REQUEST:** Administrative Permit for a large mixed light cannabis cultivation site on a Forest Land zoned parcel, and cultivation expansion on acreage per Mendocino County Code Section 20.242.040(B)(2) to allow for no more than 10,000 sq. ft. of canopy (Type 2B (10,000 sq. ft.); AG\_2017-0220).

**LOCATION:** 6.6± miles north of Covelo town center, lying on the north side of Hulls Valley Road (CR 341), 0.7± miles northeast of its intersection with Mina Road (CR 336), located at 24310 Hulls Valley Rd., Covelo (APN: 032-042-16).

**ENVIRONMENTAL DETERMINATION:** Categorically Exempt

**SUPERVISORIAL DISTRICT:** 3

**STAFF PLANNER:** MARK CLISER

**RESPONSE DUE DATE:** May 8, 2019

**PROJECT INFORMATION CAN BE FOUND AT:**

<https://www.mendocinocounty.org/government/planning-building-services/public-agency-referrals>

Mendocino County Planning & Building Services is soliciting your input, which will be used in staff analysis and forwarded to the appropriate public hearing. You are invited to comment on any aspect of the proposed project(s). Please convey any requirements or conditions your agency requires for project compliance to the project coordinator at the above address, or submit your comments by email to [pbs@mendocinocounty.org](mailto:pbs@mendocinocounty.org). Please note the case number and name of the project coordinator with all correspondence to this department.

We have reviewed the above application and recommend the following (please check one):

- ☐ No comment at this time.
- ☐ Recommend conditional approval (attached).
- ☐ Applicant to submit additional information (attach items needed, or contact the applicant directly, copying Planning and Building Services in any correspondence you may have with the applicant)
- ☐ Recommend denial (Attach reasons for recommending denial).
- ☐ Recommend preparation of an Environmental Impact Report (attach reasons why an EIR should be required).
- ☐ Other comments (attach as necessary).

**REVIEWED BY:**

Signature \_\_\_\_\_ Department \_\_\_\_\_ Date \_\_\_\_\_

**OWNER/ APPLICANT:** EILEEN FRANCES RUSSELL

**AGENT:** N/A

**REQUEST:** Administrative Permit for a large mixed light cannabis cultivation site on a Forest Land zoned parcel, and cultivation expansion on acreage per Mendocino County Code Section 20.242.040(B)(2) to allow for no more than 10,000 sq. ft. of canopy (Type 2B (10,000 sq. ft.); AG\_2017-0220).

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**APN/S:** 032-042-16-00

**PARCEL SIZE:** 7.79± acres

**GENERAL PLAN:** FL:160  
**ZONING:** FL:160

**EXISTING USES:** Cannabis

**DISTRICT:** NONE

**RELATED CASES:** AG\_2017-0220 (Agriculture); PP\_2017-0187 (Property Profile)

	<u>ADJACENT GENERAL PLAN</u>	<u>ADJACENT ZONING</u>	<u>ADJACENT LOT SIZES</u>	<u>ADJACENT USES</u>
<b>NORTH:</b>	TP160	FL160	600±	Institutional
<b>EAST:</b>	FL160	FL160	7.81±	Institutional
<b>SOUTH:</b>	FL160	FL160	45±	Institutional
<b>WEST:</b>	FL160	FL160	15.52±	Institutional

REFERRAL AGENCIES

<u>LOCAL</u> <input checked="" type="checkbox"/> Air Quality Management District <input checked="" type="checkbox"/> Building Division Ukiah <input checked="" type="checkbox"/> Department of Transportation (DOT) <input checked="" type="checkbox"/> Environmental Health (EH) <input checked="" type="checkbox"/> Forestry Advisor	<input checked="" type="checkbox"/> Sonoma State University <u>STATE</u> <input checked="" type="checkbox"/> CALFIRE (Land Use) <input checked="" type="checkbox"/> CALFIRE (Resource Management) <input checked="" type="checkbox"/> California Dept. of Fish & Wildlife	<u>TRIBAL</u> <input checked="" type="checkbox"/> Cloverdale Rancheria <input checked="" type="checkbox"/> Redwood Valley Rancheria <input checked="" type="checkbox"/> Sherwood Valley Band of Pomo Indians
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ADDITIONAL INFORMATION:

STAFF PLANNER: MARK CLISER

DATE: 4/24/2019

ENVIRONMENTAL DATA

1. MAC:

GIS

2. FIRE HAZARD SEVERITY ZONE:

CALFIRE FRAP maps/GIS

Very High

3. FIRE RESPONSIBILITY AREA:

CALFIRE FRAP maps/GIS

Federal

4. FARMLAND CLASSIFICATION:

GIS

5. FLOOD ZONE CLASSIFICATION:

FEMA Flood Insurance Rate Maps (FIRM)

