



COUNTY OF MENDOCINO

Cannabis Department

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Notice of Application Stay for One-Year Period

Applicant Name(s): _____
Application Number(s): _____
Cultivation Site Address: _____
Date of Filing: _____

Pursuant to section 10A.17.090 of the Mendocino County Code, an applicant may file a Notice of Application Stay (NAS) for the purpose of preventing the denial of an application for a Phase One Permit based on inactivity by the applicant for up to a one-year period.

In filing this Notice of Application Stay, I hereby acknowledge and declare the following:

1. I am the Applicant or authorized representative of the Applicant entity.
2. I am filing this Notice of Application Stay in order to prevent the denial of my application for a Phase One Permit based on inactivity for a one-year period from the date stated above, with the understanding that this does not prevent either the Mendocino County Cannabis Program or myself from continuing to process or perfect my application.
3. As of the date stated above, I have ceased all cannabis cultivation activities at the cultivation site in excess of the limitations of paragraph (B) or (C) of section 10A.17.030 (personal/caregiver exemptions).
4. For the one-year period after the filing of this Notice of Application Stay (the "Application Stay Period"), I am prohibited from cultivating cannabis in excess of the limitations of paragraph (B) or (C) of section 10A.17.030 (personal/caregiver exemptions).
5. After filing this Notice of Application Stay, the County will inform the State of California that I do not have local authorization to cultivate cannabis for the Application Stay Period.
6. Violation of the prohibition on cultivating beyond the personal cultivation exemptions shall be a violation of County Code and **shall be cause for immediate denial of my Permit application**. A denial of my application may be followed by nuisance abatement procedures.
7. I hereby consent to inspection by Mendocino County of my cultivation site (and origin site, if the application involves a relocation) to determine compliance with the terms of this Notice and Chapter 10A.17 at any time and without any notice.
8. I agree to pay the full amount of the cost of the inspection of my cultivation site pursuant to section 10A.17.090.
9. I may only file a Notice of Application one time.
10. I may contact the County at any time during the Application Stay Period in writing to inform the County that I desire to have my Application Stay lifted.
11. Upon the end of the Application Stay Period or upon voluntarily lifting the Application Stay, the County will notify me in writing of what is required to complete my application.

I declare under penalty of perjury, under the laws of the State of California, that the information provided herein is true and correct and that I agree to act in accordance with the statements herein.

Print Applicant Name: _____

Applicant Signature: _____

Date: _____