



COUNTY OF MENDOCINO CANNABIS DEPARTMENT

860 North Bush St · Ukiah · CALIFORNIA · 95482

PHONE: 707-234-6680

mcdpod@mendocinocounty.gov
[www.https://www.mendocinocounty.org/departments/cannabis-department](https://www.mendocinocounty.org/departments/cannabis-department)

AIR QUALITY CLEARANCE CHECKLIST

Mendocino County Code Section 10A.17.070 requires the following: CCBL Holders shall obtain as may be required all approvals and permits required by the Mendocino County Air Quality Management District (MCAQMD) pursuant to state and federal laws, MCAQMD regulations, adopted air quality plans, MCAQMD policies and other applicable statutes. Mendocino County Cannabis Staff have reviewed the following information provided by the applicant and have either provided clearance or provided the applicant information that they will need to contact MCAQMD if any further action is needed.

APPLICANT INFORMATION

Applicant Name(s): _____

Must match existing application

Phone Number: _____ Email: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

CULTIVATION SITE INFORMATION

AG #: _____ APN: _____

CCBL Type: _____

Site Address: _____

City: _____ State: _____ Zip Code: _____

CANNABIS PLANNING STAFF USE ONLY

Staff Directions: Complete the section below. If the applicant selected "no" to all of the criteria listed above in the questionnaire, and the cultivation site is not located in a Naturally Occurring Asbestos (NOA) area, this form is the applicant's clearance, and no further action is required from MCAQMD.

If the applicant is in a Naturally Occurring Asbestos (NOA) area and/or selected "yes" to any of the criteria above, MCD staff will provide this form to the applicant to obtain all approvals and permits from MCAQMD.

Cannabis Planner Name: _____

Review Date: _____

NOA Known Area: Yes No

AQMD Clearance Required: Yes No Date Applicant Notified: _____

Cannabis Staff Signature: _____

AIR QUALITY QUESTIONNAIRE (COMPLETED BY APPLICANT)

Instructions: Please check all the appropriate boxes and fill-in information below that applies to your commercial cannabis cultivation and operations on site.

	Yes	No
Diesel Engines 50 Hp or greater, or multiple engines that total 90 Hp or greater (Does not apply to Motor Vehicles)	<input type="checkbox"/>	<input type="checkbox"/>
Non Diesel Engines – 250 Hp or greater (Does not apply to Motor Vehicles)	<input type="checkbox"/>	<input type="checkbox"/>
Generator (if yes, type and Hp):	<input type="checkbox"/>	<input type="checkbox"/>
Water Pump (if yes, size of pump and power source):	<input type="checkbox"/>	<input type="checkbox"/>
Drying Equipment with exhaust stack: Type	<input type="checkbox"/>	<input type="checkbox"/>
Gasoline Fuel Storage Tank (500 gallons or more)	<input type="checkbox"/>	<input type="checkbox"/>
Boiler/Water Heating Equipment (Individually or cumulatively greater than 500,000 Btu/hr)	<input type="checkbox"/>	<input type="checkbox"/>
Grading Large Area (greater than 1 acre of soil disturbance) or road construction/maintenance (1 mile of road or more)	<input type="checkbox"/>	<input type="checkbox"/>
Process that may generate fumes, dust, smoke, or strong odors (Includes: manufacturing, processing, production, testing, dispensing facilities)	<input type="checkbox"/>	<input type="checkbox"/>
Open Storage, processing and or mixing of soil or soil amendments (More than 500 square feet) Approximate size of pile: _____ sq. ft.	<input type="checkbox"/>	<input type="checkbox"/>
Composting On-site Approximate size of pile: _____ sq. ft.	<input type="checkbox"/>	<input type="checkbox"/>
Open Outdoor Burning *Burning cannabis vegetation is not permitted. Burning is allowed for vegetation grown on property, but requires a burn permit. See specific permit types below: <input type="checkbox"/> Single or two family dwelling and yard cleaning: for the disposal of brush, pruning, and other non-cannabis related vegetative matter on the property where grown. <input type="checkbox"/> Fire Hazard Reduction: for the disposal of standing brush, grass, brush clearance, and tree trimmings removed to reduce fire hazard on property where grown.	<input type="checkbox"/>	<input type="checkbox"/>

APPLICANT/LICENSE HOLDER AFFIDAVIT

Should any of the information supplied in this Air Quality Checklist be determined by the County to be false or misleading, the County may issue a CCBL Application Denial per Mendocino County Code Section 10A.17.100(D)(3) and/or a Notice to Terminate CCBL pursuant to Mendocino County Code Section 10A.17.140 (C).

I/We declare under penalty of perjury, under the laws of the State of California, that the information provided on this application is true and correct and that I am authorized to sign as the applicant/license holder of this Cannabis Cultivation Site.

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____



**Mendocino County
Air Quality Management District**

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(707) 463-4354 / (707) 234-6360
mcaqmd@mendocinocounty.org
www.mendoair.org

APPLICANT TO COMPLETE THIS SECTION

Applicant Name(s):
Must match existing application _____

Application/Permit Number: AG_ _____ APN(s): _____

Cultivation Site Address: _____

City: _____ State: _____ Zip Code: _____

This completed form by MCAQMD is your clearance.

MCAQMD STAFF USE ONLY:

AQMD Staff Name: _____

Review Date: _____

AQMD Staff Signature: _____

MCAQMD Certifies that Cannabis Cultivation Applicant listed above:

Requires the following AQMD Permit(s):

Does not require a MCAQMD issued permit(s)