

**Mono County  
Community Development Department**

PO Box 347  
Mammoth Lakes, CA 93546  
(760) 924-1800, fax 924-1801  
commdev@mono.ca.gov

**Planning Division**

PO Box 8  
Bridgeport, CA 93517  
(760) 932-5420, fax 932-5431  
[www.monocounty.ca.gov](http://www.monocounty.ca.gov)

**COMMERCIAL CANNABIS ACTIVITY**

**USE PERMIT  
APPLICATION**

APPLICATION # _____ FEE \$ _____
DATE RECEIVED _____
RECEIPT # _____ CHECK # _____ or CASH <input type="checkbox"/>
RECEIVED BY _____

**APPLICANT/AGENT** Kevin Dortch

**ADDRESS** 8511 Wellsford Place Suite G **CITY/STATE/ZIP** Santa Fe Springs CA 90670

**TELEPHONE** ( 310 ) 467-7343 **E-MAIL** kevindortch@gmail.com

**PROPERTY OWNER**, if other than applicant Lloyd Chichester

**ADDRESS** 1129 Larson Lane **CITY/STATE/ZIP** Coleville CA 96107

**TELEPHONE** ( 530 ) 208-6570 **E-MAIL** xtandy@gbis.com

Copy of Title or Deed

OR

Signed statement of consent and a copy of the rental agreement

**PROPERTY DESCRIPTION:**

**Assessor's Parcel #** 002-110-021-000 **General Plan Land Use Designation** Ag

**TYPE OF ACTIVITY** (check all intended use on the property):

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> Nursery                   | <input checked="" type="checkbox"/> Cultivation | <input type="checkbox"/> Processing   | <input checked="" type="checkbox"/> Distribution |
| <input type="checkbox"/> Manufacturing Type N or P | <input type="checkbox"/> Manufacturing Type 6   | <input type="checkbox"/> Manufacturing Type 7                                       |  |
| <input type="checkbox"/> Testing                   | <input checked="" type="checkbox"/> Retail      | <input checked="" type="checkbox"/> Microbusiness (check all activities that apply) |  |
| <input type="checkbox"/> Other _____               |   |   |  |

**PROPOSED USE:** Describe the proposed project in detail, attaching additional sheets if necessary. NOTE: An incomplete or inadequate project description may delay project processing and/or require additional staff time to write or refine the description.

See attachment

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Will the activity take place in an existing structure?  YES  NO  N/A

If NO, have you applied for a Building Permit?  YES  NO

**WATER CONSERVATION MEASURES:** Describe water conservation measures, water capture systems, grey water systems or other measures to be incorporated to minimize use of water where feasible.

By hand and automated drip irrigation minimizes use and runoff thus allowing evaporation of excess water.

**ATTACHMENTS:** The following documents are **required** for this application to be deemed complete:

- Vicinity Map
- Site Plan
- Floor Plan
- Odor Mitigation Plan
- Sign Plan
- Visual Screening Plan
- Lighting Plan
- Parking Plan
- Fire Prevention Plan
- Documentation for any "fixed noise sources"

**DISTRIBUTION**

- Storage and handling plans

**TESTING FACILITY**

- Certificate of accreditation from approved accrediting body

I CERTIFY UNDER PENALTY OF PERJURY THAT I am:  legal owner(s) of the subject property (any person having an ownership interest in the property must sign,  corporate officer(s) empowered to sign for the corporation, or  owner's legal agent having Power of Attorney for this action (a notarized "Power of Attorney" document must accompany the application form), AND THAT THE FOREGOING IS TRUE AND CORRECT.

*Loyle Bruchester* 12/2/18  
Signature Date

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

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

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

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

\_\_\_\_\_  
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**USE PERMIT PROJECT INFORMATION**

(To be completed by applicant or representative)

NOTE: Please answer all questions as accurately and completely as possible to avoid potential delays in processing. Attach additional sheets if necessary.

**I. TYPE OF PROJECT (check any permit(s) requested):**

- Director Review    Use Permit    Lot Line Adjustment    Land Division (4 or fewer)  
 Subdivision    Specific Plan    Variance    General Plan Amendment  
 Commercial Cannabis    Other \_\_\_\_\_

APPLICANT Kevin Dortch

PROJECT TITLE Walker River Farms

LOT SIZE (sq. ft./acre) 1 of 395 acres used ASSESSOR'S PARCEL # 002-110-021-000

PROJECT LOCATION 1129 Larson Lane, Coleville Ca 96107

Has your project been described in detail in the project application? Yes  No

Please Specify:

- EXISTING    PROPOSED  
Number of Units \_\_\_\_\_ Building Height/# of floors 25ft/1  
Number of Buildings 4 Density (units/acre) 0.009

- Total lot coverage/impervious surface (sq. ft. & %) 7500sqft & 0.04%  
a. Buildings (first-floor lot coverage /sq. ft. & %) 7500sqft & 0.04%  
b. Paved parking & access (sq. ft. & %) Dirt parking only

Landscaping/screening and fencing:

- a. Landscaping (sq. ft. & %) N/A  
b. Undisturbed (sq. ft. & %) N/A

Total parking spaces provided:

- a. Uncovered 6  
b. Covered None  
c. Guest/Handicapped 1

**II. SITE PLAN**

Are all existing and proposed improvements shown on the Plot Plan (see attached Plot Plan Requirements)? Yes  No

**III. ENVIRONMENTAL SETTING**

Use one copy of the Tentative Map or Plot Plan as needed to show any necessary information. Attach photographs of the site, if available.