NO

6. COASTAL GROUNDWATER RESOURCE AREA:

Coastal Groundwater Study/GIS

7. SOIL CLASSIFICATION:

Mendocino County Soils Study Eastern/Western Part

Eastern Soil Types

8. PYGMY VEGETATION OR PYGMY CAPABLE SOIL:

LCP maps, Pygmy Soils Maps; GIS

9. WILLIAMSON ACT CONTRACT:

GIS/Mendocino County Assessor's Office

NO

10. TIMBER PRODUCTION ZONE:

GIS

NO

11. WETLANDS CLASSIFICATION:

GIS

12. EARTHQUAKE FAULT ZONE:

Earthquake Fault Zone Maps; GIS

NO

13. AIRPORT LAND USE PLANNING AREA:

Airport Land Use Plan; GIS

NO

14. SUPERFUND/BROWNFIELD/HAZMAT SITE:

GIS; General Plan 3-11

NO

15. NATURAL DIVERSITY DATABASE:

CA Dept. of Fish & Wildlife Rarefind Database/GIS

YES

16. STATE FOREST/PARK/RECREATION AREA ADJACENT:

GIS; General Plan 3-10

17. LANDSLIDE HAZARD:

Hazards and Landslides Map; GIS; Policy RM-61; General Plan 4-44

18. WATER EFFICIENT LANDSCAPE REQUIRED:

Policy RM-7; General Plan 4-34

19. WILD AND SCENIC RIVER:

[www.rivers.gov](http://www.rivers.gov) (Eel Only); GIS

20. SPECIFIC PLAN/SPECIAL PLAN AREA:

Various Adopted Specific Plan Areas; GIS

21. STATE CLEARINGHOUSE REQUIRED:

Policy

22. OAK WOODLAND AREA:

USDA

23. HARBOR DISTRICT:

Sec. 20.512

FOR PROJECTS WITHIN THE COASTAL ZONE ONLY

24. LCP LAND USE CLASSIFICATION:

LCP Land Use maps/GIS

25. LCP LAND CAPABILITIES & NATURAL HAZARDS:

LCP Land Capabilities maps/GIS; 20.500

26. LCP HABITATS & RESOURCES:

LCP Habitat maps/GIS; 20.496

27. COASTAL COMMISSION APPEALABLE AREA:

Post LCP Certification Permit and Appeal Jurisdiction maps/GIS; 20.544

28. CDP EXCLUSION ZONE:

CDP Exclusion Zone maps/GIS

NO

29. HIGHLY SCENIC AREA:

Highly Scenic & Tree Removal Area Maps/GIS; Secs. 20.504.015, 20.504.020

NO

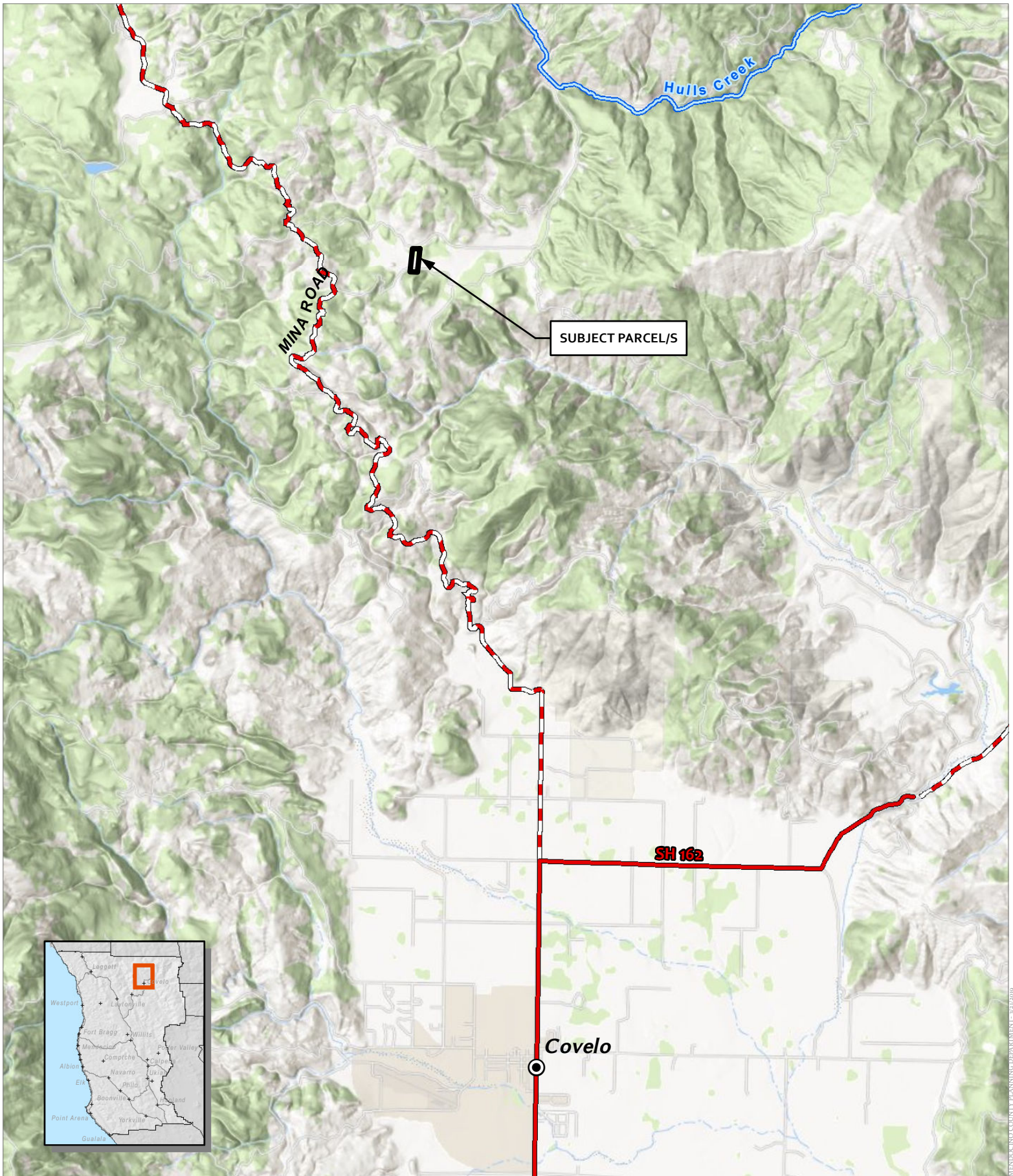
30. BIOLOGICAL RESOURCES & NATURAL AREAS:

Biological Resources & Natural Area Map; GIS; General Plan 4-9

31. BLUFFTOP GEOLOGY:

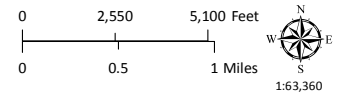
GIS; 20.500.020





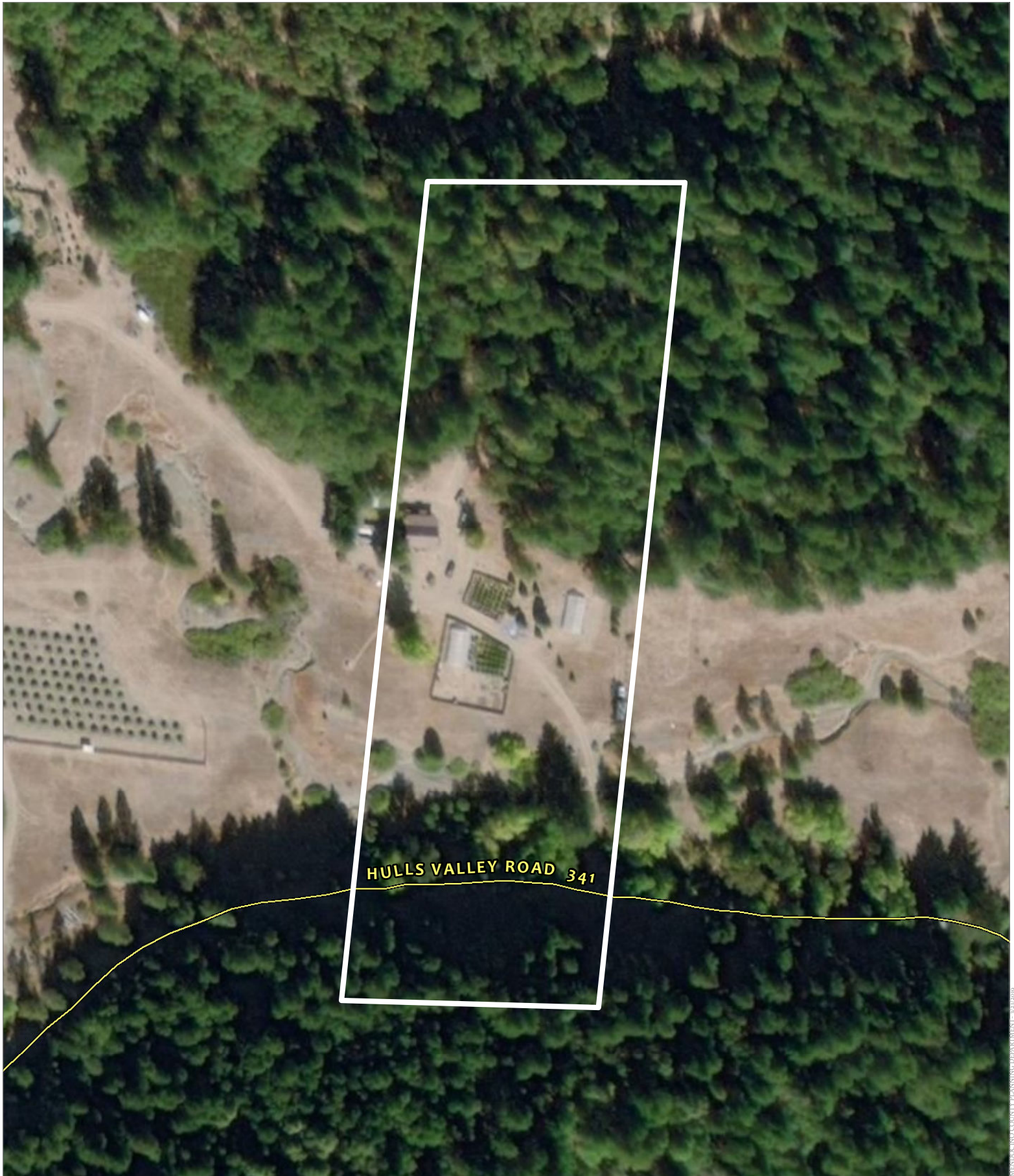
CASE: AP 2019-0025  
 OWNER: RUSSELL, Eileen, ET AL  
 APN: 032-042-16  
 APLCT: Eileen Russell  
 AGENT:  
 ADDRESS: 24310 Hulls Valley Road, Covelo

- Major Towns & Places
- Major Roads
- Major Rivers
- Highways



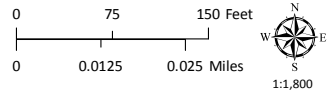
LOCATION MAP





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ADDRESS: 24310 Hulls Valley Road, Covelo

