

COUNTY OF SAN LUIS OBISPO DEPARTMENT OF PLANNING & BUILDING

MARVIN A. ROSE, INTERIM DIRECTOR

THIS IS A NEW PROJECT REFERRAL

2/9/2018	
FIRE / County Fire*, Environment	gricultural Commissioner, Building Division, CAL al Health*, Public Works*, Sheriff, CA Fish & life, San Miguel Advisory Council*, AB52
9 -	06 or bcummings@co.slo.ca.us) urrent & Environmental Planning
CRIPTION: Proposed Condition house, 6000 SF of Cannabis cult River Road in Paso Robles.	CULBERTSON al Use Permit for Cannabis activity to include ivation, manufacturing, and delivery; located
	no later than 14 days from receipt of this referral.
YES (Please go on to PART II.) NO (Call me ASAP to discuss w we must obtain comments from of HERE SIGNIFICANT CONCERNS, PRO EW? YES (Please describe impacts, a reduce the impacts to less- NO (Please go on to PART III.) EATE YOUR RECOMMENDATION FO extrach any conditions of approval y approval, or state reasons for recommendations.	hat else you need. We have only 10 days in which outside agencies.) DBLEMS OR IMPACTS IN YOUR AREA along with recommended mitigation measures to than-significant levels, and attach to this letter.) R FINAL ACTION. ou recommend to be incorporated into the commending denial.
Name	Phone
	1st District Legislative Assistant, Age FIRE / County Fire*, Environmental Wildlife, RWQCB, U.S. Fish & Wildlife Brandi Cummings (805-781-100 Development Review Team / Cummin

GENERAL APPLICATION FORM

San Luis Obispo County Department of Planning and Building

APPLICATION TYPE - CHECK ALL THAT APPLY Emergency Permit Tree Permit Minor Use Permit Conditional Use Permit/Development Plan Plot Plan Curb, Gutter & Sidewalk Waiver Other Site Plan Surface Mining/Reclamation Plan Zoning Clearance Amendment to approved land use permit Variance	DRC2017-00110 CULBERTSON AA CONDITIONAL USE PERMIT/ CANNABIS ACTIVITIES - CULTIVATION (INDOOR-GREENHOUSE, OUTDOOR), NCSAL/ NCSAL AG FH
APPLICANT INFORMATION Check box for contact person assigned to this project Landowner Name AARON Colbert Sou Mailing Address Fo 4869 Pass 2016 CA CEMBER Programs INCO gmall	
Mailing Address 7550 Carmelita any Ataxodor CA Email Address: Drogreens in Ca amail Com	Daytime Phone <u>869 806 05</u>)5 Zip Code_ <u>9344 Z</u>
Mailing Address Email Address: Mathew Coodmon Sto Sto I Mathygoodmon @ 5 moil:	Daytime Phone <u>323-496-21</u> 2₹ Zip Code93.(C(
PROPERTY INFORMATION	2010
PROPOSED PROJECT Describe the proposed project (inc. sq. ft. of all buildings): 3	000 Sife Wire House 6,000 Sife. Colivera
LEGAL DECLARATION I, the owner of record of this property, have completed this for statements here are true. I do hereby grant official represent the subject property.	orm accurately and declare that all tatives of the county authorization to inspect
FOR STAFF USE ONLY	Date <u>[-9-18</u>

LAND USE PERMIT APPLICATION PACKAGE SAN LUIS OBISPO COUNTY PLANNING & BUILDING http://www.slocounty.ca.gov/planning.htm

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San Luis Obispo County Department of Planning and Building File No
Type of project: ☑ Commercial ☐ Industrial ☐ Residential ☐ Recreational ☐ Other
Describe any modifications/adjustments from ordinance needed and the reason for the request (if applicable): Venteries on 100 ft Set brick
Describe existing and future access to the proposed project site:
Surrounding parcel ownership: Do you own adjacent property? Yes No If yes, what is the acreage of all property you own that surrounds the project site?
Surrounding land use: What are the uses of the land surrounding your property (when applicable, please specify all agricultural uses): North: East: South: West:
For all projects, answer the following: Square footage and percentage of the total site (approximately) that will be used for the following: Buildings: 4 9 900 sq. feet 20 % Landscaping: / 0,000 sq. feet / 0 % Paving: sq. feet 2 % Other (specify) Total area of all paving and structures: sq. feet sq. feet sq. feet sq. feet Total area of grading or removal of ground cover: sq. feet sq. feet sq. feet Number of parking spaces proposed: Height of tallest structure: / 0 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1
Proposed water source: On-site well Shared well Other Community System - List the agency or company responsible for provision: Do you have a valid will-serve letter? Yes No (If yes, please submit copy)
Proposed sewage disposal: ☑ Individual on-site system ☐ Other ☐ Community System - List the agency or company responsible for sewage disposal: ☐ Do you have a valid will-serve letter? ☐ Yes ☐ No (If yes, please submit copy)
Fire Agency: List the agency responsible for fire protection:
For commercial/industrial projects answer the following: Total outdoor use area: sq. feet acres Total floor area of all structures including upper stories: sq. feet
For residential projects, answer the following: Number of residential units: Number of bedrooms per unit: Total floor area of all structures including upper stories, but not garages and carports: sf Total of area of the lot(s) minus building footprint and parking spaces: sf

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San Luis Obispo County Department of Planning and Building

File No _____

The California Environmental Quality Act (CEQA) requires all state and local agencies to consider and mitigate environmental impacts for their own actions and when permitting private projects. The Act also requires that an environmental impact report (EIR) be prepared for all actions that may significantly affect the quality of the environment. The information you provide on this form will help the Department of Planning and Building determine whether or not your project will significantly affect the quality of the environment.

To ensure that your environmental review is completed as quickly as possible, please remember to:

a. Answer ALL of the questions as accurately and completely as possible.

b. Include any additional information or explanations where you believe it would be helpful or where required. Include additional pages if needed.

c. If you are requesting a land division or a re-zoning, be sure to include complete information about

future development that may result from the proposed land division or rezoning.

d. Include references to any reports or studies you are aware of that might be relevant to the questions asked or the answers you provide.

