



## City of Calexico

Development Services Department - Planning Division

608 Heber Avenue, Calexico, CA 92231

• Phone: (760) 768-2118 • Fax: (760) 357-7862 • Email: [planning@calexico.ca.gov](mailto:planning@calexico.ca.gov)

[www.calexico.ca.gov](http://www.calexico.ca.gov)

# NOTICE TO ALL INTERESTED PARTIES

**On December 20, 2019 Ordinances 1205 and 1206 became effective.**

**Ordinance 1205.** An Ordinance of the City Council of the City of Calexico, California, Amending Sections 5.96.020 and 17.11.1020 of the Calexico Municipal Code to Remove Industrial Hemp from the Definition of Cannabis. Beginning today, Industrial Hemp will be treated as any other commodity for purposes of cultivation, manufacturing and all retail activities.

- (1) The previously associated cannabis taxes no longer apply to Industrial Hemp.
- (2) A conditional use permit is no longer be required to cultivation, manufacture, distribute or to engage in retail activities for Industrial Hemp.
- (3) Please note that approval will is required from the County of Imperial, Agricultural Commissioner's office in order to cultivate Industrial Hemp within the City of Calexico; contact their office at (443) 265-1500 for more information.

**Ordinance No. 1206.** An Ordinance of the City Council of the City Of Calexico, California, Amending Section 17.11.1040 Of The Calexico Municipal Code Increasing the Number of Potential Cannabis Retailer, Non-Storefront Retailer, And Microbusiness Permits from Seven (7) to Twelve (12).

- (1) An existing waitlist for the newly available licenses exists and their applications are in the process of being entitled. The City Clerk maintains this list, please contact this office at (760) 768-2102 for more information.
- (2) In the event that one of those entities fails to secure both a Conditional Use Permit and Commercial Cannabis Activity Regulatory Permit, that license will become available from a new waitlist.
- (3) In order to be considered for the new waitlist please **submit an application via email only and pay the \$1800 application review fee**. Once applications are deemed complete and fees are paid the applicant will be placed on a waitlist.
- (4) Applications are placed on the waitlist if the entirety of the Commercial Cannabis Regulatory Permit Application is deemed complete under the following conditions:
  - A. Completed properly with all the required information, signatures and is notarized.
  - B. The application review fee is paid to the Finance Department.
  - C. Please see the Cannabis Regulations tab on the City's website for more information on the application process and related standards or request the materials from the Planning Division in writing at Development Services Department, 608 Heber Avenue, Calexico CA 92231

Please note that this fee is non-refundable and the payment of fees does not guarantee that the application and proposed retail facility will be entitled.

There are currently other Commercial Cannabis Activity Regulatory Permits available Cultivation, Manufacturing and Distribution.

If you have any questions please feel free to contact us via phone, email or visit the Development Services window at Calexico City Hall, 608 Heber Avenue, Calexico, CA 92231



# City of Calexico

Development Services Department - Planning Division

- Phone: (760) 768-2105 • FAX (760)357-7862 • Email: [planning@Calexico.ca.gov](mailto:planning@Calexico.ca.gov)
- ATTN: Planning Division - Cannabis

## COMMERCIAL CANNABIS REGULATORY PERMIT APPLICATION CHECKLIST

In addition to completing the proceeding application form, please include the following as required by Calexico Municipal Code Chapter 5.96.

Official Use  
Only

(1)	List of Interested Parties (CMC §§ 5.96.040(C); 5.96.150)	
(2)	Applicant Identification (CMC § 5.96.040(D))	
(3)	List of License or Permit Types (CMC § 5.96.040(E))	
(4)	License or Permit Denials (CMC § 5.96.040(F))	
(5)	Fictitious Business Name List (CMC § 5.96.040(I))	
(6)	Financial Information (CMC § 5.96.040(J))	
(7)	Application for Fingerprint Images (CMC § 5.96.040(K))	
(8)	Misdemeanor/Felony Convictions (CMC § 5.96.040(L))	
(9)	Diagram of Premises (CMC § 5.96.040(M))	
(10)	Security Plan (CMC § 5.96.040(N))	
(11)	Odor Control Plan (CMC § 5.96.040(O))	
(12)	Business Operations Plan including Business Plan, Community Relations Plan, Neighborhood Responsibility Plan, Cannabis Waste Procedures, Delivery Procedures, Proof of Insurance, and Budget (CMC § 5.96.040(P))	



