

Court's Ex. **034**

Case # 37-2017-00010073-CU-BC-CTL

Rec'd \_\_\_\_\_

Dept. **C-73** Clk. \_\_\_\_\_

City of San Diego  
Development Services  
1222 First Ave., MS-302  
San Diego, CA 92101  
(619) 446-5000

THE CITY OF SAN DIEGO

# General Application

FORM  
**DS-3032**  
AUGUST 2013

1. **Approval Type:** *Separate electrical, plumbing and/or mechanical permits are required for projects other than single-family residences or duplexes* ☐ Electrical/Plumbing/Mechanical ☐ Sign ☐ Structure ☐ Grading ☐ Public Right-of-Way; ☐ Subdivision ☐ Demolition/Removal ☐ Development Approval ☐ Vesting Tentative Map ☐ Tentative Map ☐ Map Waiver ☒ Other: CUP

2. **Project Address/Location:** *Include Building or Suite No.*  
6176 Federal Blvd.

**Project Title:**  
Federal Blvd. MMCC

**Project No.:** *For City Use Only*  
**520604**

**Legal Description:** *(Lot, Block, Subdivision Name & Map Number)*

TR#:2 001100 BLK 25\*LOT 20 PER MAP 2121 IN\* City/Muni/Twp: SAN DIEGO

**Assessor's Parcel Number:**  
543-020-02

**Existing Use:** ☐ House/Duplex ☐ Condominium/Apartment/Townhouse ☒ Commercial/Non-Residential ☐ Vacant Land

**Proposed Use:** ☐ House/Duplex ☐ Condominium/Apartment/Townhouse ☒ Commercial/Non-Residential ☐ Vacant Land

## Project Description:

The project consists of the construction of a new MMCC facility

3. **Property Owner/Lessee Tenant Name:** *Check one* ☐ Owner ☒ Lessee or Tenant  
Rebecca Berry

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_ City: San Diego State: CA Zip Code: 92122 E-mail Address: becky@tfcscd.net

4. **Permit Holder Name** - This is the property owner, person, or entity that is granted authority by the property owner to be responsible for scheduling inspections, receiving notices of failed inspections, permit expirations or revocation hearings, and who has the right to cancel the approval (in addition to the property owner). SDMC Section 113.0103.

Name: Rebecca Berry Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_ City: San Diego State: CA Zip Code: 92122 E-mail Address: becky@tfcscd.net

5. **Licensed Design Professional** (if required): (check one) ☒ Architect ☐ Engineer License No.: C-19371

Name: Michael R Morton AIA Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_ City: San Diego State: CA Zip Code: 92104 E-mail Address: \_\_\_\_\_

6. **Historical Resources/Lead Hazard Prevention and Control** (not required for roof mounted electric-photovoltaic permits, deferred fire approvals, or completion of expired permit approvals) -

a. Year constructed for all structures on project site: 1951

b. HRB Site # and/or historic district if property is designated or in a historic district (if none write N/A): N/A

c. Does the project include any permanent or temporary alterations or impacts to the exterior (cutting-patching-access-repair, roof repair or replacement, windows added-removed-repaired-replaced, etc)? ☒ Yes ☐ No

d. Does the project include any foundation repair, digging, trenching or other site work? ☒ Yes ☐ No

I certify that the information above is correct and accurate to the best of my knowledge. I understand that the project will be distributed/reviewed based on the information provided.

Print Name: Abhay Schweitzer

Signature: [Signature] Date: 10/28/2016

7. **Notice of Violation** - If you have received a Notice of Violation, Civil Penalty Notice and Order, or Stipulated Judgment, a copy must be provided at the time of project submittal. Is there an active code enforcement violation case on this site? ☐ No ☐ Yes, copy attached

8. **Applicant Name:** *Check one* ☐ Property Owner ☐ Authorized Agent of Property Owner ☒ Other Person per M.C. Section 112.0102  
Rebecca Berry

Address: \_\_\_\_\_ City: San Diego State: CA Zip Code: 92122 E-mail Address: becky@tfcscd.net

**Applicant's Signature:** I certify that I have read this application and state that the above information is correct, and that I am the property owner, authorized agent of the property owner, or other person having a legal right, interest, or entitlement to the use of the property that is the subject of this application (Municipal Code Section 112.0102). I understand that the applicant is responsible for knowing and complying with the governing policies and regulations applicable to the proposed development or permit. The City is not liable for any damages or loss resulting from the actual or alleged failure to inform the applicant of any applicable laws or regulations, including before or during final inspections. City approval of a permit application, including all related plans and documents, is not a grant of approval to violate any applicable policy or regulation, nor does it constitute a waiver by the City to pursue any remedy, which may be available to enforce and correct violations of the applicable policies and regulations. I authorize representatives of the city to enter the above-identified property for inspection purposes. I have the authority and grant City staff and advisory bodies the right to make copies of any plans or reports submitted for review and permit processing for the duration of this project.

