

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/pbs

May 2, 2019

Department of Transportation Environmental Health - Ukiah Building Inspection - Ukiah Air Quality Management CalFire – Prevention CalFire – Resource Management Department of Fish and Wildlife Little Lake Fire District Cloverdale Rancheria Redwood Valley Rancheria Sherwood Valley Band of Pomo Indians

CASE#: AP_2019-0032 DATE FILED: 4/5/2019 OWNER/APPLICANT: ANTONY & CINDY BROWNING

REQUEST: Administrative Permit for a setback reduction of a medium mixed light cannabis cultivation site (Type 1B (5,000 sq. ft.); AGR_2018-0011) of no more than 5,000 sq. ft. of canopy. At all times there will be no more than 5,000 sq. ft. of mature growth canopy. The new setback will be 20 ft. from the northwestern property line, and 0 ft. from southeastern property line (under same ownership as of May 2019), and 50 ft. from southwestern property line, which abuts Ridgeview Road.

LOCATION: 4.7± miles south of Willits City center, lying on the east side of Ridgeview Road (CR 372), 0.3± miles southeast of its intersection with Black Bart Drive (CR 370), located at 15633 Ridgeview Rd., Willits (APN: 147-290-08).

ENVIRONMENTAL DETERMINATION: Categorically Exempt SUPERVISORIAL DISTRICT: 3 STAFF PLANNER: MARK CLISER RESPONSE DUE DATE: May 16, 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 <u>pbs@mendocinocounty.org</u>. 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 _____

REPORT FOR: ADMINISTRATIVE PERMIT

APPLICANT: ANTONY & CINDY BROWNING

AGENT: CINDY BROWNING

OWNER/

- **REQUEST:** Administrative Permit for a setback reduction of a medium mixed light cannabis cultivation site (Type 1B (5,000 ft²); AGR_2018-0011) of no more than 5,000 ft² of canopy. At all times there will be no more than 5,000 ft² of mature growth canopy. The new setback will be 20 ft. from the northwestern property line, and 0 ft. from southeastern property line (under same ownership as of May 2019), and 50 ft. from southwestern property line, which abuts Ridgeview Road.
- **LOCATION:** 4.7± miles south of Willits City center, lying on the east side of Ridgeview Road (CR 372), 0.3± miles southeast of its intersection with Black Bart Drive (CR 370), located at 15633 Ridgeview Rd., Willits (APN: 147-290-08).
- **APN/S:** 147-900-08-01

PARCEL SIZE: 22± acres

GENERAL PLAN: RR5: ZONING: RR:5

EXISTING USES: Residential; Cannabis

DISTRICT: Supervisorial District 5 (Williams)

RELATED CASES: BU_1999-0245 (GARAGE); BU_2017-0239 (CLASS K 2873 SQFT SFR); BU_2017-0240 (CLASS K 1120 SQFT GARAGE/SHOP); BU_2017-0241 (CLASS K 728 SQFT STORAGE BLDG); BU_2018-1491 (OCCUPANCY CHANGE TO F1 FOR DRY SHED); BU_2018-1492 (ADDING 2 BUMP OFFS TO GARAGE FOR DRY SHED); AGR_2018-0011 (AGRICULTURAL); BU_2018-1539 – BU_2018-1540 (HOOP HOUSES 1 & 2)

	ADJACENT GENERAL PLAN	ADJACENT ZONING	ADJACENT LOT SIZES	ADJACENT USES
NORTH:	RR5:	RR:5	4.15±; 2.2±; 2.4±; 9.3±	Residential
			acres	
EAST:	RL160:	RL:160	136.87±	Agricultural
SOUTH:	RR5:	RR:5	11± acres	Residential
WEST:	RR5:	RR:5	1.4±; 1.4±; 1.4±; 1.6±	Residential
			acres	

REFERRAL AGENCIES

LOCAL ☑ Air Quality Management District ☑ Building Division Ukiah ☑ Department of Transportation (DOT) ☑ Environmental Health (EH) ☑ Little Lake Fire District

STATE ☑ CALFIRE (Land Use) ☑ CALFIRE (Resource Management) ☑ California Dept. of Fish & Wildlife TRIBAL ⊠ Cloverdale Rancheria ⊠ Redwood Valley Rancheria ⊠ Sherwood Valley Band of Pomo Indians

ADDITIONAL INFORMATION: Located in an area of naturally occurring asbestos and eastern serpentine inclusions