Public Roads



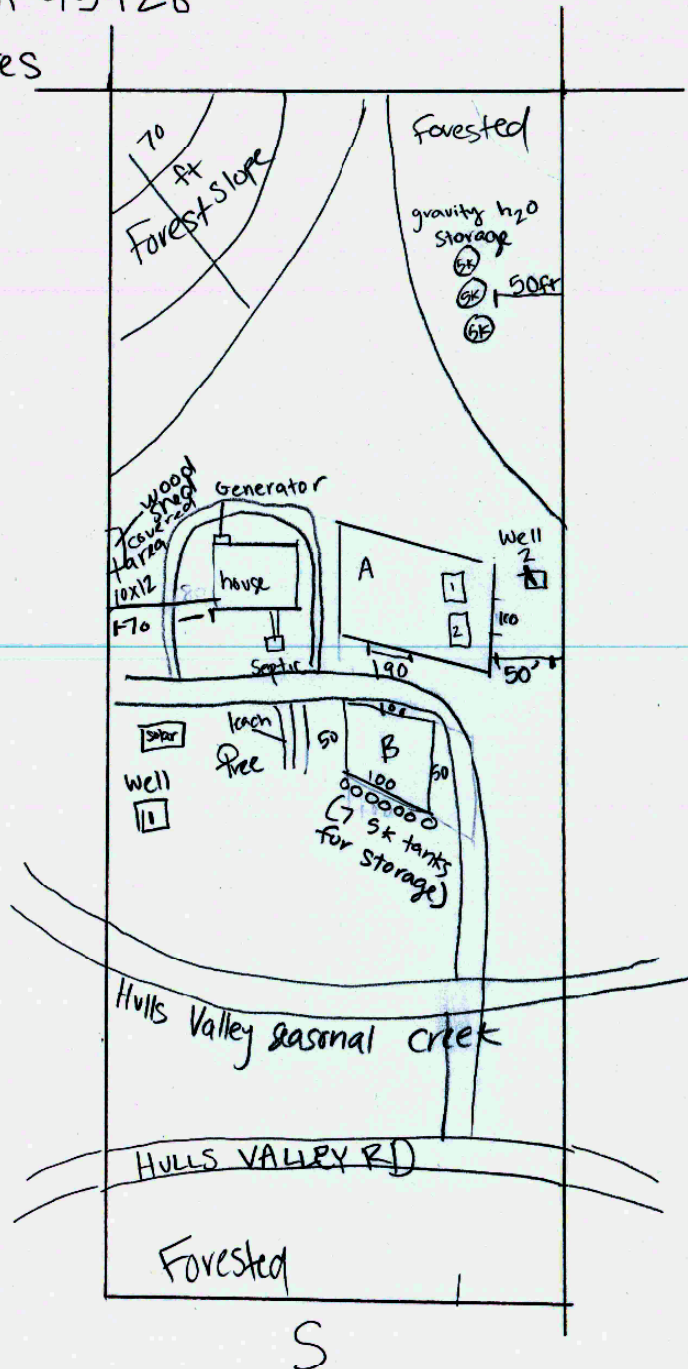
AERIAL IMAGERY

Eileen Russell  
 APN: 032-042-16  
 24310 Hulls Valley Rd  
 Covelo CA 95428  
 7.79 acres



W

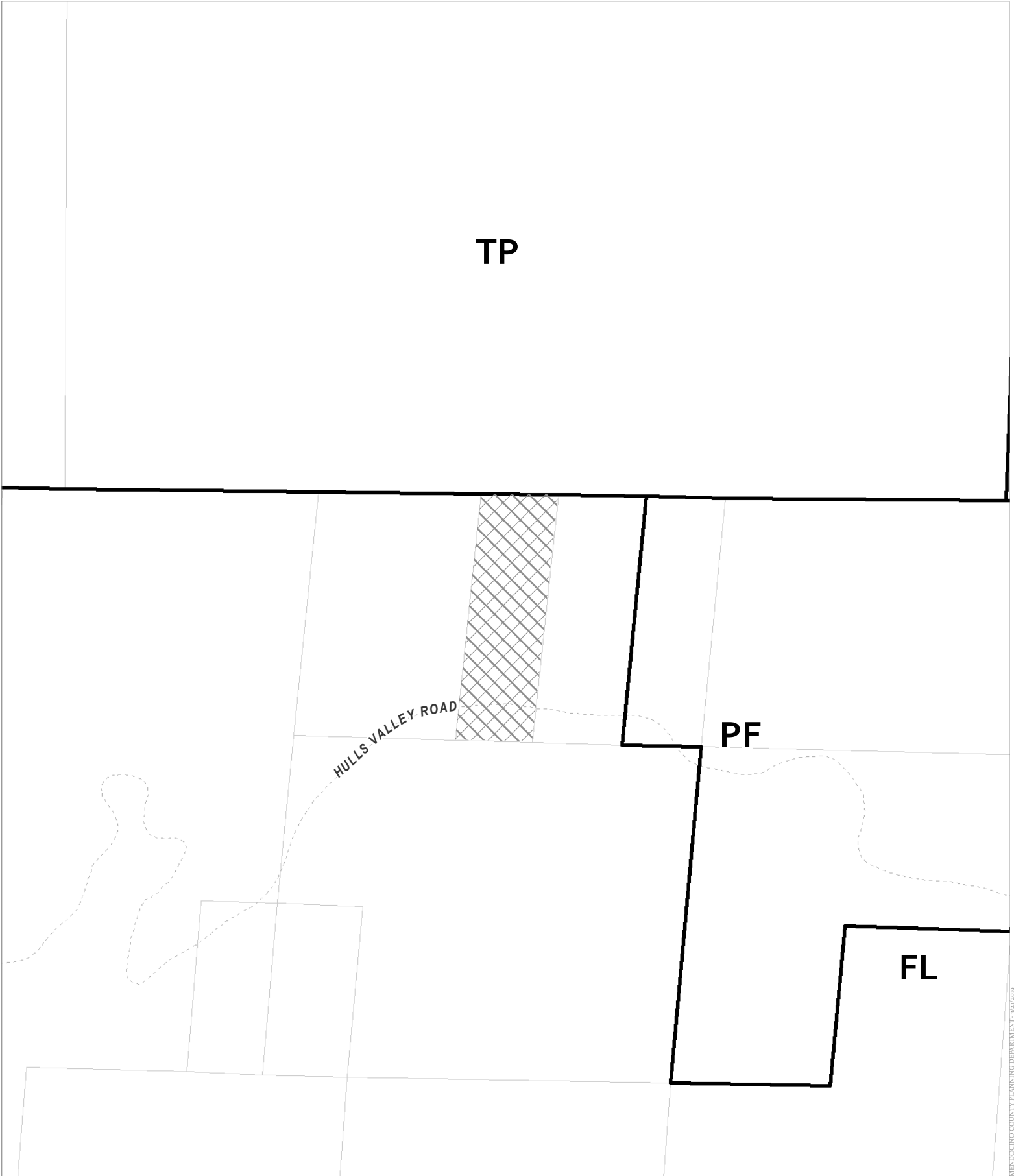
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NO SCALE