**1. VICINITY MAP:**

Attach a copy of assessor's parcel pages or a vicinity map showing the subject property in relation to nearby streets and lots or other significant features.

2. EXISTING DEVELOPMENT:

Vacant  If the site is developed, describe all existing uses/improvements such as structures, roads, etc.  
Does the Plot Plan show these uses? Yes  No

3. ACCESS/CIRCULATION:

Name of Street Frontage(s) Larson Lane

Paved  Dirt  No existing access

Are there any private roads, drives or road easements on/through the property?

Yes  No

Has an encroachment permit been submitted to Public Works or Caltrans? Yes  No

Does the property have any existing driveways or access points? Yes  No

Are any new access points proposed? Yes  No

Does the Plot Plan show the driveways or access points? Yes  No

Describe the number and type of vehicles associated with the project Standard trucks and cars (2per day)

4. ADJACENT LAND USES:

A. Describe the existing land use(s) on adjacent properties. Also note any major man-made or natural features (i.e., highways, stream channels, number and type of structures, etc.).

LAND USE

LAND USE

North Ag hay cultivation

South Larson Lane, fire station, Ag livestock

East Highline ditch, hay & Ag undeveloped West Ag livestock

B. Will the proposed project result in substantial changes in pattern, scale or character of use in the general area? Yes  No  If YES, how does the project propose to lessen potential adverse impacts to surrounding uses? \_\_\_\_\_

5. SITE TOPOGRAPHY:

Is the site on filled land? Yes  No  Describe the site's topography (i.e., landforms, slopes, etc ) \_\_\_\_\_

Bare ground with less than 1 degree slope active horse range

6. DRAINAGES:

A. Describe existing drainage ways or wetlands on or near the project site (i.e., rivers, creeks and drainage ditches 12' or deeper and/or within 30' of the property) \_\_\_\_\_

Premises 64 ft west of highline ditch & 60 ft east of wetlands

B. Are there any drainage easements on the parcel? Yes  No

C. Will the project require altering any streams or drainage channels? Yes  No  If YES, contact the Department of Fish and Game for a stream alteration permit. IF YES TO ANY OF THE ABOVE, show location on plot plan and note any alteration or work to be done within 30 feet of the stream or drainage.

7. VEGETATION:

A. Describe the site's vegetation and the percentage of the site it covers (map major areas of vegetation on the Plot Plan) Bare horse trampled ground with a few weeds,

site scraped occasionally to remove foxtails

B. How many trees will need to be removed? None

C. Are there any unique, rare or endangered plant species on site? Yes  No

D. Has the site been used for the production of agricultural crops/trees or grazing/pasture land in the past or at the present time? Yes  No

E. Is landscaping/planting of new vegetation proposed? Yes  No

8. WILDLIFE:

A. Will the project impact existing fish and wildlife? Yes  No

Describe existing fish and wildlife on site and note any proposed measures (if any) to avoid or mitigate impacts to fish and wildlife Active horse range, area used for feeding and trampled, no wildlife present

B. Are there any unique, rare or endangered animal species on site? Yes  No

9. CULTURAL RESOURCES:

A. Are there any cemeteries, structures or other items of historical or archaeological interest on the property? Yes  No  Specify \_\_\_\_\_

10. SITE GRADING:

A. Will more than 10,000 square feet of site area be cleared and/or graded? Yes  No  If YES, how much? \_\_\_\_\_

B. Will the project require any cuts greater than 4' or fills greater than 3'? Yes  No

C. Will the project require more than 200 cubic yards of cut or fill? Yes  No  If YES, how much? \_\_\_\_\_ If YES to A, B or C, contact the Department of Public Works for a grading permit.

D. Will site grading of 10% or more occur on slopes? Yes  No

E. Note any measures to be taken to reduce dust, prevent soil erosion, or the discharge of earthen material off site or into surface waters Due to level site minimal grading is needed. Straw wattles will be used during construction

11. AIR QUALITY:

A. Will the project have wood-burning devices? Yes  No  If YES, how many? \_\_\_\_\_

B. What fuel sources will the proposed project use? Wood  Electric  Propane/Gas

C. Will the proposal cause dust, ash, smoke, fumes or odors in the vicinity? Yes  No

12. VISUAL/AESTHETICS:

A. How does the proposed project blend with the existing surrounding land uses?

Site not visible from surrounding residences, standard metal building

B. How does the proposed project affect views from existing residential/commercial developments, public lands or roads? Site not visible from surrounding residences or Larson Ln. thus no views affected

C. If outdoor lighting is proposed, describe the number, type and location One outdoor light shaded downward at entrance door for each of four structures.

