

# ***Medical Cannabis Cultivation Permit Application Requirements (Zoning and Use Permit) PJR-123***

**NOTE: Zoning Permits for Outdoor Cultivation under 10,000 square feet in Diverse Agriculture (DA) and Land Extensive Agriculture (LEA), and under 25 plants in Land Intensive Agriculture (LIA) are being processed by the Department of Agriculture, Weights and Measures. Any associated processing, structures, grading, etc will be processed at Permit Sonoma.**

**PURPOSE:** The Medical Cannabis Land Use Ordinance (Ord #6189) was adopted December 20, 2016 and created regulations related to Medical Cannabis Cultivation and related uses. No recreational cannabis uses or sales are currently allowed.

**ZONING PERMIT PROCEDURE:** The applicant submits a complete Medical Cannabis Cultivation application to the Planning Division at the Permit Sonoma zoning cubicle. After a complete application is submitted, a project planner in the Project Review Division is assigned to the project. The project planner reviews the proposal and all submitted information in detail and performs a site visit. The project also will go on referral to the Northwest Information Center and tribal governments for review of cultural resources. This is the only referral that will be sent. The planner will determine if the proposed project meets all of the criteria listed in the ordinance. If so, the planner will approve the project administratively. There is a ten (10) day appeal period for appeals of all administrative decisions to the Planning Commission. All cannabis permits will be issued for one year from the date of approval and will expire if not renewed.

**MINOR AND CONDITIONAL USE PERMIT PROCEDURE:** The applicant submits a complete Medical Cannabis Cultivation application to the Planning Division at the Permit Sonoma zoning cubicle. After a complete application is submitted, a project planner in the Project Review Division is assigned to the project. Referrals are sent to various Permit Sonoma Divisions, County departments, and State agencies for review, comment(s) and condition(s). The project planner then reviews all this information in detail and performs a site visit. The project planner then makes a decision on the level of environmental review required and carries out any necessary documentation consistent with the California Environmental Quality Act (CEQA).

After the environmental review is completed, the planner will either prepare to approve the project administratively or set a date for a public hearing before the Board of Zoning Adjustments. A notice of the public hearing or hearing waiver is posted at the property and sent to owners of the property within 300 feet of the site. If a hearing is scheduled, all interested persons are given an opportunity to comment on the proposed Use Permit at the public hearing. If the project is approved by the Board, there is a ten (10) day appeal period for appeals to the Board of Supervisors. All cannabis permits will be issued for one year from the date of approval and will expire if not renewed.



**Sonoma County Permit and Resource Management Department**  
2550 Ventura Avenue Santa Rosa CA 95403-2859 (707) 565-1900

[www.PermitSonoma.org](http://www.PermitSonoma.org)

Effective 04/06/18

**REQUIRED APPLICATION MATERIALS:** A complete application must include all of the following:

1.  Planning Application (PJR-001) signed by all property owners, officers and shareholders associated with operation.
2.  Indemnification Agreement form PJR-011, signed by the applicant.
3.  Owner/Agent Authorization Form (lease agreement, purchase contract, etc.), if applicant is not the property owner.
4.  Business Entity Documents and Authorization (articles of incorporation, etc.).
5.  Copy of current lease agreement, share-cropping agreement, etc.
6.  Statement of Operator Qualifications:
  - a. Disclose any felony convictions.
  - b. Include the number of employees (both permanent year-round and temporary) and if they are 21 years of age or older.
  - c. Please list and attach any other cannabis related applications that the operator(s) have applied for.
7.  Proposal Statement. This shall be a written statement that should include descriptions of how the operation meets all of the Development Criteria and Operating Standards in Section 26-88-254 of the Sonoma County Code including the following information:
  - a. Description of the Existing Use and Property
    - List and identify on site plan any existing easements (if private road show right to use for commercial purposes).
    - Describe any existing agricultural, commercial, and residential uses.
    - Yes  No Is the project subject to a Land Conservation (Williamson) Act Contract?What is the highest natural slope of cannabis cultivation? \_\_\_\_\_
  - b. Description of the Proposed Cannabis Use and Operational Plan
    - Include the types of cannabis use, sizes, and locations.
    - What structures are proposed? Does anything need to be legalized?
    - Will cannabis be processed (drying, curing, grading trimming) onsite? If not, list location of processing activity.
  - c. Description of how the project will meet the Medical Cannabis Land Use Ordinance Development Criteria (26-88-254(f)). Please provide copies of any studies or documentation in the following areas:
    - Number and type of facilities
    - Square footage of each cultivation area
    - Setbacks of all cultivation and outdoor activity areas to property lines.
    - Separation distance of property boundary of cultivation site to property line of sensitive uses.
    - List all existing structures and proposed uses and structures.
    - Biotic Resources – professional site assessment required.
    - Farmland Protection- Will crops be removed? If so, what 1:1 mitigation ratio is proposed (for indoor and mixed light only)?
    - Fire Prevention Plan – describe how proposal meets fire safe standards.
    - Grading and Access – define the slope of cultivation sites and access.