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## COMMERCIAL CANNABIS REGULATORY PERMIT APPLICATION

### Applicant

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

### Primary Contact Person

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

### 24-Hour Contact Person

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

### Community Relations Manager

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Type of Business Entity (CMC § 5.96.030(B)):  Sole Proprietorship  Corporation

**Commercial Cannabis Business Premises**  Partnership  Ltd. Liability Company

Physical Address: \_\_\_\_\_

Assessor Parcel Number(s): \_\_\_\_\_

Website: \_\_\_\_\_ Phone: \_\_\_\_\_

Type of Application :  NEW  RENEWAL

Type of Cannabis Business :

CULTIVATOR

MANUFACTURER

DISTRIBUTOR

LABORATORY TESTING

INDUSTRIAL HEMP:  CULTIVATOR  MANUFACTURER

SHARED-USE FACILITY MANUFACTURER TENANT

MICROBUSINESS Please select at least 3 of the following:

Cultivator (area less than 10,000 square feet)  Level I Manufacturing

Distribution (outside city limits)

For Cultivation, Manufacturing and Distribution, please define whether the permit is for small-scale or industrial-scale facility:  
 SMALL SCALE  INDUSTRIAL SCALE

# COMMERCIAL CANNABIS REGULATORY PERMIT APPLICATION

Type(s) of State License(s) obtained or pursuing:

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## Applicant/ Representative Signature:

By applying for and accepting a regulatory permit, applicant acknowledges that while the City of Calexico has taken initial steps to permit commercial cannabis businesses within the City, the City is reviewing, on an on-going basis, the experience of other jurisdictions within and beyond the State of California, and the evolving situation with respect to federal enforcement of cannabis-related laws. The applicant accepts the risk that City may decide at any time to change its cannabis-related regulations, to suspend processing applications, or to revoke existing permits to operate cannabis-related businesses, if the City determines it is in the best interest of City to do so. Any changes to City's regulation may apply to any permit issued to applicant. Applicant acknowledges that the issuance of a regulatory permit does not create a right to continue to operate a Commercial Cannabis Activity Business for any amount of time or under a given set of regulations. Additionally, a regulatory permit does not authorize cannabis-related activity when property restrictions imposed by CC&Rs or similar property restrictions prohibit such activity and that any cannabis permit is subject to revocation if the City determines that the permitted property is subject to any such restrictions.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

## Please Designate Authorized Representative

Name: _____	Phone: _____
Mailing Address: _____	
Email: _____	Fax: _____

## OFFICIAL USE ONLY

## Time and Date Stamp

Case Number: \_\_\_\_\_

Finance Department	
Development Service Department	
Fire Department	
Police Department	
Public Works	

**COMMERCIAL CANNABIS REGULATORY PERMIT APPLICATION**

**CALEXICO PROPERTY OWNER/LANDLORD USE DISCLOSURE & AUTHORIZATION FOR A COMMERCIAL CANNABIS BUSINESS**

I, \_\_\_\_\_, am the legal owner / landlord / lessor of real property  
(Name of Property Owner/Landlord) (Circle Appropriate Term)

located at \_\_\_\_\_, in Calexico, California.  
(Address of the Property)

I hereby authorize the Commercial Cannabis Activity Business entitled \_\_\_\_\_ to use this property as a Commercial Cannabis Activity Business, as those terms are defined in Calexico Municipal Code Chapter 5.96.

