Memo to the Planning Commission

HEARING DATE: MAY 22, 2014 Continued from the May 1, 2014 Hearing 1650 Mission St. Suite 400 San Francisco, CA 94103-2479

Reception: 415.558.6378

Fax.

415.558.6409

Planning Information: 415.558.6377

Date: May 13, 2014
Case No.: **2013.1340 D**

Project Address: 1423 Ocean Avenue

Zoning: Ocean Avenue- NCT District

45-X Height and Bulk District

Block/Lot: 6941/063
Project Sponsor: Greg Schoepp

3615 Balboa Street

San Francisco, CA 94121

Staff Contact: Jessica Look – (415) 575-6812

jessica.look@sfgov.org

Recommendation: Take Discretionary Review and Approve the MCD with Conditions

BACKGROUND

This case was continued by request of the Commission to hear this item after the Department of Public Health hearing for Waterfall Wellness's permit (due to change of ownership). This would give the Commission a realistic understanding of the number of operating MCDs within proximity of the project site. In addition, the Commission requested the Department to work with community groups to obtain their position on the opening of Bay Area Compassion Health Center.

To date, the following letters from neighborhood/community based organizations have been submitted to the Planning Department and are included in this packet for your review.

- Ocean Avenue Association
- OMI Neighbors in Action
- West of Twin Peaks Central Council (2 Letters)
- Balboa Terrace Homes Association

In addition, after the hearing the Department has received 13 letters of opposition and/or concern of the opening of a 3rd Ocean Ave. MCD and 1 letter of support. These letters are included in the packet for your review.

CURRENT PROPOSAL

No changes have been made to the proposal since the May 1, 2014 hearing date. At the May 22 hearing, the Department will have an update from the Department of Public Health hearing that will occur on May 14, 2014.

Memo to Planning Commission Hearing Date: May 22, 2014 CASE NO. 2013.1340D 1423 Ocean Avenue

REQUIRED COMMISSION ACTION

In order for the project to proceed, the Commission must take discretionary review and approve the MCD with conditions.

To minimize the potential impact of the proposed use on the surrounding commercial area the following conditions are recommended for imposition on the project:

- 1. The operator of the establishment shall maintain the main entrance and all sidewalks abutting the subject property in a clean condition. Such maintenance shall include, at minimum, daily sweeping and litter pickup and disposal and washing or steam/pressure cleaning of the main entrance and abutting sidewalks at least once every month.
- 2. The project sponsor shall maintain appropriate odor control equipment to prevent any significant noxious or offensive odors from escaping the premises.
- 3. An enclosed garbage area shall be provided within the establishment. All garbage containers shall be kept within the building until pick-up by the disposal company.

BASIS FOR RECOMMENDATION

In 1996, California voters passed Proposition 215, known as the Compassionate Use Act, by a 56% majority. In San Francisco, Proposition 215 passed by a 78% majority. The legislation established the right of seriously ill Californians, including those suffering from illnesses such as AIDS, cancer and glaucoma, to obtain and use marijuana for medical purposes when prescribed by a physician.

MCDs began to be established in San Francisco shortly after Proposition 215 passed as a means of providing safe access to medical cannabis for those suffering from debilitating illnesses. At that time, San Francisco did not have any regulatory controls in place to restrict the placement and operations of the dispensaries. As a result, over 40 dispensaries were established in the city without any land use controls, often resulting in incompatible uses next to each other.

On December 30, 2005, the Medical Cannabis Act, as approved by the Board of Supervisors and Mayor, became effective. The Act, set forth in Ordinance 275-05 and supported by Ordinances 271-05 and 273-05, amended the Planning, Health, Traffic, and Business and Tax Regulation Codes in order to establish a comprehensive regulatory framework for MCDs in San Francisco.

The Act designates the Department of Public Health (DPH) as the lead agency for permitting MCDs. DPH conducts its own review of all applications and also refers applications to other involved City Agencies, including the Planning Department, in order to verify compliance with relevant requirements. The Planning Department's review is generally limited to the location and physical characteristics of MCDs.

• The MCD complies with all standards and requirements of the Planning Code and advances the objectives and policies of the General Plan.

- 1423 Ocean Ave. is well served by transit (K Ingleside Ocean Ave. MUNI Metro line runs along Ocean Ave. and the site is near Balboa BART station)
- 1423 Ocean Ave. is more than 1,000' from primary and secondary schools.
- 1423 Ocean Ave. is more than 1,000' from any active permitted youth-services facility.
- The project site has been fully renovated to provide a safe, well-lit environment for California Medical Marijuana Patients with proper identification cards.
- Employment levels are estimated to be between 15 to 20 jobs with comparable pay and benefits.

RECOMMENDATION: Take Discretionary Review and Approve the MCD with Conditions

Attachments:

- Submitted letters from Community Based Organizations to the Planning Department
- Submitted letters (other)

Ocean Avenue Association Statement on Medical Cannabis Dispensaries March 25, 2014

The Ocean Avenue Association, a San Francisco Community Benefits District, supports strong and successful businesses. We want to see businesses that share our mission and contribute to the Ocean Avenue community by attending OAA board meetings or the Street Life and Public Safety committee meetings, helping with monetary or volunteer labor contributions for our marketing or greening initiatives, or organizing their own events to promote the Ocean Avenue commercial district.

OAA recognizes that a diverse mix of useful retail businesses serves the community better than a concentration of similar businesses. Clustering does not provide the variety of retail services that are the backbone of a successful neighborhood commercial corridor that meets the needs of its residents. OAA therefore supports anti-clustering policies for the Ocean Avenue commercial corridor. OAA believes that no more than two Medical Cannabis Dispensaries are needed to provide full service on the Ocean Avenue commercial corridor.

A well-run MCD would be an asset in the district. A well-run MCD should have a written set of operating and emergency policies and procedures based on best practices to operate its business. These policies should be presented at a public meeting to provide important public comment. A significant aspect of a well-run MCD is the enforcement of city and state laws and regulations by the business. Also, an MCD should be able to properly conduct its business without intruding on other nearby businesses or the public right-of-way. The design and maintenance of the storefront is important to the successful operation of an MCD in the Ocean Avenue retail district. (See the recent Department of City Planning report on this subject for more details.) To sum up, an Ocean Avenue MCD, like any other business in the retail district, should strive to be a good neighbor and an active participant in the community.

Daniel Weaver, Executive Director
Ocean Avenue Association
1728 Ocean Ave., PMB 154
San Francisco, CA 94112
650-273-6223
oceanavenueassociation.org
info.oacbd@gmail.com

From: mary harris
To: Look, Jessica (CPC)

Subject: FW: OMI-NIA Letter of Support for BACH Date: Thursday, May 08, 2014 4:50:57 PM

OMI Neighbors In Action... A Community Organization of Neighbors Helping Neighbors

Members of the San Francisco Planning Commission, April 30, 2014

As President of the Oceanview, Merced Heights, Ingleside, Neighbors In Action, I would like to inform the Commission of the progress that the members of Bay Area Compassionate Health Center have made in reaching out to our community.

They have shown community engagement by volunteering at a planting event, attending meetings of community organizations including the Ocean Avenue Association as well as the OMI Neighbors In Action. Also, BACH organized a community meeting for April 30 to explain and respond to questions about their security plan and to allow neighbors to make input.

BACH is demonstrating a commitment to participating in the Ingleside community. They are willing to prepare a written security/operations plan and to seek community participation in developing the draft plan.

Therefore, OMI Neighbors In Action supports the application of the Bay Area Compassionate Health Center to establish an MCD in the community. OMI NIA looks forward to working with this new business proposed to open at 1423 Ocean Ave. in the future.

Mary Harris President (415) 584-1521 OMI Neighbors In Action 65 Beverly Street, San Francisco CA 94132 PO Box 27112

San Francisco, CA 94127

http://www.westoftwinpeaks.org/

March 25, 2014

San Francisco Planning Commission 1650 Mission Street, Suite 400 San Francisco, CA 94103-2414

RE: Report to Board of Supervisors concerning Medical Cannabis Dispensaries (MCDs)

Dear President Wu and Commissioners,

The West of Twin Peaks Central Council, an organization of twenty neighborhoods, requests that you take into account the following matters, and that appropriate changes be made to the Planning Commission's Report to the Board of Supervisors concerning Medical Cannabis Dispensaries (MCDs) consistent with the following:

The study does not address the compatibility of MCDs with NCT neighborhoods. In order for high density housing along transit rich corridors where residents take public transportation to work and walk to neighborhood serving retail to be successful, there must be a variety of businesses. This was not adequately addressed in the report.

To address this issue, consideration should be given to the imposition of a limit, or cap, on the total number of MCDs in an NCT corridor and in other Neighborhood Commercial zoned areas.

An example of an NCT zoned area which would benefit from such a cap is Ocean Avenue, west of the 280 Freeway. This area already has two MCDs, which is more than adequate to serve the needs of medicinal marijuana consumers in the area. Additional MCDs on this corridor will result in a concentration of MCDs on this neighborhood-serving retail street, crowding out businesses that serve the surrounding residential neighborhoods. Such a concentration will also result in more interaction between the MCDs and young people who walk to the several schools, a library and recreation facilities on the street.

In this regard, the report's suggestion of a possible reduction in the separation between MCDs and schools, and the elimination of the buffer around recreational facilities, does not address the resulting greater interaction between young students, MCDs and MCD customers in the vicinity of MCDs. Furthermore, there is no evidence presented by the report to suggest that reducing the distance between MCDs, schools and recreation facilities will result in a decreased concentration of MCDs.

The West of Twin Peaks Central Council therefore requests that the Planning Commission conduct further analysis of these issues and adopt a report to the Board of Supervisors which recommends: caps in the number of MCDs in NCT and other Neighborhood Commercial zoned areas; the preservation or increase in the required distance between MCDs and schools; and a requirement for similar separation between MCDs and libraries, recreation facilities and other facilities serving youth.

Sincerely,

Matt Chamberlain

President, West of Twin Peaks Central Council

May 12, 2014

West of Twin Peaks Central Council PO Box 27112 San Francisco, CA 94127

To: San Francisco Planning Commission 1650 Mission Street, Suite 400 San Francisco, CA 94103-2479

Dear Commissioners,

The West of Twin Peaks Central Council, an organization of twenty neighborhoods, has, since its inception in 1937, worked to maintain and improve quality of life for the residents of its neighborhoods. This work has included efforts to maintain the quality and diversity of businesses in the commercial areas that serve our neighborhoods. The Council, working closely with the City and neighboring organizations, secured the capital improvements made to Ocean Avenue in 1999 to 2001.

The Planning Commission approved the first Medical Cannabis Dispensary (MCD) on Ocean Avenue in response to statements that patients in our part of the City needed a nearby MCD where they could get their medicine. Now there are two MCDs on Ocean Avenue. Since the reason for approving a local MCD is to serve the neighboring population, and not simply to create another business opportunity, two MCDs on Ocean Avenue is sufficient to serve the needs of patients in the area, which is well served by public transit.

Additional MCDs on this corridor would constitute a concentration of MCDs on this neighborhood-serving retail street, crowding out businesses that serve the surrounding residential neighborhoods. Such a concentration would jeopardize the continued development of Ocean Avenue, which is now experiencing a renaissance of new cafes, housing units, and small shops that serve the residents of the area.

The proposed MCD is also less than 500 feet from the new Ingleside branch of the SF Public Library located at 1298 Ocean Ave. This branch has a vibrant program tailored to youth of all ages including after school math and reading tutoring and toddler story and playtime events. The proposed MCD would also be roughly equidistant between Aptos Middle School and Riordan High School. Students from both schools frequent the businesses on Ocean Ave., putting them in daily close proximity to the proposed MCD.

For these reasons, the Council, during its February 24, 2014 meeting, voted unanimously to oppose the issuance of a permit for a third Medical Cannabis Dispensary (MCD) on Ocean Avenue.

We therefore request that you deny the applicant's request for a permit to operate the proposed MCD at 1423 Ocean Avenue.

Sincerely,

Matt Chamberlain

President, West of Twin Peaks Central Council

cc: John Rahaim, Planning Director
Jonas P. Ionin, Planning Commission Secretary
Jessica Look, Planner
Norman Yee, District 7 Supervisor
Westwood Highlands Homeowner's Association
Ingleside Terraces Homes Association
Balboa Terrace Homes Association
Sunnyside Neighborhood Association

Westwood Park Association

Balboa Terrace Homes Association



P.O. Box 27642 San Francisco California 94127

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May 8, 2014

San Francisco Planning Commission 1650 Mission Street, Suite 400 San Francisco, CA 94103-2479

Dear Planning Commission,

The Balboa Terrace Homes Association opposes the allowance of a permit for a third Medical Cannabis Dispensary (MCD) on Ocean Avenue. Ocean Avenue is a transit corridor that is already served by a light-rail line, and the two existing MCD's are readily accessible and more than sufficient for the needs of any medical cannabis users. The allowance of a third MCD would seriously jeopardize the continued development of Ocean Avenue, which is now experiencing a renaissance of new cafes, stores, housing units, and small shops as a result of recent City investment in this corridor, and would threaten the peace and security of the residential neighborhoods for which Ocean Avenue is the main commercial street. Moreover, several schools are located on Ocean Avenue, including Commodore Sloat Elementary School, Aptos Middle School, and the Voice of Pentecost Academy. In addition to these schools, Archbishop Riordan High School, Lick-Wilmerding High School, and the City College of San Francisco are just a short walk away. Finally, the Ingleside Branch of the San Francisco Public Library, which has a very active children's section, is less than 500 feet from the proposed location of the MCD.

The Balboa Terrace Homes Association asks that NO new permits be granted for MCD's on Ocean Avenue under any circumstances. The Report to the Planning Commission on this issue does not adequately take into account our concerns that allowing any further MCD's would result in an increase in crime, negative impact on new business site location, and a general deterioration of the neighborhoods around Ocean Avenue, including Balboa Terrace.