13. NATURAL HAZARDS:

A. Is the site known to be subject to geologic hazards such as earthquakes, landslides, mudslides, ground failure, flooding, avalanche or similar hazards? Yes  No  (Circle applicable hazard[s]).

B. Will any hazardous waste materials such as toxic substances, flammables or explosives be used or generated? Yes  No

C. Does the project require the disposal or release of hazardous substances? Yes  No

D. Will the project generate significant amounts of solid waste or litter? Yes  No

E. Will there be a substantial change in existing noise or vibration levels? Yes  No  If YES to any of the above, please describe \_\_\_\_\_

14. OTHER PERMITS REQUIRED:

List any other related permits and other public approvals required for this project, including those required by county, regional, state and federal agencies:

Commercial Cannabis Operation Permit *County Planning Division*

- Encroachment Permits from *Public Works or Caltrans*.
- Stream Alteration Permit from *Department of Fish and Game*
- 404 Wetland Permit from *Army Corps of Engineers*
- Grading Permit from *Public Works*
- Building Permit from *County Building Division*
- Well/Septic from *County Health Department*
- Timber Land Conversion from *California Department of Forestry*
- Waste Discharge Permit from *Lahontan Regional Water Quality Control Board*
- Other \_\_\_\_\_

**IV. SERVICES**

1. Indicate how the following services will be provided for your project and the availability of service.  
 Electricity Electricity from the grid is limited, additional electricity obtained via propane CHIP  
 Underground  Overhead  (Show location of existing utility lines on Plot Plan)

Road/Access Larson Lane

Water Supply Existing well

Sewage Disposal Existing septic tank system


Fire Protection Antelope Valled Fire Department 1166 Larson Lane, Coleville Ca 96107

School District Eastern Sierra Unified School District

2. If an extension of any of the above is necessary, indicate which service(s), the length of extension(s), and the infrastructure proposed \_\_\_\_\_

Two power line poles (~600 ft) will be needed to get electricity to the premises

**CERTIFICATION:** I hereby certify that I have furnished in the attached exhibits the data and information required for this initial evaluation to the best of my ability, and that the information presented is true and correct to the best of my knowledge and belief. I understand that this information, together with additional information that I may need to provide, will be used by Mono County to review the proposed project in compliance with state and local law.

Signature  Date 12/3/18

For \_\_\_\_\_

NOTE: Failure to provide any of the requested information will result in an incomplete application and thereby delay processing.