Should a determination be made that the information is inaccurate or insufficient, you will be required to submit additional information upon request.

Physical Site Characteristic Information

Your site plan will also need to show the information requested here:

1.	Describe the topography of the site:	
	Level to gently rolling, 0-10% slopes:	
	Moderate slopes - 10-20%: acres	
	20-30%: acres	
	Steep slopes over 30%: acres	MINISTER CONTROL OF THE CONTROL OF T
2.	Are there any springs, streams, lakes or marshes on or near the site? If yes, please describe:	Yes No
3.	Are there any flooding problems on the site or in the surrounding area?	☐ Yes 🏿 No
	If yes, please describe:	Yes No
4.	Has a drainage plan been prepared?	☐ Yes ☐ NO
	If yes, please include with application.	DV IVN-
5.	Has there been any grading or earthwork on the project site? If yes, please explain:	☐ Yes 🎑 No
6.	Has a grading plan been prepared?	Yes 🔯 No
	If yes, please include with application.	The state of the s
7.	Are there any sewer ponds/waste disposal sites on/adjacent to the project?	☐ Yes ☑ No
8.	Is a railroad or highway within 300 feet of your project site?	☐ Yes W No
9.	Can the proposed project be seen from surrounding public roads?	☐ Yes 🔯 No
	If yes, please list:	

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2	What type of water supply is proposed? ▼☑ Individual well ☐ Shared well ☐ Community water system
	What is the proposed use of the water?
	Residential Agricultural - Explain
	Commercial/Office - Explain
^	☐ Industrial – Explain
3.	How many service connections will be required?
5.	Do operable water facilities exist on the site?
	✓ Yes ☐ No If yes, please describe:
6.	Has there been a sustained yield test on proposed or existing wells?
	✓ Yes ☐ No If yes, please attach.
7.	Does water meet the Health Agency's quality requirements?
	Bacteriological? Yes No
	Chemical? Yes UNo
	Chemical? Yes No Physical Yes No
	Water analysis report submitted? ✓ Yes ☐ No
8.	Please check if any of the following have been completed on the subject property and/or submitted
	to County Environmental Health.
	☐ Will Serve Letter ☐ Pump TestHours / GPM ☐ Surrounding Well Logs ☐ Hydrologic Study ☐ Other Survey Control of the control of
	Surrounding Well Logs Hydrologic Study Other
<u>Sev</u>	age Disposal Information
	age Disposal Information on-site (individual) subsurface sewage disposal system will be used:
lf aı	on-site (individual) subsurface sewage disposal system will be used:
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What type of solid waste will be generated by the project? □ Domestic □ Industrial ☑ Agricultural □ Other, please explain? Name of Solid Waste Disposal Company: Name of Solid Waste Disposal company:	
a value is the wests disposal storage in relation to buildings?	
A VIII - I - II - VIII	
3. Where is the waste disposal storage in relation to buildings?	r composting
 Where is the waste disposal storage in relation to buildings. Does your project design include an area for collecting recyclable materials and/or materials? Yes No	, compositing
Community Service Information	
1. Name of School District: Piso Poble 5 Jint Unified 2. Location of nearest police station: J. M. 185 3. Location of nearest fire station: 14 M. 95	School DShick
2. Location of nearest police station:	
3. Location of nearest fire station:	
 Location of nearest public transit stop: Are services (grocery/other shopping) within walking distance (1/2 mile or closer) 	
of the project?	
Historic and Archeological Information	
1. Please describe the historic use of the property: \(\frac{\sqrt{0}}{\sqrt{0}}\)	
Please describe the historic use of the property	s on the project
site or in the vicinity? Yes No	
3. Has an archaeological surface survey been done for the project site? Yes, please describe.	es 🛛 No
If yes, please include two copies of the report with the application.	A CONTROL OF THE PARTY OF THE P
Commercial/Industrial Project Information	
Only complete this section if you are proposing a commercial or industrial proje change.	
1. Days of Operation: M - F Hours of Operation:	YAM- YAM
2 How many people will this project employ? 4 - 6	
3 Will employees work in shifts? TRG YES LAVIO	
If yes, please identify the shift times and number of employees for each shift	
 4. Will this project produce any emissions (i.e., gasses, smoke, dust, odors, fumes,	71 htgeled
5. Will this project increase the noise level in the immediate vicinity?	ZINO
If you plaged evaluin	
(If loud equipment is proposed, please submit manufacturers estimate on noise to	stail: 1)//
6. What type of industrial waste materials will result from the project? Explain in de	etall. <u>70/ %</u>
7. Will hazardous products be used or stored on-site? Yes No	
If yes, please describe in detail: #\$\frac{162}{2}	
8. Has a traffic study been prepared? Yes No If yes, please attact	ch a copy.
9 Please estimate the number of employees, customers and other project-related	traffic trips to or
from the project: Between 7:00 - 9:00 a.m. Setween 4:00 to 6:00 p.	m
Simulation and the control of the co	Page 9 of 16
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10.	Are you proposing any special measures (carpooling, public transit, telecommuting) to reduce automobile trips by employees				
	If you please specify what you are proposing:				
11,	Are you aware of any potentially problematic roadway conditions that may exist or result from the proposed project, such as poor sight distance at access points, connecting with the public road? Yes Mo If yes, please describe:				
gric	gricultural Information				
only	complete this section if your site is: 1) Within the Agricultural land use category, or 2) ently in agricultural production.				
1.	Is the site currently in Agricultural Preserve (Williamson Act)? If yes, is the site currently under land conservation contract? Yes No				
3.	If your land is currently vacant or in agricultural production, are there any restrictions on the crop productivity of the land? That is, are there any reasons (i.e., poor soil, steep slopes) the land cannot support a profitable agricultural crop? Please explain in detail:				
Spe	cial Project Information				
1.	Describe any amenities included in the project, such as park areas, open spaces, common recreation facilities, etc.(these also need to be shown on your site plan):				
2.	Will the development occur in phases? Tyes No / State Prouds				
3,	Will the development occur in phases? Yes No If yes describe: 4(color to be connected with this proposal? Will the development occur in phases? Yes No Graph of the Pennils Do you have any plans for future additions, expansion or further activity related to or connected with this proposal? We No If yes, explain: Wet Sections				
4.	Are there any proposed or existing deed restrictions? Yes No If yes, please describe:				
<u>Ene</u>	gy Conservation Information				
1,	Describe any special energy conservation measures or building materials that will be incorporated into your project *: Special Via Atran System				
	*The county's Building Energy Efficient Structures (BEES) program can reduce your construction permit fees. Your building must exceed the California State Energy Standards (Title 24) in order to qualify for this program. If you are interested in more information, please contact the Building Services Division of the Department of Planning and Building at (805) 781-5600.				
<u>Env</u>	ironmental Information				
1,	List any mitigation measures that you propose to lessen the impacts associated with your project:				
2.	Are you aware of any unique, rare or endangered species (vegetation or wildlife) associated with the project site? Yes No If yes, please list:				
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	e you aware of any previous environmental determinations for all or portions of this property?
lf y	es, please describe and provide "ED" number(s):
Other R	elated Permits
	t all permits, licenses or government approvals that will be required for your project (federal, ite and local): جمع على المعادة (federal)
	you are unsure if additional permits are required from other agencies, please ask a member of

