



Shaping
our community
together

CITY OF **LACEY**

DEPARTMENT OF COMMUNITY DEVELOPMENT
420 College Street SE, Lacey, WA 98503 (360) 491-5642

| |
|----------------------|
| OFFICIAL USE ONLY |
| Date: _____ |
| Case #: _____ |
| Received By: _____ |
| Planner: _____ |
| Related Cases: _____ |
| |

COLLECTIVE GARDEN APPLICATION

Application Fee: \$100.00

| |
|-------------------------------------------------------------------------------------------------------------------------------|
| *Applicant/Property Owner Information |
| Owner: _____ |
| Mailing Address: _____ |
| Phone Number(s): _____ |
| E-mail Address: _____ |
| Signature: _____ |
| <i>* For projects with multiple owners, attach a separate sheet with above owner information and signatures.</i> |
| Applicant: _____ |
| Mailing Address: _____ |
| Phone Number(s): _____ |
| E-mail Address: _____ |
| *Authorized Representative: _____ |
| Mailing Address: _____ |
| Phone Number(s): _____ |
| E-mail Address: _____ |
| <i>*The authorized representative will be the primary staff contact for all project related questions and correspondence.</i> |

Project Information

Garden Name: _____

Property Description

Site Address: _____

Full Legal Description of Subject Property (attached):

Section: _____ Township: _____ Range: _____

Assessor Tax Parcel Number(s): _____

Security:

What measures will be taken to prevent access and theft of cannabis supplies and plants? _____

Attach a narrative describing how the proposed collective garden meets the below requirements:

Collective gardens shall meet the following standards as enumerated in LMC 9.44.160:

A. Location and Distance Restrictions.

- (1) No Collective Garden shall be permitted outdoors;
- (2) No Collective Garden shall be located within One Thousand (1000) feet of schools and youth-oriented facilities, as measured from edge of property line to edge of property line;
- (3) No Collective Garden shall be located within Five Hundred (500) feet of another permitted collective garden;
- (4) No Collective Garden shall be located in a manner that will allow the cannabis plants to be visible by the public.

B. Ownership and Limitation on Numbers. No more than one Collective Garden may be located on a legal parcel of land, and the parcel must be owned or leased to one of the members of the Collective Garden. A qualifying patient cannot be a member of more than one Collective Garden, and must be a member of one Collective Garden for at least thirty (30) days before transferring their membership to another Collective Garden. Each Collective Garden must maintain records of its membership demonstrating compliance with the provisions of this subsection. Such records shall be maintained and be subject to inspection by the City for no less than three years.

C. Allowed Zones Districts. Medical Cannabis Collective Gardens, as defined herein, shall be allowed in the Agricultural, Light Industrial, Industrial, General Commercial, Light Industrial/Commercial Districts and Central Business Districts 4 and 5 of the City and in no other locations.

Other Permits

As a result of establishing a collective garden will there be improvement or modifications made to any of the following:

| | | |
|--------------------|-----------|----------|
| Building | Yes _____ | No _____ |
| Electrical System: | Yes _____ | No _____ |
| Water System: | Yes _____ | No _____ |
| Sewer System: | Yes _____ | No _____ |
| Driveway: | Yes _____ | No _____ |

An application for a collective garden permit will be issued only in conformance with the laws of the State of Washington, City of Lacey Ordinance #1395 and LMC 9.44. Such issuance does not confer upon the members of the Collective Garden immunity from prosecution under federal law

I affirm, under penalty of perjury, that all answers, statements, and information submitted with this application are correct and accurate to the best of my knowledge. I also affirm that I am the owner of the subject site or am duly authorized by the owner to act with respect to this application. Further, I grant permission from the owner to any and all employees and representatives of the City of Lacey and other governmental agencies to enter upon and inspect said property as reasonably necessary to process this application and to monitor compliance with the Lacey Municipal Code. I agree to pay all fees of the City that apply to this application.

| | | |
|-------------------|-------------------------------------|-------------|
| _____ | _____ | _____ |
| Print Name | Signature of applicant | Date |
| _____ | _____ | _____ |
| Print Name | *Signature of property owner | Date |

*Written consent demonstrating the applicant is authorized to sign the application on behalf of the property may be attached in lieu of property owner signing this form.