Yours truly

Gerald Bernstein, President Balboa Terrace Homes Association

Herlew. Beend

From: Gail Dent

To: Look, Jessica (CPC)

Subject: another medical cannabis dispensary for Ocean Ave

Date: Tuesday, May 13, 2014 7:40:25 PM

We already have done our share. let some other neighbor hood do theirs.

From: <u>creps4@aol.com</u>

To: Look, Jessica (CPC); "Gommissions Secretary"@sfgov.org

Subject: Cannabis dispensary at 1423 Ocean

Date: Tuesday, May 13, 2014 10:29:35 AM

Please stop the planned THIRD medical cannabis dispensary from opening on Ocean Avenue. The city is trying to upgrade Ocean Ave. and this does NOT help. Ingleside Terraces is a lovely family neighborhood and the 1400 block of Ocean is an unholy mix of cannabis, tattoo parlors, "massage parlors" and billiards. I also understand that an e-cigarette store may move in. WHY is the planning commission allowing this stretch of Ocean to become a dumping ground?? We are trying to raise our children in a safe environment. Please help us.

Adrienne Sciutto and Irene Creps 883 Urbano Drive SF 94127 415-587-3313 From: <u>Carolyn Karis</u>

To: Look, Jessica (CPC); Yee, Norman (BOS); Rahaim, John (CPC)

Cc: Low, Jen (BOS); Mormino, Matthias (BOS)

Subject: 1423 Ocean Avenue MCD Mandatory Discretionary Review -- neighborhood opinion and opposition

Date: Monday, May 12, 2014 1:27:29 PM

May 12, 2014

Re: Mandatory Discretionary Review, 1423 Ocean Avenue

Dear Commissioners,

Thank you for continuing the matter of 1423 Ocean Avenue. I was present in the hearing room at the May 1 meeting and hoped to speak in opposition to a third MCD on Ocean Avenue; unfortunately I needed to leave before the time for public comments.

The Discretionary Review Analysis packet prepared on April 24 for the May 1, 2014, Planning Commission meeting included some interesting facts.

Neighbors are opposed to an additional MCD on Ocean Avenue. All of the emails contained in the packet are opposed to a third MCD on Ocean Avenue. However, these emails were dismissed as being "no official neighborhood group that voiced an opinion."

I do not understand why the 64 items cited by staff in support of 1423 Ocean Avenue (BACH) are credited while the 22 emails cited in opposition are regarded as less important, as no "neighborhood" opinion.

Reviewing the letters in support of BACH, one can gather the following facts: Facts gathered from http://commissions.sfplanning.org/cpcpackets/2013.1340D.pdf

Support for 1423 Ocean MCD included the following:

Stock letters of support with bullet points, undated -- 27

Stock letters of support with fill-in-the-blank name, undated -- 6

2 letters with no name or zip addressed to **Supervisors** Clausnitch and Yee (error: there is no Supervisor Brian Clausnitch; Ryan Clausnitzer is with the SF Department of Public Health)

2 letters with no name or zip address to Supervisor Yee Letter from UFCW5 (Cannabis division)--March 4, 2014 (signed by Brian Webster) Letter from Instituto Laboral de la Raza -- March 3, 2014 (unsigned but from Sarah Shaker)

Zips of the items in support of BACH-- (map and neighborhoods from http://www.healthysf.org/bdi/outcomes/zipmap.htm) 94014 --- 2 (Daly City)

94102--- 4 (Hayes Valley/Tenderloin/North of Market Street)

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94103 --- 5 (South of Market)
94109 --- 2 (Polk/Russian Hill)
94112 --- 8 (Ingleside-Excelsior/Crocker-Amazon)
94115 --- 1 (Western Addition/Japantown)
94122 --- 1 (Sunset)
94132 --- 4 (Lake Merced)
94134 --- 4 (Visitation Valley/Sunnydale)
94401 --- 1 (San Mateo)
no zip -- 3
no name or zip -- 4
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-- Most of these zips are not part of the Ocean Avenue neighborhood corridor.

Please note that the emails in Opposition in the DR Analysis packet contain no "stock letters"

1 Letter from resident on Granada

11 emails from neighbors (writers identify themselves as living in Westwood Park, Balboa Terrace, Ingleside Terraces, or in the neighborhood; one is from Tiara Mitchell, the current permit holder of Waterfall Wellness)

Some additional items and comments to share after reviewing the May 1, 2014, Planning Commission hearing video and captioned text:

- When questioned by Commissioner Sugaya, Jessica Look, in her reply, did not seem to consider individual emails from neighbors as important. Instead, she phrased her response as not receiving any official letter from neighborhood board of directors.
- Waterfall Wellness (WW) has been operating on a temporary (transitional) extension of the permit at 1545 Ocean Avenue (for about 3 months)
- People speaking in favor of BACH (1423 Ocean) said that they received great "compassionate" service from BACH; however, BACH does not yet have a permit to operate on Ocean Avenue.
- One speaker [Kyle], pro WW, stated he was confused about the services the speakers in favor of BACH mentioned since he recently saw them receiving their medicines/services at Waterfall Wellness.
- There is a dispute occurring between Greg Schoepp (1423 Ocean/BACH) and Waterfall Wellness (1545 Ocean), with Tiara Mitchell as current permit holder/manager. At the Ingleside Presbyterian community meeting of BACH, Schoepp said that he was "fired" from WW. At the 5/1/14 hearing, Daniel Mendez, the owner of the closed NorCal, the original dispensary at 1545 Ocean Avenue, accused Schoepp of theft and firing employees of WW. I do not know the truth behind this conflict, nor the resolution of the Department of Public Health hearing concerning the permits for these MCDs, but definitely do not wish to have MCDs clustered on Ocean Avenue. Two dispensary locations on Ocean Avenue are more than sufficient. Kaiser Permanente has one pharmacy location for the entire city of San Francisco.
- The DR Analysis and Jessica Look, at the hearing, stated that the MCD at 1423 Ocean Avenue "would allow on-site smoking and vaporization." They will have exhaust fans which will send the fumes out into the neighborhood.

Sincerely, Carolyn Karis Victoria Street, Ingleside Terraces San Francisco From: Bill Sugaya

To: Look, Jessica (CPC)

Subject: Fw: 1423 OCEAN AVE. MCD APPLICATION/DISCRETIONARY REVIEW CONTINUANCE

Date: Saturday, May 03, 2014 11:00:44 AM

---- Forwarded Message -----

From: Caryl Ito <carylito@aol.com>

To: cwuplanning@gmail.com; planning@rodneyfong.com; plangsf@gmail.com; richhillissf@yahoo.com;

mooreurban@aol.com; hs.commish@yahoo.com

Cc: norman.yee@sfgov.org; matthias.mormino@sfgov.org; woloso1@yahoo.com

Sent: Thursday, May 1, 2014 9:10 PM

Subject: 1423 OCEAN AVE. MCD APPLICATION/DISCRETIONARY REVIEW CONTINUANCE

Dear President Wu and commissioners:

I happened to turn on Ch. 78 late this afternoon to find out that this matter was on your agenda for the DR application.. I am a member of the Westwood Park Board of Directors and along with several neighborhood groups like Ingleside Terrace, Balboa Terrace, OMI, West Portal Assoc and the West of Twin Peaks Council, have all been communicating and working with Supervisor Yee on his legislation to require 500 ft between clinics and support having a "cap" on commercial corridors to avoid clustering clinics only in certain neighborhoods like Ocean Avenue.

We were not notified or aware that this matter was on your agenda and surprised your planning staff had not reached out to many of the organizations involved in this issue. So when Commissioner Sugaya raised the question to staff about "why" the neighborhood groups had not weighed in or attended tonight, I am also concerned about communication from the Dept to all of us.

Our Westwood Park Association strongly recommends a cap be made on commericial corridors like Ocean Ave which is about 5 blocks long and we have the two MCDs currently operating with the one Waterfall going under DPH review due to change of ownership.

We also have yet to meet with the new Bock group wanting to open the third location and this meeting has not been scheduled due to schedule conflicts so it is untrue that the owners have met with us. Also, I do not believe that the OMI or Ocean Ave Merchants have met to change their position to limit the # of clinics on Ocean as some individuals portrayed during public testimony.

A copy of the formal position letter will be following this email that had been sent to the Board of Supervisors concerning legislation that Supervisor Yee is sponsoring. We had no idea that this current application from Bock would be heard before the Board took up this matter.

Thank you for continuing this matter today until more facts become available to you to make the right decision. We do hope you take into consideration the matter of having more than 2 clinics in a commercial zone and avoid continuing to cluster these clinics only in certain neighborhoods.

Sincerely

Caryl Ito Westwood Park Association Board Member 415:334-6759, fax 415:334-3048 From: Rene Casis

To: <u>Yee, Norman (BOS); Look, Jessica (CPC)</u>
Subject: Latest development proposals on Ocean Avenue

Date: Tuesday, May 13, 2014 9:55:25 AM

Mr Yee / Ms Look,

As a resident of the area near Ocean Avenue, I am deeply concerned and, quite frankly, disappointed with your support for a third marijuana dispensary on 1423 Ocean Avenue and a e-cigarette/tobacco store on 1963 Ocean Avenue.

First, there are already two marijuana dispensaries on Ocean Avenue. A third is outright excessive. Though I am not morally against marijuana use, having three dispensaries in a concentrated areas will only encourage more such establishments and will have adverse impact on the commercial improvement of Ocean Avenue. In addition, given there are schools and a library in the area, it would be irresponsible of you to support businesses that will expose young children to this element.

Second, I see a high correlation of an e-cigarette/tobacco supply store proposed to open in light of a proposed third marijuana dispensary. In case you have not noticed, or do not care to consider, there is a public middle school adjacent to 1963 Ocean Avenue. Do you honestly think it is a good idea to have such a store open which would encourage the use of tobacco products?

I am unequivocally opposed to both of these proposals. I understand the neighborhood associations surrounding the area are also opposed and I am in agreement with them.

Mr Yee, when you ran for District 7 Supervisor, gave the impression you would impose positive change to the area. I hope you agree to OPPOSE the proposals of a third marijuana dispensary and a e-cigarette/tobacco store. Otherwise, you are practically pushing tobacco products to young children.

Ms Look, from what I have observed you seem skewed towards the supporters of these businesses and have failed to demonstrate the the opposing views. You have outright ignored the the opposition. You are ultimately silencing the majority who oppose this. Your support of this will negatively alter one of the few true residential and family-oriented areas of San Francisco. I urge you to do what is right for Ocean Avenue and the neighboring residents/families and OPPOSE the third marijuana dispensary and e-cigarette/tobacco store.

Rene Casis

From: Robert Karis

To: <u>Cindy Wu, Planning Commission President</u>; <u>Rodney Fong, Planning Commission Vice-President</u>; <u>Michael J.</u>

Antonini, Commissioner; Gwyneth Borden, Commissioner; Rich Hillis, Commissioner; Kathrin Moore,

Commissioner; Hisashi Sugaya, Commissioner; Secretary, Commissions (CPC)

Cc: Look, Jessica (CPC); Robert Karis

Subject: Medical Cannabis Dispensaries Should Be Limited to two On Ocean Avenue

Date: Thursday, May 08, 2014 12:23:30 PM

Dear Commissioners and City Planner:

At the Planning Commission hearing on May 1, 2014, agenda item 17, it was stated that "for the record, there was no official neighborhood group that voiced an opinion." I would like to correct that. On March 19, 2014, the Ocean Avenue Association voted that the maximum number of MCD's in the corridor be limited to two (current number) which is adequate and sufficient under the present conditions http://www.oceanavenueassociation.org/the_cbd/reports

Please include their letter in your May 22 hearing on this topic www.oceanavenueassociation.org/the_cbd/download/MCD%20Letter%203-25-2014.pdf

Ocean Avenue Association Statement on Medical Cannabis Dispensaries, March 25, 2014

The Ocean Avenue Association, a San Francisco Community Benefits District, supports strong and successful businesses. We want to see businesses that share our mission and contribute to the Ocean Avenue community by attending OAA board meetings or the Street Life and Public Safety committee meetings, helping with monetary or volunteer labor contributions for our marketing or greening initiatives, or organizing their own events to promote the Ocean Avenue commercial district.

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A well-run MCD would be an asset in the district. A well-run MCD should have a written set of operating and emergency policies and procedures based on best practices to operate its business. These policies should be presented at a public meeting to provide important public comment. A significant aspect of a well-run MCD is the enforcement of city and state laws and regulations by the business. Also, an MCD should be able to properly conduct its business without intruding on other nearby businesses or the public right-of-way. The design and maintenance of the storefront is important to the successful operation of an MCD in the Ocean Avenue retail district. (See the recent Department of City Planning report on this subject for more details.) To sum up, an Ocean Avenue MCD, like any other business in the retail district, should strive to be a good neighbor and an active participant in the community.

Daniel Weaver, Executive Director

Ocean Avenue Association 1728 Ocean Ave., PMB 154 San Francisco, CA 94112 6502736223 oceanavenueassociation.org info.oacbd@gmail.com
 From:
 George Wu

 To:
 Look, Jessica (CPC)

Subject: New Cannabis dispensaries on Ocean Avenue

Date: Tuesday, May 13, 2014 1:03:36 PM

I strenuously object to clustering MCDs on Ocean Avenue! Who is so irresponsible as to permit multiple MCDs in a corridor with city college, Aptos middle school, and Commodore Elementary School students. Do our supervisors ignore the research that shows the negative consequences on our youth with access to marijuana?! Stop the madness of the temptation and exposure of mind altering drugs to our youth. Stop offering more MCDs!

