



COUNTY OF MENDOCINO
DEPARTMENT OF PLANNING AND BUILDING SERVICES
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Building Permit Fee Estimate for
Cannabis Equity Grant Applicants

ALL information requested below is required to complete this form and be eligible for use of Equity Grant funds. *Incomplete information will not be accepted and the applicant will be liable for payment of fees.*

1. Equity Certification Number: _____
2. Ag Permit Number or CFBL Number: _____
3. Site Address: _____
4. Site APN: _____
5. Property Ownership: _____
6. Authorized Agent: _____
7. Type of Structure- **you may only select 1 per form**

- ☐ Greenhouse ☐ Hoophouse ☐ Barn ☐ Shed ☐ Storage Bldg
☐ Pond ☐ Solar ☐ 400+ Amp Electrical

8. Occupancy/Use Type- **you may only select 1 per form**

- ☐ Commercial ☐ Agriculture ☐ Residential

9. Total Square Feet of Structure selected above: _____
10. Are Utilities Included ☐ Yes ☐ No
11. If Yes, list all utilities included: _____

Please note if any information on the application is changed after this estimate is provided, the applicant will be subject to current applicable fees and the Estimate will become void.

Office Use Only – PBS staff must sign this document to validate the process.

Accepted by: _____ Date: _____

Building Permit Number: _____

Once received by staff, please allow 5 business days for processing. The final estimate of permit fees will be emailed to the Applicant and the Cannabis Program upon completion.