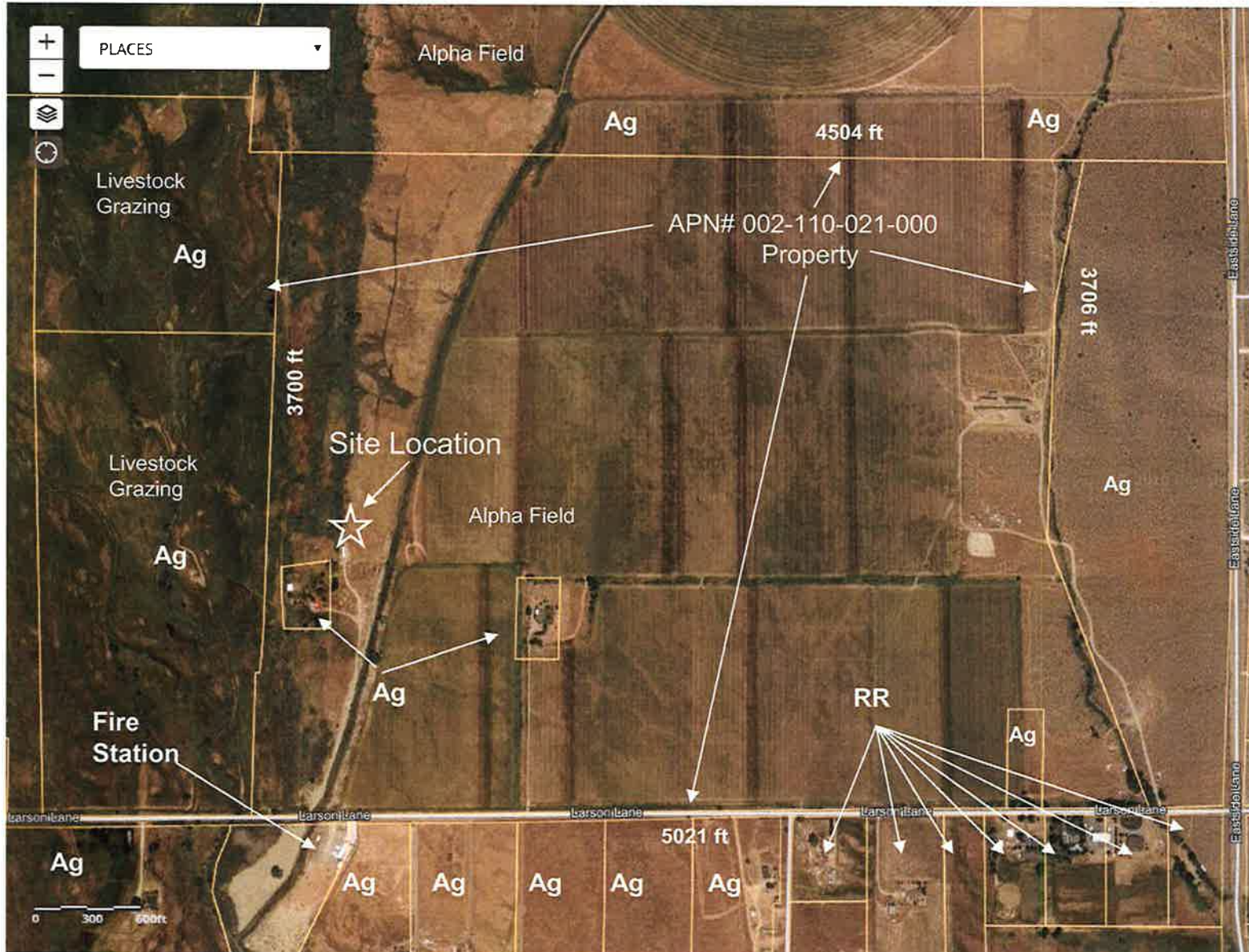


# Site Geographic Location



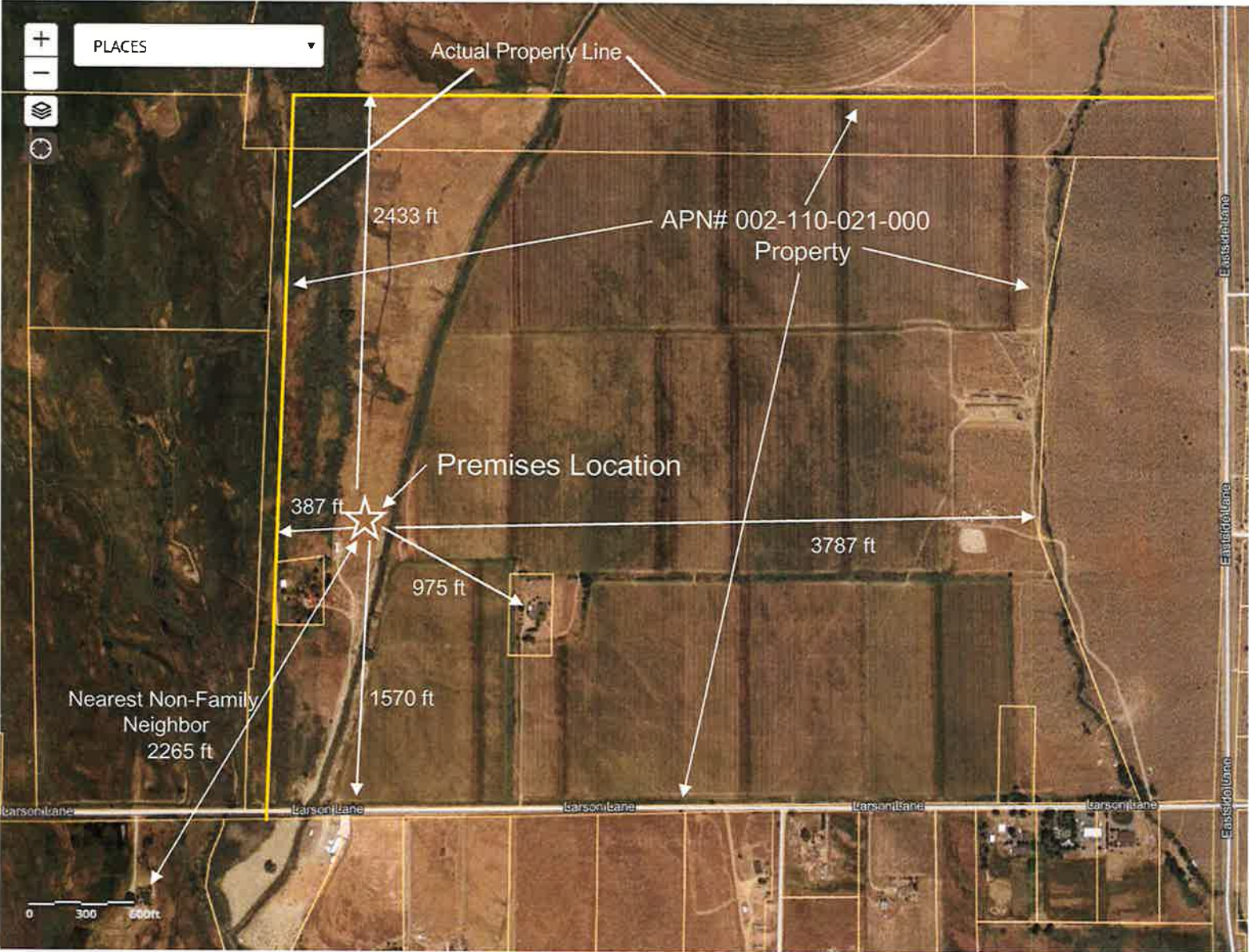


# Surrounding Land Use Designations