George Wu, MD

Sent from my iPhone

From: Rose Ann Anderson

To: Look, Jessica (CPC); Yee, Norman (BOS)

Subject: Ocean Ave marijuana shop
Date: Monday, May 05, 2014 3:49:18 AM

There are two MCDs on Ocean Avenue. Since the reason for approving a local MCD is to serve the neighboring population, and not simply to create another business opportunity, two MCDs on Ocean Avenue should be sufficient to serve the needs of patients in the area.

I strongly oppose a 3rd medical marijuana shop.

Rose Ann Anderson

From: Pat R

To: cwu.planning@gmail.com; planning@gmail.com; planning@gmailto:planning@gmailt

richhillissf@yahoo.com; mooreurban@aol.com; hs.commish@yahoo.com

Cc: Rahaim, John (CPC); Secretary, Commissions (CPC); Look, Jessica (CPC); Yee, Norman (BOS)

Subject: OPPOSITION TO 1423 OCEAN AVE MCD, CLUSTERING ON OCEAN AVE, PROTECTING MINOR RIGHTS!

Date: Thursday, May 08, 2014 11:18:05 PM

San Francisco Planning Commissioners

May 8, 2014

1650 Mission St., Suite 400

San Francisco, CA 94103-2414

Dear Commissioners:

My family and I have been long time residents of San Francisco, Ingleside Terraces. I attended the hearing on May 1, 2014 for MCD 1423 Ocean Ave, along with other IT and Balboa Terrace residents. We witnessed the under representation of concerned neighbors OPPOSITION letters and emails by City Planner Jessica Look. Unfortunately, I had to leave before the hearing was finished, however I finished watching the hearing on TV.

There is **strong opposition** by many neighborhood groups for anymore MCD's on Ocean Ave. West of Twin Peaks Central Council (WTPCC) sent a letter dated 3/25/14 to Cindy Wu, Planning Comm. Pres. that was not included in the 5/1/14 DR report. Westwood Park Board has been in communication with Supervisor Yee and submitted a letter to Planning Dept. Balboa Terrace Board will submit their letter to the Commission Dept opposing 1423 Ocean Ave. MCD.

I strongly oppose the approval of 1423 MCD on Ocean Ave. Two MCD's on Ocean Ave is more than adequate to serve the needs of medical cannabis consumers in the area. Additional MCD's on Ocean Ave would result in an **over concentration**, "clustering", of MCD's! Ocean Ave corridor serves a neighborhood that we have worked so hard to change. Newly upgraded Ocean Ave retail stores like Whole Foods, Ingleside Library, Yogurt land, three Yoga studios, and new Avalon Apartments all serve the community of all ages in a positive manner.

I advocate for the youth under 18 that have no vote on this issue. As parents, we work so hard to educate our children in San Francisco and keep them safe. The youth is the next generation of leaders in our community. It is not right to have three MCD's in a five block area where children walk or take MUNI to school. Minors have to pass through two MCD's locations with security guards, gated store fronts, and emitting a foul smell. What are you teaching our kids? Would the planning Department allow three **Starbucks** or **McDonald's** within 5

I urge you to read all the emails included in the May 1, 2014 DR packet, and all the emails and letters you will receive from neighbors and neighborhood associations **opposing 1423**Ocean Ave Bach MCD. We do not need a drive by pick up location conveniently placed by 280 exits to serve "patients" of other cities!

Additionally, I learned at the 5/1/14 hearing that 1423 Bach MCD would allow "smoking" on the premises. I oppose to having a "smoking allowed" MCD location because of fire hazard and the smoke would require extraction seven times in an hour. This foul smell would circulate to neighborhood residents and minors that would eat at nearby Ocean Pizza Restaurant at 1443 Ocean Ave (two stores down) or minors visiting Ingleside SF Library that is two blocks from 1423 Ocean MCD. Please keep children SAFE!

Concerned Ingleside Terraces Resident,

Pat Ryan

From: Robert Karis

To: Look, Jessica (CPC); Yee, Norman (BOS); Low, Jen (BOS); Mormino, Matthias (BOS)

Subject: Opposition to a new MCD at 1423 Ocean Avenue

Date: Tuesday, May 06, 2014 1:45:11 PM

Please consider the following at the Planning Commission Hearing on May 22, 2014.

The proposed Medical Cannabis Dispensary at 1423 Ocean Avenue would be the third MCD in five blocks, as there are existing MCD's at 1545 and 1944 Ocean Avenue. Ocean Avenue is a neighborhood that has been trying to improve itself for many years. The recent addition of a Chase Bank and Whole Foods, after more than 20 years without a bank or full-service grocery store, and the new library, is a cause for optimism. Turning Ocean Avenue into a center for cannabis distribution will be several steps backward.

I ask that the commissioners carefully read the emails from neighbors opposing a new MCD, which are found in the Discretionary Review Analysis for the hearing on 5/1/14, http://commissions.sfplanning.org/cpcpackets/2013.1340D.pdf starting on p. 120. P. 125 "we are hoping to see this area continue to grow and improve in a positive, family-friendly direction with businesses that make a positive impact to both the immediate community and the property value. Not with more businesses requiring bouncers at all hours" or armed guards and other elaborate security systems. The letters in favor of approval of a new MCD are primarily canned, from zip codes not adjacent to Ocean Avenue, some are not signed, and have mistakes that indicate a lack of familiarity with this neighborhood, such as mentioning living in the "Ingleside Terraces District" or being addressed to a "Supervisor Clausnitch."

The DR Analysis for the hearing on 5/1 p. 9 states that Proposition 215 "established the right of seriously ill Californians, including those suffering from illnesses such as AIDS, cancer and glaucoma, to obtain and use marijuana for medical purposes when prescribed by a physician." However, many observers believe that users are most commonly young adults who do not appear to be seriously ill. Unfortunately, the San Francisco DPH does not collect demographic data regarding age, sex, or diagnoses of medical cannabis users.

San Francisco has 28 permitted MCD's, clustered in downtown and Mission St. Many areas of of the City have no MCD's, such as the Sunset, West Portal, most of the Richmond District, North Beach, the Marina, Pacific Heights, Noe Valley, Bernal Heights, and the southeast part of the City. It is frequently stated that the reason these neighborhoods have no MCD's is because of the limited "green zones". The more likely reason that MCD's do not exist in these areas is because of neighborhood opposition. The Planning Commission is well aware of this opposition, having experienced it in the application for an MCD at 2139 Taraval St. in 2010, an application which ultimately failed. An examination of the map http://www.sf-planning.org/index.aspx?page=2486 shows that there are many locations available, if the neighborhoods thought that an MCD was a desirable addition. In southwest San Francisco there are potential locations on Irving and Judah Sts., Noriega St. (7 blocks, both sides of the street), Taraval St. (9 blocks, 27th Ave. to 36 Ave., both sides of the street), Sloat Blvd. (4 blocks), Park Merced, West Portal, Alemany Blvd., Outer Mission St., and Mission St. and Geneva Avenues.

Last month, the Planning Commission unanimously approved an anti-clustering ordinance that would require a conditional use for MCD's within 500 feet of each

other. 1423 Ocean Ave. is 400 feet from 1545 Ocean Ave. Although the new ordinance has not yet been put into effect, the same criteria should apply for the current application. Other factors are the DPH hearing for 1545 Ocean Avenue and the strong accusations made against the management of the new MCD (p. 129 of the DR Analysis of 5/1). Marijuana is a drug that is not approved by the federal government http://www.whitehouse.gov/ondcp/marijuanainfo/ It is completely unwarranted for San Francisco to force a struggling neighborhood to have several MCD's.

I ask the Commissioners to not approve the current application.

Sincerely, Robert Karis Victoria Street Ingleside Terraces From: Geoff Palmer

To: Look, Jessica (CPC); Secretary, Commissions (CPC); Yee, Norman (BOS); Low, Jen (BOS)

Subject: Opposition to third Medical Cannabis Dispensary at 1423 Ocean Avenue

Date: Monday, May 12, 2014 6:27:13 PM

Dear Ms. Look

"Daddy, do you smell the skunk again?

That about sums it up. My 5 and 9 year old kids are exposed to marijuana smoke on a regular basis when we walk along Ocean Avenue now. The "customers" of these marijuana stores have no qualms about exposing the general public to their stench.

There was such promise to the business strip after decades of being mired in semi-blight. It's been wonderful to experience the traffic calming and facelift of the Avenue's infrastructure. There have been some worthwhile stores opened that you actually want to patronize like Whole Foods. But sadly so many legitimate small businesses just can't make a go of it with the high cost relative to the low foot traffic. Too many business storefronts stay vacant for years, others flat out fail. So, what fills the void? Highly profitable "Medical Cannabis Dispensaries". Ooh, with a name like that, they must be real step up.

Medical? Yeah, right. Stand outside any of these places and watch young adult in hoodies saunter in and out. They may have problems (like life plans), but I doubt medical problems. It's truly tragic -- all the effort and expense to upgrade the strip only to see these pot stores proliferate. You wouldn't see this happening in Upper Fillmore, West Portal, or Chestnut Street.

Why does Ocean Avenue have this curse about it? You'd think with the surrounding established neighborhoods it would be a thriving place. But something in its overall design relegates it to be a limp-along, mediocre place which in turn attracts operations like this. I've spent 30 years looking at every angle and I'm stumped as to why it doesn't attract a critical mass of vigilant merchants and patrons.

Mark me down as being against this latest version of the corner liquor store.

Sincerely,

Geoff Palmer Ingleside Terraces

From: benmolyneaux@yahoo.com
To: Look, Jessica (CPC)

Subject: Please do no allow the Dispensary at 1423 Ocean Ave.

Date: Saturday, May 10, 2014 12:45:17 PM

Hi Jessica,

I wanted to write to express my family's disapproval about the potential opening of a medical marijuana dispensary at 1423 Ocean Avenue.

We live within 1,000 feet of the proposed location. Moreover, my wife runs a family home childcare (in our home) serving around 20 families from the community. This childcare facility is located within 1,000 feet of the proposed location. Even if the law does, in fact, currently permit dispensaries within 1,000 feet of a childcare facility, we believe that the planners should still factor this in when they make the final decision. I know of at least two more child care facilities within the 1,000 feet.

Additionally, the new Ingleside Library, almost right across the street from the proposed dispensary, serves as a community facility for children and adolescents. In fact, that appears to be its primary function, and it seems to have been built and designed with the goal of serving children and the community in mind. I don't believe this aspect was sufficiently considered in your last meeting about this subject. In addition to a large children's book section, the library has a very large activity room where children's activities are conducted every Tuesday morning and Wednesday night, as well as very frequently on the weekends. Also, every day after school, a large number of children and adolescents spend a lot of time at that library reading books, doing their homework, and waiting for their parents.

It was largely the efforts of the San Francisco City Government and Planning to redevelop the area that have led families and businesses to be attracted to this area. However, we feel that having so many medical dispensaries within such a small area is going against the efforts that San Francisco has made to improve the area, and it will instantly make the area less child and family friendly. We are afraid if this medical dispensary is permitted, people will feel less comfortable living and starting businesses in the area. Having to walk past such densely-concentrated guarded dispensaries while walking along Ocean Avenue would not be a pleasant experience for anyone, and we do not want this area to become pigeon-holed and primarily known for these kinds of facilities.

Thank you for your consideration, Ben Molyneaux

From: Robert Karis

To: <u>Cindy Wu, Planning Commission President; Rodney Fong, Planning Commission Vice-President; Michael J.</u>

Antonini, Commissioner; Gwyneth Borden, Commissioner; Rich Hillis, Commissioner; Kathrin Moore,

Commissioner; Hisashi Sugaya, Commissioner; Secretary, Commissions (CPC)

Cc: Look, Jessica (CPC); Robert Karis

Subject: West of Twin Peaks Central Council Letter to Planning re: Ocean Ave MCDs

Date: Thursday, May 08, 2014 12:46:56 PM

Dear Commissioners and City Planner:

At the Planning Commission hearing on May 1, 2014, agenda item 17, it was stated that "for the record, there was no official neighborhood group that voiced an opinion." I would like to correct that. In addition to the letter from the Ocean Avenue Association which I emailed to you, please include the following letter from the West of Twin Peaks Central Council dated March 25, 2014, in your May 22 hearing on this topic www.westoftwinpeaks.org/documents/2014-03-25%20-%20Letter%20to%20Planning%20Commission%20re%20MCD%27s.pdf

West of Twin Peaks Central Council

A Resource for Neighborhood Organizations West of Twin Peaks in San Francisco since 1936

PO Box 27112

San Francisco, CA 94127 http://www.westoftwinpeaks.org/

March 25, 2014

San Francisco Planning Commission, 1650 Mission Street, Suite 400 San Francisco, CA 94103-2414

RE: Report to Board of Supervisors concerning Medical Cannabis Dispensaries (MCDs)

Dear President Wu and Commissioners,

The West of Twin Peaks Central Council, an organization of twenty neighborhoods, requests that you take into account the following matters, and that appropriate changes be made to the Planning Commission's Report to the Board of Supervisors concerning Medical Cannabis Dispensaries (MCDs) consistent with the following:

The study does not address the compatibility of MCDs with NCT neighborhoods. In order for high density housing along transit rich corridors where residents take public transportation to work and walk to neighborhood serving retail to be successful, there must be a variety of businesses. This was not adequately addressed in the report.

To address this issue, consideration should be given to the imposition of a limit, or cap, on the total number of MCDs in an NCT corridor and in other Neighborhood Commercial zoned areas.

An example of an NCT zoned area which would benefit from such a cap is Ocean Avenue, west of the 280 Freeway. This area already has two MCDs, which is more than adequate to serve the needs of medicinal marijuana consumers in the area. Additional MCDs on this corridor will result in a concentration of MCDs on this neighborhood-serving retail street, crowding out businesses that serve the

surrounding residential neighborhoods. Such a concentration will also result in more interaction between the MCDs and young people who walk to the several schools, a library and recreation facilities on the street.

