



COUNTY OF COLUSA

COMMUNITY DEVELOPMENT DEPARTMENT

220 12th Street

Colusa, California 95932

TELEPHONE (530) 458-0480 FAX (530) 458-0482

COLUSA COUNTY INDUSTRIAL HEMP PROCESSING LICENSE APPLICATION INTRUCTIONS

1.) SECTION A: APPLICANT INFORMATION:

On the License Application Form, complete **Section A**. The Applicant needs to be the **authorized Representative** listed on the **Certification of Property Control** form. The maps showing the property location(s) should list the APN's of each property and show the proposed grow areas. The **Description of Industrial Hemp Operations** should provide a general description of the proposed cultivation characteristics and total acreage that will be planted.

2.) SECTION B: SUBMITTAL REQUIREMENTS:

1. **Certification of Property Control Form.**
2. **Narrative describing your Processing process and details.** – Please describe all aspects of your processing procedures in detail. This must include business hours, anticipated number of employees, and employee shift schedule. Photos and/or schematics are helpful and are encouraged.
3. **Industrial Hemp to be processed documentation.** - Provide the source of the Industrial Hemp to be processed with proof that it was grown under a valid State Registration and any required local jurisdiction approval for said Industrial Hemp's Cultivation as well as the local jurisdictions testing documentation verifying that the level of tetrahydrocannabinol (THC) is no more than three-tenths of one percent.
4. **An Odor Management Plan** (If Required) – Detail how the facility will be properly ventilated and exhaust air filtered to neutralize the odor so it is not detected by a person with a normal sense of smell outside of the business premises.
 - a. An Odor Management Plan is required if:
 - i. The processing facility is within 1.5 miles from a community; and/or
 - ii. There is a residence located within 1000 feet of the processing facility.
5. **A Security Plan** – Provide in detail measures to mitigate potential crime.

3.) SECTION C: APPLICANT AFFIRMATION AND CONSENT

Complete **Section C** and provide your signature.

4.) FINAL STEP - LICENSE APPROVAL

Once the completed License Application has been submitted to the Community Development Department, staff will review the application for completeness and begin processing the application. You will be contacted regarding any additional information or necessary changes to your application prior to formal approval being granted by the Community Development Department. Once approved a copy of the license will be provided to the Colusa County Sheriff and the Colusa County Agricultural Commissioner.



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COLUSA COUNTY INDUSTRIAL HEMP PROCESSING LICENSE APPLICATION

SECTION A: APPLICANT INFORMATION

Date: _____

County Staff Use

License No: 2021-_____

Applicant		Doing Business As (DBA)	
Mailing Address	City	State	Zip Code
Business Website	Email Address	Phone Number	

Proposed Location APNs and addresses(attach maps with processing areas clearly shown):

Anticipated Processing Dates _____

SECTION B: SUBMITTAL REQUIREMENTS

1. Certification of Property Control Form.
2. Narrative describing your Processing process and details.
3. Industrial Hemp to be processed documentation.
4. An Odor Management Plan (If required)
5. A Security Plan.

SECTION C: APPLICANT AFFIRMATION AND CONSENT

Under penalty of perjury, I hereby declare that the information contained within and submitted with the application is complete, true, and accurate. I understand that a misrepresentation of fact is cause for rejection of this application, denial of a license, or revocation of a license issued.

Signature	Printed Name	Date Signed
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CERTIFICATION OF PROPERTY CONTROL REGARDING APPLICATION FOR COLUSA COUNTY INDUSTRIAL HEMP LICENSE

Date: _____

To: County of Colusa
Community Development Department
220 12th Street
Colusa, CA 95932

I, the undersigned, declare under penalty of perjury that I am the legal owner of record of the Subject Property(ies) identified below for which an application is being submitted to conduct Industrial Hemp operations pursuant to Chapter 11 of the Colusa County Code.

APN(s): _____

Maps of the Subject Property(ies) must be attached.

As the Subject Property(ies) Owner I am applying for an Industrial Hemp License ____myself or I am ____ granting permission to:

Representative: _____ Phone _____

Address: _____

Email: _____

to apply for a Colusa County Industrial Hemp License on the above referenced Subject Property(ies).

Signature of Owner of Record (must be original)

Print Name of Owner of Record

Address of owner of record

Phone Number

Email