



COUNTY OF SAN LUIS OBISPO
DEPARTMENT OF PLANNING & BUILDING
TREVOR KEITH, *DIRECTOR*

THIS IS A NEW PROJECT REFERRAL

DATE: 4/12/2019

TO: 4th District Legislative Assistant, Assessor, Air Pollution Control Board (APCD), Building Division, Cal Fire/County Fire, Environmental Health, Public Works, Sheriff, U.S. Fish and Wildlife, CA Fish and Wildlife, RWQCB, South County Advisory Council, AB52

FROM: Cassidy McSurdy (cmcsurdy@co.slo.ca.us or 805-788-2959)

PROJECT NUMBER & NAME: DRC2019-00064 COSGROVE

PROJECT DESCRIPTION: Proposed Minor Use Permit for cannabis cultivation. Phase I will allow for 1000 sq/ft of cultivation with the possibility of expanding to up to 5000 sq/ft of cultivation in Phase II. The project is to be located at 990 Temettate Ridge Ln. Nipomo, CA.

APN(s): [090-471-017](#)

Return this letter with your comments attached no later than 14 days from receipt of this referral. CACs please respond within 60 days. Thank you.

PART I: IS THE ATTACHED INFORMATION ADEQUATE TO COMPLETE YOUR REVIEW?

- ☐ YES (Please go on to PART II.)
- ☐ NO (Call me ASAP to discuss what else you need. We have only 10 days in which we must obtain comments from outside agencies.)

PART II: ARE THERE SIGNIFICANT CONCERNS, PROBLEMS OR IMPACTS IN YOUR AREA OF REVIEW?

- ☐ YES (Please describe impacts, along with recommended mitigation measures to reduce the impacts to less-than-significant levels, and attach to this letter.)
- ☐ NO (Please go on to PART III.)

PART III: INDICATE YOUR RECOMMENDATION FOR FINAL ACTION.

Please attach any conditions of approval you recommend to be incorporated into the project's approval, or state reasons for recommending denial.

IF YOU HAVE "NO COMMENT," PLEASE SO INDICATE, OR CALL.

Date

Name

Phone



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

Department Use Only
Do Not Mark
(Staff Apply Label Here)

APPLICANT INFORMATION Check box for contact

person assigned to this project

☐ Landowner Name Cory Cosgrove Daytime Phone 805 415 62
 Mailing Address 990 TERRACE RIDGE LN NIPISO CA Zip Code 93444
 Email Address: COSGROVE MD @ GMAIL

☐ Applicant Name Cory Cosgrove Daytime Phone 805 415 62
 Mailing Address 990 TERRACE RIDGE LN NIPISO CA Zip Code 93444
 Email Address: COSGROVE MD @ GMAIL

☐ Agent Name N/A Daytime Phone _____
 Mailing Address _____ Zip Code _____
 Email Address: _____

PROPERTY INFORMATION

Total Size of Site: 25 ACRES Assessor Parcel Number(s): 090-471-017
 Legal Description: PHONIPPA 42/95 PINE PAR 12
 Address of the project (if known): 990 TERRACE RIDGE LN NIPISO CA 93444
 Directions to the site (including gate codes) - describe first with name of road providing primary access to the site, then nearest roads, landmarks, etc.: STATE HIGHWAY 166 & 4280
 Describe current uses, existing structures, and other improvements and vegetation on the property:
W/ HOUSEHOLD: 516 TRAILER - OAKS & SAGE BRUSH.

PROPOSED PROJECT

Describe the proposed project (inc. sq. ft. of all buildings): GREEN HOUSES - 800 SQ FT.

LEGAL DECLARATION

I, the owner of record of this property, have completed this form accurately and declare that all statements here are true. I do hereby grant official representatives of the county authorization to inspect the subject property.