In this regard, the report's suggestion of a possible reduction in the separation between MCDs and schools, and the elimination of the buffer around recreational facilities, does not address the resulting greater interaction between young students, MCDs and MCD customers in the vicinity of MCDs. Furthermore, there is no evidence presented by the report to suggest that reducing the distance between MCDs, schools and recreation facilities will result in a decreased concentration of MCDs.

The West of Twin Peaks Central Council therefore requests that the Planning Commission conduct further analysis of these issues and adopt a report to the Board of Supervisors which recommends: caps in the number of MCDs in NCT and other Neighborhood Commercial zoned areas; the preservation or increase in the required distance between MCDs and schools; and a requirement for similar separation between MCDs and libraries, recreation facilities and other facilities serving youth.

Sincerely, Matt Chamberlain President, West of Twin Peaks Central Council From: Mike Regan
To: Look, Jessica (CPC)
Subject: MCD on Ocean Ave

Date: Monday, May 05, 2014 6:39:43 AM

Hi, I live in Ingleside Terraces and I know that some residences are writing regarding the third MCD on Ocean Ave, I just wanted to let you know that I am NOT opposed to a third dispensary on Ocean Ave.

I think that people should be given a larger choice of establishments to obtain their needed medicine.

Thanks

Michael Regan 66 Entrada Ct.

Discretionary Review Analysis

Medical Cannabis Dispensary HEARING DATE MAY 1, 2014

Date: April 24, 2014 2013.1340 D Case No.:

Project Address: 1423 Ocean Avenue

Ocean Avenue- NCT District Zoning:

Block/Lot: 6941 / 063 Project Sponsor: Greg Schoepp

3615 Balboa Street

San Francisco, CA 94121

Staff Contact: Jessica Look - (415) 575-6812

jessica.look@sfgov.org

Recommendation: Take Discretionary Review and Approve with Conditions

Planning 45-X Height and Bulk District 415.558.6377

1650 Mission St. Suite 400 San Francisco,

CA 94103-2479

415.558.6409

Reception: 415.558.6378

Fax:

PROJECT DESCRIPTION

The proposal is to establish a new Medical Cannabis Dispensary (dba "Bay Area Compassionate Health Center") at 1423 Ocean Avenue to replace a vacant ground floor commercial space that was last occupied by a retail service (dba "Golden Years Medical Home Health Care Products"). The proposed retail space contains approximately 2,472 square feet, of only 672 square feet will be accessible to patrons. No parking is required and no physical expansion is proposed as part of this project.

The proposed Medical Cannabis Dispensary (MCD) will dispense cannabis and cannabis foodstuffs. It would allow on-site smoking or vaporizing. The MCD will not have any live marijuana plants on site. In addition, any medical cannabis distributed on the premises will be grown outside of San Francisco. Tenant Improvements will be made in connection with this property to comply with Mayor's Office of Disability requirements. The proposed hours of operation are 10:00 AM to 10:00 PM, daily. The subject commercial space has approximately 16-feet of frontage on Ocean Avenue. The windows are proposed to be clear and unobstructed.

According to the project sponsor, Bay Area Compassionate Health Center is a family owned business. They currently serve over 8,000 patients mostly in the southwest neighborhoods of San Francisco, including Sunset, West Portal and Excelsior. They intend to fully comply with the comprehensive regulatory framework for MCDs in San Francisco.

The project sponsors will also maintain full-time security which includes indoor and outdoor video cameras. In addition, security guards will be employed both inside and outside of the location.

Planning Code Section 790.141 states that all MCDs are required to be heard by the Planning Commission, which will consider whether or not to exercise their discretionary review powers over the building permit application.

SITE DESCRIPTION AND PRESENT USE

The project is located on the southern side of Ocean Avenue, between Miramar and Granada Avenues, Block 6941, Lots 063 and 064. The property is located within the Ocean Avenue NCT (Neighborhood Commercial Transit) District with 45-X height and bulk district. The subject one-story building was constructed circa 1923. It occupies two lots and is developed with three commercial spaces. The proposed MCD would occupy only one storefront (furthest from Granada Ave.) The other two commercial spaces are currently occupied the paint store dba Sherwin Williams.

The subject building is located in the mid-block, with approximately 52 feet of frontage. The proposed MCD store frontage, however is only 16 feet.

SURROUNDING PROPERTIES AND NEIGHBORHOOD

The Ocean Avenue Neighborhood Commercial Transit corridor is characterized by multi-purpose transit oriented small-scale commercial uses, one- or two-story buildings, and containing neighborhood serving uses from Phelan Avenue to Manor Drive, such as salons, cleaners, retail stores, and restaurants. The retail frontage is interrupted at several locations by larger buildings such as multi-family residential apartments and churches. The subject site is within a Mayor's Invest in Neighborhoods Initiative Area and within a Community Benefit District (Ocean Avenue CBD).

Ocean Avenue was recently transformed by Avalon Bay's 173 unit market rate housing with a new Whole Foods on the ground floor. The site also falls in the Balboa Park Station Area Plan adopted in 2000, which one of the 3 key principles is to improve the economic vitality of the Ocean Avenue Neighborhood Commercial District.

There are two other existing MCDs in the area. The first is located at 1545 Ocean Ave dba "Waterfall Wellness Health Center: This MCD was approved via the Mandatory Discretionary Review process on October 10, 2007 (Case No. 2007.0631D) and is currently operating. Waterfall Wellness Health Center is located one block away. The second MCD is located at 1944 Ocean Avenue dba 1944 Ocean Avenue Collective. This MCD is about 5 blocks away and outside the 1,000 foot buffer.

Additionally, Waterfall Wellness is going through a change of ownership and will have a hearing before the Director of the Department of Public Health. The Department of Public Health is delaying this hearing until 1423 Ocean Avenue MCD DR case is heard before the Planning Commission.

ISSUES AND OTHER CONSIDERATIONS

Adjacent Land Uses

Three sites within 1,000 feet of the project site require further discussion. They are the OMI Family Center, the San Francisco Public Library Ingleside Branch, and the Ingleside Presbyterian Church and Ingleside Community Center (both located in the same building).

OMI Family Center is located at 1701 Ocean Avenue near the corner of Faxon Avenue and Ocean Avenue, about 3 blocks away. The OMI Family Center provides full range outpatient services to individuals and families including individual, group and family counseling, assessment, psychiatric evaluation and involuntary hospitalization when necessary. The site also offers psychotherapy and case management to individuals of all ages. Finally, it serves as point of entry to adult clients entering community mental health services. The center is a registered provider through the San Francisco Department of Public Health, Community Behavioral Health Services and provides services to a wide range of ages, not those primarily 18 and under.

The second site is the San Francisco Public Library, Ingleside branch. The library is located at 1298 Ocean Avenue and this branch was opened on September 12, 2009. The library's collection includes adult, teen and children books and the location has a teen and children's room. There is also a public meeting room for community use. Staff has requested additional information from the South West District Manager, Terry Gwiazdowski, who has provided statistics from FY 2012-2013 of the Ingleside which show that 52.17 % of the books checked out from this branch are for adult (in comparison, teen books- 8.81% and juvenile books - 39.02%). The Department however, has determined that libraries are intended to serve and be a community resource for all ages, not those primarily for those under 18.

Finally, it be been brought to the attention to the Department that the Ingleside Community Center operates out of the Ingleside Presbyterian Church at 1345 Ocean Avenue. The Ingleside Community Center has been operating at this site 25 years and has a 501c3 nonprofit status. It was started by Reverend Roland Gordon (aka Rev. G), the head pastor of the church and considered by many to be a community leader.

The Center does not have a child care license through the state, as it is license-exempt. The after school program operates Monday thru Thursday (3pm-6pm) and services K-12 grade students with tutorial, computer, art and recreational activities. According to the director, Ms. Martha Quinn, most students are dropped off at the church and are from various locations of San Francisco. There are roughly 10-15 students there daily, between 3 – 6, Monday through Thursday.

The Ingleside Presbyterian Church does provide other services besides the Community Center, which include weekly church service, AA meetings, and a Community Food Program. The Church has been at that location for 105 years. According to Reverend Roland Gordon, the building, which contains both the Church and the Community Center, is intended to serve all members of the community, not just those under 18. The Zoning Administrator has also reviewed this information and concurred that the community center is an accessory use of the church, and the building as a whole operates and provides services to all ages, not just those primarily under 18. Thus the project complied with Planning Code Section 790.141.

Pending Legislation: MCD Controls within the Ocean Avenue NCT

There is currently pending legislation that was introduced on February 4, 2014 by Supervisor Norman Yee and was approved at the Planning Commission on April 4, 2014. The ordinance would amend the Planning Code to require that in the Ocean Avenue NCT, a MCD may be allowed within 500 feet of another MCD as a conditional use, and includes a provision that directs the removal of these controls if the City adopts a City-wide anti-clustering controls for MCDs. Essentially, uses subjected to CU approval are not permitted unless the Commission finds that the use is necessary or desirable and compatible with the community. A CU is appealable to the Board of Supervisors, while a use permit subject to a DR hearing is appealable to the Board of Appeals.

The proposed Ordinance includes the following findings for the Commission to use when evaluating MCD applications subject to CU approval:

- (b) The Planning Commission shall approve the application and authorize the conditional use if, in addition to the application's satisfying the requirements of Planning Code Section 303, the facts presented establish that:
 - (1) the MCD will bring measurable community benefits and enhancements to the Ocean Avenue NCT District;
 - (2) the MCD has prepared a parking and transportation management plan sufficient to address the anticipated impact of patients visiting the MCD; and
 - (3) the MCD has demonstrated a commitment to maintaining public safety by actively engaging with the community prior to applying for the Conditional Use, including adequate security measures in its operation of the business, and designating a community liaison to deal effectively with current and future neighborhood concerns.
- (c) In addition to the above criteria, in regard to a Conditional Use authorization application, the Planning Commission shall consider the existing concentrations of MCDs within the District.

It is estimated that if this legislation is approved by the Board of Supervisors, the Planning Code amendment will be in effect in early June. The applicant is aware of the implications of the pending legislation, but still wanted to bring this DR to the Planning Commission as soon as possible. If the proposed legislation were adopted, it would require a conditional use, as 1423 Ocean Avenue is within 500' of another MCD (dba "Waterfall Wellness Health Center" at 1545 Ocean Avenue).

The Project Sponsor has developed a security plan for the operation of the proposed MCD. This program includes the following physical security enhancement equipment including physical barriers, electronic systems, access control, video surveillance, and security personnel. There will also be a 24 hour electronic surveillance system consisting of 24 cameras. There will also be an alarm system controlled by a keypad and monitored 24 hours a day. Security lighting will also be mounted to each exterior wall. In addition, there will be patient entry procedures pertaining to first time patients, returning patients and for caregivers. All staff/management/security guards will receive training on the collective's Anti-Diversion policy. Any patients found to be unlawfully diverting medical cannabis will have their membership

permanently revoked. Finally, all surrounding businesses and neighbors will be given a contact care with numbers of the store and of managers if any issue occurs.

This project has been designed to be a Code compliant establishment including day time hours of operation that is permitted as-of-right (Planning Code Section 737.27) as well as façade design that complies with Neighborhood Commercial District street frontage requirements (Planning Code Section 145.1) for openings and visibility.

HEARING NOTIFICATION

ТҮРЕ	REQUIRED PERIOD	REQUIRED NOTICE DATE	ACTUAL NOTICE DATE	ACTUAL PERIOD
312 Posted Notice	30 days	January 13, 2014	January 13, 2014	30 days
312 Mailed Notice	30 days	January 13, 2014	January 13, 2014	30 days
DR Posted Notice	30 days	April 1, 2014	March 28, 2014	32 days
DR Mailed Notice	30 days	April 1, 2014	March 28, 2014	32 days

PUBLIC COMMENT

	SUPPORT	OPPOSED	NO POSITION
Adjacent neighbor(s)			
Other neighbors on the			
block or directly across			
the street			
Neighborhood groups or	X	X	
others	Λ	Α	

According to the project sponsors, Bay Area Compassionate Health Center has conducted outreach to neighborhood associations including the Ocean Avenue Association, the Ingleside Terraces Home Association, the Westwood Park Neighborhood Association, the Sunnyside Association, OMI Neighbors in Action as well as Reverend Roland Gordon at the Ingleside Presbyterian Church. The project sponsor has prepared a Neighborhood Outreach Summary which is included in the enclosed attachments.

In addition, the project sponsor has provided 39 letters in support of the proposal, with some reasons being that community members needs a safe and convenient location to obtain medicine, and that legally regulated dispensaries actually benefit the local community by stimulating local business.

The Department has received 12 letters in opposition from adjacent residents. Neighbors are generally concerned with the clustering of MCDs (as two are in operation along Ocean Ave), incompatibility with existing land uses and family friendly environment along the corridor. Some residents also feel that this project will go against the recent revitalization efforts of the area, such as the new Whole Foods and new library.

The Department has received four phone calls objecting to the use. Callers have stated that there are numerous MCDs already existing in close proximity to the subject site.

Staff has not received any correspondence from adjacent business owners, nor from any neighborhood associations or merchants associations.

PROJECT ANALYSIS

MEDICAL CANNABIS DISPENSARY CRITERIA

Below are the six criteria to be considered by the Planning Commission in evaluating Medical Cannabis Dispensaries, per Planning Code Section 790.141:

1. That the proposed site is located not less than 1,000 feet from the parcel containing the grounds of an elementary or secondary school, public or private, or recreation buildings as defined by Section 221(e) of the Planning Code.

Project Meets Criteria

The subject parcel is not located within 1000' of an elementary or secondary school, public or private, or active recreation buildings or permitted community centers which primarily serve persons 18 years or less as defined by Section 790.141 of the Planning Code. An MCD on this block would therefore be a highly compatible use.