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STORMWATER CONTROL PLAN

APPLICATION AND COVERSHEET

PLANNING & BUILDING DEPARTMENT . COUNTY OF SAN LUIS OBISPO 976 Osos Street . Room 200 . San Luis Obispo . California 93408 . (805) 781-5600

1) APPLICANT INF	ORMATION			
Applicant Name:	Arrow Culbers	√ √ Daytim	ne Phone:	
Applicant Name: Allow Culberdson Daytime Phone: Mailing Address: 4415 No River RD Paso Robes. (1) Zip Code: 93446				
Email Address:	Progrecus incog w		Managed Seattle and American Seat.	
	6V D 11V2		nuces of the control of the scholar	
2) PROJECT INFO	RMATION	A name of a vita.	design where o coest	
□ PRELIMINARY –	Subdivision or Land Use Pe	ermit 🗆 FINA	L – Construction Permit	
Permit Number:			— South Volumetrout and Comment	
Property APNOX 1	111-019-		pour un la fastication	
			(co) account of the light form	
	FOR ITEMS # 3, 4, and 5 - Plea	se Refer to Chapter 3 of	the PCR Handbook	
3) IMPERVIOUS SU	JRFACE VALUES— Refer to	the Glossary or App	pendix C in the PCR Handbook	
Pre-Project (sqft)				
Impervious Area:	,	Total Proje	ect Area:	
Post-Project (sqft)				
Total Impervious A	rea:	Pervious A	Area:	
New Imp. Surfac	ce:		Imp. Surface:	
Replaced Imp. S	Surface:			
Total Site Disturbat	nce			
4) REVIEW FOR EX	(EMPTION – Refer to Figure	3-2 in the PCR Hand	dbook	
	JIRED – The project is local square feet of impervious s		Management (MS4) Area and involves	
□ SWCP EXEM	IPT – The project is exempt	from a Stormwater C	Control Plan for the following reason:	
□ Outsi	de of MS4. The project is n	ot located in a Storm	water Management Area.	
	than 2,500 square feet. Th vious area.	ne project creates or r	replaces less than 2,500 square feet of	
Previo 2014.	ous land use approval. The Project Number:	ne project has receive	ed land use approval prior to March 6,	

5) PERFORMANCE REQUIREMENTS Check the applicable performance requ		roject meets	s the requirement:
☐ Exempt from SWCP			
□ #1 – Site Design Performance Requirement Met?		☐ YES	□ NO
☐ #2 – Water Quality Treatment	Performance Requirement Met?	☐ YES	□ NO
☐ #3 – Runoff Retention	Performance Requirement Met? ☐ YES ☐ NO		□ NO
☐ #4 – Peak Management	Performance Requirement Met?	☐ YES	□ NO
Are structural stormwater control measu	ures proposed?	□ NO	TO A THE RESIDENCE OF THE PROPERTY OF THE PROP
6) DESIGN CRITERIA – Refer to PCR	Handbook, Appendix A		
☐ Exempt from SWCP			
Watershed Management Zone #	1		
Applicable Rainfall Event (percentile):			
24-hour Rainfall Isohyetal Line (in):			
7) CERTIFICATION			
☐ Exempt. This project is exempt from	submitting a SWCP.		
☐ Full Compliance. This project fully	complies with all applicable Perform	ance Requ	irements.
☐ Alternative Compliance. This property Requirements. As such, the application			
Reason for non-compliance:	tal navomark	92	er i np. s <u>uracu</u>
Method for alternative compliance:_			sonsquiale a la
sots magament (MS4) Area and Irvolvi	rer to Fepure 3-2 in the PER Hands Vent is breated in a Stormwater Ma	97 - 100 P	MANGARON WENGE BANGAR ADWA
This SWCP was prepared by a Register	ed Civil Engineer: 🔲 YES 💆	NO	
Engineer Name	License No.	Mora ant -	TRUENS COVE
I have completed this form accurately ar	nd declare that all statements here a	are true.	o epietuo (
Preparer signature		Date_	Cn. 9-2018
Preparer's name (if other than the Engin	eer listed above) M9 Hher	J 90	odman

STORMWATER SITE DESIGN ANALYSIS

San Luis Obispo County Department of Planning and Building File No _____

SITE DESCRIPTION				
Is the project site within the Central Business District? Was the project site previously developed? Is the project site surrounded on all sides by development? □ YES □ NO □ YES □ NO □ YES □ NO				
SITE DESIGN AND AND AND AND AND AND AND AND AND AN				
For each of the following, please describe how this project has complied to the <i>maximum extent</i> practicable with the following site design and runoff reduction strategies (attach additional pages if needed):				
Limit disturbance of creeks and natural drainage features.				
\$441 and to I consult surfugious particultic systems and a pivous society in expectation.				
January and January Commission of the Commission				
Minimize compaction of highly permeable soils.				
Limit clearing and grading of native vegetation at the site to the minimum area needed to build the project, allow access, and provide fire protection.				
Minimize impervious surfaces by concentrating improvements on the least-sensitive portions of the site, while leaving the remaining land in a natural, undisturbed state.				