Signature: [Signature] Date: Oct 31 2016

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Upon request, this information is available in alternative formats for persons with disabilities.

DS-3032 (08-13)

Trial Ex. 034-001



City of San Diego  
Development Services  
1222 First Ave., MS-401  
San Diego, CA 92101  
(619) 446-5000

# Affidavit for Medical Marijuana Consumer Cooperatives for Conditional Use Permit (CUP)

FORM  
DS-190  
MARCH 2014

The purpose of this affidavit is for the property owner, authorized agent, or business owner of the Medical Marijuana Consumer Cooperative (MMCC) to affirm that all uses within 1,000 feet from the subject property line have been identified, including residential zones within 100 feet, as defined in San Diego Municipal Code (SDMC), Sections 113.0103 and 141.0614.

The proposed MMCC location must be 100 feet from any residential zone and not within 1,000 feet of the property line of the following:

1. Public park
2. Church
3. Child care center
4. Playground
5. City library
6. Minor-oriented facility
7. Other medical marijuana consumer cooperatives
8. Residential care facility
9. Schools

## GENERAL INFORMATION

Project Name:

Federal Blvd. MMCC

Project No.: For City Use Only

5201004

Project Address:

6176 Federal Blvd., San Diego, CA 92114

Date Information Verified by Owner or Authorized Agent:

10/28/2016

**DECLARATION:** *The property owner, authorized agent, or business owner of the Medical Marijuana Consumer Cooperative must complete the following section and sign their name where indicated.*

We are aware that the business described above is subject to the Medical Marijuana Consumer Cooperatives (MMCC) regulated by SDMC, Section 141.0614 and Chapter 4, Article 2, Division 15. We hereby affirm under penalty of perjury that the proposed business location is not within 1,000 feet, measured in accordance with SDMC, Section 113.0225, of the property line of any public park, church, child care center, playground, library owned and operated by the City of San Diego, minor-oriented facility, other medical marijuana consumer cooperative, residential care facility, or schools; and is 100 feet from any residential zone as identified on the 1000-foot radius map and spread-sheet submitted with the Conditional Use Permit application.

Property Owner or Authorized Agent Name: Check one ☒ Owner ☐ Agent

Telephone No.:

Mailing Address:

City:

State:

Zip Code:

Signature:

Date:

Business Owner Name:

Rebecca Berry

Telephone No.:

(858) 999-6882

Mailing Address:

5982 Gullstrand Street

City:

San Diego

State:

CA

Zip Code:

92122

Signature:

Rebecca Berry

Date:

Oct 31 2016

Printed on recycled paper. Visit our web site at [www.sandiego.gov/development-services](http://www.sandiego.gov/development-services).  
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DS-190 (03-14)



City of San Diego  
Development Services  
Attn: Deposit Accounts  
1222 First Ave., MS-401  
San Diego, CA 92101  
(619) 446-5000

## Deposit Account/Financially Responsible Party

FORM  
DS-3242  
AUGUST 2014

Project Address/Location: 6176 Federal Blvd. San Diego, CA. 92114  
Project No.: 520606 Internal Order No.: For City Use Only

Approval Type: Check appropriate box for type of approval requested:

- ☐ Grading ☐ Public Right-of-Way ☐ Subdivision ☐ Neighborhood Use ☐ Coastal ☐ Neighborhood Development  
☐ Site Development ☐ Planned Development ☒ Conditional Use ☐ Variance ☐ Vesting Tentative Map  
☐ Tentative Map ☐ Map Waiver ☐ Other: \_\_\_\_\_

Is the project subject to a Reimbursement Agreement? ☐ No ☐ Yes

If yes, provide Reimbursement Agreement Application Project Number or Resolution/Ordinance No.: \_\_\_\_\_

**Deposit Trust Fund Account Information:** A deposit into a Trust Fund account with an initial deposit to pay for the review, inspection and/or project management services is required. The initial deposit is drawn against to pay for these services. The Financially Responsible Party will receive a monthly statement reflecting the charges made against the account, and an invoice when additional deposits are necessary to maintain a minimum balance. The payment of the invoice will be required in order to continue processing your project. At the end of the project, any remaining funds will be returned to the Financially Responsible Party.