STAFF PLANNER: MARK CLISER

DATE: 5/1/2019

ENVIRONMENTAL DATA

1. MAC:

2. FIRE HAZARD SEVERITY ZONE: CALFIRE FRAP maps/GIS High

3. FIRE RESPONSIBILITY AREA: CALFIRE FRAP maps/GIS CALFIRE / Little Lake Fire District

4. FARMLAND CLASSIFICATION:

5. FLOOD ZONE CLASSIFICATION:

6. COASTAL GROUNDWATER RESOURCE AREA: Coastal Groundwater Study/GIS

7. SOIL CLASSIFICATION: Mendocino County Soils Study Eastern/Western Part Eastern

8. PYGMY VEGETATION OR PYGMY CAPABLE SOIL: LCP maps, Pygmy Soils Maps; GIS

9. WILLIAMSON ACT CONTRACT: GIS/Mendocino County Assessor's Office

10. TIMBER PRODUCTION ZONE:

11. WETLANDS CLASSIFICATION:

12. EARTHQUAKE FAULT ZONE:

Earthquake Fault Zone Maps; GI

13. AIRPORT LAND USE PLANNING AREA: Airport Land Use Plan; GIS

14. SUPERFUND/BROWNFIELD/HAZMAT SITE: GIS; General Plan 3-11

15. NATURAL DIVERSITY DATABASE: CA Dept. of Fish & Wildlife Rarefind Database/GIS

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

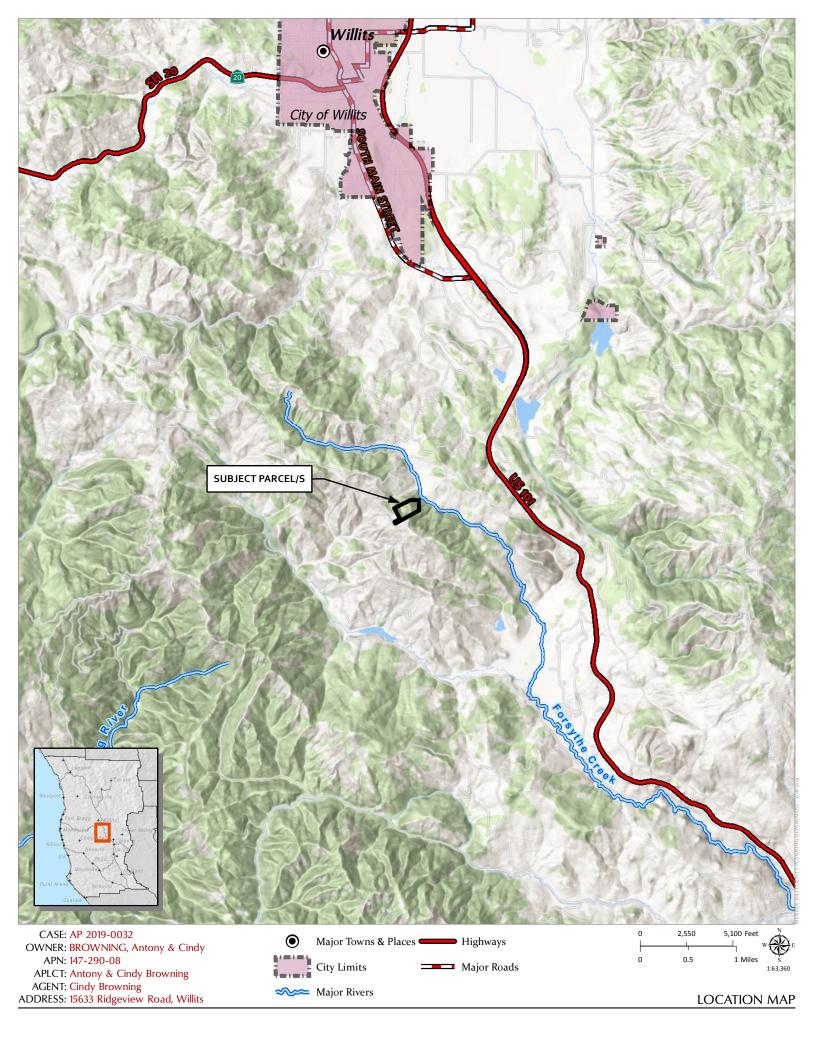
19. WILD AND SCENIC RIVER: <u>www.rivers.gov</u> (Eel Only); GIS

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:





OWNER: BROWNING, Antony & Cindy APN: 147-290-08 APLCT: Antony & Cindy Browning AGENT: Cindy Browning ADDRESS: 15633 Ridgeview Road, Willits