OPERATING PLAN

Day-To-Day Operations

PROGREENS will build upon proven practices within the medical cannabis industry. PROGREENS will utilize state of the art design features, efficient equipment, standardized and sanitary procedures. All employees will be trained in medical cannabis, and PROGREENS will employ industry software to track its product from seed to sale.

PROGREENS has conducted extensive research to come up with the most safe and efficient use of its space for implementing a medical marijuana cultivation operation. An effective workflow system is critical to maximizing product amount and quality. Plants will be grown in soil, which is more forgiving than other systems, and particular strains and generations can be raised together. Our designer will create a safe and open design using large aisles throughout the facilities. The design will also mitigate any potential exposure to pest intrusion.

A secure auxiliary trimming room will be set up near the cultivation, and as such the product will not have to leave the immediate facility until it is fully prepared. An industry-grade safe will be kept inside the trimming room to ensure security.

- Greenhouses combine the latest technology in HVAC, light deprivation, environmental controls irrigation, insect exclusion, benching systems, hybrid techniques, and systematic growing conditions
- · Greenhouses have an abundance of natural lighting
- A good blackout system is an integral component to the flowering process
- An integrated greenhouse system includes heating and cooling design features
- CO2 can be introduced to maximize the quality of medical marijuana production
- Ventilation is essential to all greenhouse crops, and filtration can eliminate exhaust odors
- Greenhouse medical marijuana can be grown in potted soil
- · A nutrient management system will maximize the production yield while ensuring high quality
- An environment monitoring computer system can regulate nutrients, blackout, air circulation, CO2, and

irrigation needs; it is designed to maintain the exact environment needed for as many different growing environs for propagation, cloning, flowering, and even varieties – the technology is even currently being integrated with smartphone control systems

Growing Techniques

As mentioned above, PROGREENS intends to utilize potted soil for its cultivation operations. Additionally, PROGREENS plans to use natural sunlight, which will reduce the power-load. PROGREENS will grow Indica, Sativa, Hybrid and CBD strains. We will use black out screens to limit that light exposure to the plants as to induce the flowering process.

Product Yield Techniques

The harvesting process for medical marijuana is quite involved, and PROGREENS plans to provide the support, training, tools, and safety to help its cultivation operation run smoothly. The secure trimming room will be the location of all trimming activity. Initially, PROGREENS staff, in accordance with all applicable health and safety standards, will do all trimming. PROGREENS utilizes a trimming machine, which would be located in the trimming room. Harvested and manicured medical marijuana product will be packaged appropriately and stored in a secure safe until it is ready to be laboratory tested.

Patient Delivery Retail Non-Storefront

Persons other than management, employees and contractors will use a security entrance to premiss. No Patients will be allowed in at any any time. Delivery protocol:

- Personnel will not allow patient access to facility
- Patients will be required to show a current patient Doctor's recommendation and valid California ID or drivers license
- Patient will be verified by personnel and prepare the order for delivery
- New medical patients will be required to fill out a HIPPA COMPLIENT MEMBERSHIP agreement that is kept in a database along with valid CA state ID and Doctor's recommendation.
- Recreational use patrons will be required to fill out a membership agreement and be 21 with a
 valid drivers license or identification card.

After a patient is verified they will be delivered products. Our driver will take approx. 4 deliveries before returning to the retail non-storefront.

A separate door for exiting the dispensary will be clearly labeled and be locked on the OUTSIDE only, to allow drivers to freely exit the dispensary area but not be able to return.

With the exception to employee areas, all other aspects of the facility will be off limits and locked with security doors and clearly labeled restricted area. No patient will be allowed access to any areas of the facility.

Drivers will carry all cash in a secure lock box and have no access to keys or any other method used to retrieve contents thereof. Furthermore all drivers will give all recreational patrons a standard receipt indicating that the excise tax is included in the sale.

All Fleet cars will be equipped with GPS tracking systems and all passwords to any and all applications will be shared with SLO County sheriffs dept.

Manufacturing and distribution

As the market demands less cannabis flower and more easier utilized and more discreet need for manufactured products as well as automated tamper resistant packaging will be common place in the ever evolving cannabis market place. As a standard rule of thumb non-flower manufacturing accounts for 75% of all deliveries. PROGREENS plans to have all health and safety issues met or exceeded for creating high end manufactured products.

PROGRRENS distribution market consists of our High Quality multi award winning flower. All sales are invoiced and handled by qualified drivers that at all time in route have manifests of weight, destination, a collective/transportation agreement, and all other documentation associated with distribution transportation

Proposed Location And Conceptual Site Plan

PROGREENS owns the subject property for purposes of carrying out a medical marijuana cultivation, manufacturing, distribution and delivery operations. The relevant documentation is attached.

The subject property is not located within one thousand feet (1,000 ft) from any sensitive use property as defined by SLO County, i.e. school, college, university, church, park, daycare facility, or drug/alcohol treatment facility. The subject property has received zoning clearance from SLO County. The proposed site is at APN: 026-141-019. The subject property is currently registered and being cultivated

The proposed site is at APN: 026-141-019. It is zoned AG in the un-incorporated area of SLO County, and meets the land use category for cultivation, Nurseries, non-volatile manufacturing and delivery non-storefront. The property is currently a registered for cannabis cultivation.

PROGREENS plans to expand from 6000 ftsq to 22,000 ftsq a conceptual design including proper parking and other concerns will be met.

Site Design

PROGREENS has conducted extensive research to come up with the most safe and efficient use of its space for implementing a vertical integration platform as well as multi-sectional use.. An effective workflow system is critical for maximizing efficiency. Our designers have created a safe and open design and will also mitigate any potential for theft or intrusion.