### FINANCIALLY RESPONSIBLE PARTY

Name/Firm Name:

Address:

E-mail:

Rebecca Berry

5982 Gullstrand Street

City:

State:

Zip Code:

Telephone:

Fax No.:

San Diego

CA

92122

**Financially Responsible Party Declaration:** I understand that City expenses may exceed the estimated advance deposit and, when requested by the City of San Diego, will provide additional funds to maintain a positive balance. Further, the sale or other disposition of the property does not relieve the individual or Company/Corporation of their obligation to maintain a positive balance in the trust account, unless the City of San Diego approves a Change of Responsible Party and transfer of funds. Should the account go into deficit, all City work may stop until the requested advance deposit is received.

☐ This is a continuation of existing Project No.: \_\_\_\_\_ Internal Order No.: \_\_\_\_\_

**NOTE:** Using an existing opened account may be allowed when:

1. Same location for both projects;
2. Same Financially Responsible Party;
3. Same decision process (Ministerial and discretionary projects may not be combined);
4. Same project manager is managing both projects; and
5. Preliminary Review results in a project application.

Please be advised: Billing statements cannot distinguish charges between two different projects.

Please Print Legibly.

Print Name:

REBECCA BERRY

Title:

PRESIDENT

Signature\*:

Rebecca Berry

Date:

10/31/16

\*The name of the individual and the person who signs this declaration must be the same. If a corporation is listed, a corporate officer must sign the declaration (President, Vice-President, Chairman, Secretary or Treasurer).

### FOR CITY USE ONLY

Project Title:

Federal Blvd. mmcc

Date Requested:

10/31/16

☐ Keep existing Project No.: \_\_\_\_\_ as lead or ☐ Use new Project No.: \_\_\_\_\_ as lead

### ACCOUNT CLOSURE AUTHORIZATION

Date Requested:

☐ Completed ☐ Inactive ☐ Withdrawn ☐ Collections

Print Name:

Signature:

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DS-3242 (08-14)



THE CITY OF SAN DIEGO

City of San Diego  
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1222 First Ave., MS-302  
San Diego, CA 92101  
(619) 446-5000

## Ownership Disclosure Statement

**Approval Type:** Check appropriate box for type of approval (s) requested: ☐ Neighborhood Use Permit ☐ Coastal Development Permit  
☐ Neighborhood Development Permit ☐ Site Development Permit ☐ Planned Development Permit ☒ Conditional Use Permit  
☐ Variance ☐ Tentative Map ☐ Vesting Tentative Map ☐ Map Waiver ☐ Land Use Plan Amendment • ☐ Other \_\_\_\_\_

**Project Title****Project No. For City Use Only**

Federal Blvd. MMCC

**Project Address:**

6176 Federal Blvd., San Diego, CA 92114

**Part I - To be completed when property is held by Individual(s)**

By signing the Ownership Disclosure Statement, the owner(s) acknowledge that an application for a permit, map or other matter, as identified above, will be filed with the City of San Diego on the subject property, with the intent to record an encumbrance against the property. Please list below the owner(s) and tenant(s) (if applicable) of the above referenced property. The list must include the names and addresses of all persons who have an interest in the property, recorded or otherwise, and state the type of property interest (e.g., tenants who will benefit from the permit, all individuals who own the property). A signature is required of at least one of the property owners. Attach additional pages if needed. A signature from the Assistant Executive Director of the San Diego Redevelopment Agency shall be required for all project parcels for which a Disposition and Development Agreement (DDA) has been approved / executed by the City Council. Note: The applicant is responsible for notifying the Project Manager of any changes in ownership during the time the application is being processed or considered. Changes in ownership are to be given to the Project Manager at least thirty days prior to any public hearing on the subject property. Failure to provide accurate and current ownership information could result in a delay in the hearing process.

**Additional pages attached** ☐ Yes ☒ No**Name of Individual (type or print):**

Darryl Cotton

☒ Owner ☐ Tenant/Lessee ☐ Redevelopment Agency**Street Address:**

6176 Federal Blvd

**City/State/Zip:**

San Diego Ca 92114

**Phone No:**

( 619 ) 954-4447

**Fax No:****Signature:****Date:**

10-31-2016

**Name of Individual (type or print):**☐ Owner ☐ Tenant/Lessee ☐ Redevelopment Agency**Street Address:****City/State/Zip:****Phone No:****Fax No:****Signature :****Date:****Name of Individual (type or print):**

Rebecca Berry

☐ Owner ☒ Tenant/Lessee ☐ Redevelopment Agency**Street Address:**

5982 Gullstrand St

**City/State/Zip:**

San Diego / Ca / 92122

**Phone No:**

8589996882

**Fax No:****Signature :****Date:**

10-31-2016

**Name of Individual (type or print):**☐ Owner ☐ Tenant/Lessee ☐ Redevelopment Agency**Street Address:****City/State/Zip:****Phone No:****Fax No:****Signature :****Date:**