COMMERCIAL CANNABIS ADMINISTRATIVE PERMIT

RESEARCH & DEVELOPMENT FACILITY

City of Salinas ● Community Development Department ● 65 West Alisal Street ● Salinas, CA 93901 ● (831) 758-7206

Nan	Name of Business:		
Nan	Name of Business Owner/Primary Contact:		
	Business Location:		
Phone: Email:		l:	
	California License Type(s) to Be Obtained:		
	The City of Salinas hereby issues this Administrative Pernoperation of a testing facility, subject to the following condi-		
<i>1</i> .	The operator shall obtain and maintain in good standing a license from the State of California. A copy of this license shall be submitted to the Community Development Department once it is obtained, and whenever it is updated or renewed. Retail and Wholesale sales of cannabis or cannabis products by the business are prohibited.		
2.	Business Identification Signage shall be limited to that needed for identification only and shall not contain an logos or information that identifies, advertises, or lists the services or products offered. No cannabis or cannabi products shall be visible from a public or private road, sidewalk, park, or any common public viewing area.		
3.	All persons employed or contracted to work at the site shall obtain a Work Permit from the City of Salinas i accordance with Section 5-07.25 of the Salinas Municipal Code.		
4 .	All transportation to and from the site shall be done by a business with a valid Distribution license from the State Any persons transporting cannabis, cannabis product, or cash shall be a direct employee of the business. Vehicles used for the transport of cannabis, cannabis product, or cash shall not have any markings which would indicate the vehicle's affiliation with the business.		
5.	The business shall install an odor elimination system sufficient to prevent odors from escaping the site, unless th City approves in writing an alternative method of complying with this requirement.		
6.	With the exception of growing plants, any cash, cannabis, or cannabis product with a value of over \$1,000 shabe stored in a permanently installed safe or vault when not actively being transported.		
7.	The business shall provide quarterly reports to the Community Development Department providing information on the number of employees, the average and median wages of these employees, and the ZIP Code of residence for each employee on the date of hire.		
Appı	Approved By:		
Plan	Planning Staff	Date	
decle subn	I declare under penalty of perjury that I am the owner and/or the declare under penalty of perjury that the information contained in submitted herewith, are true and correct to the best of my knowledg of the State of California and the City of Salinas, and will conduct n	or attached to this Permit, including any plans and document. e. I further declare that I agree to comply with the requirement.	
App	Applicant (Sign and Print Name)	Date	
		Office Use Only PERMIT NUMBER: R-	
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