2. The parcel containing the MCD cannot be located on the same parcel as a facility providing substance abuse services that is licensed or certified by the State of California or funded by the Department of Public Health.

Project Meets Criteria

The subject parcel does not contain a facility providing substance abuse services that is licensed or certified by the State of California or funded by the Department of Public Health.

3. No alcohol is sold or distributed on the premises for on or off site consumption.

Project Meets Criteria

No alcohol is sold or distributed on the premises for on or off-site consumption.

4. If Medical Cannabis is smoked on the premises the dispensary shall provide adequate ventilation within the structure such that doors and/or windows are not left open for such purposes resulting in odor emission from the premises.

Project meets Criteria

The proposed MCD will provide adequate ventilation within the structure.

5. The Medical Cannabis Dispensary has applied for a permit from the Department of Public Health pursuant to Section 3304 of the San Francisco Health Code.

Project Meets Criteria

The applicant has applied for a permit from the Department of Public Health.

6. A notice shall be sent out to all properties within 300-feet of the subject lot and individuals or groups that have made a written request for notice or regarding specific properties, areas or Medical Cannabis Dispensaries. Such notice shall be held for 30 days.

Project Meets Criteria

A 30-day notice was sent to owners and occupants within 300-feet of the subject parcel identifying that a MCD is proposed at the subject property and that the building permit was subject to a Mandatory Discretionary Review Hearing.

GENERAL PLAN COMPLIANCE:

The Project is, on balance, consistent with the following Objectives and Policies of the General Plan:

COMMERCE AND INDUSTRY

Objectives and Policies

OBJECTIVE 1:

MANAGE ECONOMIC GROWTH AND CHANGE TO ENSURE ENHANCEMENT OF THE TOTAL CITY LIVING AND WORKING ENVIRONMENT.

Policy 1.1:

Assure that all commercial and industrial uses meet minimum, reasonable performance standards.

The location for the proposed MCD meets all of the requirements in Section 790.141 of the Planning Code.

OBJECTIVE 7:

ENHANCE SAN FRANCISCO'S POSITION AS A NATIONAL AND REGIONAL CENTER FOR GOVERNMENTAL, HEALTH, AND EDUCATIONAL SERVICES.

Policy 7.3: Promote the provision of adequate health and educational services to all geographical districts and cultural groups in the city.

The chronically ill patients who would be served by the proposed use are in great need of this type of medical service. By allowing the services provided by the MCD, its patients are assured to safe access to medication for their aliments.

SECTION 101.1 PRIORITY POLICIES

Planning Code Section 101.1 establishes eight priority policies and requires review of permits for consistency, on balance, with these policies. The Project complies with these policies as follows:

1. Existing neighborhood-serving retail uses be preserved and enhanced and future opportunities for resident employment in and ownership of such businesses enhanced.

The proposed use is a neighborhood serving use. The location for the MCD is currently vacant so the new use will not displace a previous neighborhood serving use.

2. That existing housing and neighborhood character be conserved and protected in order to preserve the cultural and economic diversity of our neighborhoods.

The project occupies a ground floor commercial space and will adhere with all signage regulations defined in Article 33 of the Health Code to help preserve the existing neighborhood character. The proposed use would not adversely affect the existing neighborhood character.

3. That the City's supply of affordable housing be preserved and enhanced.

The exiting building is occupied by non-residential uses so the proposed use will not displace any affordable housing.

4. That commuter traffic not impede MUNI transit service or overburden our streets or neighborhood parking.

The site is close to multiple public transit lines and the immediate neighborhood provides sufficient short-term parking so the use will not impede transit operations or impact parking.

5. A diverse economic base be maintained by protecting our industrial and service sectors from displacement due to commercial office development, and that future opportunities for resident employment and ownership in these sectors be enhanced.

The subject building is vacant and will not displace any industrial or service industry establishments.

6. The City achieves the greatest possible preparedness to protect against injury and loss of life in an earthquake.

The MCD will follow standard earthquake preparedness procedures and any construction would comply with contemporary building and seismic codes.

7. Landmarks and historic buildings be preserved.

The subject building will not be altering the front façade.

8. Parks and open space and their access to sunlight and vistas be protected from development.

The project will not restrict access to any open space or parks and will not impact any open space or park's access to sunlight or vistas.

ENVIRONMENTAL REVIEW

The project is categorically exempt from the environmental review process under Section 15301 Class 1(a) of the State CEQA Guidelines, pursuant to Title 14 of the California Administrative Code.

BASIS FOR RECOMMENDATION

In 1996, California voters passed Proposition 215, known as the Compassionate Use Act, by a 56% majority. In San Francisco, Proposition 215 passed by a 78% majority. The legislation established the right of seriously ill Californians, including those suffering from illnesses such as AIDS, cancer and glaucoma, to obtain and use marijuana for medical purposes when prescribed by a physician.

MCDs began to be established in San Francisco shortly after Proposition 215 passed as a means of providing safe access to medical cannabis for those suffering from debilitating illnesses. At that time, San Francisco did not have any regulatory controls in place to restrict the placement and operations of the dispensaries. As a result, over 40 dispensaries were established in the city without any land use controls, often resulting in incompatible uses next to each other.

On December 30, 2005, the Medical Cannabis Act, as approved by the Board of Supervisors and Mayor, became effective. The Act, set forth in Ordinance 275-05 and supported by Ordinances 271-05 and 273-05, amended the Planning, Health, Traffic, and Business and Tax Regulation Codes in order to establish a comprehensive regulatory framework for MCDs in San Francisco.

The Act designates the Department of Public Health (DPH) as the lead agency for permitting MCDs. DPH conducts its own review of all applications and also refers applications to other involved City Agencies, including the Planning Department, in order to verify compliance with relevant requirements. The Planning Department's review is generally limited to the location and physical characteristics of MCDs.

- The MCD complies with all standards and requirements of the Planning Code and advances the objectives and policies of the General Plan.
- 1423 Ocean Ave. is well served by transit (K Ingleside Ocean Ave. MUNI Metro line runs along Ocean Ave. and the site is near Balboa BART station)
- 1423 Ocean Ave. is more than 1,000' from primary and secondary schools.
- 1423 Ocean Ave. is more than 1,000' from any active permitted youth-services facility.
- The project site has been fully renovated to provide a safe, well-lit environment for California Medical Marijuana Patients with proper identification cards.
- Employment levels are estimated to be between 15 to 20 jobs with comparable pay and benefits.
- The owners and staff of Bay Area Compassionate Health are familiar with the neighborhood business owners by having coordinated local events and fundraisers which in turn raised revenue and exposure around the Ocean Avenue commercial area.
- To minimize the potential impact of the proposed use on the surrounding commercial area the following conditions are recommended for imposition on the project:
 - 1. The operator of the establishment shall maintain the main entrance and all sidewalks abutting the subject property in a clean condition. Such maintenance shall include, at

SAN FRANCISCO
PLANNING DEPARTMENT

- minimum, daily sweeping and litter pickup and disposal and washing or steam/pressure cleaning of the main entrance and abutting sidewalks at least once every month.
- 2. The project sponsor shall maintain appropriate odor control equipment to prevent any significant noxious or offensive odors from escaping the premises.
- 3. An enclosed garbage area shall be provided within the establishment. All garbage containers shall be kept within the building until pick-up by the disposal company.

RECOMMENDATION

RECOMMENDATION: Take Discretionary Review and Approve the MCD with Conditions

Attachments:

Parcel Map Sanborn Map Zoning Map Aerial Photographs Site Photographs Area Map of Potential MCD Locations Arc View GIS MCD Proximity Map Reduced Architectural Plans Section 312 Notice DR 30 Day Notice Applicant's MCD Application

Project Sponsor Submittals

Neighborhood Outreach Summary Security Plan General Information on Business Operation and MCDs

Community Input

Letters of Support Letters of Opposition

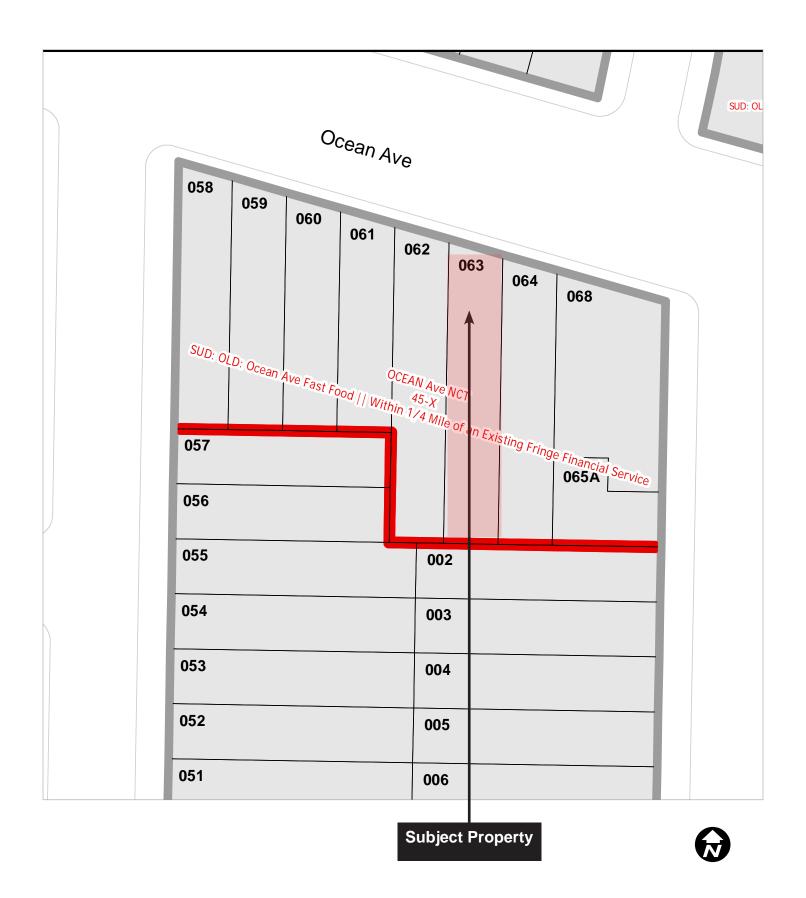
SAN FRANCISCO
PLANNING DEPARTMENT

Attachments

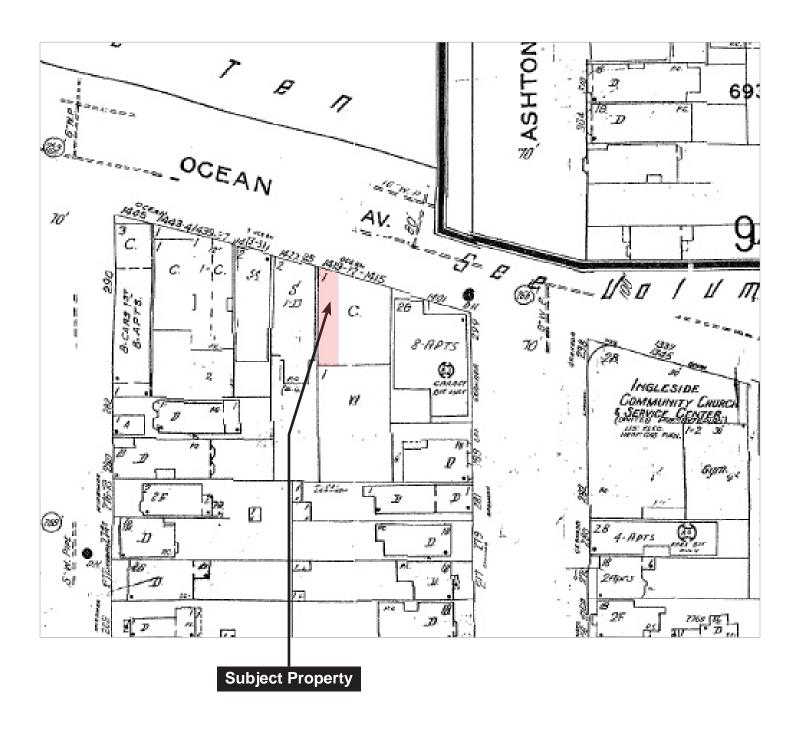




Parcel Map



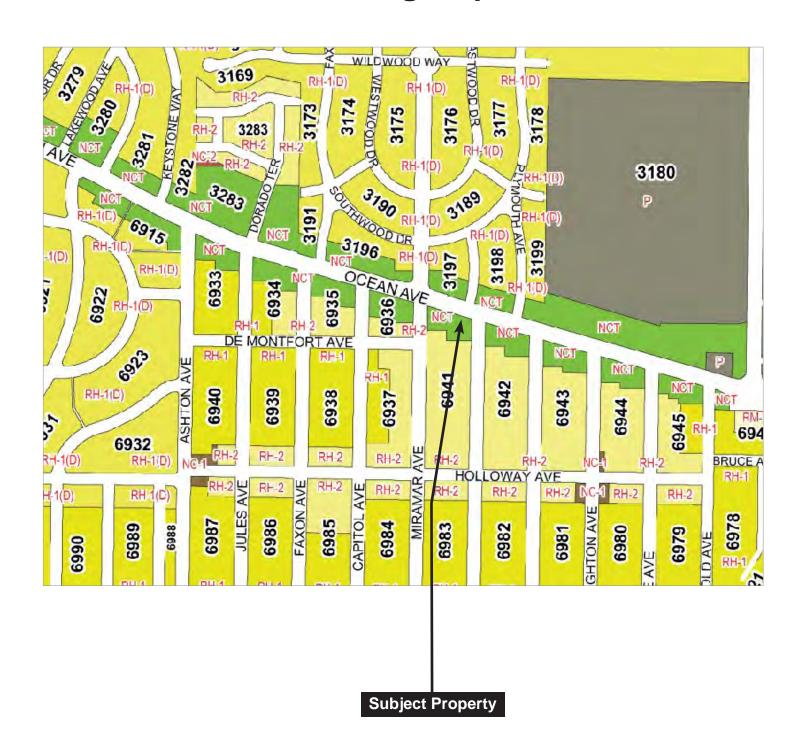
Sanborn Map



^{*}The Sanborn Maps in San Francisco have not been updated since 1998, and this map may not accurately reflect existing conditions.

