Supplemental Data for Initial Study

The following supplemental information is required for all applications requiring environmental review in accordance with the California Environmental Quality Act (CEQA). Please answer the following questions as thoroughly as possible. If questions do not apply to your project, indicate by writing 'N IA" or check "no". Use separate sheets of paper if necessary. **IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT THE LAKE COUNTY PLANNING DIVISION.**

Description of objective of project and its operational characteristics:				
Type of Business: Commercial Cannabis Cultivation w/ Self-Distribution				
Product or service provided: Cannabis Flower and Trim				
Hours of operation: 8 am to 6 pm	Daily April 1st - Days of operation: November 15th			
Number of shifts (normal):	Number of shifts (peak):3			
Employees per shift (normal):2	Employees per shift (peak):6			
Number of deliveries per day:Max_1	Number of customer per day: <u>Max 1</u>			
Number of pick-ups per day:Max_1	Lot size: 76 Acres			
Number and type of company Vehicles: 1 Pick-up Tru	, ,			
Floor area of existing structures: _0	Proposed building floor area: 560 sq. ft.			
Number of existing parking spaces: 0	Number of proposed parking spaces: 4			
Number of floors:1	-			
Additional relevant information: CUA Investments is seeking a Major Use Permit				
for Commercial Cannabis Cultivation with Self Distribution. CUA Investments				
proposed cultivation operation will be composed of three A-Type 3 "Medium" outdoor cultivation/canopy areas.				

Description of site prep/construction activities

June 2020	
How long wil	I construction take?
2 weeks	
What days/ti	mes will construction occur?
8am to 6pm	, Monday through Saturday
What type of	construction equipment will be used?
Tractor, E	Fork Lift, Pick-up Truck, Hand Tools
How many tr 40 - 80	uck/vehicle trips will be necessary for construction?
40 - 80	uck/vehicle trips will be necessary for construction? ent be idling during construction?
Will equipme	

How much grading is anticipated to occur and where?

A very small amount of grading (<50 cubic yards) is anticipated for the proposed cultivation operation.

Will soil be imported or exported to/from the site? If so from where and what amount?

No soil will be imported. ~400 cubic yards of an organic soilless growing

medium composed mostly of composted forest material will be used as the growing medium of the proposed cultivation operation.

Is trenching required? If yes, please provide location, dimensions and cubic yards.

Some trenching may be required to run irrigation/water supply lines for short (~30-foot) segments under access roads.

How much water will be used for construction, operation and maintenance? What is the water source?

~10,000 gallons per day for construction, operation, and maintenance of

the proposed cultivation operation. Existing onsite groundwater wells.

Other questions and information needed for the Initial Study

Describe how scenic views or vistas are impacted by the cultivation site.

6-foot wire fences with privacy mesh will be erected around the proposed

outdoor cultivation areas. No public roads/areas in the area.

What lighting is proposed for the project? Will areas be lit at night?

Motion-sensing security lights around the proposed cultivation operation

All lights will be fully shielded and downward casting.

Are there any existing agricultural uses on-site besides cannabis? Will they be removed?

No _____

(Resolution No. 2017-19, February 7, 2017)

Will this project result in the loss of forest land? If so, describe how many acres and what type of trees.

Project will result in the loss of ~3 acres of Non-native Annual Grassland

How will dust, ash, smoke, fumes or odors generated by the cultivation site be managed?

Dust: water truck/soil moisture and seed, mulch, and gravel bare soil

Odor: Odor Response Program

Are there any water features (drainages, streams, creeks, lakes, rivers, vernal pools, wetlands, etc.) on-site or immediately adjacent to the project? If yes, will any work take place in or near them?

Yes. Multiple watercourses begin on the Project Property.

No work will take place within 100 feet of surface water bodies.

Will there be a loss of any wetland or streamside vegetation? If yes, describe where, total area, and type of vegetation lost.

No

Describe and site or buildings have any archaeological or historical significance.

No sites or buildings of any archaeological or historical significance on the Project Property.

What are the slopes on the cultivation site?

5% to 15% slopes

(Resolution No. 2017-19, February 7, 2017)

Describe the soils found at the site and their potential for landslides, erosion, lateral spreading, subsidence, liquefaction, or collapse.

Gravelly clay loams. Not susceptible to landslides, lateral spreading, subsidence, liquefaction, or collapse.

Describe methods to be taken to reduce greenhouse gases.

Outdoor cannabis cultivation is removes greenhouse gases from the atmosphere through photosynthesis.

Will solid waste be produced? If yes, how will it be disposed of?

Yes. Solid waste will be regularly transported to a Lake County

Integrated Waste Management Facility.

Will hazardous waste be produced? If yes, how will it be disposed of?

No

How will vegetative waste be managed?

Vegetative waste will be composted on site and compost will be incorporated

into growing medium of cultivation areas as an organic soil amendment.

How will growth medium waste be managed?

Organic growing medium will be amended and reused each year.

Will any material be taken to a landfill? If yes, which one and how much material is anticipated?

Yes. Eastlake Landfill. It is anticipated that less than 400 lbs. will be taken to the landfill (not recycled) annually.