Property owner signature Cory Cosgrove Date 3-1-19

FOR STAFF USE ONLY



LAND USE PERMIT APPLICATION

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): NA

Describe existing and future access to the proposed project site: EXISTING DRIVEWAY

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: CITRUS AVOCADO HORSES South: CITRUS AVOCADO HORSES
East: CITRUS AVOCADO HORSES West: CITRUS AVOCADO HORSES

For all projects, answer the following:

Square footage and percentage of the total site (approximately) that will be used for the following:

Buildings: 800 sq. feet _____ %

Landscaping: 0 sq. feet _____ %

Paving: 0 sq. feet _____ %

Other (specify) _____

Total area of all paving and structures: 14,572 728 sq. feet ☒ sq. feet ☐ acres

Total area of grading or removal of ground cover: _____ sq. feet ☐ sq. feet ☐ acres

Number of parking spaces proposed: 1 Height of tallest structure: 10'

Number of trees to be removed: NONE Type: _____

Setbacks: Front 50 Right 30 Left 30 Back 50

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: CAL FIRE 20 NIPOMO

For commercial/industrial projects answer the following:

Total outdoor use area: 1000 ☒ sq. feet ☐ acres

Total floor area of all structures including upper stories: 800 sq. feet

For residential projects, answer the following:

Number of residential units: 1 Number of bedrooms per unit: 2

Total floor area of all structures including upper stories, but not garages and carports: 728 sf

Total of area of the lot(s) minus building footprint and parking spaces: 29 5 ACRES



ENVIRONMENTAL DESCRIPTION FORM

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:

- Answer **ALL** of the questions as accurately and completely as possible.
- Include any additional information or explanations where you believe it would be helpful or where required. Include additional pages if needed.
- 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.
- 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:

- Describe the topography of the site:
 Level to gently rolling, 0-10% slopes: 5 acres
 Moderate slopes - 10-20%: 10 acres
 20-30%: 10 acres
 Steep slopes over 30%: _____ acres
- Are there any springs, streams, lakes or marshes on or near the site? ☐ Yes ☒ No
 If yes, please describe: _____
- Are there any flooding problems on the site or in the surrounding area? ☐ Yes ☒ No
 If yes, please describe: _____
- Has a drainage plan been prepared? ☐ Yes ☒ No
 If yes, please include with application.
- Has there been any grading or earthwork on the project site? ☐ Yes ☒ No
 If yes, please explain: _____
- Has a grading plan been prepared? on file ☒ Yes ☐ No
 If yes, please include with application.
- Are there any sewer ponds/waste disposal sites on/adjacent to the project? ☐ Yes ☒ No
- Is a railroad or highway within 300 feet of your project site? ☐ Yes ☒ No
- Can the proposed project be seen from surrounding public roads? ☐ Yes ☒ No
 If yes, please list: _____

Water Supply Information

1. What type of water supply is proposed?
☒ Individual well ☐ Shared well ☐ Community water system
2. What is the proposed use of the water?
☐ Residential ☒ Agricultural - Explain CANNABIS
☐ Commercial/Office - Explain _____
☐ Industrial - Explain _____
3. What is the expected daily water demand associated with the project? 800 gpd Day Ex 2-3200 gpd
4. How many service connections will be required? 1
5. Do operable water facilities exist on the site?
☒ Yes ☐ No If yes, please describe: TRANS 32" S & WIDE 14" 52'
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 ☐ 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.
☐ Well Driller's Letter ☒ Water Quality Analysis (☒ OK or ☐ Problems)
☐ Will Serve Letter ☒ Pump Test 4 Hours / 30 GPM
☐ Surrounding Well Logs ☐ Hydrologic Study ☐ Other _____

Please attach any letters or documents to verify that water is available for the proposed project.