SITE PLAN



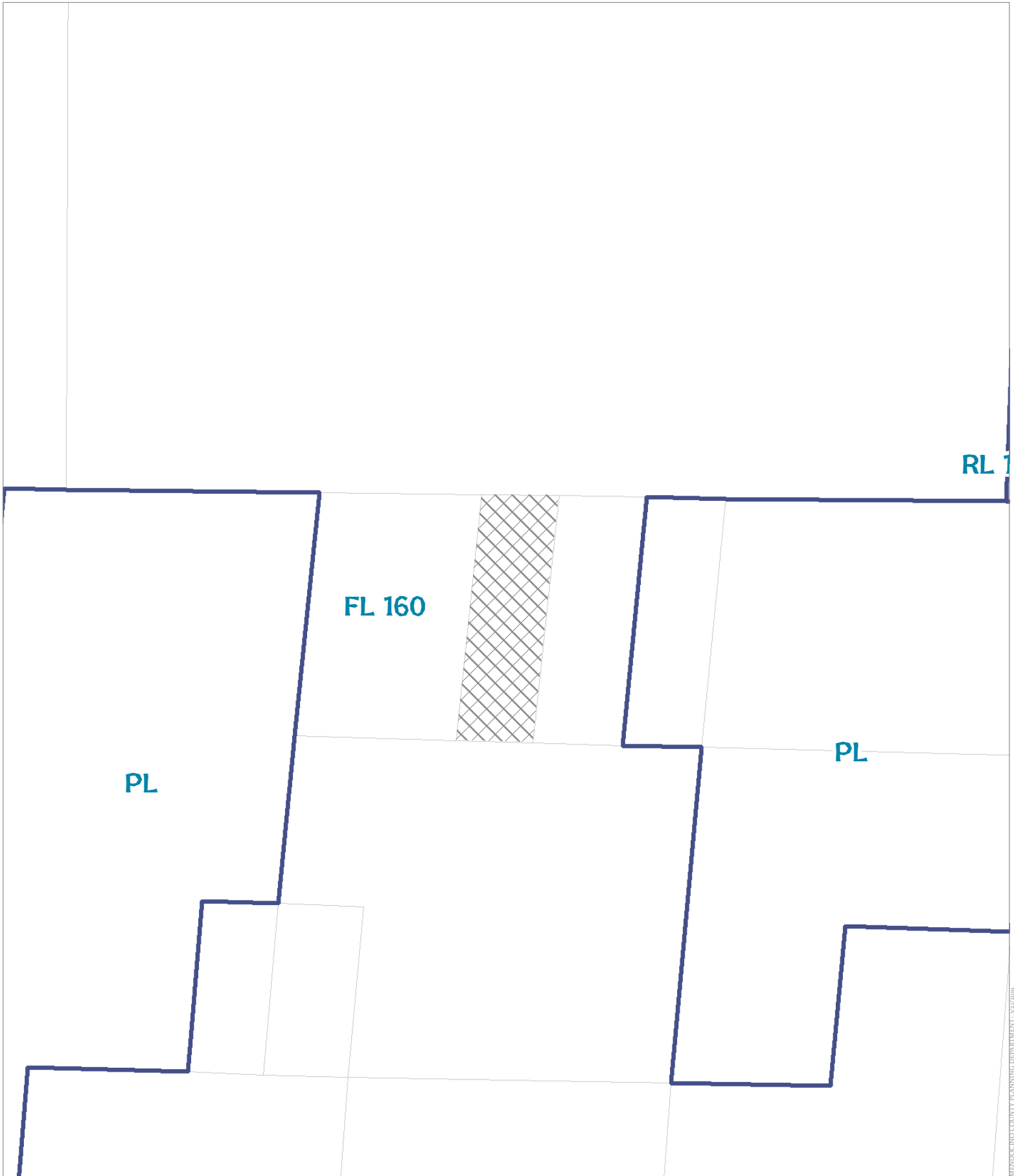
MENDOCINO COUNTY PLANNING DEPARTMENT - 3/3/2019

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OWNER: RUSSELL, Eileen, ET AL  
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 Zoning Districts  
 Public Roads

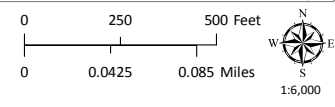
0 250 500 Feet  
0 0.0425 0.085 Miles  
N  
W E  
S  
1:6,000

ZONING DISPLAY MAP



CASE: AP 2019-0025  
OWNER: RUSSELL, Eileen, ET AL  
APN: 032-042-16  
APLCT: Eileen Russell  
AGENT:  
ADDRESS: 24310 Hulls Valley Road, Covelo

 General Plan Classes



GENERAL PLAN CLASSIFICATIONS

MENDOCINO COUNTY PLANNING DEPARTMENT - 3/3/2019



031-280-14  
ROGER BURCH  
TP160 600 A±

032-042-17  
VACANT  
FL160 120.72 A±

032-042-12  
LYNN ZACHRESON  
FL160 15.52 A±

032-042-16  
EILEEN RUSSELL  
FL160 7.79 A±

032-042-18  
VACANT  
FL160 7.81 A±

032-042-13  
VACANT  
PF0 7.83 A±

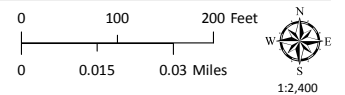
032-043-01  
VACANT  
PF0 39.45 A±

032-042-19  
SUSAN OBRIEN  
FL160 45 A±

032-043-02  
VACANT  
PF0 30 A±

MENDOCINO COUNTY PLANNING DEPARTMENT - 3/3/2019

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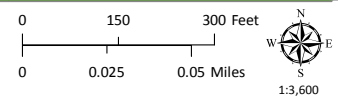
ADJACENT PARCELS