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Hazardous Materials – include list of nutrients, soil or medium types, pest control methods, etc.

If pesticides are used, provide a copy of current Operator Identification Number issued by the Sonoma County Department of Agriculture: \_\_\_\_\_

Outdoor Lighting Plan – Type and location of all lighting.

Stormwater Management Plan

Security and Fencing Plan including a thorough narrative and map of security details including the type of fencing materials and landscaping used for screening and the physical and passive security measures. This is kept confidentially, please provide the security information separate from the rest of the application materials.

d. Description of how the project will meet the Medical Cannabis Land Use Ordinance Operating Standards (26-88-254(g)). Please provide copies of any studies or documentation in the following areas:

Odor Control Plan.

Energy source use.

Hours of operation.

Outdoor activity areas and distance to property lines.

Waste Management Plan – describe how mediums, plant waste, and material waste will be handled.

Water Supply and Management Plan (see supplemental application attached).

Groundwater Monitoring Easement if Water Well (can be submitted after application is accepted).

Wastewater Management Plan – septic system, sewer system, etc.

8.  Location/vicinity map (8 ½ in. X 11 in.) showing where the project is located in relation to nearby lots, streets, highways and/or major natural features (e.g., location maps & road maps).

9.  Hydrogeological study, if applicable (SGMA Basins, Groundwater Availability Zone 3 and 4)

10.  Preliminary building and grading plans, including tenant improvements. (1 full set)

11.  Photographs, including aerials, of the proposed development site.

12.  Site plan. Include either a 24 in. x 36 in. or 11 in. x 17 in. site plan and one reduced site plan (8 ½ in. x 11 in.). This reduced site plan must clearly depict the information shown on the full-sized site plan. Full sized plans must be folded. Preparation of the site plan by a professional draftsman, architect, or engineer is strongly recommended. If the existing site is to be greatly modified by the proposed project (removal of existing buildings, vegetation), both an existing site plan and a proposed site plan are required.

a. All Site plans shall meet the Minimum Standard Site Plan Requirements (Form CSS-019) and include the following;

Cultivation area(s), which shall contain all plants both mature and immature.

Propagation area(s), if applicable.

Storage area/structure for pesticides and other agricultural chemicals as well as fuels.

Areas where composting of green waste will occur, if applicable.

Holding area for Cannabis scheduled for destruction.

Area(s) and structures where Cannabis will be processed, if applicable.

Area(s) for non-compostable refuse.

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- Area(s) where harvested Cannabis will be stored.
- 13.  At-Cost Project Reimbursement (Form PJR-095), if Use Permit.
- 14.  Filing fee – see the current Permit Sonoma Project Review Fee Schedule.

**APPLICANTS PROVIDING FALSE OR MISLEADING INFORMATION IN THE PEMRITTING PROCESS WILL RESULT IN REJECTION OF THE APPLICATION AND/OR NULLIFICATION OR REVOCATION OF ANY ISSUED PERMIT.**



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## Supplemental Application

### Water Use

Estimated total use in gallons each season, listed by each source of water: \_\_\_\_\_

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Water source (check all that apply):

- Municipal source (Must attach documentation.)
- Recycled water (Must attach documentation of source and permitted storage facility.)
- Surface water (Must attach documentation of water rights.)
- Well water / Groundwater Zone: \_\_\_\_\_

If using groundwater on any parcel, is the well located in a high or medium priority basin as defined by the State Department of Water Resources?  Yes  No

**If using groundwater, must attach copy of recorded easement allowing access to Sonoma County personnel.**

If located in groundwater zone 3 or 4 or in high or medium priority basin, attach:

1. Documentation to show that proposed use would not result in a net increase in water use on site, **OR**
2. A hydrogeological report prepared by a qualified professional providing supporting data and analysis and certifying that the onsite groundwater supply is adequate to meet the proposed uses and cumulative projected land uses in the area on a sustainable basis, and that the operation will not:
  - a. Result in or exacerbate an overdraft condition in basin or aquifer
  - b. Result in reduction of critical flow in nearby streams, **or**
  - c. Result in well interference at offsite wells

Is well equipped with a meter and sounding tube or other water level sounding device?