= Public Roads

- Driveways/Unnamed Roads

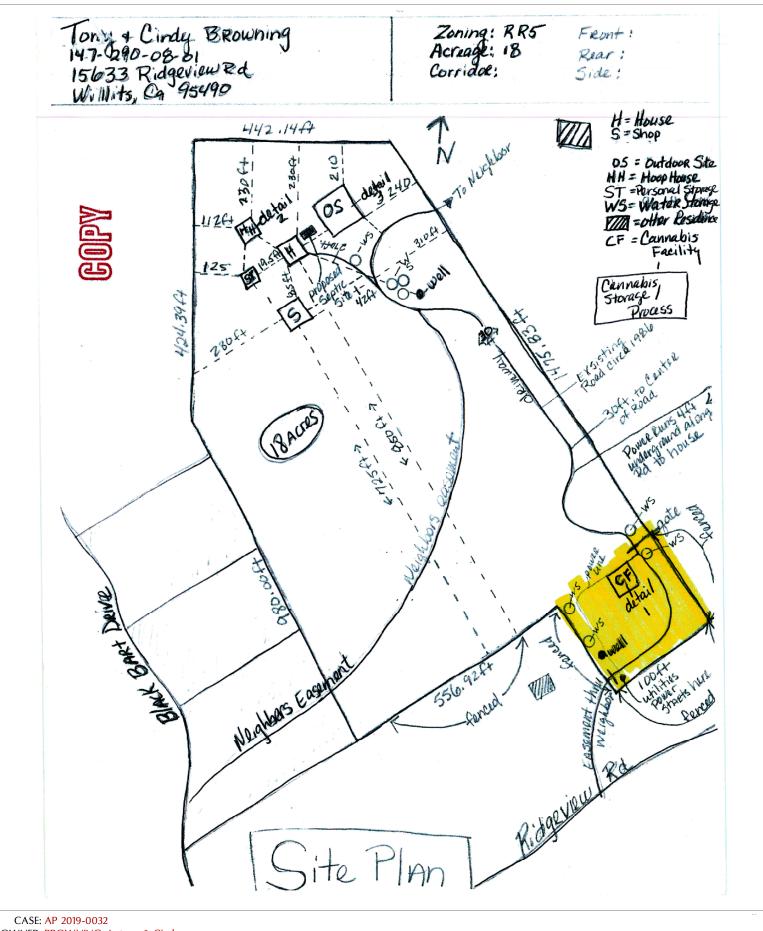
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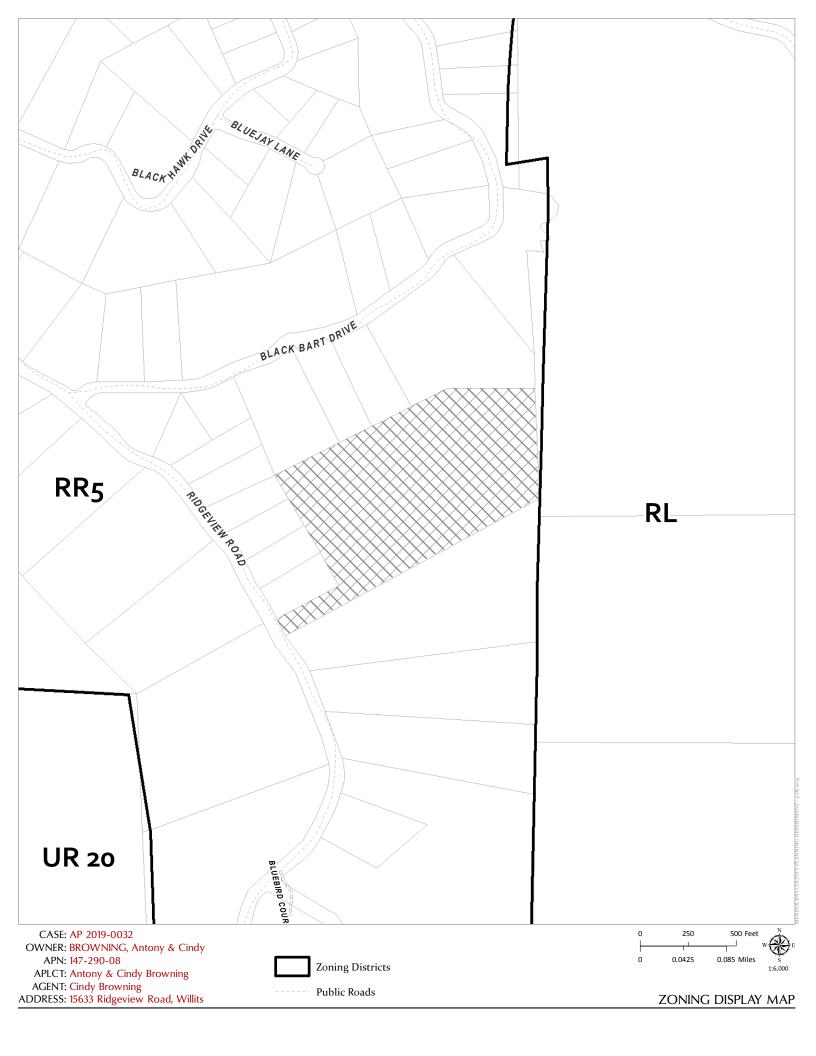
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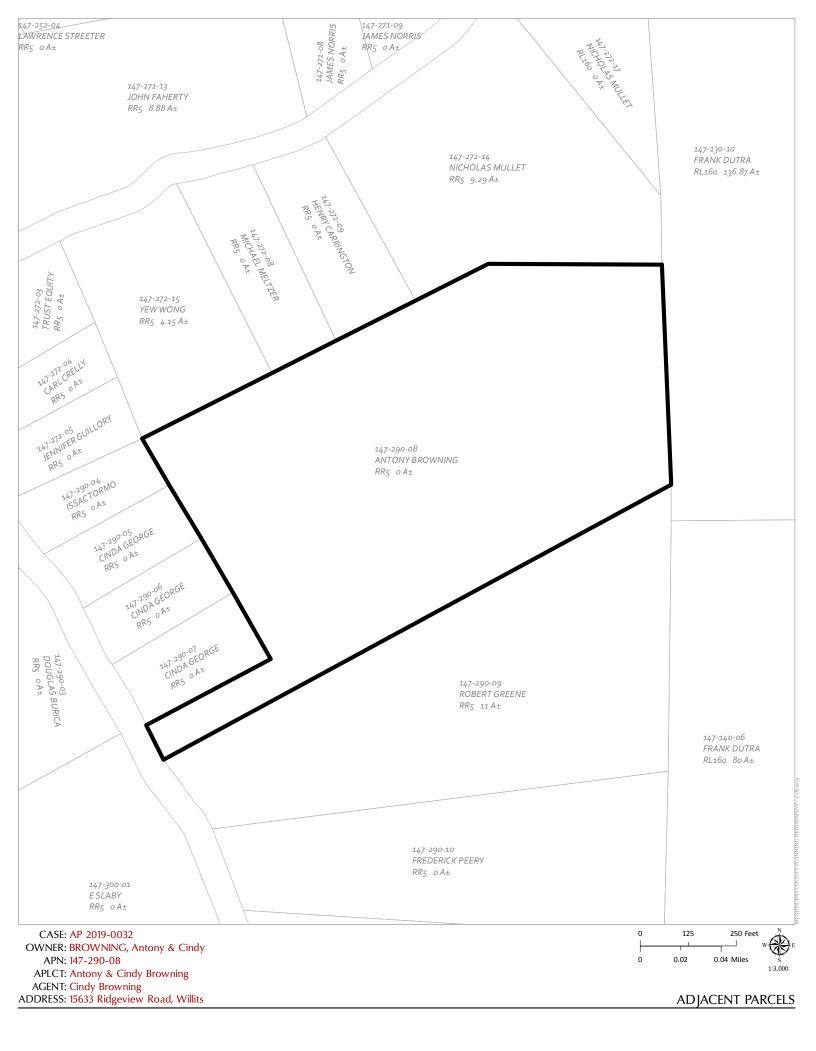
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NO SCALE