US FOREST SERVICE

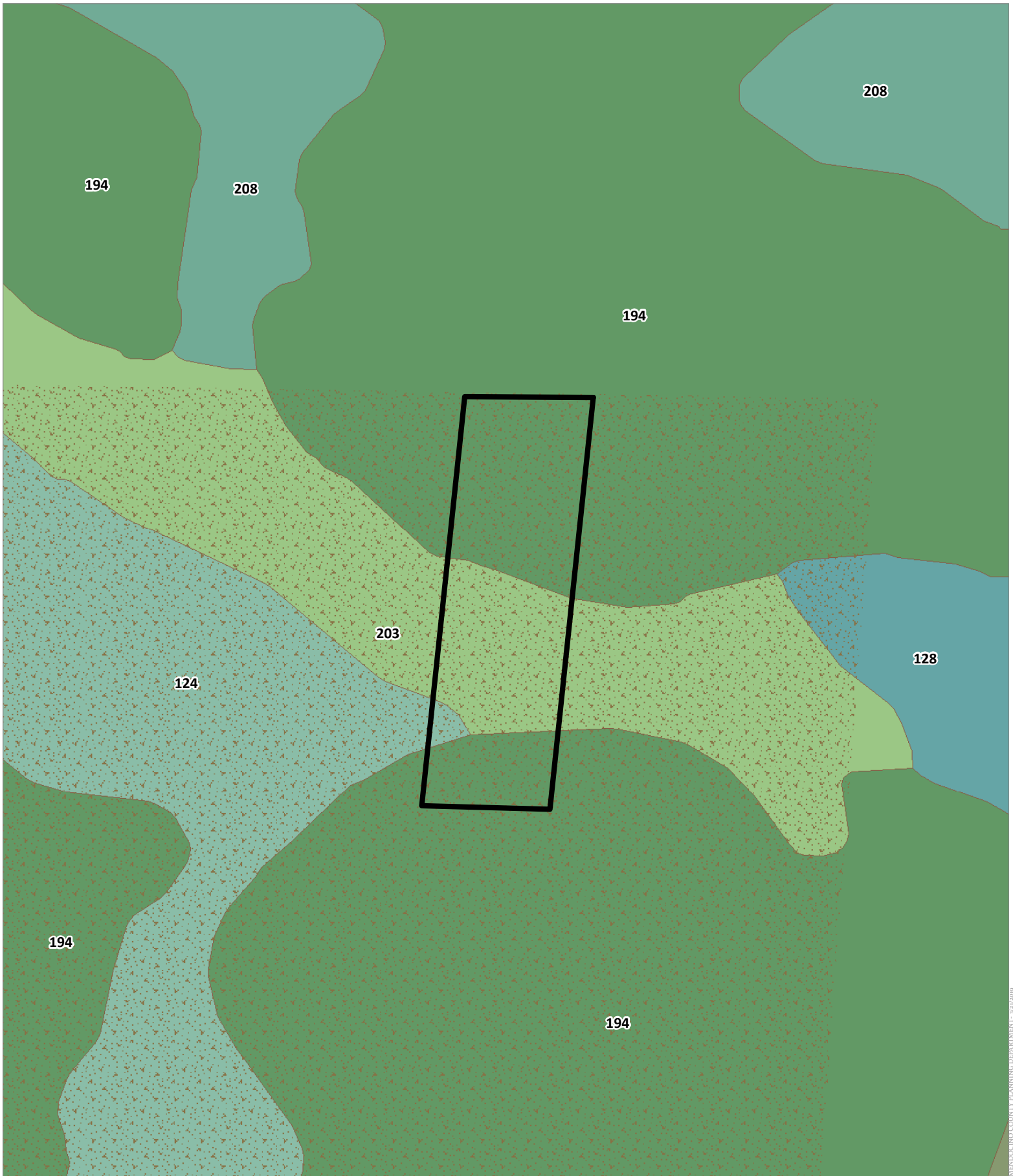
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AGENT:  
ADDRESS: 24310 Hulls Valley Road, Covelo

Very High Fire Hazard



High Fire Hazard

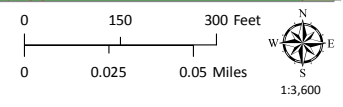


## FIRE HAZARD ZONES



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 AGENT:  
 ADDRESS: 24310 Hulls Valley Road, Covelo

 Naturally Occurring Asbestos  
 Eastern Study Soil Types



LOCAL SOILS

RENDERING COUNTY PLANNING DEPARTMENT - 3/3/2019



# WATER WELL PERMIT

<b>NEW</b> <input type="checkbox"/> FEE \$ _____	<b>REPAIR OR DESTRUCTION</b> <input type="checkbox"/> NO FEE	<b>RECEIPT NUMBER</b> _____	<b>PERMIT NUMBER</b> <b>N8. 10753</b>
-----------------------------------------------------	-----------------------------------------------------------------	--------------------------------	------------------------------------------

## (7) ATTACH PLOT PLAN

Application must be accompanied with a plot plan that clearly shows the location of the parcel and the approximate location of the proposed well on the parcel (include location of all septic systems).

## (8) DIRECTIONS (Include mile-post markers, landmarks, nearest cross street, etc...):

See Map

## (9) LICENSED WELL DRILLER

I agree to comply with all the regulations of the County of Mendocino and the State of California pertaining to water well construction.

**I WILL NOTIFY THE HEALTH DEPARTMENT TWENTY-FOUR (24) HOURS PRIOR TO POURING THE ANNULAR SEAL.**

**I WILL FURNISH THE HEALTH DEPARTMENT WITH A LEGIBLE COPY OF THE STATE WATER WELL DRILLERS REPORT WITHIN 15 DAYS OF COMPLETION OF THIS WELL.**

NAME: Fisch Brothers Drilling LICENSE NO. 399226  
 SIGNED: M. Fisch DATE: 7/5/95

## FOR OFFICE USE ONLY — DIVISION OF ENVIRONMENTAL HEALTH

REMARKS: \_\_\_\_\_

PERMIT ISSUED: M. Fisch DATE: 7/7/95  
Ok'd to seal by phone 8/2/95

INSPECTIONS CONSTRUCTION: \_\_\_\_\_ DATE: \_\_\_\_\_

FINAL: Karl A. Cantor DATE: Oct 2 1996

THIS PERMIT EXPIRES 1 YEAR FROM DATE OF ISSUANCE-MENDOCINO COUNTY CODE SEC. 16.04.080.  
 This permit becomes void after one year if the work authorized thereby has not been completed.

Application is hereby made to the Mendocino County Division of Environmental Health for a permit to construct, reconstruct, or destroy a water well in compliance with the Code of Mendocino County.

## APPLICANT TO COMPLETE ITEMS (1)-(9)

(1) ADDRESS 24310 Hulls Valley Rd.  
Covelo, Ca 95428  
 Assessor's Parcel No. 032-042-16  
 Land Division No. \_\_\_\_\_

Parcel No. \_\_\_\_\_  
 Parcel Size 7.79 AC.