Yes  No

If yes, describe: \_\_\_\_\_

Describe your waste water management plan (how will you manage storm and waste water to prevent the movement of nutrients, sediment, and other contaminants either on site or sanitary sewer):

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# Planning Application

## PJR-001

**Application Type(s):**

- Admin Cert. Compliance
- Ag. Or Timber Preserve/Contract
- Conditional Cert. of Compliance
- Cert. of Modification
- Coastal Permit
- Zoning Permit for: \_\_\_\_\_

- Design Review Admin.
- Design Review Full
- General Plan Amendment
- Lot Line Adjustment
- Major Subdivision

File # \_\_\_\_\_

- Minor Subdivision
- Voluntary Merger
- Ordinance Interpretation
- Second Unit Permit
- Specific/Area Plan Amendment

- Use Permit
- Variance
- Zone Change
- Other: \_\_\_\_\_

**By placing my contact information (name, address, phone number, email address, etc.) on this application form and submitting it to Sonoma County PRMD, I understand and authorize PRMD to post this application to the internet or public information purposes, including my contact information.**

PRINT CLEARLY					
APPLICANT			OWNER (IF OTHER THAN APPLICANT)		
Name			Name		
Mailing Address			Mailing Address		
City	State	Zip	City	State	Zip
Day Ph ( )	Email		Day Ph ( )	Email	
Signature		Date	Signature		Date
OTHER PERSONS TO BE NOTIFIED (If listed they must sign application form)					
Name/Title			Name/Title		
Mailing Address			Mailing Address		
City	State	Zip	City	State	Zip
Day Ph ( )	Email		Day Ph ( )	Email	
Signature		Date	Signature		Date
PROJECT INFORMATION					
Address(es)				City	
Assessor's Parcel Number(s)					
Project Description					
Acreage			Number of new lots proposed		
Site Served by Public Water? <input type="checkbox"/> Yes <input type="checkbox"/> No			Site Served by Public Sewer <input type="checkbox"/> Yes <input type="checkbox"/> No		
TO BE COMPLETED BY PRMD STAFF					
Planning Area		Supervisory District		Latitude	
Longitude					
Current Zoning					
General Plan Land Use			Specific/Area Plan		
S.P. Land Use			Violation? <input type="checkbox"/> Yes <input type="checkbox"/> No		File No.
Application resolve planning violation? <input type="checkbox"/> Yes <input type="checkbox"/> No			Penalty application? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Previous Files					
Application accepted by			Date		
Approved by			Date		

# **Indemnification Agreement**

**PJR-011**

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"As part of this application, applicant agrees to defend, indemnify, release and hold harmless the County, its agents, officers, attorneys, employees, boards and commissions from any claim, action or proceeding brought against any of the foregoing individuals or entities, the purpose of which is to attack, set aside, void or annul the approval of this application or the adoption of the environmental document which accompanies it. This indemnification shall include, but not be limited to, damages, costs, expenses, attorney fees or expert witness fees that may be asserted by any person or entity, including the applicant, arising out of or in conjunction with the approval of this application, whether or not there is concurrent passive or active negligence on the part of the County. If, for any reason any portion of this indemnification agreement is held to be void or unenforceable by a court of competent jurisdiction, the remainder of the agreement shall remain in full force and effect."

\_\_\_\_\_  
Applicant Name

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Owner Name

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
File No.

**NOTE:** The purpose of the Indemnification Agreement is to allow the County to be held harmless in terms of potential legal costs and liabilities in conjunction with permit processing and approval.

**Sonoma County Permit and Resource Management Department**

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# At-Cost Project Reimbursement

PJR-095

PROJECT File: \_\_\_\_\_; request for \_\_\_\_\_

I, \_\_\_\_\_, the undersigned, hereby authorize the County of Sonoma to process the above referenced permit request in accordance with the Sonoma County Code. I am depositing \$ \_\_\_\_\_ as a *minimum* deposit to pay for County staff review, coordination and processing costs related to my permit request based on actual staff time expended and other direct costs. **In making this deposit, I acknowledge and understand that the deposit may only cover a portion of the total processing costs. Actual costs for staff time are based on hourly rates adopted by the Board of Supervisors in the most current Sonoma County fee schedule. I also understand and agree that I am responsible for paying these costs even if the application is withdrawn or not approved.**

