

## Sonoma County Cannabis Local Equity Program Phase 2 Application

**This application is used for Local Equity Program Phase 2 only. You must have been deemed a Verified Cannabis Equity Applicant/Operator before submitting a Phase 2 Application.**

### Cannabis Local Equity Program Purpose and Application Process

Many rural communities in California have a history of entrenched local poverty and economic hardship. These communities were impacted significantly by the criminalization of cannabis, including Sonoma County communities as illustrated on page 25 of the Sonoma County Cannabis Equity Assessment (2021) (CEA). According to the CEA, targeted, data-driven, and well-funded equity programs can help communities and populations, especially ancillary cannabis businesses, into a legal and sustainable economic future.

The purpose of this program is to utilize funds from the Governor's Office of Business and Economic Development (GO-Biz) Cannabis Equity Grant program to aid equity applicants and licensees to build a business in the regulated market.

The application process will be two phases:

- Phase 1 – Applicants apply to become a *Verified Cannabis Equity Applicant/Operator*
- Phase 2 – *Verified Cannabis Equity Applicants/Operators* apply for Cannabis Equity Grant funding.

### How to Apply

Please review the Cannabis Local Equity Program Manual and the information below prior to completing this application. The Local Equity Program Manual is available online at:

<https://sonomacounty.ca.gov/administrative-support-and-fiscal-services/county-administrators-office/projects/cannabis-program/cannabis-local-equity-program>

Applications and supporting documents must be submitted via email to: [Cannabis@sonoma-county.org](mailto:Cannabis@sonoma-county.org)



**This application is used for Local Equity Program Phase 2 only.**

Please print clearly or type answers.

Applicant/Operator Name \_\_\_\_\_

Business Name (if applicable) \_\_\_\_\_

Mailing Address \_\_\_\_\_

Mailing City, State Zip \_\_\_\_\_

E-mail Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Have you been deemed a Verified Cannabis Equity Applicant/Operator?      Yes      No

**If No, stop here and apply for the Local Equity Program Phase 1.**

Are you a current operator?      Yes      No

If you are a current operator, is your operation in the unincorporated County or in a City?

County      City

If in a City, which one? \_\_\_\_\_

If you are a current operator, what is your permit application file number?

\_\_\_\_\_

If you are a current operator, what is your Department of Cannabis Control (DCC) License number and expiration date?

\_\_\_\_\_

If you are not a current operator, do you plan to apply for a permit? If so, in which jurisdiction and when?

\_\_\_\_\_

What is your role in the business? Attach the Statement of Information submitted to the California Secretary of State.

\_\_\_\_\_

Has another member of the business applied for a Cannabis Equity Grant? If so, provide the name.

Note: only a maximum of two applicants per business may receive an Equity Grant.

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**Review Section 5 on Services in the Cannabis Local Equity Program Manual for availability and scope of services that may be funded by the Cannabis Local Equity Program.**

Cannabis Equity Funds may be used for Financial, Administrative/Technical, Outreach and Education, and Business Acumen uses.

- **Financial** uses include but are not limited to application fees, environmental studies fees and costs, and costs of agencies or professionals who offer cannabis business support.
- **Administrative and Technical** uses include but are not limited to fees to agencies or professionals who provide technical assistance for record expungement or for assistance through the local permitting and state licensing processes.
- **Outreach and Education** uses include but are not limited to costs associated with the creation of outreach materials or for outreach and education efforts related to establishing trust and confidence with the legal cannabis industry.
- **Business Acumen** uses include but are not limited to training for employers and employees to understand workforce rules and regulations, accounting practices, and human resources practices.

**Questions**

1. Describe how the Cannabis Equity Funds would be used, if awarded. Use additional pages if necessary.

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2. Amount of Cannabis Equity Funds being requested. \_\_\_\_\_

Required supplemental information:

- Budget for proposed use of Cannabis Equity Funds (template is included at the end of this application)
- Documentation of Tier B Criteria (see next section)
- Statement of Information submitted to the California Secretary of State

**Review Tier B Eligibility Criteria before responding to the next question.**

To determine and categorize which individual applicants are most in need of support, a score will be determined for each equity applicant based on the number of eligibility criteria the applicant meets. Tier A criteria will be scored at two points each and Tier B criteria will be scored at one point each. The County reserves the right to adjust eligibility criteria and scoring method as needed to reflect current needs and trends in the County. The score will support prioritization of services and support for equity applicants. The goal of the applicant scoring system is to ensure that those most impacted by cannabis criminalization and poverty have priority access to local equity program funding.



Tier B Eligibility Criteria	
Size of operation	Applicant has “small scale” cultivation as defined by Sonoma County’s ministerial (zoning) permit criteria as stated in Ordinance No. 6436 adopted June 6, 2023.
School district enrollment	Applicant is legal guardian of at least one child that has been enrolled in a Sonoma County School District for at least five (5) consecutive years prior to application.
Wildfire Damage	Applicant operating in the legal cannabis industry in Sonoma County who has been directly impacted (i.e.: damage to/loss of home or business) by wildfires in the County in the period from 2017 to present.
Participation in PRP	Applicant currently participates in or previously participated in the cannabis Penalty Relief Program (PRP).
Shift in Land Use Requirements	Applicant was cultivating on land zoned Agricultural Residential (AR) or Rural Residential (RR) when cannabis Ordinance No. 6189 adopted December 20, 2016, which did not allow for commercial cultivation in those zoning districts; or on a parcel under 10 acres in size when the minimum parcel size was raised per Ordinance No. 6245 adopted October 16, 2018.
Participation in Foster Care System	Applicant was a part of the foster care system.
Drug Diversion Program Completion	Applicant has completed a drug diversion program.
Residency consideration	Applicant has resided in Sonoma County for at least ten years in the period between 2011 and the present.
Veteran status	Applicant is a veteran of the United States Armed Forces.
Equity Licensee Status	Applicant is a verified Department of Cannabis Control Equity Licensee.

## Question

Which Tier B Criteria do you qualify for? Mark all that apply.

Size of Operation	School district enrollment
Wildfire Damage	Participation in Penalty Relief Program
Shift in Land Use Requirements	Participation in Foster Care System
Drug Diversion Program Completion	Residency consideration
Veteran status	DCC Equity Licensee Status

**NOTE: Documentation is required to verify the above.**

Documentation includes:

- Penalty Relief Program Local Authorization Letter
- Letter of confirmation of Department of Cannabis Control Equity Licensee status
- DD Form 214 or Veteran Status Verification Form
- Utility (PG&E, water, cellular phone) bill in applicant's name
- Rental or lease agreement with signatures and in the applicant's name
- School district certificate of enrollment or verification/proof of school enrollment

***\*Note that most information provided to the County is a public record, however, the County will not disclose confidential personal and financial information. If confidential information is not required to verify compliance with the eligibility criteria, please redact prior to submittal. Please mark or label any information submitted that you consider confidential.***

## Attestation and Signature

With this signature, I declare that I have carefully read the Sonoma County Cannabis Local Equity Program Manual and that the information provided in this application and in all attachments is true and correct. I also acknowledge that it is my responsibility to comply with the provisions of the Sonoma County Code and all laws, rules, and regulations that govern my application to be eligible for the Sonoma County Cannabis Local Equity Program. I acknowledge and understand that including false, misleading, or fraudulent information in this application may cause my application to be denied, for any funding agreement issued in reliance on it to be revoked, and disqualification from current and future equity program funding.

Click here to indicate that you have read and agree to the terms of the applicant attestation and agreement.

Applicant Name \_\_\_\_\_

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