Sewage Disposal Information

If an on-site (individual) subsurface sewage disposal system will be used:

1. Has an engineered percolation test been accomplished?
☒ Yes ☐ No If yes, please attach a copy.
2. What is the distance from proposed leach field to any neighboring water wells? 500 feet
3. Will subsurface drainage result in the possibility of effluent reappearing in surface water or on adjacent lands, due to steep slopes, impervious soil layers or other existing conditions?
☐ Yes ☒ No
4. Has a piezometer test been completed?
☐ Yes ☒ No If 'Yes', please attach.
5. Will a Waste Discharge Permit from the Regional Water Quality Control Board be required?
☐ Yes ☒ No (*a waste discharge permit is typically needed when you exceed 2,500 gallons per day*)

If a community sewage disposal system is to be used:

1. Is this project to be connected to an existing sewer line? ☐ Yes ☐ No
Distance to nearest sewer line: _____ Location of connection: _____
2. What is the amount of proposed flow? _____ GPD
3. Does the existing collection treatment and disposal system have adequate additional capacity to accept the proposed flow? ☐ Yes ☐ No

Solid Waste Information

1. What type of solid waste will be generated by the project?
☐ Domestic ☐ Industrial ☒ Agricultural ☐ Other, please explain? PLASTIC DEBRIS
2. Name of Solid Waste Disposal Company: SANTA MARIA LANDFILL
3. Where is the waste disposal storage in relation to buildings? ALONG SIDE
4. Does your project design include an area for collecting recyclable materials and/or composting materials? ☒ Yes ☐ No

Community Service Information

1. Name of School District: LOJANITAS
2. Location of nearest police station: SHERIFF HIGHWAY 125 ST.
3. Location of nearest fire station: CAL FIRE 20450 PIONEER HIGHWAY 93494
4. Location of nearest public transit stop: TEFT
5. Are services (grocery/other shopping) within walking distance (1/2 mile or closer) of the project? ☐ Yes ☒ No

Historic and Archeological Information

1. Please describe the historic use of the property: PRIVATE LAND USE
2. Are you aware of the presence of any historic, cultural or archaeological materials on the project site or in the vicinity? ☐ Yes ☒ No
If yes, please describe: _____
3. Has an archaeological surface survey been done for the project site? ☐ Yes ☒ No
If yes, please include two copies of the report with the application.

Commercial/Industrial Project Information

Only complete this section if you are proposing a commercial or industrial project or zoning change.

1. Days of Operation: 4 Days Hours of Operation: 8:00 - 5:00
2. How many people will this project employ? 1
3. Will employees work in shifts? ☐ Yes ☒ No
If yes, please identify the shift times and number of employees for each shift 17/525
4. Will this project produce any emissions (i.e., gasses, smoke, dust, odors, fumes, vapors)?
☒ Yes ☐ No If yes, please explain: ODORS - CARBON TUBES
5. Will this project increase the noise level in the immediate vicinity? ☐ Yes ☒ No
If yes, please explain: _____
(If loud equipment is proposed, please submit manufacturers estimate on noise output.)
6. What type of industrial waste materials will result from the project? Explain in detail: NA
7. Will hazardous products be used or stored on-site? ☐ Yes ☒ No
If yes, please describe in detail: _____
8. Has a traffic study been prepared? ☐ Yes ☒ No If yes, please attach 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. _____ Between 4:00 to 6:00 p.m. _____

10. Are you proposing any special measures (carpooling, public transit, telecommuting) to reduce automobile trips by employees ☐ Yes ☒ No

If yes, please specify what you are proposing: N/A ON SITE

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 ☒ No If yes, please describe: _____

Agricultural Information

Only complete this section if your site is: 1) Within the Agricultural land use category, or 2) currently in agricultural production.

1. Is the site currently in Agricultural Preserve (Williamson Act)? ☒ Yes ☐ No
2. 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: NO ONLY

PARTIAL DUE TO SLOPE

Special 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? ☒ Yes ☐ No
If yes describe: _____
3. Do you have any plans for future additions, expansion or further activity related to or connected with this proposal? ☒ Yes ☐ No If yes, explain: OVER GREENHOUSES
4. Are there any proposed or existing deed restrictions? ☐ Yes ☒ No
If yes, please describe: NO HOVED ANIMALS

Energy Conservation Information

1. Describe any special energy conservation measures or building materials that will be incorporated into your project *: FLAT PL SOLAR POWER

*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.