I understand and agree to the following terms and conditions of this Reimbursement Agreement:

1. Time spent by County of Sonoma staff in processing my application and any direct costs will be billed against the available deposit. **"Staff time" includes, but is not limited to, time spent reviewing application materials, site visits, responding by phone or correspondence to inquiries from the applicant, the applicant's representatives, neighbors and/or interested parties, attendance and participation at meetings and public hearings, preparation of staff reports and other correspondence, processing of any appeals, responding to public records act requests or responding to any legal challenges related to the application. "Staff" includes any employee of the Permit and Resource Management Department (PRMD), the Department of Transportation and Public Works and/or the Office of the County Counsel.**
2. Staff will review the application for completeness and provide me with a good faith estimate of the full cost of processing the permit. This good faith estimate will be included in an At-Cost Fee Agreement. The At-Cost Fee Agreement shall be signed by the party responsible for payment of fees, and the requested additional deposit shall be submitted to PRMD to allow continued processing of the project.
3. If processing costs exceed the available deposit, I will receive quarterly invoices payable within 30 days of billing.
4. I understand that the County desires to avoid incurring permit processing costs without having sufficient funds on deposit. If staff determines that inadequate funds are on deposit for continued processing, staff shall notify me in writing and request an additional deposit amount estimated necessary to complete processing of my application. I agree to submit sufficient funds as requested by staff to process the project through the hearing process within 30 days of the request.
5. If the final cost is less than any additional deposits requested by the County (deposits that exceed the initial minimum deposit described above), the unused portion of the additional deposit will be refunded to me within 60 days of final project action.
6. If the final cost is more than the available deposit, I agree to pay the difference within 30 days of billing.
7. If I fail to pay any invoices or requests for additional deposits within 30 days, the County may either stop processing my permit application, or after conducting a hearing, deny my permit application. If I fail to pay any invoices after my application is approved, I understand that my permit may not vest and may expire, or may be subject to revocation. .



8. If the County determines that any study submitted by the applicant requires a County-contracted consultant peer review, I will pay the actual cost of the consultant review. This cost may vary depending on the complexity of the analysis. Selection of any consultant for a peer review shall be at the sole discretion of the PRMD Director or his designee. The estimated cost of the peer review shall be paid prior to the County initiating any peer review by consultant.
9. I agree to pay the actual cost of any public notices for the project as required by State Law and Local Ordinance.
10. I may, in writing, request a further breakdown or itemization of invoices, but such a request does not alter my obligation to pay any invoices in accordance with the terms of this agreement.
11. I agree to pay all costs related to permit condition compliance as specified in any conditions of approval for my permit/entitlement.

**Note: This agreement does not include other agency review fees or the County Clerk Environmental Document filing fees.**

Name of Property Owner or Corporate Principal Responsible or Appointed Designee for Payment of all County Processing Fees (*Please Print*):

Name of Company or Corporation (*if applicable*):

Mailing Address of the Property Owner or Corporation/Company responsible for paying processing fees:  
*If a Corporation, please attach a list of the names and titles of Corporate officers authorized to act on behalf of the Corporation*

Signature:\*

Date:

Email Address:

Phone Number:

**\*ATTENTION - The property owner (or Corporate principal) will be held responsible for all charges.**

# CANNABIS TRIP GENERATION FORM

## PJR-127

This form provides a method to determine if a traffic study is necessary. The thresholds for traffic studies are identified within the Guidelines for Traffic Impact Studies located on our website here: <http://sonomacounty.ca.gov/TPW/Roads/Services/Data-and-Resources/Traffic-Study-Guidelines/>

**Operator Name:** \_\_\_\_\_ **Location:** \_\_\_\_\_

**Type of Cannabis Operation and Square Footage:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Hours of Operation:** \_\_\_\_\_

**Special Hours (harvest, rush processing due to climatic conditions, etc.):** \_\_\_\_\_

- ADT means Average Daily Trips. For purposes of this form, provide traffic generation information in one-way trips. A round trip is counted as two trips and a vehicle driving to the property is counted as one trip. Some parts of this form require a multiplier of three to recognize a round trip and another inconsistent extra trip for lunch or other activities.
- Attach pages as necessary to more fully describe any of the items or circumstances found below.
- All employees should be counted regardless if they are full or part-time.
- Note the time of day these trips are occurring if possible.

