

Sonoma County Cannabis Local Equity Program Phase 1 Application

This application is used for Local Equity Program Phase 1 Application only.

Cannabis Local Equity Program Purpose and Application Process

Many rural communities in California were impacted significantly by the criminalization of cannabis, including Sonoma County. According to the Sonoma County Cannabis Equity Assessment (2021), 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 contains 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.

Eligibility Criteria

Individuals and not business entities are the only ones eligible to apply to the Cannabis Local Equity Program.

Those applicants/operators who meet one or both of the Tier A criteria listed below and provide verifiable documentation may be deemed *Verified Cannabis Equity Applicants/Operators*.

| Tier A Eligibility Criteria | |
|--|--|
| Applicant conviction and/or arrest history | Applicant was arrested and/or convicted of the sale, possession, distribution, use, manufacture, or cultivation of cannabis (including as a juvenile), or other non-violent cannabis-related crime, or been subject to asset forfeiture because of a cannabis-related offense between 1971 and 2016. |
| Family conviction and/or arrest history | Applicant with a parent, sibling, spouse, child, or a guardian/member of immediate household who was arrested for or convicted of the sale, possession, distribution, use, manufacture, or cultivation of cannabis (including as a juvenile). |



How to Apply

Please review the Cannabis Local Equity Program Manual and the beginning of this document 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 may be submitted via email to: Cannabis@sonoma-county.org

*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.



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Please print clearly or type answers.

Applicant/Operator Name _____

DBA Name (if applicable) _____

Mailing Address _____

Mailing City, State Zip _____

E-mail Address _____

Phone Number _____

Are you a current operator? Yes No

If yes, what is your Agricultural Cannabis Permit (APC), Cannabis Use Permit (UPC), or Cannabis Zoning Permit (ZPC) permit application file number?

If yes, what is your Department of Cannabis Control (DCC) License number and expiration date?

If no, do you plan to apply for an APC, UPC, or ZPC permit and when?

Review Tier A Eligibility Criteria before responding to the next questions.

In order to be deemed a Verified Equity Applicant/Operator, you must meet and provide verifiable documentation for at least one of the Tier A Eligibility Criteria listed below.

| Tier A Eligibility Criteria | |
|--|--|
| Applicant conviction and/or arrest history | Applicant was arrested and/or convicted of the sale, possession, distribution, use, manufacture, or cultivation of cannabis (including as a juvenile), or other non-violent cannabis-related crime, or been subject to asset forfeiture because of a cannabis-related offense between 1971 and 2016. |
| Family conviction and/or arrest history | Applicant with a parent, sibling, spouse, child, or a guardian/member of immediate household who was arrested for or convicted of the sale, possession, distribution, use, manufacture, or cultivation of cannabis (including as a juvenile). |



Questions

1. Were you arrested and/or convicted of the sale, possession, distribution, use, manufacture, or cultivation of cannabis (including as a juvenile), or other non-violent cannabis-related crime, or been subject to asset forfeiture because of a cannabis-related offense between 1971 and 2016?

Yes, I was arrested for a non-violent cannabis-related crime.

Yes, I was convicted of a non-violent cannabis-related crime.

Yes, I was subject to asset forfeiture because of a cannabis-related offense.

2. Was a parent, sibling, spouse, child, or a guardian/member of immediate household who was arrested for or convicted of the sale, possession, distribution, use, manufacture, or cultivation of cannabis (including as a juvenile)?

Yes, a family member (as described above) was arrested for a cannabis-related crime.

Yes, a family member (as described above) was convicted of a cannabis-related crime.

NOTE: Documentation is required to verify the above.

You can show proof of conviction or arrest or asset forfeiture using any of the following:

- Copies of federal or state court records that show the outcome of the case
- Records showing dismissal or expungement
- Any other court or law enforcement record that show proof of conviction or arrest
- Declarations from attorneys familiar with your conviction history
- Records documenting asset forfeiture

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 _____