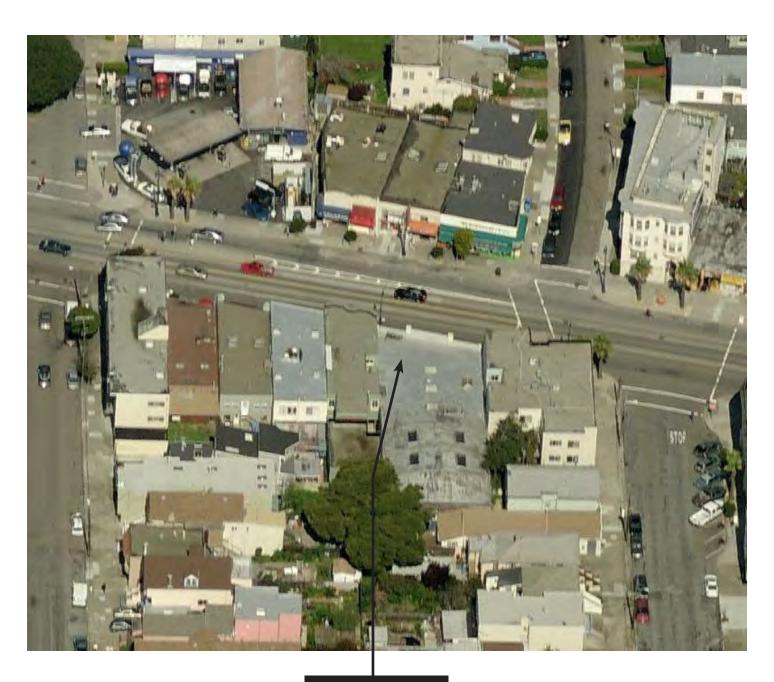


Zoning Map

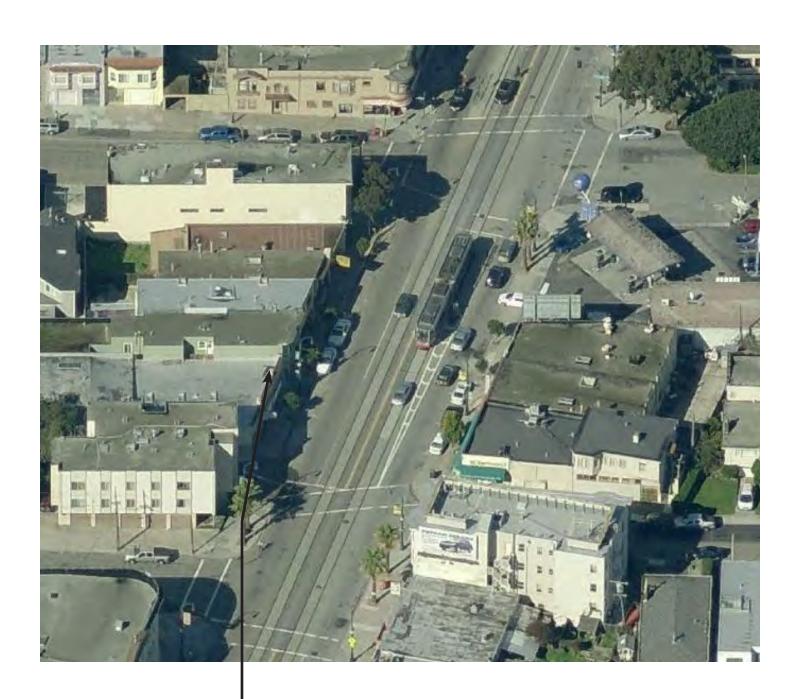




Aerial Photo View from North



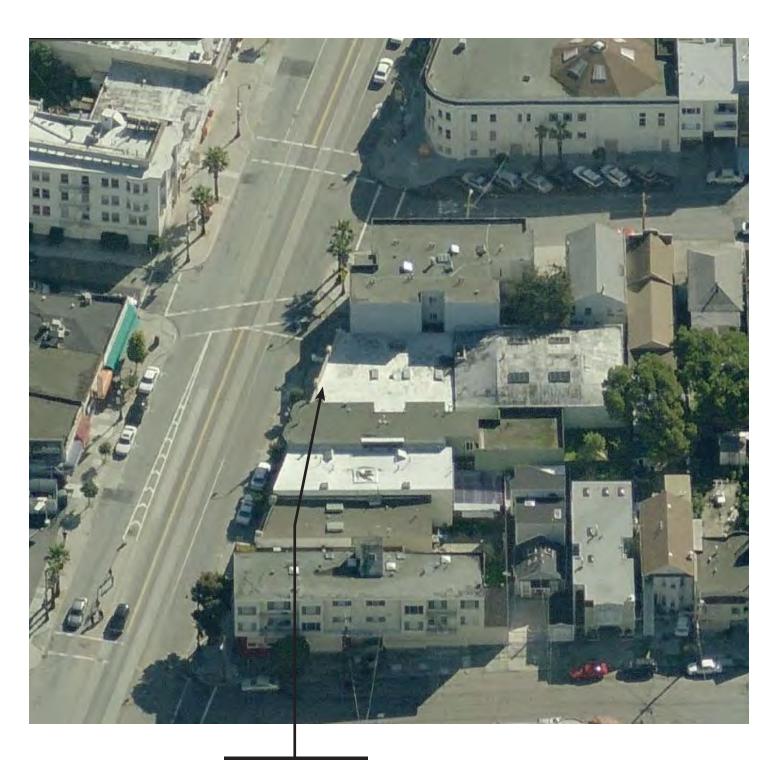
Aerial Photo View from East



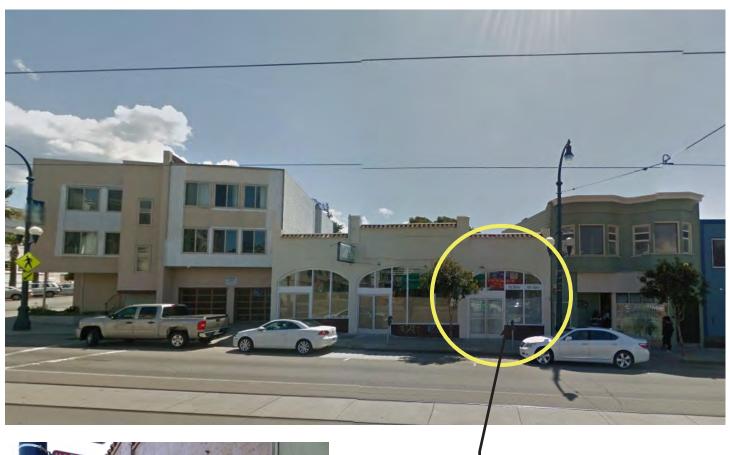
Aerial Photo View from South



Aerial Photo View from West



Site Photo

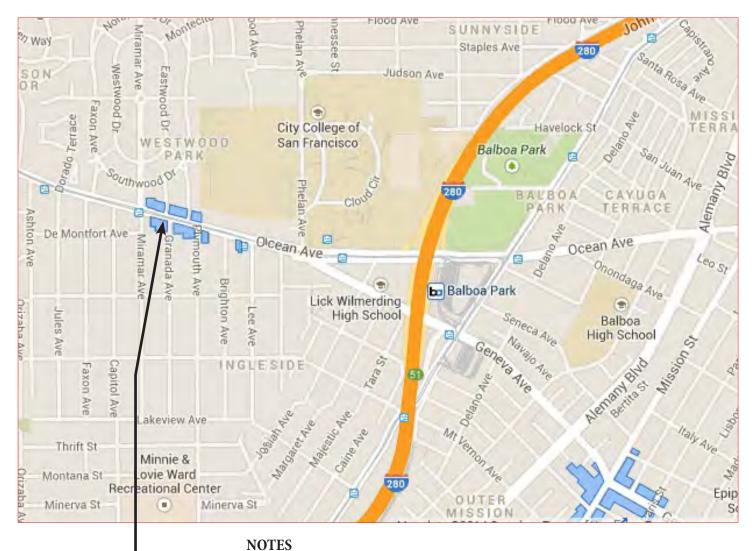




Subject Property

Store front

Area Map of Potential MCD Locations



m ·

This map as an initial guide for investigating possible Medical Cannabis Dispensary (MCD) locations. It is not intended to supersede or be used in-lieu of applicable requirements found in the Planning Code.

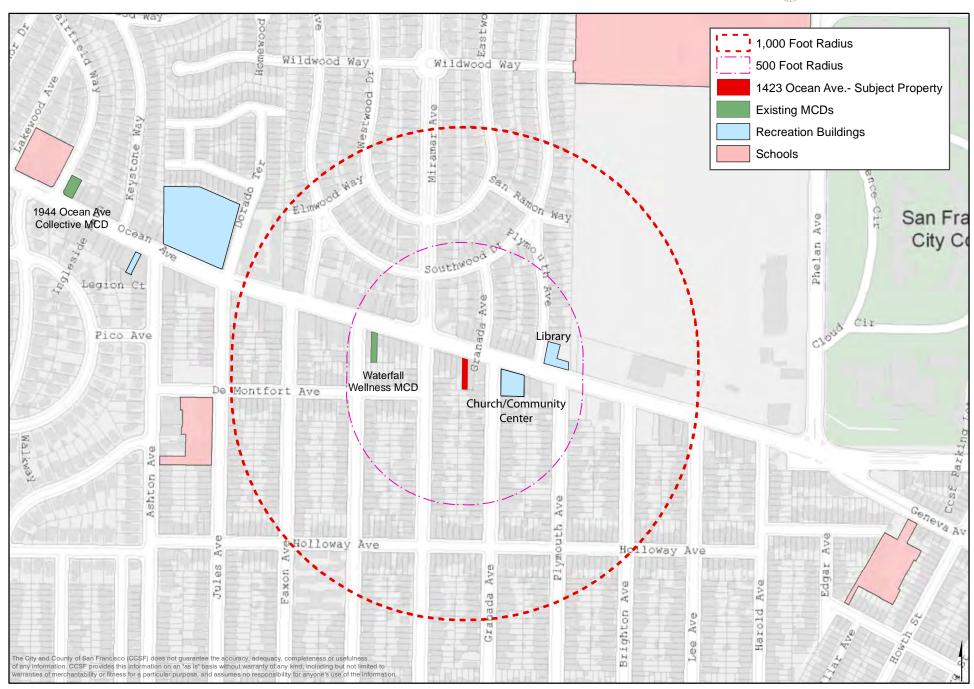
This map indicates area which are (1) zoned to allow new MCDs and (2) not not located within 1,000' of a school.

This map does not indicate uses which further restrict MCD locations including (i.e. community facilities, recreation buildings, and substance abuse treatment centers)

This map is based on the best information available at the time of publication. The City and County of San Francisco (CCSF) does not guarantee the accuracy, completeness, or usefulness of any information. CCSF provides this information on an "as is" basis without warranty of any kind, including but not limited to warranties of merchantability or fitness for a particular purpose, and assumes no responsibility for anyone's use of the information.

1423 Ocean Avenue - 1,000 Foot Radius + 500 Foot Radius (for reference)





MEDICAL CANNABIS DISPENSARY

1423 OCEAN AVENUE SAN FRANCISCO, CA. 94112

Mayor's Office on Disability DISABILITY ACCESS COMPLIANCE APPROVAL Edwin M. Lee PROJECT (Name): MEDICAL CANNABIS DISPENSARY Project Address: 1423 OCEAN AVENUE, SAN FRANCISCO THE MAYOR'S OFFICE ON DISABILITY HAS REVIEWED AND APPROVED: Site Permit Plans ACCESSIBILITY COMPLIANCE AT THE SITE HAS BEEN APPROVED IN THE Temporary Certificate of Occupancy (TCO) Certificate of Final Completion (CFC) By: Jim Whipple/Carla Johnson 401 Van Ness Avenue, Suite 300, San Francisco, CA 94102 415.554.6799 TTY MOD@sfgov.org

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SCOPE OF WORK

PROPOSED USE:

VERIFICATION & LICENSING FOR MEDICAL CANNABIS DISPENSARY. (4) OR LESS EMPLOYEES WORK UNDER THIS ESTABLISHMENT.

NEW VENTILATION SYSTEM PER CALIFORNIA MECHANICAL CODE.

