



E-Mail: [cannabis.permit@culvercity.org](mailto:cannabis.permit@culvercity.org)  
Phone: (310) 253-5897  
Web: <http://www.culvercity.org/cannabis>

**Cannabis Business Permit Property Owner Consent Form – Page 1 of 1**

Property Address: \_\_\_\_\_

APN(s): \_\_\_\_\_

Legal Property Owner Name: \_\_\_\_\_

I, \_\_\_\_\_, \_\_\_\_\_, have read  
Authorized Person First and Last Name Title (owner, president, managing partner, managing member, trustee)

Culver City Municipal Code Chapter 11.17 and consent to the operation of \_\_\_\_\_,  
Primary Applicant Business Name

a proposed commercial cannabis business, at the property referenced above.

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

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

Cannabis Business Permit Primary Applicant Information:

Primary Applicant Representative First and Last Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Check all that apply:

- Property is leased to the Primary Applicant.       Property is optioned by the Primary Applicant.
- Property is optioned to more than one entity. (List others, below.)       Other (explain below)

\_\_\_\_\_  
\_\_\_\_\_

ACKNOWLEDGEMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of \_\_\_\_\_,  
County of \_\_\_\_\_

On \_\_\_\_\_ (Date) before me, \_\_\_\_\_ (Notary Name)  
personally appeared \_\_\_\_\_ (Property Owner Name), who  
proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within  
instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by  
his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the  
instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature \_\_\_\_\_ (Notary Public)

(Seal)