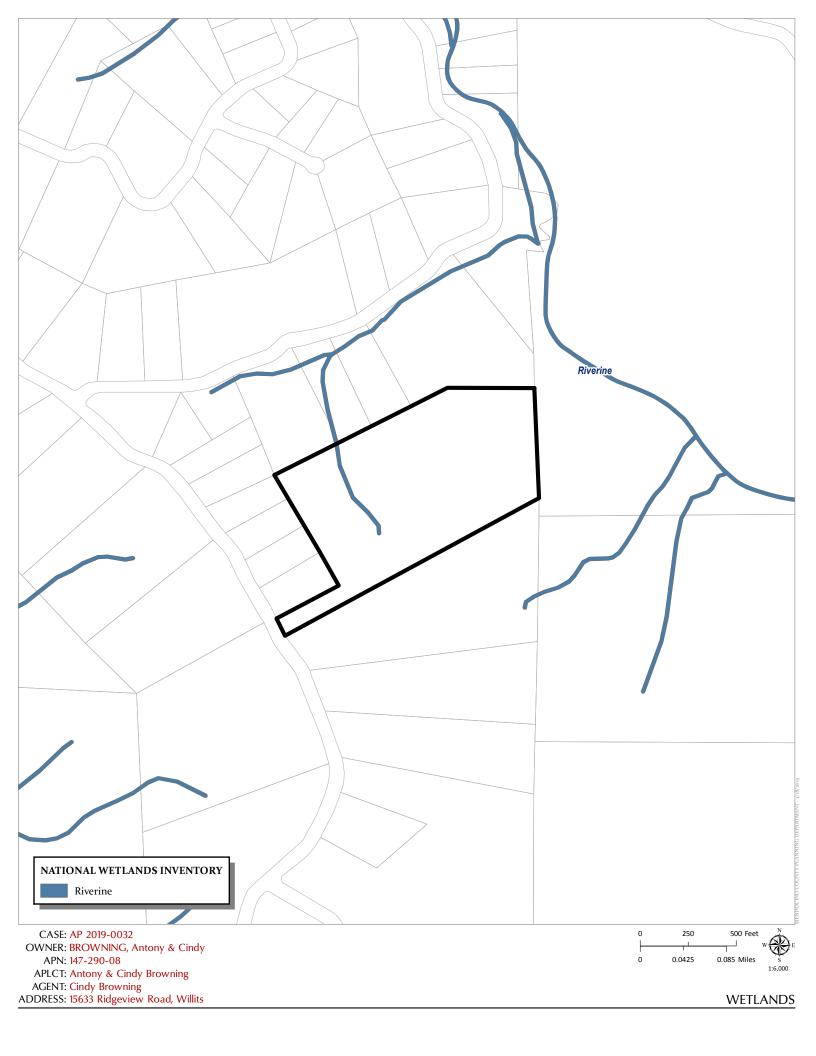


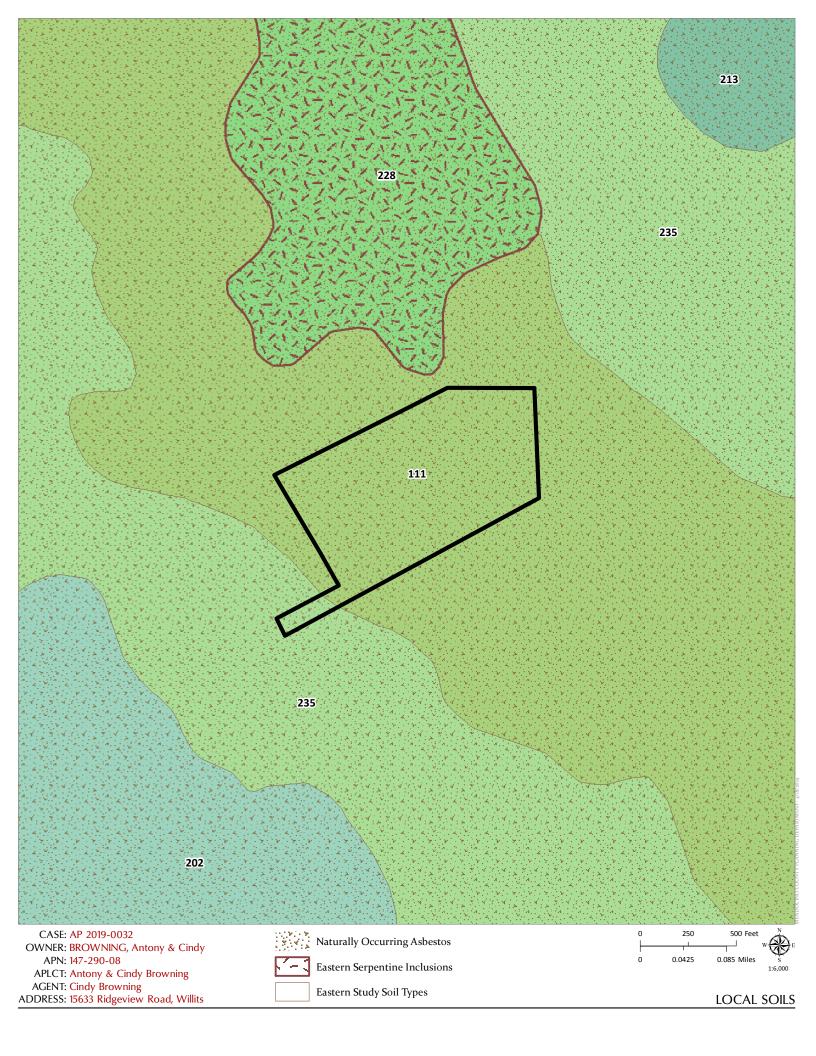
LITTLE LAKE FIRE PROTECTION DISTRICT

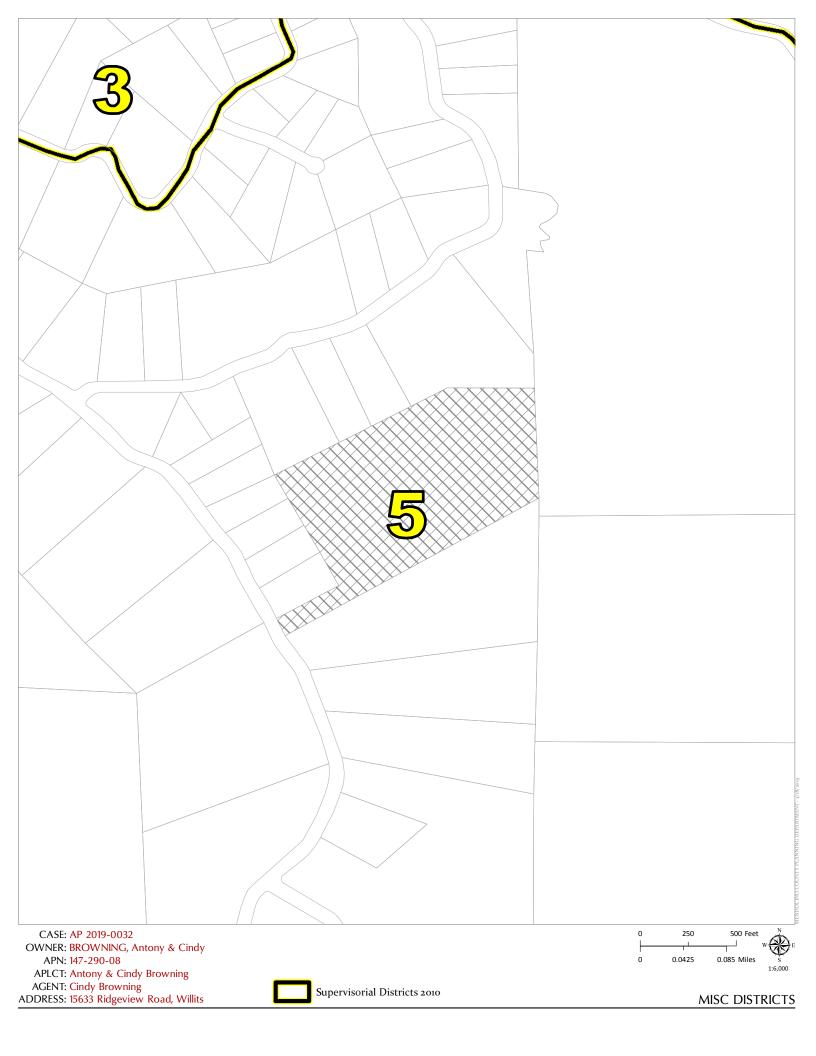
CASE: AP 2019-0032 OWNER: BROWNING, Antony & Cindy APN: 147-290-08 APLCT: Antony & Cindy Browning AGENT: Cindy Browning ADDRESS: 15633 Ridgeview Road, Willits