NEW INTERIOR PARTITIONS

APPLICABLE CODES

2010 CALIFORNIA BUILDING CODE ADMENDMENTS 2010 CALIFORNIA MECHANICAL CODE 2010 CALIFORNIA ELECTRICAL CODE 2010 CALIFORNIA PLUMBING CODE 2010 CALIFORNIA ENERGY CODE 2010 CALIFORNIA FIRE CODE & ALL RELATED 2010 ADA STANDARDS 2010 SAN FRANCISCO BUILDING CODE ORDINANCES OF THE CITY & COUNTY OF SAN FRANCISCO

SHEET INDEX COVER SHEET, PROJECT DATA AND SITE PLAN D.A. CHECKLIST & EXTERIOR ELEVATION **ADA DETAILS** ADA DETAILS **EXISTING AND PROPOSED FLOOR PLANS PROJECT DATA** CHU WANG PANG + YAN ME YUAN 1423 OCEAN AVENUE, SAN FRANCISCO, CA.94112 6941 BLOCK: 064

GOLDEN YEARS MEDICAL HOME HEALTH

ASSESOR'S PARCEL MAP

2719

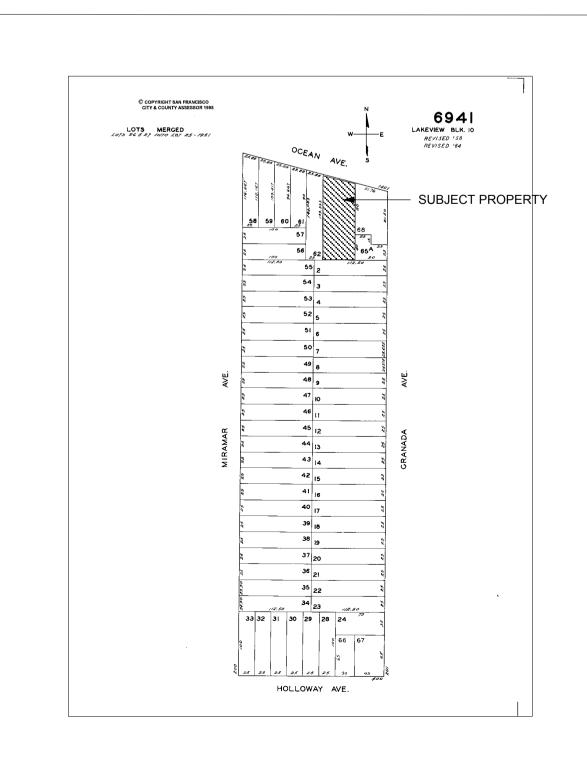
CARE PRODUCTS

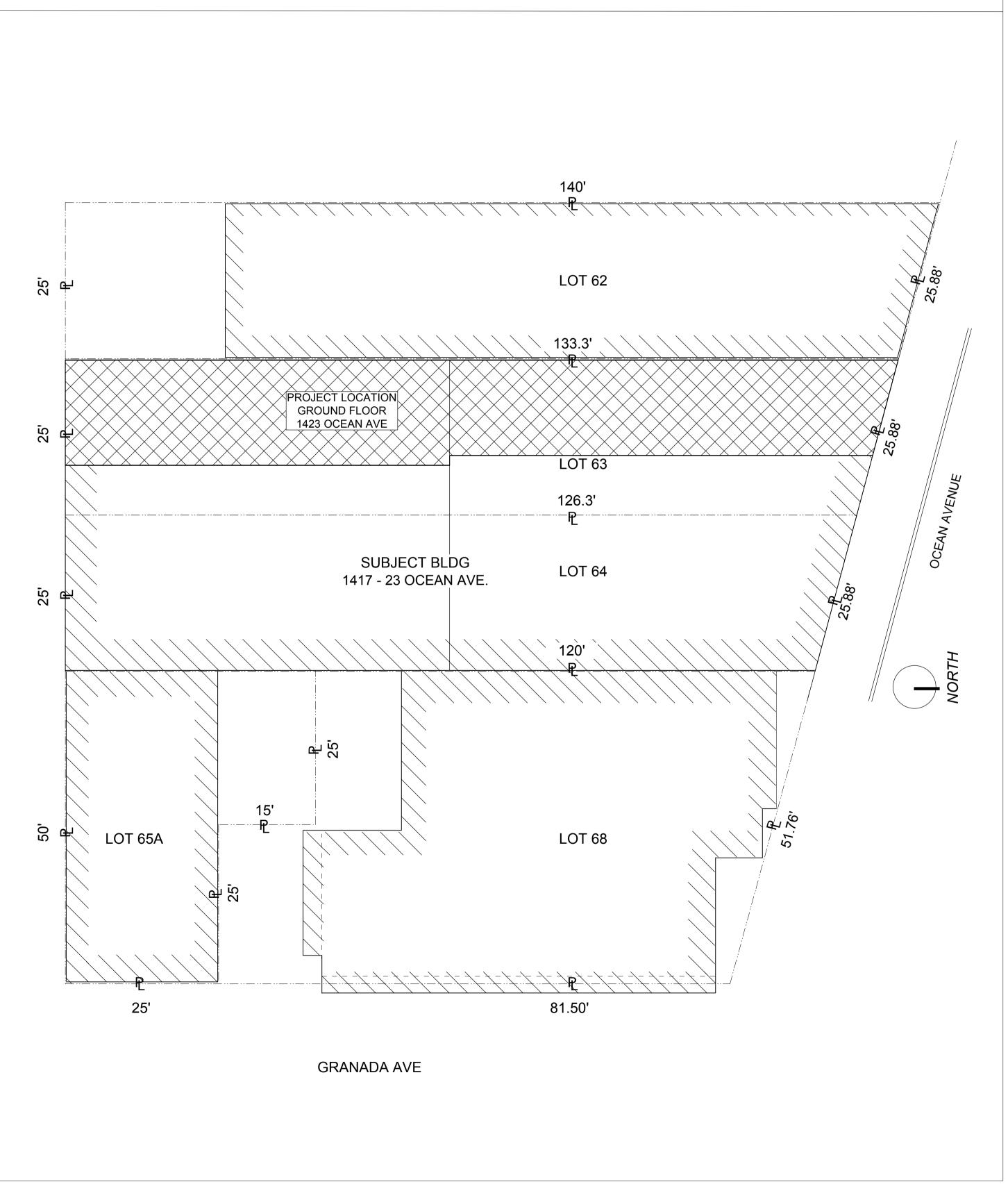
NO. OF STORIES:

PREVIOUS USE:

OCCUPANCY CLASS:

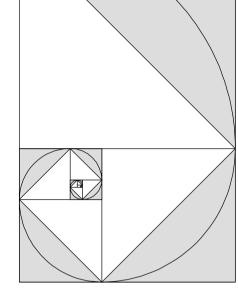
EXISTING COMM SF:







SCALE: 3/32" = 1'- 0"

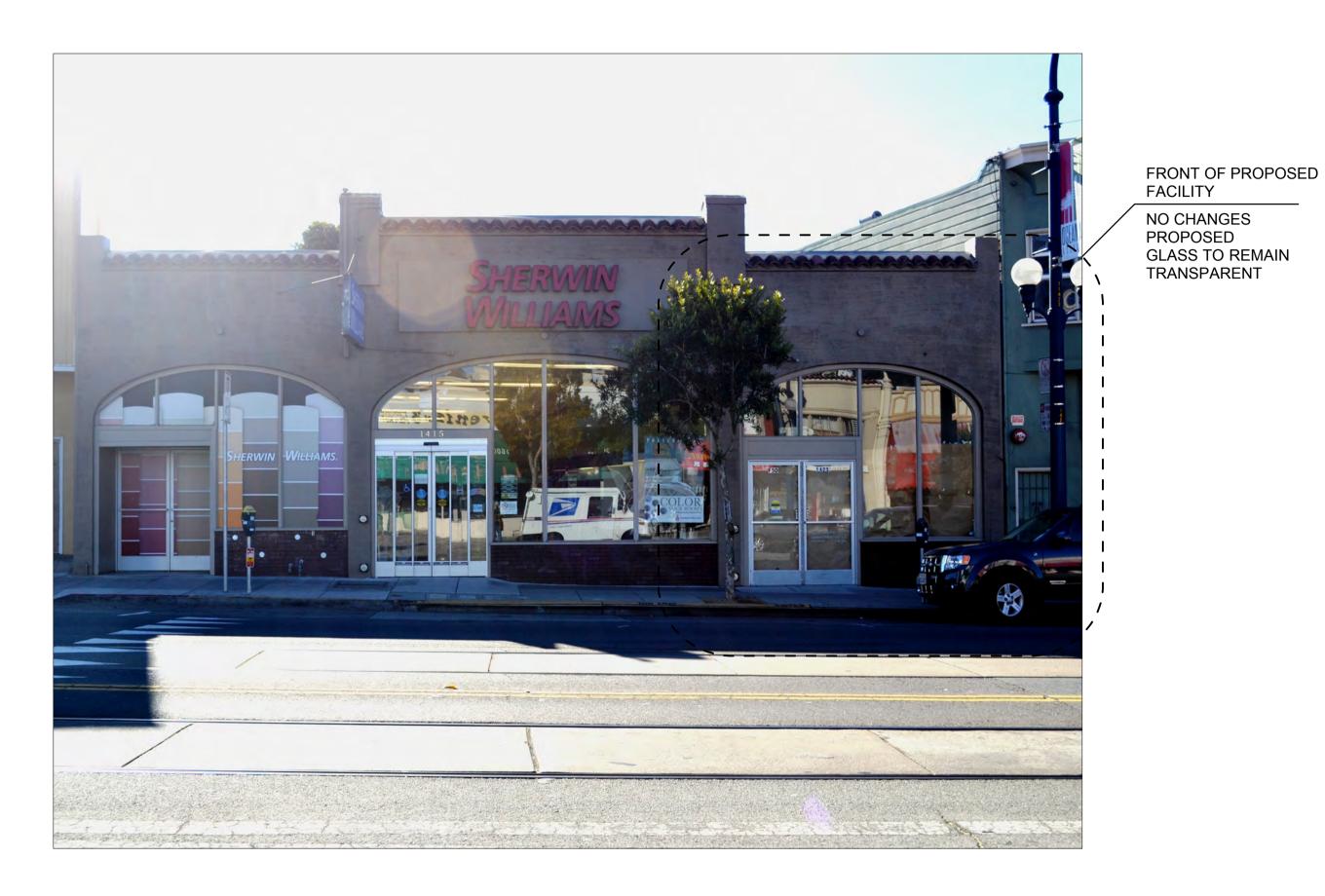


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gord

OCEAN AVENUE FRANCISCO, CA



NORTH ELEVATION

NOT TO SCALE

* REAR ELEVATION NOT ACCESSIBLE

D.A. CHECKLIST (p. 1 of 2): The address of the project is1423 OCEAN AVENUE
For ALL tenant improvement projects in commercial use spaces, this checklist is required to be reproduced on the plan set and signed.
1. The proposed use of the project isRETAIL (e.g. Retail, Office, Restaurant, etc.)
2. Describe the area of remodel, including which floor:GROUND_FLOOR
3. The construction cost of this project excluding disabled access upgrades is \$, which is (check one) □ more than / □ less than the Accessibility Threshold amount of \$139,934.96 based on the "2012 ENR Construction Cost Index" (The cost index & threshold are updated annually).
4. Is this a City project and/or does it receive public funding? <i>Check one:</i> <u>I Yes</u> / <u>KNo</u> Note: If Yes, then see Step 3 on the Instructions page for additional forms required.
Conditions below must be fully documented by accompanying drawings 5. Read A through G below carefully and check the most applicable box (one box only):
☐ A: All existing conditions serving the area of remodel fully comply with access requirements. No further upgrades are required.
B: All existing conditions serving the area of remodel that do <u>not</u> fully comply with access requirements <u>will be</u> fully upgraded with this project.
☐ C: Proposed project (check one) = is less than the threshold / = is over the threshold & falls under CBC 1134B.2.1 Ex. 2; Partial
upgrades, including Equivalent Facilitation will be provided up to 20% of the project value as itemized on Form C. Priority of
upgrades is to be considered in the order listed on p. 2 of the D.A. Checklist. Fill out Hardship request form(s) for non-fully complying
items, including for Equivalent Facilitation items. Checking box C means there are still non-complying items serving the area of
remodel.
□ D: Access features will either fully comply or be provided with Code defined Equivalent Facilitation. Submit an Unreasonable Hardship
Request (UHR) for the Equivalent Facilitation items.
☐ E: Hardship appeal to be filed with Access Appeals Commission (AAC). Note: Plan check of items not under AAC consideration will continue while resolution of AAC decision is sought.
☐ F: Consisting only of Barrier Removal, Notice of Accessibility Violation (NOV) Compliance or Exempted Work; Fill out Form F.
☐ G: Minor revision to previously approved permit drawings only. (Note: This shall <u>NOT</u> be used for new or additional work) Provide
previous approved permit application here:

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Page 6 of 11

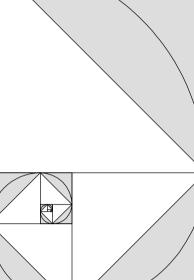
<u>D.</u> A	A. CHECKLIST	\ 1	/	able boxe	s and spe	cify whe	re on the d	rawings tl	ne details	are shown:
	pgrades below are listed riority based on CBC 1134B.2.1 Ex1	Existing Fully Complying	Upgrade to Full Compliance	Upgrade /	Equivalent Facilitation/ Hardship		None existing & not req'd by Code	Access Appeals Commis- sion	Barrier Removal/ NOV	Location of detail(s)-include detail no. & drawing sheet (<u>do not leave this part blank</u> !). Also clarification comments can be written here.
servir Note: prima	accessible entrance ng the area of remodel. This should be a ary entrance. Add'l ade may be required if it									SEE SHEET A1.1 DETAILS 11,12,13
	ccessible route to the of remodel									
2a. path	n of travel		\square							SEE SHEET A2, PLAN
2b. ram	ips		\square							SEE SHEET A1, DET 2, 5
2c. elev	/ator						\bowtie			
2d. staii	rs (if no elevator)	\bowtie								SEE SHEET A1, DET 3, 4
2f. othe	r:									
restro	ast one accessible from for each sex from the area of remodel.	×								SEE SHEET A1, DET 1 SEE SHEET A1.1, DET 8,10
4. Acces	ssible public pay e.						\boxtimes			
	ssible drinking ains (hi-low).						\boxtimes			
6. Signa	age.	\bowtie								SEE SHEET A1.1 DETAIL 9
7. Visua	ıl Alarm.						X			
8.	Parking						×			
Others:	path from parking area						\bowtie			
ļ	Shower						\boxtimes			