(2) OWNER Kathryn Picina  
 Business Name (if applicable) \_\_\_\_\_

Mailing Address 24310 Hulls Valley Rd.  
Covelo, Ca 95428  
 Telephone No. 983-6248

<b>(3) TYPE OF WORK</b> New Well <input checked="" type="checkbox"/> Test Hole <input type="checkbox"/> Reconstruction <input type="checkbox"/> Other <input type="checkbox"/> Destruction <input type="checkbox"/>	<b>(4) TYPE OF PERMIT</b> Regular <input checked="" type="checkbox"/> Special Permit Area <input type="checkbox"/>
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------

(5) PROPOSED USE  
 Domestic ☒ Industrial ☐ Monitoring ☐  
 Irrigation ☐ Test Well ☐ Municipal ☐ Other ☐

(6) CONSTRUCTION  
 Drilling Method: Rotary ☒ Cable ☐ Other ☒ Air  
 Casing: Steel ☐ Concrete ☐ Plastic ☒  
 Diameter: 5" Bore Size: 10"  
 Gage or Wall: C160  
 Annular Space: Size 2" Seal Depth: 20'  
 Seal Material: Concrete ☐ Grout ☐  
 Puddled Clay ☐ Neat Cement ☐  
 Other (describe): Bentonite

FOR OFFICE USE ONLY





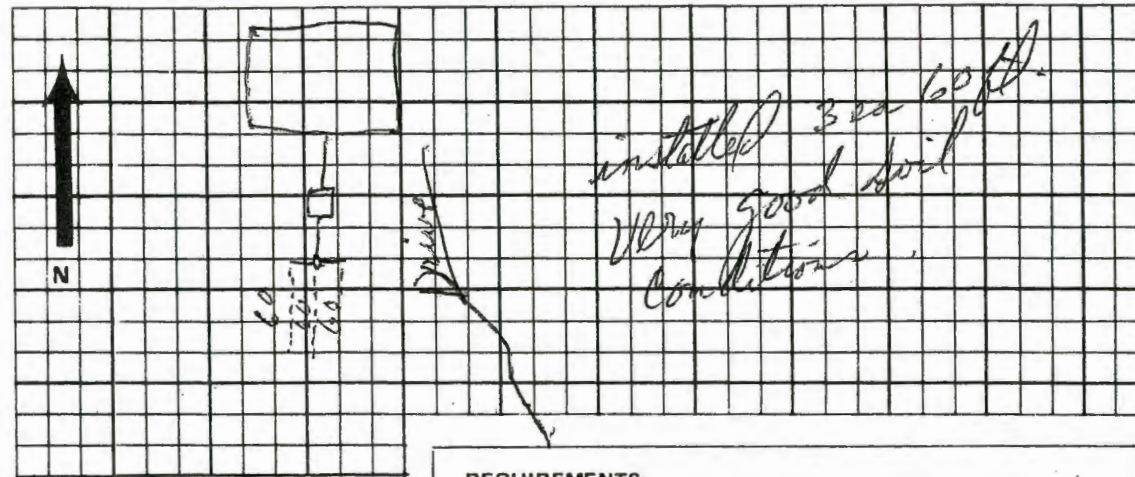


# INDIVIDUAL SEWAGE DISPOSAL SYSTEM PERMIT

NEW <input checked="" type="checkbox"/> FEE 110. <sup>00</sup>	REPAIR <input type="checkbox"/> NO FEE	RECEIPT NUMBER 45892	PERMIT NUMBER No 1103 -A
-------------------------------------------------------------------	-------------------------------------------	-------------------------	-----------------------------

## SEWERAGE SYSTEM LAYOUT PLAN

PLOT PLAN TO SHOW SYSTEM LOCATION, SHOWING DISTANCE TO BUILDINGS, PROPERTY LINES, WELLS, STREAMS, CUT BANKS, ETC. ALSO INDICATE SLOPE AND TERRAIN FACTORS.



Residence <input checked="" type="checkbox"/>	Mobile Home <input type="checkbox"/>
Other <input type="checkbox"/>	
Check if this construction will result in additional bedrooms <input type="checkbox"/>	
Apt. House <input type="checkbox"/>	Motel <input type="checkbox"/>
Mobile Home Park <input type="checkbox"/>	Other <input type="checkbox"/>
Check if this construction will result in the installation of plumbing <input type="checkbox"/>	
GARBAGE DISPOSAL UNIT YES <input type="checkbox"/> NO <input type="checkbox"/>	
LOT SIZE 10 Acres Sq. Ft.	
No. of Units 1	No. of Bedrooms 2
WATER SUPPLY PRIVATE <input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/>	

## REQUIREMENTS:

1. A concrete 2-compartment septic tank of at least 810 gallons working capacity (1200 gallon tank required with garbage disposal).
2. One and two bedroom dwellings require a tile and gravel disposal trench 30 inches deep, 2 feet wide, with a total length of 120 feet. Three bedroom dwellings require 170 lineal feet. Trenches shall have a gradual fall of 1 INCH TO 30 FEET.
3. Septic tank and disposal field must be 10 feet from property lines and structures, 100 feet from any water well or surface drainage.
4. When the sewage disposal system has been installed, and before top soil is placed over it, the INSTALLER SHALL NOTIFY the Health Department IN WRITING that a final inspection can be made. Allow five working days for the inspection.

SEPTIC TANK SIZE 1200	LEACH LINE REQUIRED 270 ft.	NUMBER OF LINES 2
SPECIAL REQUIREMENTS APPLICABLE TO THIS PARCEL Install as per Don Clark's report. Changed from 3 to 2 Bedrooms.		
REMARKS		
THIS PERMIT EXPIRES ONE YEAR FROM DATE OF ISSUANCE		
PERMIT ISSUED Lloyd Weese	DATE: 11-2-83	
INSTALLATION APPROVED BY Lloyd Weese	DATE: 10-30-84	

Application is hereby made to the Mendocino County Division of Environmental Health for a permit to construct or repair a sewage disposal system as described below in compliance with the code of Mendocino County or for clearance for other construction.

