# Sonoma County Cannabis Local Equity Program Phase 1 Application

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

### **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.

# **Eligibility Criteria**

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

Applicants/operators who meet any one of the Tier A criteria listed below <u>and</u> provide verifiable documentation may be deemed *Verified Cannabis Equity Applicants/Operators*.

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





| Low-income status             | Applicant whose household income is at or below the "Low Income 60% Area<br>Median Income" level based on the Department of Housing & Urban<br>Development (HUD) State and Local Program income limits (ILs) for Sonoma<br>County.* |  |
|-------------------------------|---|--|
| Residency in low<br>HDI areas | Applicant lived for at least five years between 1971 and 2016 in a census tract identified in the Portrait of Sonoma (2021) as having an American Human Development Index (HDI) of less than or equal to 6.19.**                    |  |

\*For an outline of the relevant Sonoma County income limits, please see the following link: <u>Income and</u> <u>Rent Limits (ca.gov)</u>.

\*\*For the list of American Human Development Index by census tract, please see the Portrait of Sonoma (2021) at the following link: <u>Portrait of Sonoma County (ca.gov)</u>.

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

Applications and supporting documents must be submitted via email to: <u>Cannabis@sonoma-county.org</u>





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| Please print clearly or type answ                  | /ers.                 |                                |                          |
|--|-----------------------|--------------------------------|--------------------------|
| Applicant/Operator Name                            |                       |                                |                          |
| Business Name (if applicable)                      |                       |                                |                          |
| Mailing Address                                    |                       |                                |                          |
| Mailing City, State Zip                            |                       |                                |                          |
| E-mail Address                                     |                       |                                |                          |
| Phone Number                                       |                       |                                |                          |
| Are you a current operator?                        | Yes                   | No                             |                          |
| If you are a current operator, is                  | your operation in th  | e unincorporated Coui          | nty or in a City?        |
|  | County                | City                           |                          |
| If in a City, which one?                           |                       |                                |                          |
| If you are a current operator, wl                  | nat is your permit ap | plication file number?         |                          |
| If you are a current operator, wi expiration date? | nat is your Departme  | ent of Cannabis Contro         |                          |
| If you are not a current operator                  | r, do you plan to apr | <br>Ily for a permit? If so, i | n which jurisdiction 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. If you meet and provide verifiable documentation for more than one of the Tier A Eligibility Criteria, you will receive more points toward prioritization of funding in Phase 2.

| Tier A Eligibility Criteria                   |   |  |  |  |
|---|---|--|--|--|
| Applicant conviction<br>and/or arrest history | Applicant was arrested and/or convicted of the sale, possession, distribution, use,<br>manufacture, or cultivation of cannabis (including as a juvenile), or other non-<br>violent cannabis-related crime, or been subject to asset forfeiture because of a<br>cannabis-related offense between 1971 and 2016.            |  |  |  |
| Family conviction<br>and/or arrest history    | Applicant with a parent, sibling, spouse, child, or a guardian/member of<br>immediate household who was arrested for or convicted of the sale, possession,<br>distribution, use, manufacture, or cultivation of cannabis (including as a juvenile),<br>or other non-violent cannabis-related crime between 1971 and 2016. |  |  |  |
| Low-income status                             | Applicant whose household income is at or below the "Low Income 60% Area<br>Median Income" level based on the Department of Housing & Urban Development<br>(HUD) State and Local Program income limits (ILs) for Sonoma County.   |  |  |  |
| Residency in low HDI<br>areas                 | Applicant lived for at least five years between 1971 and 2016 in a census tract<br>identified in the Portrait of Sonoma (2021) as having an American Human<br>Development Index (HDI) of less than or equal to 6.19.  |  |  |  |

#### 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.

No, I was not arrested, convicted, nor subject to asset forfeiture because of a cannabisrelated offense.





2. Was a parent, sibling, spouse, child, guardian, or member of your immediate household arrested for or convicted of the sale, possession, distribution, use, manufacture, or cultivation of cannabis (including as a juvenile) or other non-violent cannabis-related crime between 1971 and 2016?

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.

No, no family member (as described above) was convicted of a cannabis-related crime.

3. Is your household income at or below the "Low Income 60% Area Median Income" level for Sonoma County? For an outline of the relevant Sonoma County income limits, please see the following link: <u>Income and Rent Limits (ca.gov)</u>.

Yes, my household income is at or below the "Low Median 60% Area Median Income" level.

No, my household income is not at or below the "Low Median 60% Area Median Income" level.

4. Have you lived for at least five years between 1971 and 2016 in a census tract identified as having an American Human Development Index (HDI) of less than or equal to 6.19? For the list of HDI by census tract, please see the Portrait of Sonoma (2021) at the following link: <u>Portrait of Sonoma County (ca.gov)</u>.

Yes, I have lived for at least five years in a census tract having an HDI of less than or equal to 6.19.

No, I have not lived for at least five years in a census tract having an HDI of less than or equal to 6.19.

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

You can show proof of conviction, 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

You can show proof of low income by using any of the following:

- Individual federal tax returns, state tax returns, or W-2s
- At least two consecutive paystubs
- Proof of eligibility for a program that provides financial aid to adults without enough income or resources, such as CalFresh, MediCal, CalWORKS, supplemental security income, or social security disability





You can show proof of residency by using any **two** of the following:

- California Driver's License or State Identification Card
- Property tax bill or payment, or evidence that the owner is exempt from property tax payment
- Signed rental agreement, or deed or title to residential property
- Copies of state or federal tax returns
- School records
- Banking or credit card records
- Voter registration
- Credit reports
- Utility, cable, or internet billing or payment records
- Vehicle titles or proof of vehicle registration

The records must include the equity applicant's name, show an address in the jurisdiction, and be dated between 1971 and 2016. An immediate household member may include a spouse, child, stepchild, parent, stepparent, sibling, half-sibling, stepsibling, legal guardian, or grandparent.

\*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

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Date