\_\_\_\_\_  
(Signature of legal owner/landlord/lessor) (Printed Name & Title) (Date)

\_\_\_\_\_  
(Signature of legal owner/landlord/lessor) (Printed Name & Title) (Date)

\_\_\_\_\_  
(Signature of legal owner/landlord/lessor) (Printed Name & Title) (Date)

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, Calexico, California.

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF CALIFORNIA )  
COUNTY OF IMPERIAL )

On \_\_\_\_\_, 20\_\_\_\_ before me, \_\_\_\_\_

, Notary Public, personally appeared \_\_\_\_\_, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature: \_\_\_\_\_

(Seal)

# COMMERCIAL CANNABIS REGULATORY PERMIT APPLICATION

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## ACKNOWLEDGEMENT OF COMMERCIAL CANNABIS ACTIVITY OPERATING STANDARDS AS SET FORTH IN CALEXICO ORDINANCE NO. 1120.

The undersigned Commercial Cannabis Activity Business Regulatory Permit Applicant (“Applicant”),

\_\_\_\_\_ declare(s) under penalty of perjury that he/she has read and understands the attached provisions of Calexico Ordinance 1120, and shall, collectively and individually, ensure that he/she, the Commercial Cannabis Activity Business’s owner(s), principal(s), manager(s), and operator(s) not engage in activity that violates the Operating Standards set forth in Calexico Municipal Code Chapter 5.96, and as indicated below:

- A. **Compliance with Business Operations Plan.** A permittee shall substantially comply with the complete business operations plan proposed in the permittee’s application.
- B. **Indoor Cultivation Only.** A permittee shall only cultivate cannabis in a fully enclosed and secure building. A permittee shall not allow cannabis or cannabis products on the premises to be visible from the public right-of-way, the unsecured areas surrounding the buildings on the premises, or the premises’ main entrance and lobby.
- C. **Odor Control.** A permittee shall comply with the odor control plan that is submitted during the application process and approved by the city manager. Commercial cannabis activity premises shall provide a sufficient odor absorbing ventilation and exhaust system so that odor generated inside the building(s) that is distinctive to its operation is not detected outside the premises, anywhere on adjacent property or public rights-of-way, on or about any exterior or interior common area walkways, hallways, breezeways, foyers, lobby areas, or any other areas available for common use by tenants or the visiting public, or within any other unit located within the same building as the commercial cannabis activity. As such, applicants must install and maintain the following equipment or any other equipment which the city manager or designee determines has the same or better effectiveness:
  - 1. An exhaust air filtration system with odor control that prevents internal odors from being emitted externally; or
  - 2. An air system that creates negative air pressure between the cannabis facility’s interior and exterior so that the odors generated inside the cannabis facility are not detectable outside the cannabis facility. Should compliance with the odor control plan fail to properly control odor, the city manager may impose additional or modified plan restrictions.
- D. **Track and Trace.** Commercial cannabis activity businesses shall have an electronic ‘track and trace’ system that produces historical transactional data for review by the city manager for auditing purposes.
- E. **Records.** A commercial cannabis activity business shall maintain the following records in printed format for at least three years on the premises and shall produce them to the city within twenty-four hours after receipt of the city’s request:
  - 1. The name, address, and telephone numbers of the owner and landlord of the property.
  - 2. The name, date of birth, address, and telephone number of each manager and staff of the commercial cannabis activity business; the date each was hired; and the nature of each manager’s and staff’s participation in the business.
  - 3. A written accounting of all income and expenditures of the commercial cannabis activity business, including, but not limited to, cash and in-kind transactions.
  - 4. A copy of the commercial cannabis activity business’ commercial general liability insurance policy and all other insurance policies related to the operation of the business.
  - 5. A copy of the commercial cannabis activity business’ most recent year’s financial statement and tax return.