Environmental Information

1. List any mitigation measures that you propose to lessen the impacts associated with your project:
CARBON AIR FILTERS
0.51 OF SLIGHT GREENHOUSES
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: _____

3. Are you aware of any previous environmental determinations for all or portions of this property?

☐ Yes ☒ No

If yes, please describe and provide "ED" number(s): _____

Other Related Permits

1. List all permits, licenses or government approvals that will be required for your project (federal, state and local): COUNTY PERMIT & STATE BOARD OF EQUALIZATION

(If you are unsure if additional permits are required from other agencies, please ask a member of the Planning Department staff currently assigned to the project)



COUNTY OF SAN LUIS OBISPO
DEPARTMENT OF PLANNING & BUILDING
CANNABIS APPLICATION SUPPLEMENT

PLN-2018
12/8/2017

The following information is required in addition to the Land Use Permit Application.

Cannabis Activities Proposed

- | | | |
|---|-------------------------------------|---|
| <input checked="" type="checkbox"/> Cultivation | <input type="checkbox"/> Nursery | <input type="checkbox"/> Manufacturing Facility |
| <input type="checkbox"/> Testing Facility | <input type="checkbox"/> Dispensary | <input type="checkbox"/> Distribution Facility |

For Cultivation and Nurseries ONLY

Approved Cooperative/Collective Registration number. *Note: If you do not hold an approved cooperative/collective registration, you cannot apply for cultivation until 2019.*

Approved registration number: CCM2016-

What is the applicant on the approved registration? *Note: The applicant name on the registration must match the applicant name on the land use permit.*

Name of applicant: CLARK COSGROVE

Are you planning on cultivating on the same site that a registration was approved for?

- ☐ Yes ☒ No

What type of State cultivation license are you seeking?

- | | | | |
|--------------------------------------|--|--|----------------------------------|
| <input type="checkbox"/> Type 1 | <input type="checkbox"/> Type 2 | <input type="checkbox"/> Type 3 | <input type="checkbox"/> Type 4 |
| <input type="checkbox"/> Type 5 | <input type="checkbox"/> Microbusiness | <input checked="" type="checkbox"/> Indoor | <input type="checkbox"/> Outdoor |
| <input type="checkbox"/> Mixed-light | | | |

Designate the total square footage of your cultivation canopy area(s). This is not necessarily the maximum canopy size allowed by the tier of license for which you are applying, but the amount of canopy area you intend to produce. If you intend to have multiple canopy area locations, include only the total square footage of the total canopy.

7000 sq ft

Check one or more of the following that apply and attach a detailed diagram of your designated canopy area. Include specific dimensions, in feet and inches, in the diagram. If you have only a single canopy area, clearly indicate that. If you are designating multiple canopy areas, clearly identify the square footage and dimensions of each area and how it is separated from other canopy areas. Note that if you are designating multiple canopy areas you must separate each area by a physical boundary such as an interior wall. Vertically stacked canopy areas must be identified as such in the detailed diagram submitted by applicants.

I have designated the specific area and dimensions of my newly designated canopy area(s):

CANNABIS APPLICATION SUPPLEMENT

- ☒ On my floor plan submitted with the application
☐ On an additional document submitted with my application

Record your estimates of electrical usage in kilowatt-hours (kWh). To determine how many kWh a piece of equipment uses, take the following steps:

- Determine the wattage of the device by checking manufacturer specifications
- Multiply this number by the number of hours each month the device will be in use to determine watt-hours.
- Divide each month's watt-hours by 1,000 to determine kWh. Round to three decimal places.
- Repeat this for each piece of equipment and the total amounts for each month.
- Estimates should assume the business is in full production for each month.