High Fire Hazard Moderate Fire Hazard County Fire Districts 0 500 1,000 Feet 0 0.075 0.15 Miles s 1:12,000

FIRE HAZARD ZONES & RESPONSIBILITY AREAS STATE RESPONSIBILITY AREA







State Water Resources Control Board DIVISION OF WATER RIGHTS

FORM FOR

DEMONSTRATING WATER DIVERSION FOR CANNABIS CULTIVATION USE IS ALLOWED WITHIN THE MEANING OF BUSINESS AND PROFESSIONS CODE SECTION 19332.2 (b)(4)

READ THE ATTACHED INFORMATION AND INSTRUCTION SHEET BEFORE COMPLETING THIS FORM

and a second	Water Right Claim Information	a state to be a state of the	
(Select one. Only complete	e this form if your diversion is subject to Wat	er Code Section 5101	(a), (c), (d), or (e))
Spring that does not flow off property in the v	winter ³ O Groundwater Recordation Program	n ¹ O Diversion M	anaged by Watermaster
¹ Spring cannot flow aff of the property on which it is loca ² For groundwater wells in Counties of Riverside, Son Bern ³ Your diversions are regulated and reported annually by List any related existing water rights, if applicable (e.g. A	nardino, Los Angeles, and Ventura that extract more tha a Watermaster appointed by the Department of Water	in 25 acre-feet in any year.	es reports with the Board.
	Diverter Information		
Cindy Browning			
15633 Ridgeview RD	Willits	CA State	95490
(707)354-2727	cindymbrowning@	gmail.com	
Pe	erson Filing Form (Agent Information	1 The Revention of the Land	Well State Second

	(If different from diverter information above)		
Agent Name	Company Name	Service and the service of the	NAMES AND ADDRESS OF
Mailing Address	City	State	Zip car on one of the second
Phone Number	Email Address	สารารสารสาราชการสาราร คณีการประเทศการประเทศ	

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State	Zip
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	Mail Receiver:
	(Select one only)
Oiverter	O Person Filing Form (Agent)

Checklist for Submission of this Form

Answer each question completely

Attach map and photos clearly showing the Place of Use (POU) and Point of Diversion (POD) locations

Sign and Date form

Additional copies of this form, instructions on how to complete this form, and water right information can be obtained at http://www.waterboards.ce.eou/canaabia

Form for Demonstrating Water Diversion for Cannabis Cultivation Use is Allowed Within the Meaning of Business and Professions Code Section 19332.2 (b)(4)

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Section 1: Water	Course Description
Water Course Name at the POD (Use the name shown on a USGS Quadrangle. If none, use "Unnamed Spring" or "Unnamed Stream", as applicable) Unnamed Spring	Water Course is tributary to (First named stream downstream of PCD shown on USGS Quadrangle) Forsythe Creek

(Provide the location of the POD using	oint of Diversion and Li		r data if applicable)
Latitude/Longitude Measurements:	Latitude: 39 20' 30" N	Longitude	123 20' 13" W
California Coordinate System (NAD1983)	North:	East:	Zone:
USGS Topographic Map with Point of Diver		the second s	
	information if assigned on a	assessor's parcel number (A	and the second
APN where POD is located: 147-290-08-01		Mend	ocino
Public Land Description to nearest 40 acres	kanad kata and ta a		a salatin da an
18 ac % of the % of Section	Township	Range	B&M

Section 3: Place of Use Description

 (Check boxes indicating each map to be provided)

 Identify the location of the place of use on a specific United States Geological Survey (USGS) Topographic Map, or County Assessor's parcel map or any other maps with identifiable landmarks. If assigned, provide the public land description to the nearest 40-acre subdivision and the assessor's parcel number.

 USGS Topographic Map
 Image: County Assessor's Parcel Map
 Map with identifiable landmarks

 Provide a general description of the area in which the water was used (e.g. Domestic water supply for house, and irrigation of greenhouse, specifically describe any provide and the supervision of greenhouse, specifically describe any provide and the supervision of the area in which the water was used (e.g. Domestic water supply for house, and irrigation of greenhouse, specifically describe any provide and the supervision of greenhouse, specifically describe any provide and the supervision of greenhouse, specifically describe any provide and the supervision of greenhouse, specifically describe any provide and the supervision of greenhouse, specifically describe any provide and the supervision of greenhouse, specifically describe any provide and the supervision of greenhouse, specifically describe any provide and the supervision of greenhouse, specifically describe any provide and the supervision of greenhouse, specifically describe any provide and the supervision of greenhouse, specifically describe any provide and the supervision of greenhouse, specifically describe any provide and the supervision of greenhouse, specifically describe any provide and the supervision of greenhouse, specifically describe any provide and the supervision of greenhouse and the supervision of greenhouse

firigation of Cannabis Grow Area - 2500SQ/ft

List all Assessor's Parcel Numbers (APNs) where the water will be used

147-290-08-01

	Section 4: Purpose	of Use Description	
	(Select all 1	hat apply)	
Irrigation (Cannabis Area) Square Feet of cultivation area: 2500	Irrigation (non-cannabis area) Number of acres:	Domestic Maximum number of persons to be served:	Stock watering Number and type of stock:
Number of cannabis plants: 52	0	0	2,500 gallons