# COMMERCIAL CANNABIS REGULATORY PERMIT APPLICATION

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- 6. An inventory record documenting the dates and amounts of cannabis received at the premises, the daily amounts of cannabis on the premises, and the daily amounts of cannabis transported from the premises.  
A commercial cannabis activity business shall report any loss, damage, or destruction of these records to the city manager within twenty-four hours of the loss, damage, or destruction.
- F. **Security.** A permittee shall comply with the security plan that is submitted during the application process as approved by the city manager. A permittee shall report to the Calexico Police Department all criminal activity occurring on the premises. Should compliance with the security plan fail to properly secure the commercial cannabis activity premises, the city manager may impose additional or modified plan restrictions.
- G. **Cannabis Consumption – Prohibited Business Types.** No person shall smoke, ingest, or otherwise consume cannabis in any form on, or within twenty feet of, the premises of a cultivation, manufacturing, testing, or distribution facility.
- H. **Shared-Use Facilities.** Each shared-use facility must meet all requirements outlined in the State cannabis manufacturing regulations, and include secured storage for the primary permittee’s cannabis and cannabis products. The primary permittee will assign a designated area to be used as shared space. An occupancy schedule, outlining the days and/or times that the space will be used by individual cannabis manufacturers, must be posted. Only one permittee can utilize the space at a time.
- I. **Alcohol Prohibited.** No person shall possess, consume, or store any alcoholic beverage on the premises.

I, \_\_\_\_\_  
(Printed Name of Applicant)

acknowledge that I have read and understand and will abide by the retailer and retail microbusiness operating standards listed in Calexico Municipal Code Chapter 5.96.

I certify under penalty of perjury that the foregoing information is true and correct.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in Calexico, California.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Printed Name and Title

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## INFORMATION RELEASE FORM

The undersigned, on behalf of \_\_\_\_\_, hereby  
(Name of Commercial Cannabis Activity Business)

authorize the City of Calexico, by and through its appropriate officers, agents and employees to verify and confirm the information contained in this application, and to conduct such other investigations as may be reasonably required by the City of Calexico, its officers, agents and employees for the purpose of determining the capability, fitness and capacity of the above named Commercial Cannabis Activity Business to obtain the Commercial Cannabis Activity Business Regulatory Permit.

The Applicant by signing this Information Release Form consents to service of any notice required or provided for by the laws, rules, regulations, or ordinances of the City of Calexico upon the person(s) at the address listed for applicant, will constitute sufficient and legal notice, unless said applicant listed an attorney of record and/or agent for service of process, with sufficient contact information.

# COMMERCIAL CANNABIS REGULATORY PERMIT APPLICATION

## INFORMATION RELEASE FORM (continued from previous page)

The applicant consents and agrees that full compliance will be made with all applicable State laws and City ordinances governing the conduct of the particular type of activity for which the Cannabis Commercial Cannabis Activity Business Regulatory Permit is requested. The applicant by signing this Information Release Form understands that any incomplete or false information may constitute grounds for denial.

I declare under penalty of perjury that I have read the forgoing application and all information, statements, verifications, declarations and authorizations made, attached to and contained herein, and that I have personal knowledge of the information contained in the application, and that the information contained in the application is true and correct.

\_\_\_\_\_  
(Signature of Applicant) (Printed Name & Title) (Date)  
Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in Calexico, California.

## EMERGENCY CONTACT MANAGER

The undersigned, on behalf of \_\_\_\_\_,  
(Name of Business/Applicant)

hereby designates \_\_\_\_\_ as the Emergency  
(Name of Emergency Contact Manager)

Contact Manager to whom the public or City can contact to address and resolve complaints and to respond to operating problems or concerns associated with the permitted Commercial Cannabis Activity Business.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in Calexico, California.

\_\_\_\_\_  
Signature of Emergency Contact Manager Printed Name and Title  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Email: \_\_\_\_\_ Alt Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_

## COMMUNITY RELATIONS MANAGER

The undersigned, on behalf of \_\_\_\_\_,  
(Name of Business/Applicant)

hereby designates \_\_\_\_\_ as the  
(Name of Community Relations Manager)

Community Relations Manager to whom the public or City can provide notice to if there are operating problems or issues relating to the Commercial Cannabis Facility. The Commercial Cannabis Activity Business shall make every good faith effort to encourage residents to call the Community Relations Manager to try to solve operating problems, if any, before any calls or complaints are made to the police or planning departments. Each Commercial Cannabis Activity Business shall provide the information on this page to its business neighbors within one hundred (100) feet of the Commercial Cannabis Activity Business as measured in a straight line without regard for intervening structures, between the front doors of each establishment.