Describe all sources of electrical power and the total annual kWh expected to be drawn from each. For example, if the operation uses on-site power generation from a source such as solar panels, document the amount of power you expect to use from that source in addition to any other sources.

Source or utility name	Expected kWh drawn annually
PG&E	429 kWh.
Total Annual kWh:	429 kWh.

Clearly identify the measurement unit you are using to estimate or report your water usage. If you are using multiple units, you may use additional columns to record that information. If you are using reclaimed water, identify that as a source. If you are utilizing more sources of water than may be included on this form, you may include that information on a separate page submitted with this application.

Estimate the total water used in the production of marijuana by month. If recording estimates for multiple sources, estimate these amounts separately.

Source	Private Well		
Month and Year 2019			
1			
2			
3		9,600 gal.	
4		"	
5		"	
6		"	
7		"	
8		"	
9		"	
10		"	
11		"	
12		"	
Totals			

CANNABIS APPLICATION SUPPLEMENT

Do you plan on using pesticides?

☒ Yes ☐ No

List of pesticides anticipated to be used:

NEET Powder & Oil

For Manufacturing ONLY

What type of State manufacturing license are you seeking? *Note: Volatile manufacturing is prohibited.*

☐ Type 6 ☐ Type 7 ☐ Type N ☐ Type P
☐ Microbusiness

What type of products do you plan on manufacturing?

☐ Oils ☐ Edibles ☐ Topicals ☐ Other _____

Will the facility be utilizing a closed-loop extraction system?

☐ Yes ☐ No

(If extracting) What types of extraction will you be performing?

☐ Butane ☐ Propane ☐ Hexane ☐ Carbon Dioxide
☐ Ethanol ☐ Mechanical ☐ None
☐ Other _____

For Distribution ONLY

What type of State distribution license are you seeking?

☐ Type 11 ☐ Type 11 – Transport Only

Will you be operating a storage-only business?

☐ Yes ☐ No

How many vehicles do you anticipate transporting/distributing product?

☐ 1-5 ☐ 6-10 ☐ 11+ ☐ N/A Storage Only/Other

CANNABIS APPLICATION SUPPLEMENT

For Dispensaries ONLY

What type of State dispensary license are you seeking? *Note: Dispensaries are not allowed to have storefronts open to the public.*

☐ Type 9 – non-storefront dispensary ☐ Type 10 ☐ Microbusiness

Will you be delivering to other jurisdictions?

☐ Yes ☐ No

How many vehicles do you anticipate delivering product?

☐ 1-5 ☐ 6-10 ☐ 11+ ☐ N/A Storage Only/Other

How many deliveries per day do you anticipate delivering product?

☐ <10 ☐ 11-50 ☐ 51-100 ☐ >100 ☐ N/A Storage Only/Other



Parcel Information

APN: 090-471-017

Assessee: COSGROVE MARK D TRE ETAL

Care Of:

Address: 990 TEMETTATE RIDGE NIPOMO
CA 93444

Description: RHO NIP PM 42/95 PTNS PAR 1 2

Site Address:
00990 TEMETTATE RIDGE LN

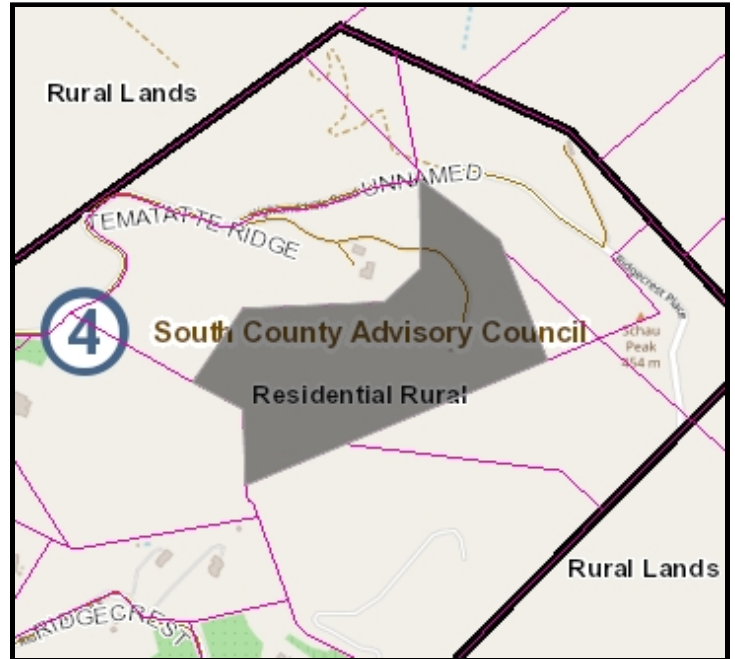
Tax Rate Area Code: 052041

Estimated Acres: 24.09

Community Code: SCSC

Supervisor District: Supdist 4

Avg Percent Slope: 37

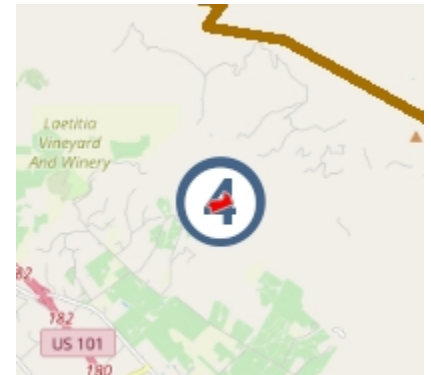


Selected Parcel

Land Use Information

Land Uses Combining Designations

RR	
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Parcel location within San Luis Obispo County

Permit Information

Permit	Description	Application Date
DRC2019-00064	Land Use	4/2/2019 10:07:08 AM
PMTR2019-00250	PMTR - Residential Permit	2/4/2019 10:30:06 AM
PMTR2018-01543	PMTR - Residential Permit	8/3/2018 12:03:10 PM
PMTR2018-01542	PMTR - Residential Permit	8/3/2018 11:45:41 AM
PMTR2018-00176	PMTR - Residential Permit	3/2/2018 1:01:09 PM



Parcel Summary Report

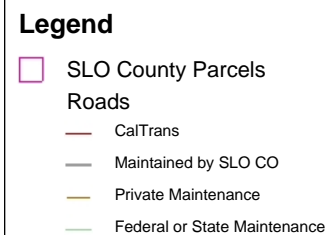
APN: 090-471-017

C5791	PMTR - Residential Permit	6/16/2000 12:00:00 AM
A7293	PMTR - Residential Permit	7/12/1999 12:00:00 AM
S980102L	Subdivision	11/4/1998 12:00:00 AM
D900201D	Land Use	4/24/1997 12:00:00 AM
S890126T	Subdivision	1/22/1996 12:00:00 AM
D890319D	Land Use	9/11/1995 12:00:00 AM
PMT2002-22370	PMTG - Grading Permit	1/30/1991 12:00:00 AM

