

# Commercial Cannabis Activity License Acknowledgement Form

**COUNTY OF SAN MATEO**

Planning & Building Department

455 County Center, 2nd Floor | Mail Drop PLN 122  
Redwood City, CA 94063

TEL (650) 363-4161 | FAX (650) 363-4849  
www.planning.smcgov.org

This Acknowledgment Form must be submitted as part of your application for a Commercial Cannabis Activity License.

## COMMERCIAL CANNABIS ACTIVITY LICENSE ACKNOWLEDGEMENT FORM

Initial:

\_\_\_\_\_ I/we consent to on-site inspection of the parcel/premises during regular business hours prior to the issuance of a License. Pre-inspections may include, without limitation, access by employees or agents of the following: the County Planning and Building Department; County Code Compliance; County Division of Environmental Health; the applicable Fire Protection Agency; the County Sheriff's Office; the County Department of Agriculture/Weights and Measures; and the County Health System.

\_\_\_\_\_ I/we agree that all structures utilized for Commercial Cannabis Activities will be planned and built or modified in accordance with applicable California Building Codes.

\_\_\_\_\_ I/we understand that the information I provide with my application may be released as required by law, judicial order, or subpoena, and could be used in a criminal prosecution.

\_\_\_\_\_ I/we agree to defend, indemnify, and hold harmless the County from any claims and defense costs, including attorneys' fees or other loss connected with any legal challenge brought as a result of the County's review and/or approval of this license. I/we agree to execute a formal agreement to this effect in the form provided by the County and available for my inspection.

\_\_\_\_\_ I/we understand that the license application fee is non-refundable even if I/we cancel the request or the application is denied during the license application process.

\_\_\_\_\_ I/we acknowledge that without a complete application package this application may be delayed or denied.

\_\_\_\_\_ I/we recognize that the County of San Mateo reserves the right to request additional information if necessary to complete review or processing of the license application, and confirm or promote conformance to ordinance-specific requirements and standards.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_