				Secti	on 5: Qu	antity of	Water D	iverted			and the second	
		(Provide)	the quantil	ty of water	diverted a	ach month	of the pris	or calenda	year for a	all purpose	is)	
Data be	sing provid	ed for cale	ndar year:	2016	Measurer	nent provid	led in:	Ga Ga	llons	С	Acre-Fe	et
0 Jan	0 Feb	0 Mar	0 Apr	ОМау	0 Jun	3,500	3,500	3,500	0 Oct	0 Nov	0 Dec	Total 10,500

and the second	ction 6: Maximum Rate of Diversion
	plete this section regarding the maximum rate of diversion
Year of maximum diversion: 2016	In what month do you divert the most water?
What is the rate of maximum diversion? 2	

Form for Demonstrating Water Diversion for Cannabis Cultivation Use is Allowed Within the Meaning of Business and Professions Code Section 19332.2 (b)(4)

Page 3 of 7
Section 7: Cannabis Cultivation Use
Provide the total amount of water used for cannabis cultivation during the prior calendar year Quantity Gallons O Acre-Feet
Is your cultivation of cannabis for commercial purposes? Yes No
If you intend to apply for a license under California Department of Food and Agriculture's Cannabis Cultivation Program, your response will help the State Water Board efficiently coordinate with the California Department of Food and Agriculture to verify your water source as required under the Business and Professions Code.
Section 8: Special Requirements
(Complete this section for the water right type you selected in "Water Right Claim Information" at the top of form)
For springs that do not flow off property:
What is the maximum flow rate of the spring during the wet season, in any year: 200 Gallons per Minute Gallons per Day
Attach a map that depicts the springhead location, the location where the spring would naturally terminate without diversions, property boundaries, and scale of the map. You may include this information on the same map used in Section 3.
For participants in the State Water Resources Control Board's Groundwater Recordation Program (If applicable):
Notice of Extraction and Diversion of Water Identification Number(s):
Attach copies of any applicable Notices of Extraction and Diversion of Water
For diverters regulated by a Watermaster appointed by the Department of Water Resources (DWR) or a Court: N/A Provide the name of the Watermaster who regulates the diversion:
Page Number where the applicant's name and a description of the general purposes and the place, the use, and the quantity of water that has been diverted from each source can be found in the annual report
Attach a copy of the most recent annual report filed by the Watermaster with a court or the State Water Resources Control Board
Attach documentation establishing the Watermaster is appointed by: DWR, a court, or pursuant to a statute to administer a final judgment determining rights to water
Section 9: Signature
Ideclare that the information in this report is true to the best of my knowledge and belief. I also acknowledge the following:

THIS FORM IS A REQUIREMENT OF BUSINESS AND PROFESSIONS CODE §19332.2 subd. (b)(4)

THE STATE WATER RESOURCES CONTROL BOARD MAY RELY ON THE NAMES AND ADDRESSES ON THIS DOCUMENT FOR MAILING NOTICES REGARDING PROCEEDINGS BEFORE THE BOARD.

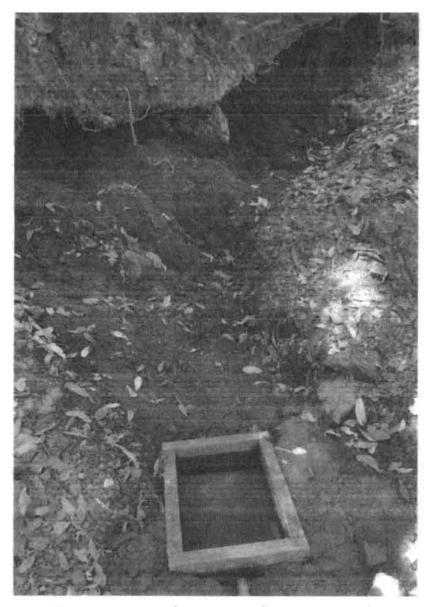
THIS FORM DOES NOT CONSTITUTE A STATEMENT OF WATER DIVERSION AND USE AND THE STATE WATER RESOURCES CONTROL BOARD'S ACCEPTANCE OF THE FORM DOES NOT VALIDATE OR CONFIRM THE INFORMATION CONTAINED, HEREIN.