Parcel Summary Report For Parcel # 026-141-019

San Luis Obispo County Department of Planning and Building

County Government Center

San Luis Obispo, California 93408

Telephone: (805) 781-5600

People Information

Role Name and Address

OWN CULBERTSON AARON

PO BOX 4869 PASO ROBLES CA 93447-4869

Address Information

Status Address

P 04415 RIVER RD NCSAL

Lot Information:

Tract / Block /

Twnshp Range Section Community: Plan/Area: Lue 1: Lue 2: Lue 3: Lot: Flags: Misc

026141 019 0001 North Cty. Plan North County P AG FH U

Parcel Information

Status Description

Active EXLN PART PTN LT 1 T26S R12E PTN SEC 16

Notes

Tax Districts

PASO ROBLES JT(27,40) (SB1537)

SAN LUIS OBISPO JT(27,40)

PASO ROBLES PUBLIC

NO. 01

AREA NO. 21

PASO ROBLES UNION (SB1537 BLO)

Case Information

Case Number: Case Status:



Parcel Summary Report For Parcel # 026-141-019

San Luis Obispo County Department of Planning and Building

County Government Center

San Luis Obispo, California 93408

Telephone: (805) 781-5600

CCM2016-00037 MON Primary Parcel

Description:

APPROVED ON 12/02/2016. DRC2017-00110

COD2011-00661 CLD Primary Parcel

Description:

EMAIL COMPLAINT ON MORE THAN A DOZEN PROPERTIES IN NORTH COUNTY. VEHICLES AND OUTDOOR STORAGE.

COD2013-00332 CLD Primary Parcel

Description:

"UNFOUNDED" COMPLAINT: GRADING AND/OR CONSTRUCTION IN THE RIVERBED/FLOOD PLAIN

DRC2017-00110 REC Primary Parcel

Description:

CANNABIS ACTIVITIES - CULTIVATION (INDOOR-GREENHOUSE, OUTDOOR), MANUFACTURING, DELIVERY CCM2016-00037

PMT2013-01257 CMP Primary Parcel

Description:

AG-EXEMPT BARN - 3.000 SQ FT BARN FOR FARM IMPLEMENTATION.

PMT2014-01583 FNL Primary Parcel

Description:

ELECTRICAL, BATHROOM AND SEPTIC SYSTEM FOR AG EXEMPT BARN (PMT2013-01257)

PMT2016-07595 RVW Primary Parcel

Description:

GREENHOUSE (720 SF) WITH ELECTRICAL- NO PLUMBING

PMT2016-07596 REA Primary Parcel

Description:

GREENHOUSE (360 SF) W/ ELECTRICAL NO PLUMBING

PRE2017-00039 REC Primary Parcel

Description:

NO SHOW



Interactive Data Viewer

Legend

SLO County Parcels Roads

CalTrans

Maintained by SLO CO

Private Maintenance

Federal or State Maintenance

1: 4,514

WGS_1984_Web_Mercator_Auxiliary_Sphere © County of San Luis Obispo Planning and Building Department

0

376.17

-752.33



752.33 Feet

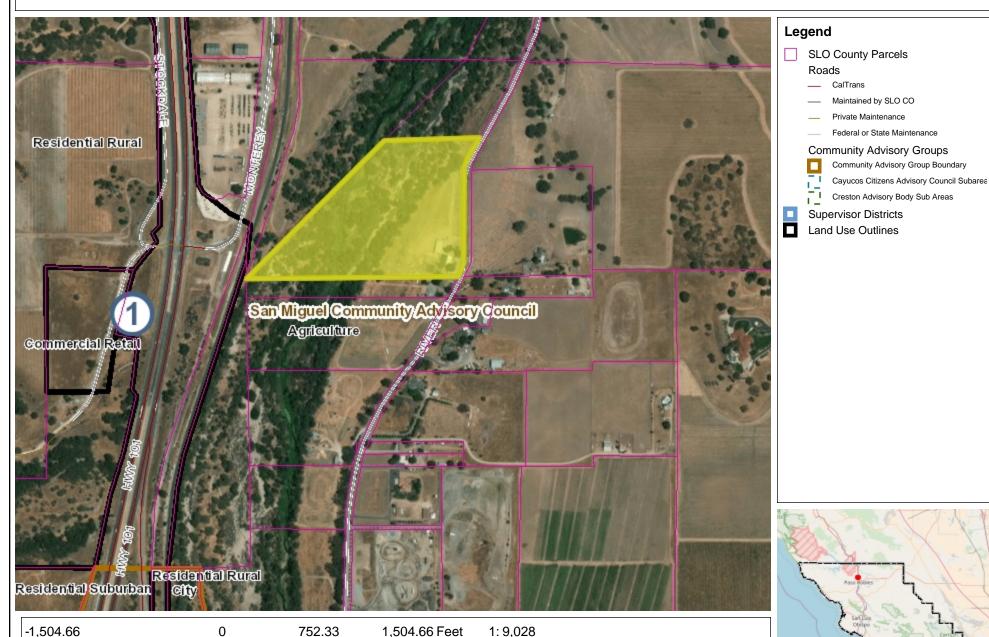
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Map for Reference Purposes Only