**COMMERCIAL CANNABIS REGULATORY PERMIT APPLICATION**

**COMMUNITY RELATIONS MANAGER (continued from previous page)**

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in Calexico, California.

Signature of Emergency Contact Manager	Printed Name and Title
Name: _____	Phone: _____
Mailing Address: _____	
Email: _____	Alt Phone: _____
Fax: _____	

**AUTHORIZATION TO INSURE CALEXICO COMMERCIAL CANNABIS ACTIVITY BUSINESS**

The undersigned, on behalf of \_\_\_\_\_,  
(Name of Corporation/Applicant)

hereby agrees to carry insurance for the Commercial Cannabis Activity Business in an amount acceptable to the City of Calexico.

The undersigned, on behalf of \_\_\_\_\_,  
(Name of Corporation/Applicant)

also agrees to name the City of Calexico as an additionally insured on said policy.

This form MUST be signed by each applicant Management Member

(Signature of Management Member)	(Printed Name & Title)	(Date)
(Signature of Management Member)	(Printed Name & Title)	(Date)
(Signature of Management Member)	(Printed Name & Title)	(Date)

This authorization may be executed in two or more counterparts, each of which shall be deemed an original, and all of which taken together shall constitute one and the same instrument. Facsimile signature(s) shall be deemed the equivalent of original signatures.

I declare under penalty of perjury that I have read the forgoing application and all information, statements, verifications, declarations and authorizations made, attached to and contained herein, and that I have personal knowledge of the information contained in the application, and that the information contained in the application is true and correct, and that the application was completed under the supervision of the Management

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in Calexico, California.

# COMMERCIAL CANNABIS REGULATORY PERMIT APPLICATION

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## STATEMENT OF AUTHORIZATION TO INDEMNIFY CITY

**Indemnity:**

The undersigned, on behalf of \_\_\_\_\_  
(Name of Applicant)

hereby authorizes and agrees to indemnify the City of Calexico (the "City"), its agents, officers, and employees, to the maximum extent permitted by law, as such may be amended from time to time, and to defend at its sole expense, any and all action against the City, its agents, officers, and employees because of any and all issues relating to the approval of said Commercial Cannabis Activity Business and related Ordinance(s) in the City.

**Reimbursements:**

The undersigned, on behalf of \_\_\_\_\_  
(Name of Applicant)

also agrees to reimburse the City for any court costs and attorney fees that the City may incur as payment for such action. The City may select any attorney it deems appropriate, in the City's exclusive discretion. Reimbursement of costs and fees, as set forth herein, shall be made payable to the "City of Calexico," within thirty (30) days of written request for same. Failure of Applicant to make payment of reimbursement, as set forth herein, shall be grounds for revocation of permit to operate a commercial cannabis activity facility in the City.

**Counterparts:**

This indemnity may be executed in two or more counterparts, each of which shall be deemed an original, and all of which taken together shall constitute one and the same instrument. Facsimile signature(s) shall be deemed the equivalent of original signatures.

**Declaration of Authorized Agents:**

This form MUST be signed by each owner/shareholder or managing member of the applicant.

I declare under penalty of perjury that I have read the forgoing application and all information, statements, verifications, declarations and authorizations made, attached to and contained herein, and that I have personal knowledge of the information contained in the application, and that the information contained in the application is true and correct, and that we/I am duly authorized to enter into this Indemnity on behalf of Applicant.

_____ (Signature of Management Member)	_____ (Printed Name & Title)	_____ (Date)
_____ (Signature of Management Member)	_____ (Printed Name & Title)	_____ (Date)
_____ (Signature of Management Member)	_____ (Printed Name & Title)	_____ (Date)