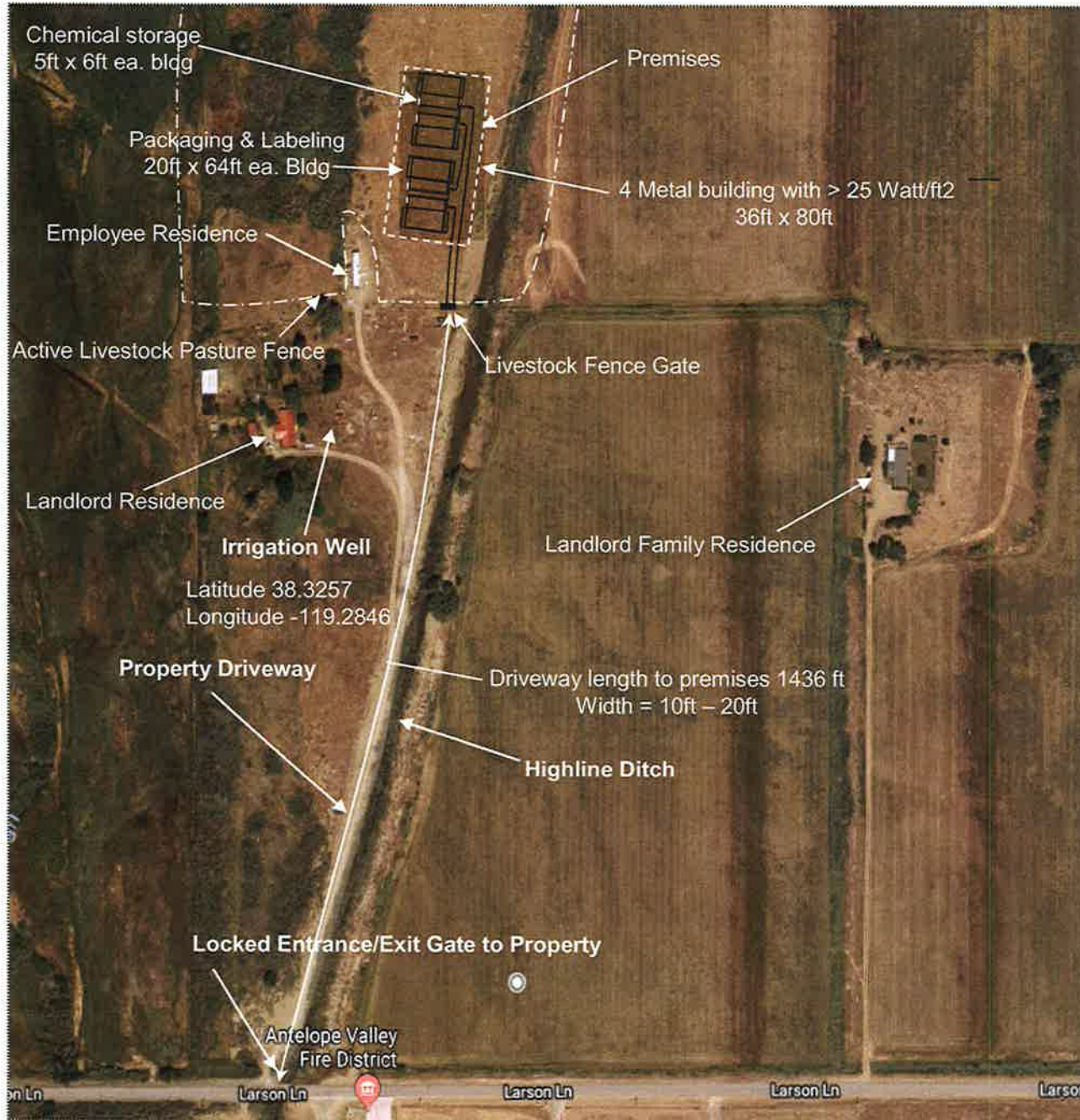


# Premises to Property Line Dimensions





↑  
North





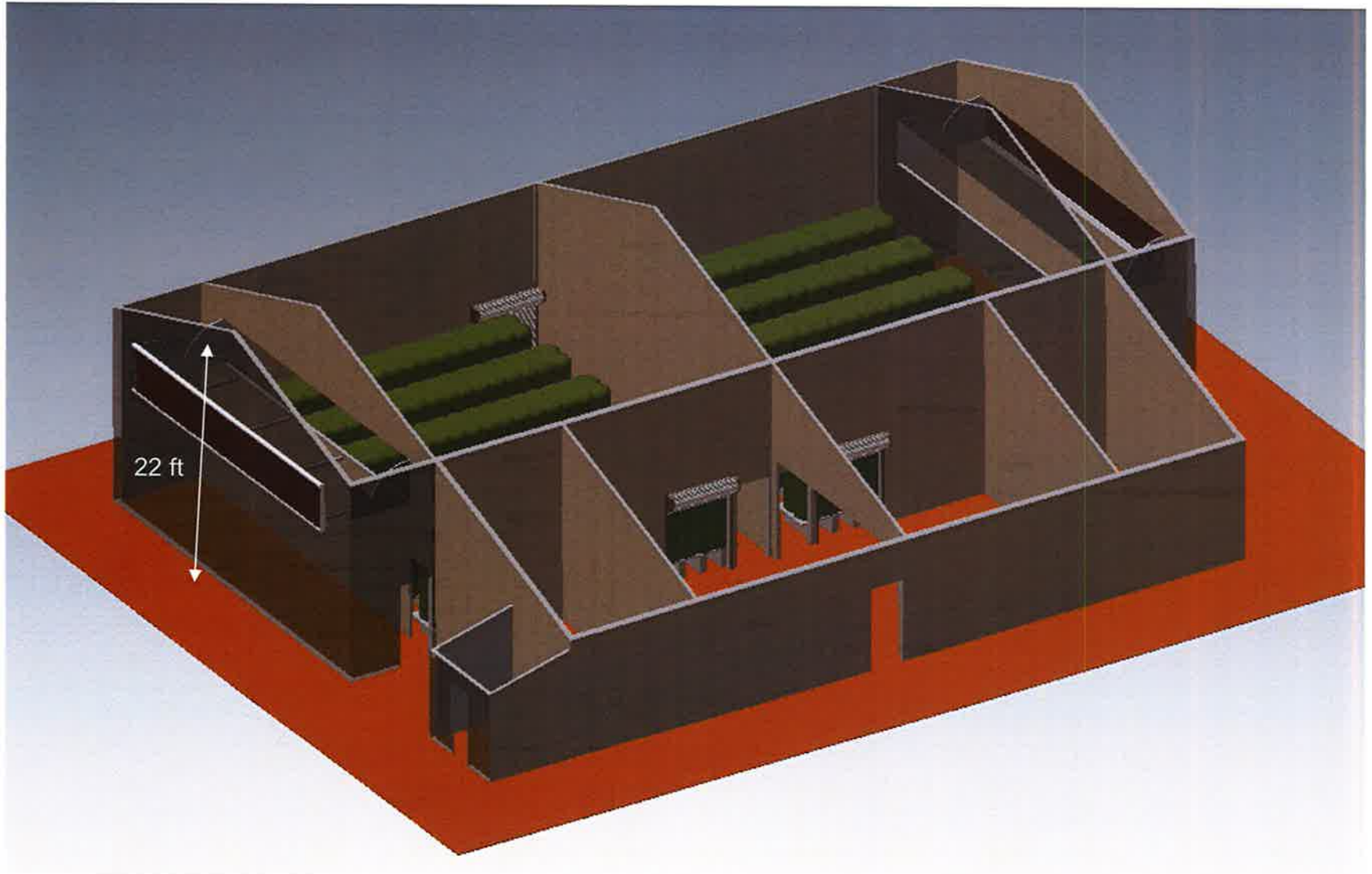