THE MAKING OF A WILLFUL MISSTATEMENT ON THIS FORM 84 AND ANY SUPPORTING DOCUMENTATION IS PUNISHABLE BY A FINE NOT EXCEEDING \$500 PLUS AN ADDITIONAL \$250 FOR EACH DAY THE VIOLATION CONTINUES IF THE VIOLATION IS NOT CORRECTED WITHIN 30 DAYS OF NOTIFICATION OF THE VIOLATION. THE BOARD MAY IMPOSE CIVIL LIABILITY UPON A PERSON WHO KNOWINGLY MAKES A MATERIAL MISSTATEMENT ON THIS FORM (Wat. Code

Signature: Under Br	owning?	Date: 6/30/2017	
Printed Name: Cindy	Mariene	Browning	
(first name)	(middle name)	(last name)	







Spring box (upper)



Spring box/ Collection (Lower)

Ukiah Office: 501 Low Gap Rd, Room 1326, Ukiah CA 9548 F Plagi Office: 790-A1 S Franklin St, Fort Bragg CA 954	82 Phone: (707) 463-4466		
Application (submit 2 copies)	Payment Received Date Received: Received By: Payment #:		
Site Address: 15633 Ridgeview Road, Willits APN: 147 - 290 - 08-01 Approximation	MENDO. ENV. HEALTH Permit		
Owner Name: Antony Browning Mailing Address: 15633 Ridgeview Road, Willits 95490 Telephone #: 459-3688 TYPE OF PERMIT	Permit Agreement: I agree to comply with all of the regulations of the Mendocino County Well Ordinance (County Code Chapter 16.04) and the State of California as they pertain to water well construction and destruction.		
Image: Regular Destruction Image: Special Permit Area Repair CONSTRUCTION Repair Casing: Steel Concrete Diameter: 5" Bore Size: 11" Gauge or Wall: CL200 Seal Depth: 20' Annular Space: Size: 2" Seal Depth: 20' Well Use Type: Domestic	 I further understand that the application filing fee is set by resolution of the Board of Supervisors and that <i>no part of the filing fee</i> shall be refundable (Mendocino County Well Ordinance §16.04.040 & Mendocino County Ordinance 1135, adopted 1973). I will notify Environmental Health 24 hours prior to pouring the annular seal to request a well seal inspection. This permit expires 1 year from date of issuance if the authorized work has not been completed (Mendocino County Code Section 16.04.090) 'Wet' Signature required; faxed or photocopies will not be accepted. 		
Seal Material: Concrete Sand Cement Bentonite Neat Cement Other (describe): Neat Cement Image: Concrete in the second	Well Driller (Business Name): Weeks Drilling License Number: C57-177681 Phone #: 462-9080 Mailing Address: 3460 N.State St., Ukiah, CA 95482 Driller Signature: State St., Ukiah, CA 95482 Inspector Notes: Coastal Zone: Y/N MG: n A Old State St., Ukiah, CA 95482 OnSent for Seal Without Inspector St., State St., Ukiah, CA 95482 United St., State St., Ukiah, CA 95482 State St., Ukiah, CA 95482 MG: n A Old State St., Ukiah, CA 95482 MG: n A Old State St., Ukiah, CA 95482 Ukiah, State St., Ukiah, CA 95482 State St., Ukiah, CA 95482 MG: n A Old State St., Ukiah, CA 95482 Ukiah, State St., Ukiah, CA 95482 State St., Ukiah, CA 95482		
N/A	Health Inspector: Used for the sector Well Seal Inspection By: Date: Water Well Permit Revised 7-9-2009		

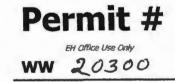


Environmental Health Division

Ukiah Office: 501 Low Gap Rd, Room 1326, Ukiah CA 95482

Fort Bragg Office: 790-A1 S Franklin St, Fort Bragg CA 95437

Phone: (707) 463-4466 Phone: (707) 961-2714



Water Well Program Payment Received RECEIVED Date Received: 15/03 Received By: 19826 APR 1 5 2005 Payment #: Application (submit 2 copies) Payment Amount: MENDO, ENV. HEALTH Lidgeview Site Address: 15(-33 Permit -290-08-01 APN: Permit Agreement: Owner Name: Tony Browning I agree to comply with all the regulations of the County of Mendocino and the 111:75 Mailing Address: 13/033 Kiegeview KD State of California pertaining to water well construction. Telephone #: (707)459-3688 I will notify Environmental Health 24 hours prior to pouring the TYPE OF PERMIT annular seal to request a well seal inspection. X Regular Destruction **Special Permit Area** Repair This permit expires 1 year from date of issuance if the authorized work has not been completed (Mendocino County Code Section 16.04.090) CONSTRUCTION 'Wet' Signature required; faxed or photocopies will not be accepted. Plastic Concrete Casing: Steel Well Driller (Business Name): Kickhaell Ent & Well Drilling Bore Size: Diameter: OO PS License Number: 403708 -2104 Phone #: Gauge or Wall: 420 21/2 Seal Depth: ular Space: Size: 649 Bear Creek RD Garberville CA Mailing Address: Community/Industrial Il Use Type: X Domestic Driller Signature: Date: 9-16-05 Sand Cement Seal Material: \mathbf{X} Concrete Man Setback to proposed septic system Nett Cement **Inspector Notes:** Bentonite Other (describe) The following items must be submitted with this application: Vicinity Map and Directions to the site i.e., mile post markers, cross-1. streets, lock combinations, or any other unique landmarks which help the inspector to locate and access the property. Plot Plan clearly showing the location of the proposed well on the parcel. 2. and including the locations of all septic systems on surrounding parcels. Health Unspectory Date: 3. Coastal Zone Permit for sites which fall within the coastal zone; you Well Seal Inspection By: Date: must obtain this permit from Planning, prior to well permit being issued. Nator Well Permit 6-200