Describe risk of an explosion or release of hazardous substances in case of an accident.
A fire or explosion could occur as a result of an ignition source
reaching a petroleum storage area or container. Hazardous substances
will be securely stored. Do portions of the cultivation site periodically flood?
No
Describe the existing drainage patterns on the site and how they may be alternated and to what degree as a result of this project.
Please see Storm Water Management Plan in Property Management Plan.
No proposed alterations to existing drainage patterns on property.
What Best Management Practices (BMPs) or measures will be implemented in order to prevent erosion and impacts to water quality?
Erosion and sediment control measures outlined Storm Water Management Pla
(straw wattles, seeding, mulching, and generous riparian buffers).
Is wastewater treatment required for the project? If yes, what is the source?
No.
Describe how this project is consistent with the County's General Plan and Zoning Ordinance.
The proposed cultivation operation will be located on an RL-zoned property
Chapter 21, Article 27 of the Lake County Code allows commercial cannabis cultivation on RL-zoned properties.
Describe the level and frequency of noise or vibration that will be generated from this project.
Low levels of noise or vibration from the operation of diesel and
gasoline-powered equipment (tractor, lawnmower, weedeater, etc)

Describe what measures have been taken to maintain or improve level of service for the appropriate fire district and Cal Fire.

"Hammerhead" emergency vehicle turnaround area.
How is the site accessed?
The site is access via private access roads off of Jerusalem Grade
Describe the amount of traffic the project will generate.
8 to 12 vehicle trips per day during cultivation season (April 1 -
November 15).
Are there any road improvements that would be required? If yes, please provide specs (type of materials and dimensions).
3 inches of gravel will be applied to the access roads of the proposed
cultivation operation.
Describe if this project will result increased traffic hazards to motor vehicles, bicyclists, or pedestrians?
ne small increase in daily vehicle trips on Jerusalem Grade should not incre
raffic hazards to motor vehicles, bicyclists, or pedestrians. Staff will be
structed to drive slowly for safety and to keep down dust. Are greenhouses or other accessory structures proposed? If yes, what are the
dimensions of the structures and materials/colors they will be constructed out of?
Yes, two 10'X 12' wooden buildings and two 20' metal shipping
containers.
What sources of energy will be used?
Roof-mounted photovoltaic solar arrays with gasoline powered generate
as a backup power supply/source.

Supplemental Data for Cannabis Cultivation

Supplemental Data for Califiable Cultivation
The legal business name of the applicant entity: <u>CUA Investments</u> , <u>Inc.</u>
The license type, pursuant to the California Department of Food and Agriculture cannabis cultivation program regulations, for which the applicant is applying and whether the application is for an M-license or A-license: Three A-Type 3 "Medium Outdoor" Cultivation Licenses
A list of all the types, including the license numbers of valid licenses, from the department and other cannabis licensing authorities that the applicant already holds: N/A
DESIGNATED RESPONSIBLE PARTY
The designated responsible party, who shall also be an owner, with legal authority to bind the applicant entity, and the primary contact for the application.
Full legal name:Justin Hammer
Title: Owner
Mailing Address: 1177 S Chanterella Drive
City: San Ramon
State: <u>CA</u> <u>Zip: 94582</u>
Primary contact phone number: (925) 886 - 9272
Email address:justinhammercbd@gmail.com_
A copy of the Designated Responsible Party's government-issued identification shall be attached. Acceptable forms of identification are a document issued by a federal, state, county, or municipal government, including, but not limited to, a driver's license or passport, that contains the name, date of birth, physical description, and picture of the individual.
<u>AGENT</u>
If an individual or entity is serving as agent for service of process for the applicant, the following information shall be provided:
Full legal name:
Title:
Mailing Address:
City:
State: Zip:
Primary contact phone number: ()
Email address: +

Owner

A complete list of every owner of the applicant entity. "Owner" means any of the following:

- (1) A person with an aggregate ownership interest of 20 percent or more in the person applying for a license or a licensee, unless the interest is solely a security, lien, or encumbrance.
- (2) The chief executive officer of a nonprofit or other entity.
- (3) A member of the board of directors of a nonprofit.
- (4) An individual who will be participating in the direction, control, or management of the person applying for a license

license.				
Each individual owner named shall submit the following information:				
Full legal name: Justin Hammer				
Title: Owner				
Mailing Address: 1177 S Chanterella Drive				
City: San Ramon				
State:Zip:94582				
Primary contact phone number: (_925_)886 9272				
Email address: justinhammercbd@gmail.com_				
Date ownership interest in the applicant entity was acquired: 8/29/2019				
Percentage of the ownership interest held in the applicant entity by the owner: 100%				
A list of all the valid licenses, including license type(s) and license number(s), from the department and other cannabis licensing authorities that the owner is listed as either an owner or financial interest holder:				
N/A				
A copy of the owner's government-issued identification shall be attached. Acceptable forms of identification are a document issued by a federal, state, county, or municipal government, including, but not limited to, a driver's license or passport, that contains the name, date of birth, physical description, and picture of the individual.				