Clerk Recorder Documents

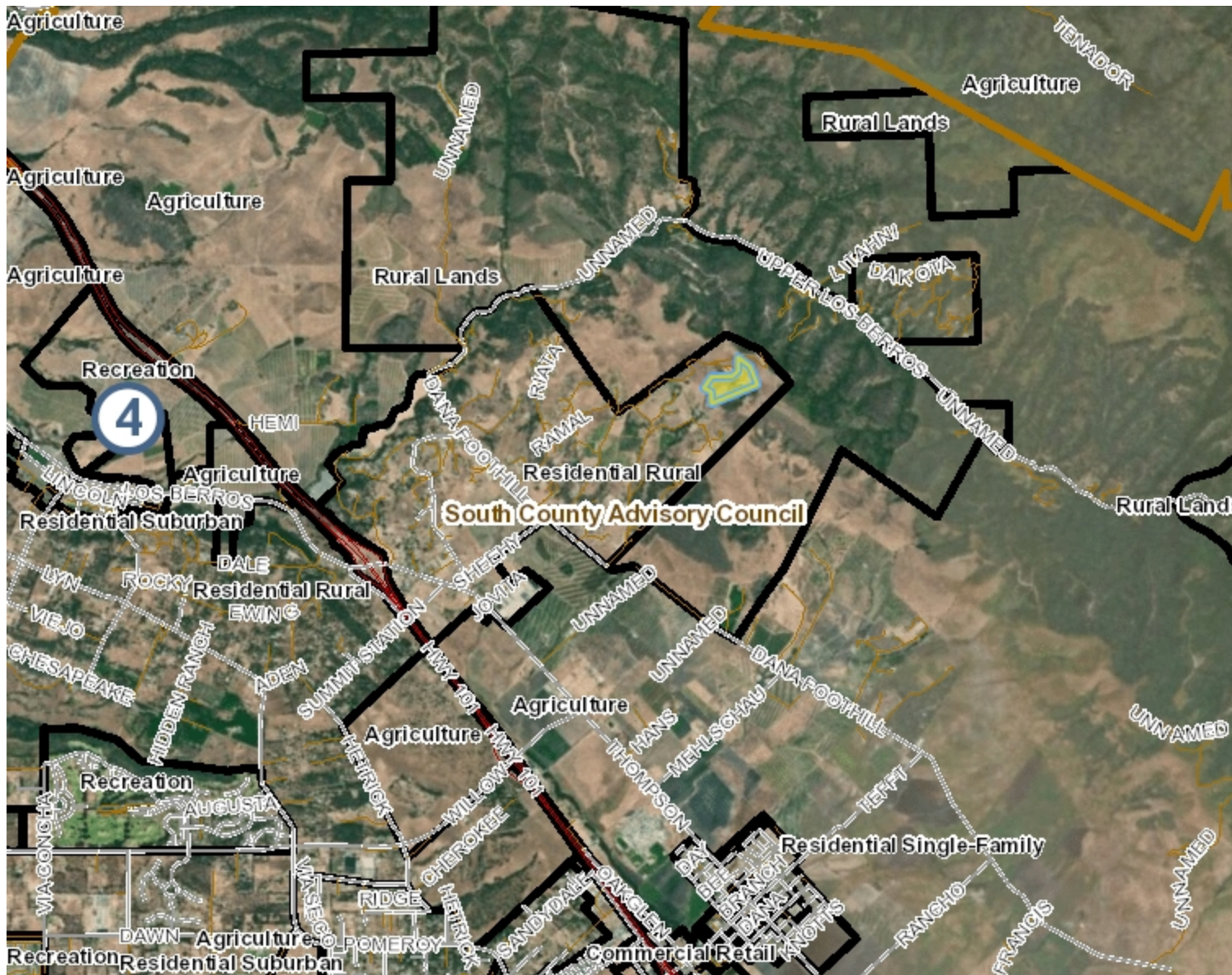
2015-R-028792

2000-I-002895



The County of San Luis Obispo does not assume liability for any damages caused by errors or omissions in the data and makes no warranty of any kind, express or implied, that these data are accurate and reliable.

Interactive Data Viewer



Legend

Roads

- CalTrans
- Maintained by SLO CO
- Private Maintenance
- Federal or State Maintenance

Community Advisory Groups

- Community Advisory Group Boundary
- Cayucos Citizens Advisory Council Subarea
- Creston Advisory Body Sub Areas

- Supervisor Districts
- Land Use Outlines

-12,037.30 0 6,018.65 12,037.30 Feet 1: 72,224

WGS_1984_Web_Mercator_Auxiliary_Sphere
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Map for Reference Purposes Only