### CANNABIS OPERATIONS

#### Cannabis Operations - Employee traffic using passenger vehicles, in average ADT

Item Description	Existing ADT		Proposed (year round) ADT		Proposed (harvest period) ADT		Proposed (processing period) ADT	
	# of employees	# of trips by employees	# of employees	# of trips by employees	# of employees	# of trips by employees	# of employees	# of trips by employees
<b>Cannabis production</b> (___ employees X 3 = ___ ADT)								
<b>Storage</b> (___ employees X 3 = ___ ADT)								
<b>Administrative</b> (___ employees X 3 = ___ ADT)								
<b>Sales</b> (___ employees X 3 = ___ ADT)								
<b>Processing</b> (___ employees X 3 = ___ ADT)								
<b>Other staff (describe):</b> _____								
<b>Totals</b>								



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Date: 08/16/2017

**Cannabis Operations - Truck traffic associated with cannabis operations (average ADT)**

Item Description	Existing	Proposed
<b>Cannabis importation</b> Truck loads per year: _____ Dates of activity __/__/__ to __/__/__ Vehicle type: _____		
<b>Cannabis disposal</b> Truck loads per year: _____ Dates of activity __/__/__ to __/__/__ Vehicle type: _____		
<b>Miscellaneous Deliveries</b> Truck loads per year: _____ Dates of activity __/__/__ to __/__/__ Vehicle type: _____		
<b>Cannabis transportation to distributor</b> Truck loads per year: _____ Dates of activity __/__/__ to __/__/__ Vehicle type: _____		
<b>Miscellaneous visitors, UPS, mail, garbage, etc., list items included:</b> _____		
<b>Totals</b>		

**CULTIVATION OPERATIONS**

**Employee trips associated with cultivation operations (growing of cannabis) in average ADT**

Item Description	Existing	Proposed
<b>Cultivation maintenance (year round)</b> (multiply # of employees X 3 for ADT)		
<b>Cultivation maintenance (part-time during peak season)</b> (multiply # of employees X 3 for ADT) Dates of activity: __/__/__ to __/__/__		
<b>Totals</b>		



**SUMMARY (During Non-harvest period)**

Item Description	Existing	Proposed
Employee traffic associated with cannabis operations		
Truck traffic associated with cannabis operations		
<u>Miscellaneous other traffic generators</u>		
<b>Totals</b>		

*Variation in ADT during the course of a typical full production year*

Month	Jan.	Feb.	Mar.	Apr.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.
<b>Totals</b>												



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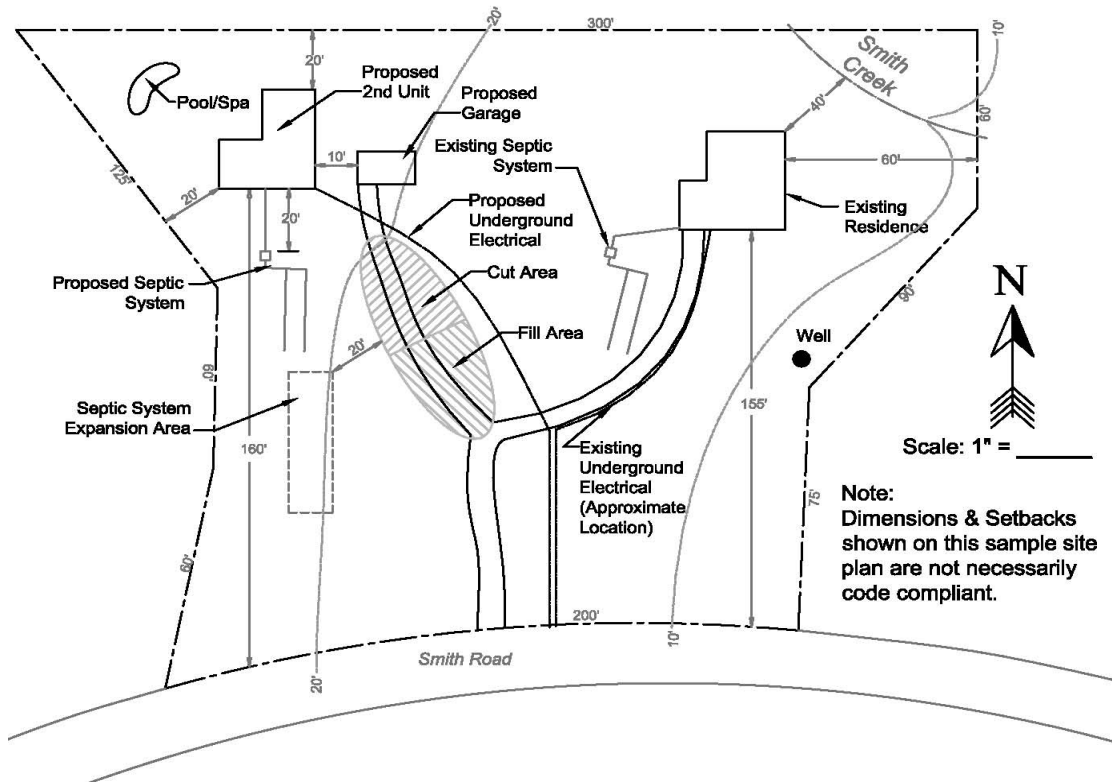
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Date: 08/16/2017