Interactive Data Viewer

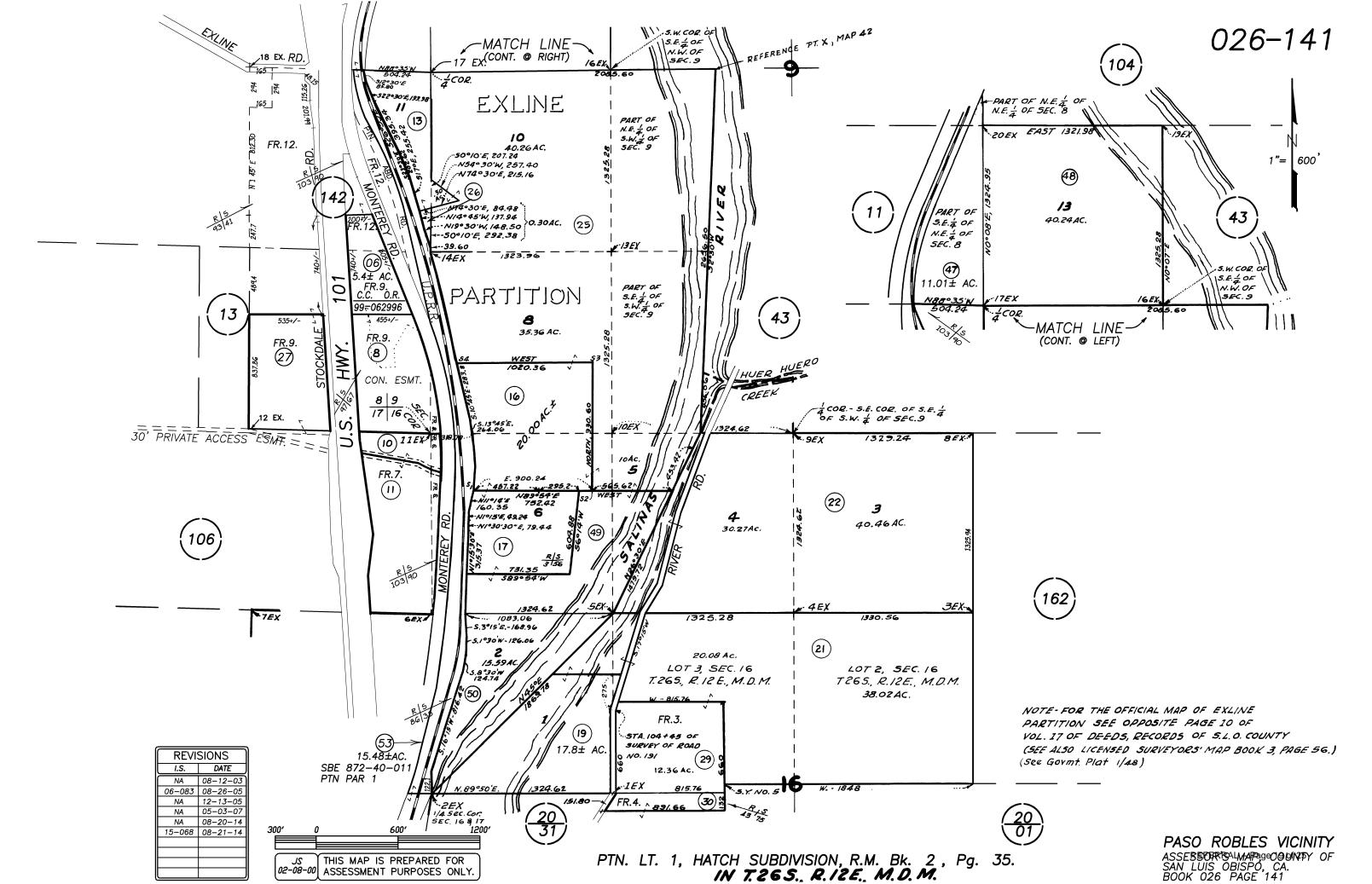


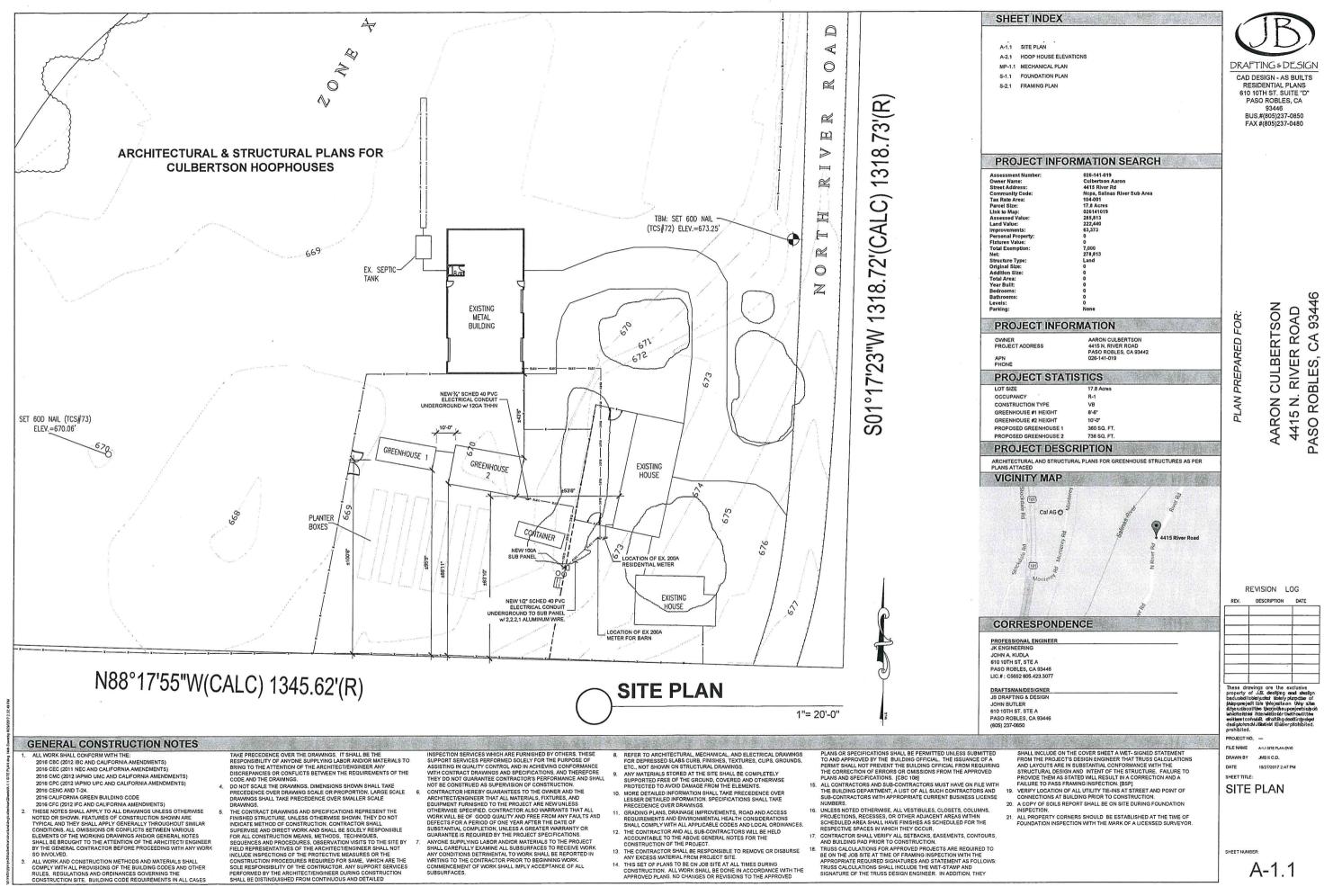
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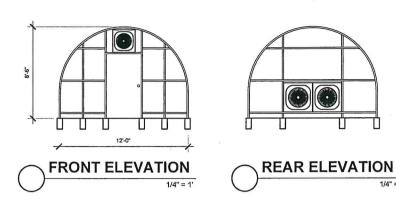
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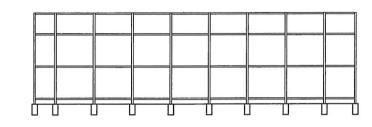
Map for Reference Purposes Only