## APPLICANT FILL IN BETWEEN HEAVY LINES ONLY

ASSESSOR'S PARCEL NO. 032-042-16

JOB ADDRESS 24310 Hulls Valley Rd.

LOCATION Hulls Valley - Conelo

CITY:

OWNER NAME Kent Loressey

MAILING ADDRESS 22800 Conelo Refuse Rd

CITY Conelo 95428 TEL. NO.

(ONE OF TWO MUST BE COMPLETED)

- WORKMEN'S COMPENSATION CERTIFICATE
- ☐ 1. A currently effective certificate of Workmen's Compensation Insurance coverage is on file with this office.  
Compensation Insurance Policy #
  - ☐ 2. I certify that in the performance of the work for which this permit will be issued I shall not employ any person in any manner so as to become subject to the workmen's compensation laws of California.

APPLICANT

(COMPLETE EITHER A OR B)

- CONTRACTOR'S LICENSE LAW CERTIFICATE
- The Applicant is licensed under the provisions of the contractors license law under license number which license is in full force and effect.
  - The Applicant is exempt from the provisions of the contractors license law for the following reasons:

DATE SIGNATURE

## IMPORTANT:

I agree to obtain sanitarian's inspection of installation prior to covering.

I agree to construct this disposal system in accordance with all the provisions of the code of Mendocino County and with the plan drawn hereon.

It is understood that the issuance of a permit in no way indicates that a guarantee of perfect and indefinite operation of this system is made by the Mendocino County Division of Environmental Health, and that the homeowner is required to make any repairs necessary to confine sewage below the surface of the ground.

Signature Date

OWNER ☐ OWNER'S AGENT ☐

APPROVED MENDOCINO COUNTY PLANNING DEPARTMENT

Date

WHEN VALIDATED THIS IS YOUR PERMIT

890 N. BUSH ST.  
UKIAH, CA 95482  
(707) 468-4466

DIVISION OF ENVIRONMENTAL HEALTH  
DEPARTMENT OF PUBLIC HEALTH  
COUNTY OF MENDOCINO

546 S. MAIN ST.  
FORT BRAGG, CA 95437  
(707) 964-4713



TRIPLICATE  
Owner's Copy  
Page 1 of 1

Owner's Well No. 95-3325

Date Work Began Aug 95, Ended Aug 95

Local Permit Agency Mendocino Cty

Permit No. 10753 Permit Date 7-7-95

STATE OF CALIFORNIA  
**WELL COMPLETION REPORT**  
Refer to Instruction Pamphlet

No. 556954

DWR USE ONLY - DO NOT FILL IN									
STATE WELL NO./STATION NO.									
LATITUDE					LONGITUDE				
APN/TRS/OTHER									

**GEOLOGIC LOG**

ORIENTATION (✓) ☒ VERTICAL ☐ HORIZONTAL ☐ ANGLE (SPECIFY)

DEPTH TO FIRST WATER (Ft.) BELOW SURFACE

**DESCRIPTION**

Describe material, grain size, color, etc.

DEPTH FROM SURFACE	
Ft.	to Ft.
0	2
2	20
20	60

topsoil  
brown clay  
brown clay w/gravel

**WELL OWNER**

Name Kathryn Licina

Mailing Address 24310 Hulls Valley Rd.

Covelo Ca. 95428

CITY STATE ZIP

**WELL LOCATION**

Address 24310 Hulls Valley Rd.

City Covelo Ca.

County Mendocino

APN Book 032 Page 042 Parcel 16

Township Range Section

Latitude Longitude DEG. MIN. SEC. NORTH WEST

**LOCATION SKETCH**

NORTH

**ACTIVITY (✓)**

☒ NEW WELL

MODIFICATION/REPAIR

Deepen

Other (Specify)

DESTROY (Describe Procedures and Materials Under "GEOLOGIC LOG")

**PLANNED USE(S)**

☒ MONITORING

WATER SUPPLY

☒ Domestic

Public

Irrigation

Industrial

"TEST WELL"

CATHODIC PROTECTION

OTHER (Specify)

SOUTH

Illustrate or Describe Distance of Well from Landmarks such as Roads, Buildings, Fences, Rivers, etc. PLEASE BE ACCURATE & COMPLETE.

DRILLING METHOD Rotary Air

FLUID

**WATER LEVEL & YIELD OF COMPLETED WELL**

DEPTH OF STATIC WATER LEVEL 15 (Ft.) & DATE MEASURED

ESTIMATED YIELD 1.5 (GPM) & TEST TYPE airlift

TEST LENGTH 1 (Hrs.) TOTAL DRAWDOWN 55 (Ft.)

\* May not be representative of a well's long-term yield.

TOTAL DEPTH OF BORING 60 (Feet)

TOTAL DEPTH OF COMPLETED WELL 60 (Feet)

DEPTH FROM SURFACE			BORE-HOLE DIA. (Inches)	CASING(S)					DEPTH FROM SURFACE			ANNULAR MATERIAL			
				TYPE (✓)				MATERIAL / GRADE				INTERNAL DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)	TYPE
Ft.	to	Ft.	BLANK	SCREEN	CON- DUCTOR	FILL PIPE									CE- MENT (✓)
0	20	8.75	X				F480PVC	5	c200		0	20		X	
20	60	"		"			"	"	"	1/8	20	60		X	fine pea

**ATTACHMENTS (✓)**

- Geologic Log
- Well Construction Diagram
- Geophysical Log(s)
- Soil / Water Chemical Analyses

**CERTIFICATION STATEMENT**

I, the undersigned, certify that this report is complete and accurate to the best of my knowledge and belief.

NAME FISC BROS. DRILLING INC.  
(PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)

5001 GRAVENSTEIN HWY NO. SEBASTOPOL CA. 95472  
ADDRESS CITY STATE ZIP