For applicants that are a cannabis cooperative as defined by Division 10, Chapter 22 (commencing with section 26220) of the Business and Professions Code, identification of all members.

Evidence that the applicant entity has the legal right to occupy and use the proposed location.

State of California Secretary of State

Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)
FEES (Filing and Disclosure): \$25.00.
If this is an amendment, see instructions.

IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM					
1. CORPORATE NAME					
2	CALIFORNIA CORPORATE NUMBER				
۷.	OALII OKKIA OOKI OKATE NOMBEK			This Space for Filir	g Use Only
No	Change Statement (Not applicable	e if agent address of record is a P.O.	Box address. See in:	structions.)	
3.		the information contained in the la			ornia Secretary
		nation has been previously filed, this			araia Caaratan,
	of State, check the box and pro	any of the information contained in the ceed to Item 17.	ie iast Statement of in	normation flied with the Calli	omia Secretary
<u> </u>	·		i+.	annet ha D.O. Davies \	
	omplete Addresses for the Follow STREET ADDRESS OF PRINCIPAL EXEC		e city. Items 4 and 5 ca CITY	annot be P.O. Boxes.) STATE	ZIP CODE
4.	STREET ADDRESS OF FRINCIPAL EXEC	OTIVE OF FIGE	OII I	SIAIL	ZIF CODE
5.	STREET ADDRESS OF PRINCIPAL BUSIN	IESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
6.	MAILING ADDRESS OF CORPORATION,	F DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE
Na	ames and Complete Addresses o	f the Following Officers (The corr	poration must list these	three officers A comparable	e title for the specific
	icer may be added; however, the preprir			Timee officers. A comparable	s the for the specific
7.	CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
8.	SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
9.	CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
	ames and Complete Addresses o		rs Who are Also O	fficers (The corporation mu	st have at least one
	ector. Attach additional pages, if neces	• '	OITY	OTATE	710.0005
10.	. NAME	ADDRESS	CITY	STATE	ZIP CODE
11.	. NAME	ADDRESS	CITY	STATE	ZIP CODE
12	. NAME	ADDRESS	CITY	STATE	ZIP CODE
13	. NUMBER OF VACANCIES ON THE BOAR	D OF DIRECTORS. IF ANY:			
_	gent for Service of Process If the	· · · · · · · · · · · · · · · · · · ·	eside in California and	Item 15 must be completed w	ith a California street
ad	dress, a P.O. Box address is not accep	stable. If the agent is another corporat	ion, the agent must ha		
	rtificate pursuant to California Corporation NAME OF AGENT FOR SERVICE OF PRO		t be left blank.		
14.	. NAME OF AGENT FOR SERVICE OF PRO	CESS			
15.	. STREET ADDRESS OF AGENT FOR SER'	VICE OF PROCESS IN CALIFORNIA, IF AN	INDIVIDUAL CITY	STATE	ZIP CODE
Ту	pe of Business				
16	. DESCRIBE THE TYPE OF BUSINESS OF	THE CORPORATION			
17	BY SUBMITTING THIS STATEMENT OF	INFORMATION TO THE CALLEODALIA OF	CODETADY OF STATE	THE CORDODATION CERTIFIE	S THE INCODMATION
17.	. BY SUBMITTING THIS STATEMENT OF CONTAINED HEREIN, INCLUDING ANY A		ONEIANT OF STATE,	THE CORPORATION CERTIFIES	5 THE INFORMATION
		OF PERSON COMPLETING FORM	TITLE	SIGNATU	
SI-	200 (REV 01/2013)	Page 1 of 1		APPROVED BY S	ECRETARY OF STATE

S



Secretary of State

RA-100

Resignation of Agent For Service of Process

R0101201

IMPORTANT — Read Instructions before completing this form.

There is **No Fee** for filing a Resignation of Agent Upon Whom Process May be Served

Copy Fees – First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00

Note: If the entity from which you are resigning is a corporation, limited liability company, or limited partnership, you can go to the California Secretary of State's Business Search at *BusinessSearch.sos.ca.gov* to verify the exact name of the entity, entity file number, and that you are currently listed as agent for service of process.

FILED Secretary of State State of California
DEC 1 6 2019

currently listed as agent for service of process.	This Space For Office Use Only			
Entity Name (Enter the exact name of the entity from which you are resigning as agent for service of process.)				
CUA INVESTMENTS INC.				
2. Entity File Number (Enter the file number issued to the business entity by the California Secretary of State.)				
C3313344				
3. Name of Resigning Agent for Service of Process (Enter your name, o enter the name of the	r if the agent for service of process is a corporation, at corporation.)			
DANNA HAMMER				
4. Statement of Resignation (The following statement declares your intent to resign as agent for service of process. Do not alter.)				
The undersigned hereby resigns as agent upon whom process may be served in California for the abovename entity.				
5. Read and Sign Below (See Instructions. Office or title not required. Do not u	se a computer generated signature.)			
I declare I am the person who signed this document, which execution	is my act and deed.			
Want Canrue				
Signature of Resigning Agent for Service of Process or				

Signature of Representative of Resigning Agent, if the agent for service of process is a corporation