WGS_1984_Web_Mercator_Auxiliary_Sphere © County of San Luis Obispo Planning and Building Department

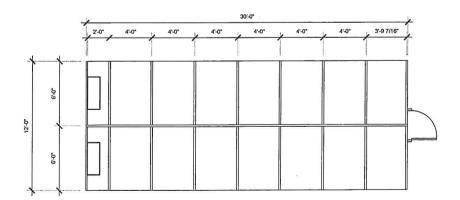




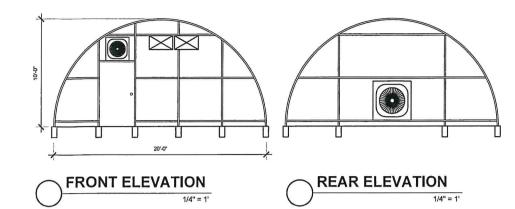


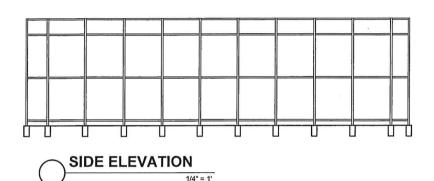


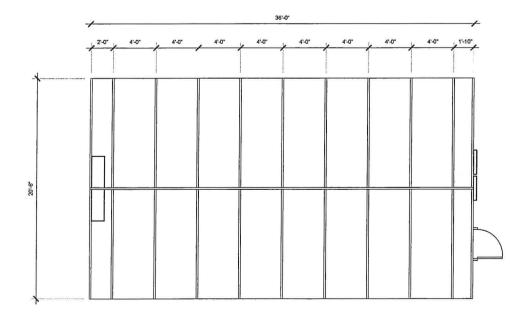
SIDE ELEVATION



EX. HOOP HOUSE FLOOR PLAN







NEW HOOP HOUSE FLOOR PLAN



DRAFTING & DESIGN

CAD DESIGN - AS BUILTS RESIDENTIAL PLANS 610 10TH ST. SUITE "D" PASO ROBLES, CA 93446 BUS.#(805)237-0480 FAX #(805)237-0480

AARON CULBERTSON 4415 N. RIVER ROAD PASO ROBLES, CA 93446

REVISION LOG DESCRIPTION DATE

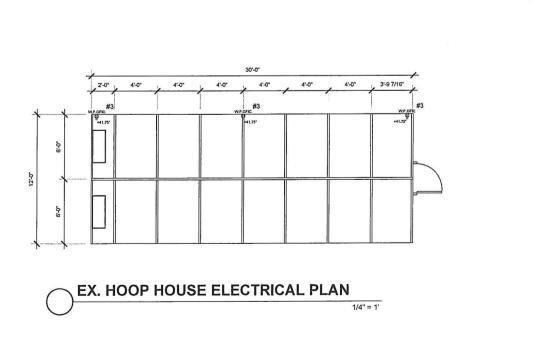
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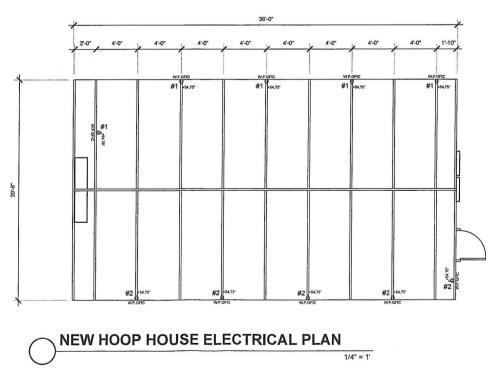
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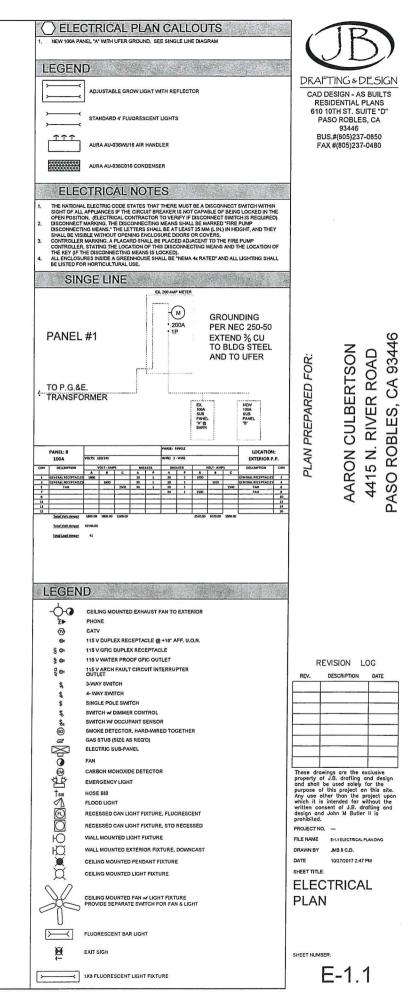
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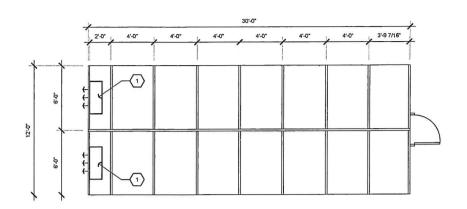
HOOP HOUSE FLOOR PLAN & **ELEVATIONS**