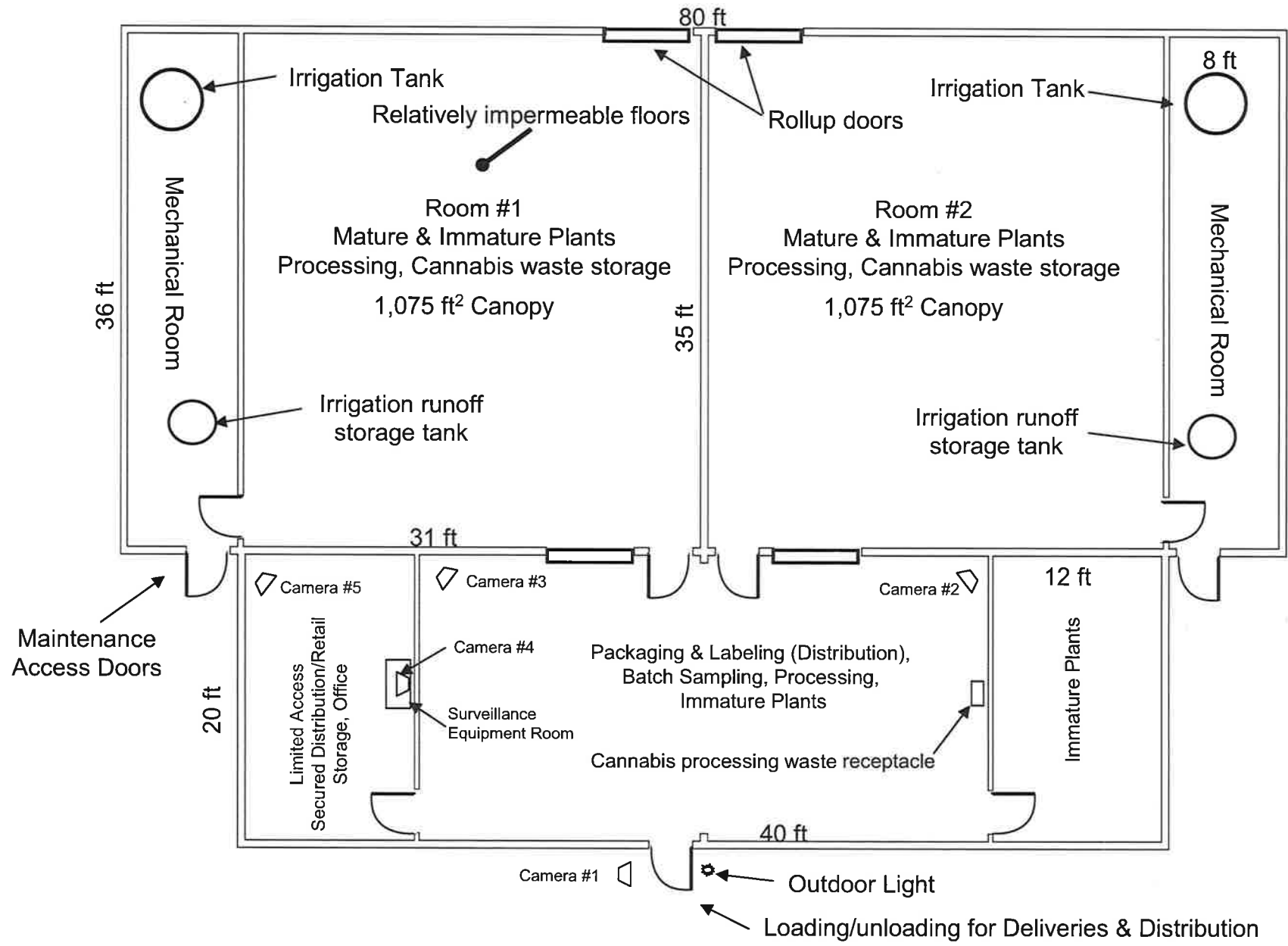




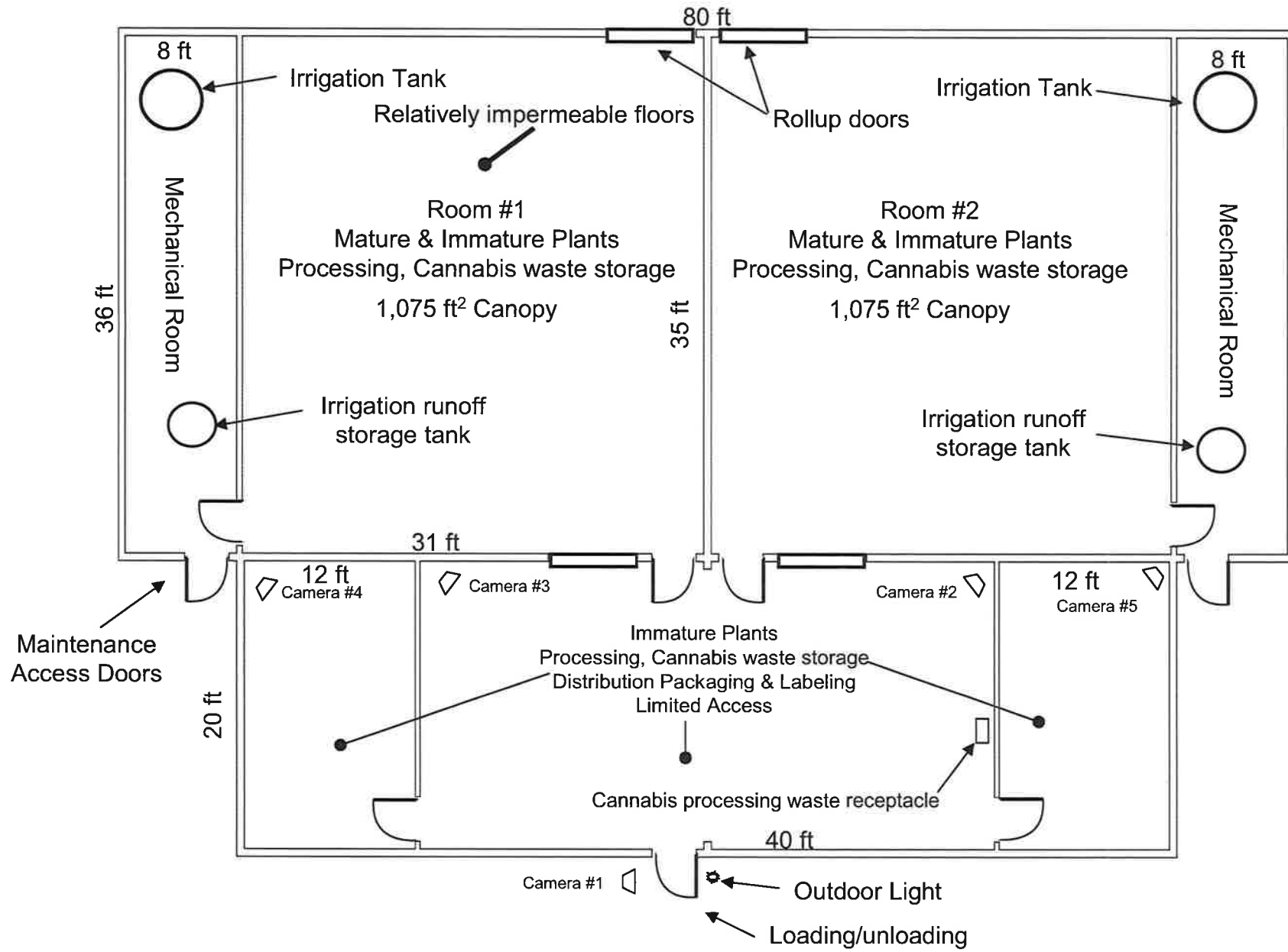
# Metal Building Isometric View



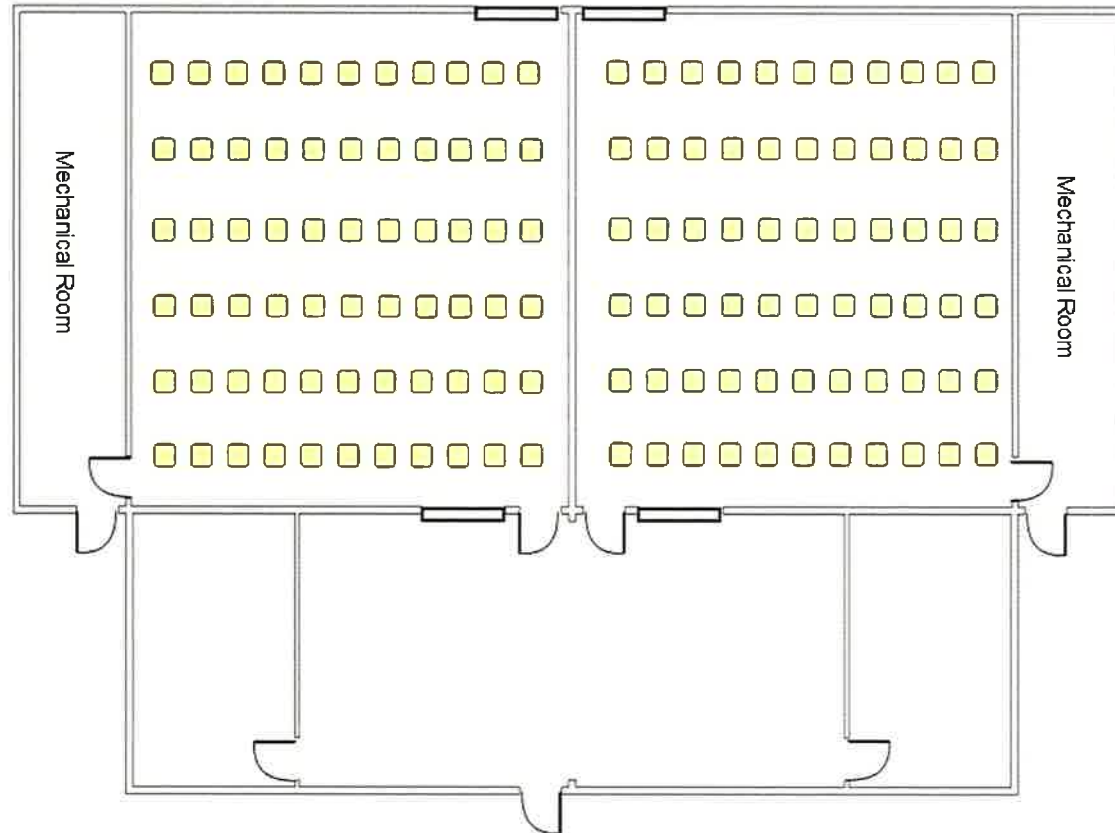
# Building #1



# Building #2, #3, & #4



## Building #1 - #4



### **Aggregate Wattage per Canopy Area Each Room**

66 lights x 1,000 watts per light = 66,000 watts

Each canopy area (indoor) is 1,075 ft<sup>2</sup>

66,000 watts/1,075 square feet = 61 watts/ft<sup>2</sup> ea. room

☐ = 1000 maximum watt light