# Minimum Standard Site Plan Requirements

CSS-019

Site plans are required for most applications at the Permit and Resource Management Department\*. The graphic below depicts the requirements for most PRMD applications. Some minor Planning applications may not require this level of detail.



## Requirements:

1. All site plans must be drawn to scale. The site plan will be same size as rest of plans. The site plan shall be drawn to a recognizable architectural/engineering standard. Provide north arrow. Provide additional directions if hard to locate. Partial site plans may be submitted as long as a vicinity map for the property is provided. The vicinity map will show the full parcel including frontage streets and cross reference the area of the partial site plan. Partial site plans must show all required features as listed below. Aerial photos will not be accepted in lieu of the Standard Site Plan. Note: Planning may require a reduced size site plan.
2. **Existing Structures:** Show and label **all** existing structures including pool/spa and retaining walls. Show and dimension all property lines. Identify existing roads, driveways, waterways, drainage features, septic systems including expansion areas, sub drains, wells and underground utilities. Property lines and dimensions supplied by applicant are for representational purposes only and do not constitute an approval of the location by the County. While not required, it is the Owner's responsibility to have property lines surveyed.
3. **Proposed Structures/Improvements:** Identify **all** proposed structures including retaining walls. Dimension proposed structures to property lines, setbacks to septic systems, creeks, and other structures. Identify all proposed improvements including driveways, turnarounds, turnouts, areas to be graded, drainage features, power poles, and underground utilities.
4. If appropriate to specific applications (Project Review) include easements, right-of-ways, building envelopes, irrigated landscape areas or trees 8" diameter or larger within project building envelope for retention or removal.
5. **Contours** (lines denoting elevation of terrain) are required for all building permits subject to a site evaluation. Contours shall be shown and labeled at maximum vertical intervals of 10 feet. See Note #4 on reverse of this form for areas of special concern requiring contour intervals of two feet or less. See Notes #2 and #3 on reverse for exceptions to contour requirements and information regarding who can produce contours.
6. Show compliance with [Fire Safe Standards](#) required by Fire Services.

\*See notes on reverse side of this form.

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**Notes:**

1. A site plan is required for the following types of applications:

- New structures
- Additions which increase the footprint of the structure
- "As Built" structures
- Ag Exempt
- Demolition
- Grading
- Site Review
- Well
- Septic
- Request for Service
- Change of Occupancy
- All Planning Applications
- Property Reports
- Ordinance Determinations
- Interior remodels
- Pool/Spa

2. Contour lines are **not** required on site plans for the following types of applications:

- Demolition
- Well
- Request for Service
- Property Reports
- Ordinance Determinations
- Grading and Septic: contours are required on grading and often on septic plans, but the contours need not be shown on the site plan for these applications
- Interior remodels
- Roof or Ground Mounted Solar Systems
- Temporary Permits

3. The Business and Professional Code governs who can produce contours and what licenses are required in the State of California. PRMD will accept contours produced from the following person(s):

- Property owner (Business and Professions Code section 6744)
- California licensed surveyor (Business and Professions Code section 8726)
- California licensed civil engineer (Business and Professions Code sections 6731 and 6731.1)
- California licensed architect (Business and Professions Code sections 6737 and 5500.1)

4. The following may require contour intervals of two feet:

- Installing culverts, drainage pipes, swales, or other small drainage facilities
- Re-routing of existing or the creation of new swales, interceptor ditches, creeks or drainage pathways
- Filling of existing swales, ditches, creeks, wetlands or depressions
- Work within 100 feet of an existing waterway or creek (top of bank)
- Work in a waterway, creek or drainage swale (installing drainage outlet)
- Work within the Flood Prone Urban Area or within a 100 year flood plain
- Construction, paving or demolition of parking areas