A-2.1

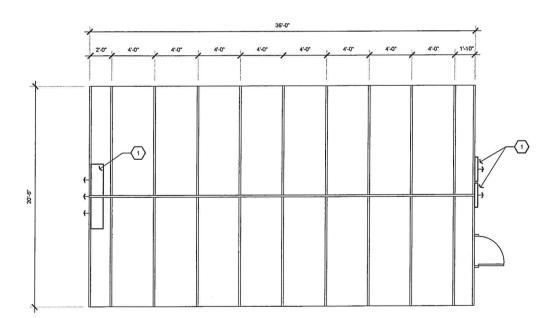








EX. HOOP HOUSE MECHANICAL PLAN



NEW HOOP HOUSE MECHANICAL PLAN

MECHANICAL CALLOUTS

EXHAUST HOOD/FAN (SEE SEPARATE SUBMITTAL)
 SEE SHEET S-1.1 FOR STRUCTURAL DETAILS ON HANGING HOOD.

MECHANICAL VENTILATION REQUIRED

OCCUPANCY PER CMC TABLE 402.1

RESTAURANT DINING AREA = 927 SQ.FT. X .07 = 64.89 PERSONS KITCHEN AREA = 402 SQ.FT. X .02 = 16.04 PERSONS STORAGE AREA = 174 SQ.FT. X .002 = .348 PERSONS

TOTAL VENTILATION OCCUPANCY = 65.3 PERSONS TOTAL VENTILATION AREA = 1503 SQ.FT.

VENTILATION REQUIRED PER CMC EQUATION 403,2.1 AND TABLE 402,1

THEREFORE THERE MUST BE A SUPPLY AIR VOLUME OF 760.29 CFM FOR THIS BUILDING.

MECHANICAL INSTALLER TO VERIFY ADEQUACY OF CURRENT SYSTEM

DRAFTING & DESIGN

CAD DESIGN - AS BUILTS RESIDENTIAL PLANS 610 10TH ST. SUITE "D" PASO ROBLES, CA 93446 BUS.#(805)237-0480

PLAN PREPARED FOR:

AARON CULBERTSON 4415 N. RIVER ROAD PASO ROBLES, CA 93446

REVISION LOG

PROJECT NO. -

FILE NAME MP-1.1 MECHANICAL PLANDING DRAWN BY JMB II C.D. DATE 10/27/2017 2:47 PM

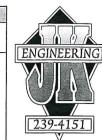
SHEET TITLE:

MECHANICAL PLAN

SHEET NUMBER:

MP-1.1

1. SEE DETAIL 1, SHEET 17 OF CONLEY'S INSTRUCTION MANUAL FOR INSTILLATION OF ARCH TO CONCRETE FOOTING 8" \emptyset x 24" DEEP.



John A. Kudla
Civil Engineering &
Structural Design
R.C.E. #50652
610 10th ST. UNIT 'A' PASO
ROBLES, CA.

AARON CULBERTSON 4415 N. RIVER ROAD PASO ROBLES, CA 93446

PLAN PREPARED FOR:

REVISION LOG

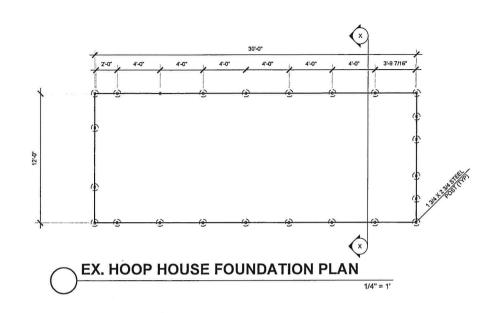
FILE NAME 5-1.1 FOUNDATION PLANEDW DRAWN BY JMB II C.D.

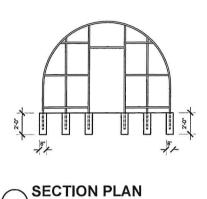
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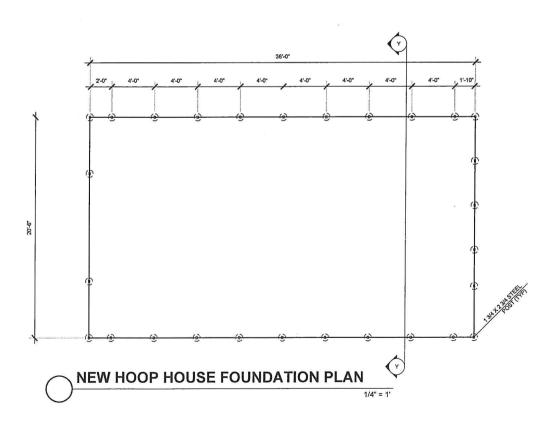
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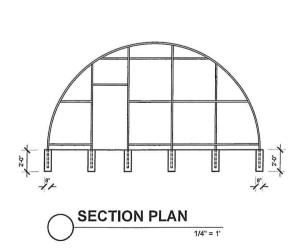
FOUNDATION PLAN

S-1.1



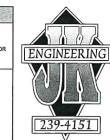






FRAMING NOTES

- SEE DETAIL 1, SHEET 8 OF CONLEY'S INSTRUCTION MANUAL FOR ARCH CONNECTION. SEE FIGURE 16 AND DETAIL 1, SHEET 18 OF CONLEY'S INSTRUCTION MANUAL FOR END WALL CONNECTIONS.



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ROBLES, CA.

PLAN PREPARED FOR:

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REVISION LOG

FILE NAME S-2.1 FRAMING PLAN.DWG DRAWN BY JMB II C.D.

DATE 10/27/2017 2:47 PM SHEET TITLE:

FRAMING PLAN

S-2.1