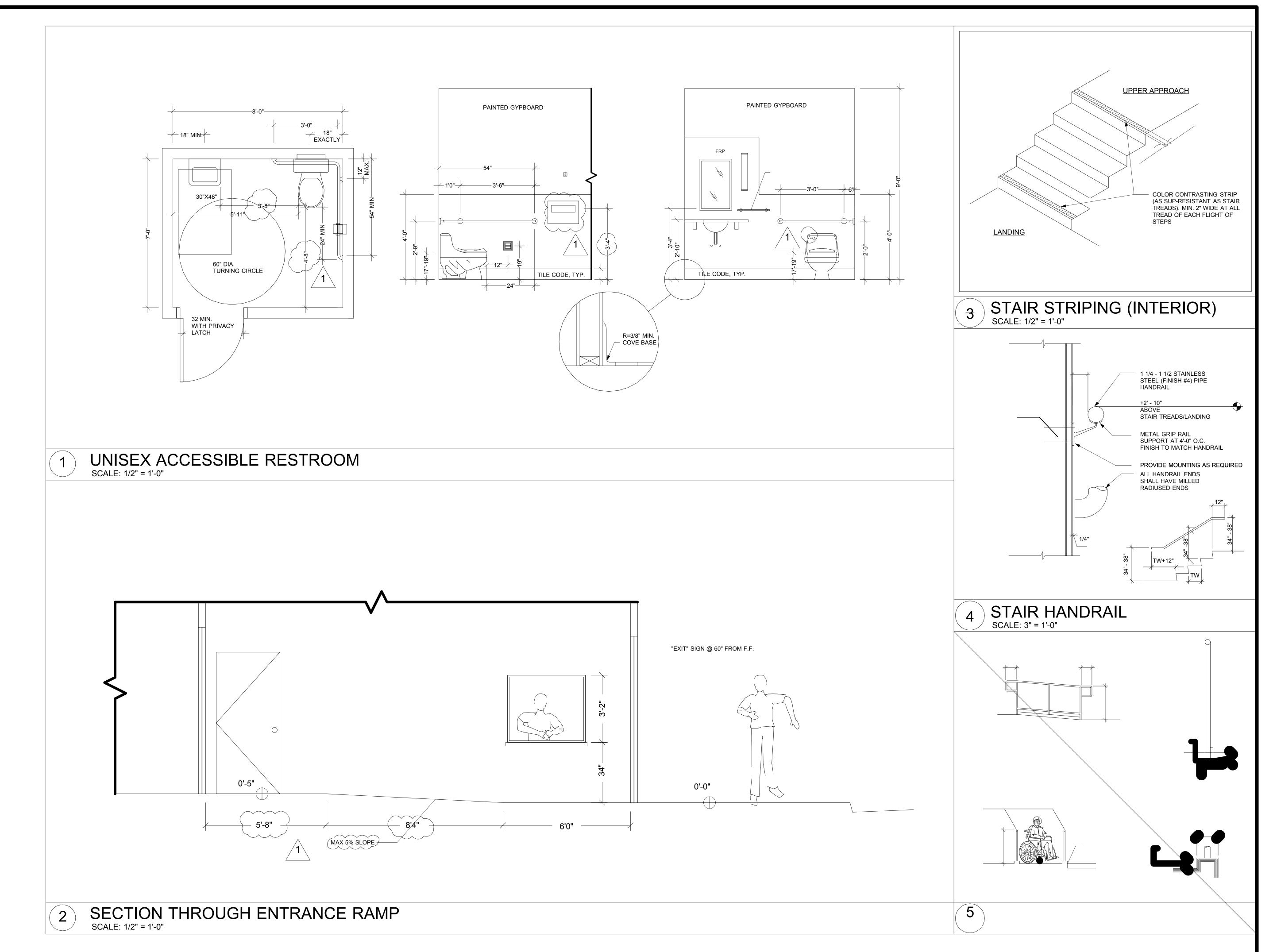
If details are provided from a set of the se If details are provided from a set of City approved reference drawings, provide its permit application number here:_

چ A01

<u>aia</u>

a. gordon atkinson, 735a taraval street ~ san francisco, ca 94116
tel 415-731-9927 fax 415-731-9942 e-mail gordonatkinson





a taraval street ~ san francisco, ca 94116
115-731-9927 fax 415-731-9942 e-mail gordonatkinson@sbcglobal.net
scale

date

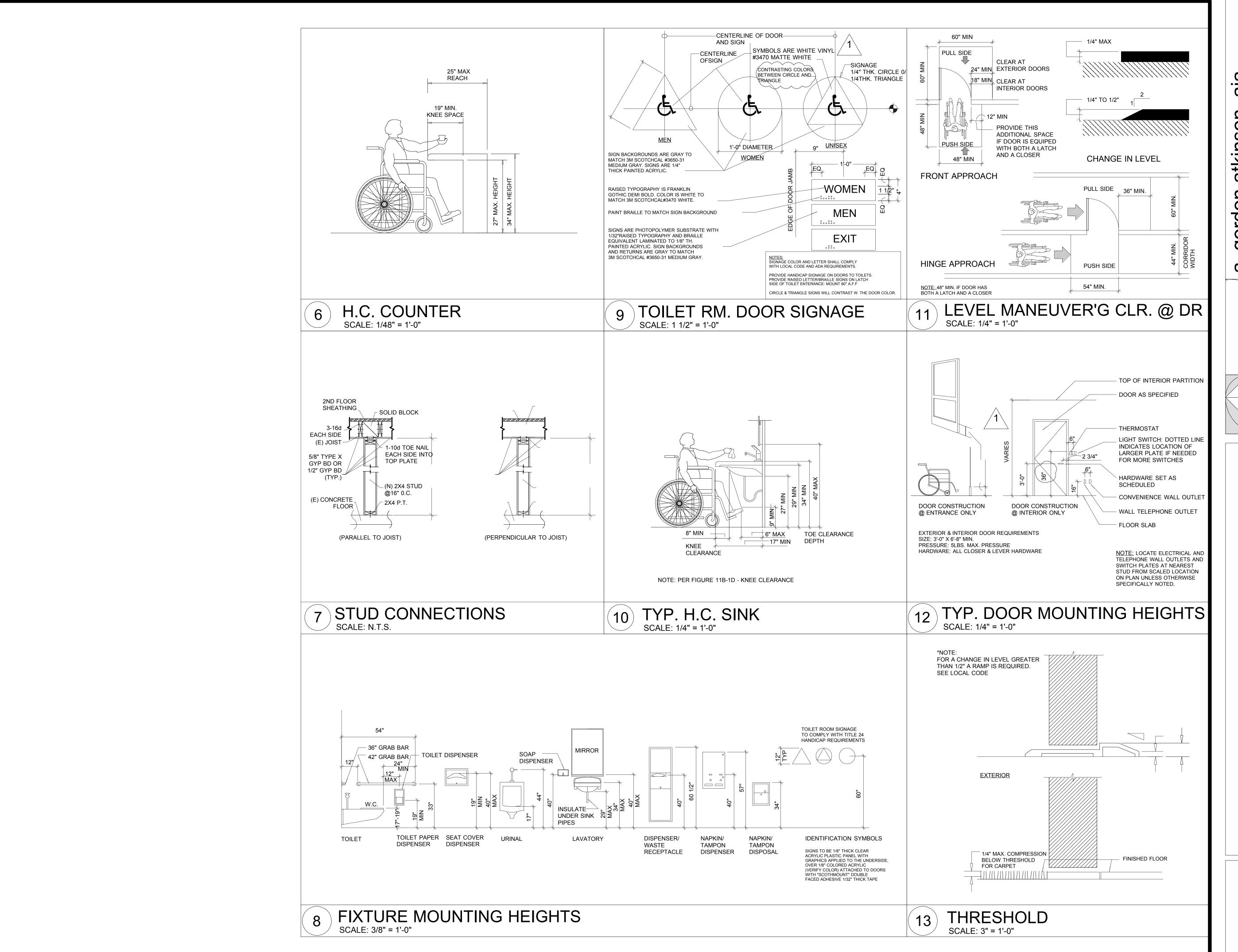
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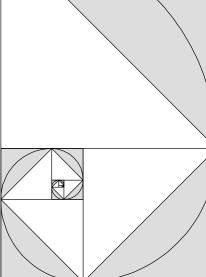
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SD

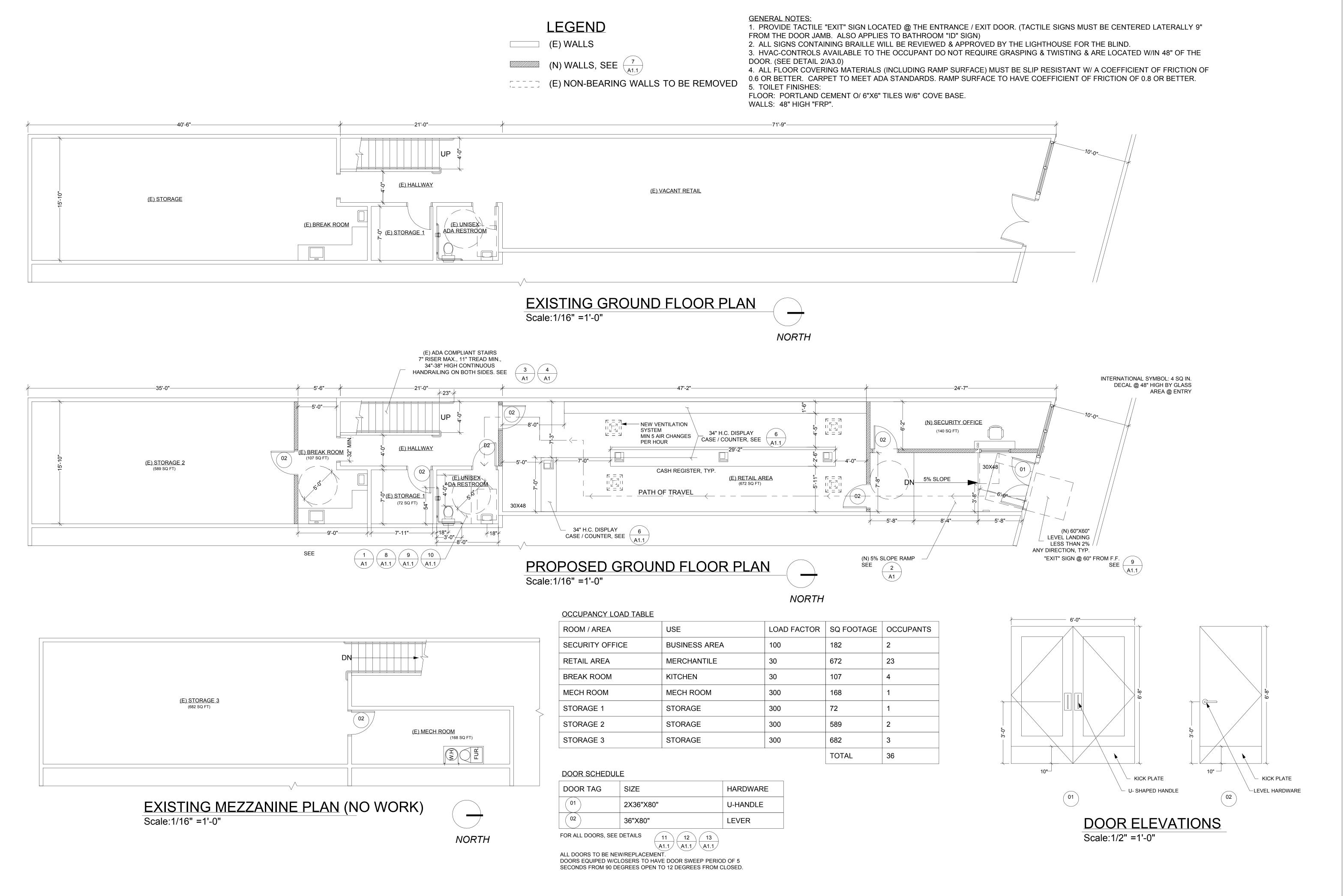
3 OCEAN AVENUE I FRANCISCO, CA



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1423 OCEAN AVENUE SAN FRANCISCO, CA



<u>aia</u>

atkinson, ancisco, ca 94116

gordon

1423 OCEAN AVENUE SAN FRANCISCO, CA FLOOR PLANS

1650 Mission Street Suite 400 San Francisco, CA 94103

NOTICE OF BUILDING PERMIT APPLICATION (SECTION 312)

On **April 23**, **2013** the Applicant named below filed Building Permit Application No. **2013.04.23.5179** with the City and County of San Francisco.

PROP	ERTY INFORMATION	APPL	ICANT INFORMATION
Project Address:	1423 Ocean Avenue	Applicant:	Gregory Schoepp
Cross Street(s):	Granada and Miramar	Address:	3615 Balboa Street
Block/Lot No.:	6941/063	City, State:	San Francisco, CA 94121
Zoning District(s):	NCT-Ocean Ave/45-X	Telephone:	(415) 298-0948

You are receiving this notice as a property owner or resident within 150 feet of the proposed project. You are not required to take any action. For more information about the proposed project, or to express concerns about the project, please contact the Applicant listed above or the Planner named below as soon as possible. If you believe that there are exceptional or extraordinary circumstances associated with the project, you may request the Planning Commission to use its discretionary powers to review this application at a public hearing. Applications requesting a Discretionary Review hearing must be filed during the 30-day review period, prior to the close of business on the Expiration Date shown below, or the next business day if that date is on a week-end or a legal holiday. If no Requests for Discretionary Review are filed, this project will be approved by the Planning Department after the Expiration Date.

Members of the public are not required to provide personal identifying information when they communicate with the Commission or the Department. All written or oral communications, including submitted personal contact information, may be made available to the public for inspection and copying upon request and may appear on the Department's website or in other public documents.

	PROJECT SCOPE	
☐ Demolition	□ New Construction	☐ Alteration
☑ Change of Use	☐ Façade Alteration(s)	☐ Front Addition
☐ Rear Addition	☐ Side Addition	☐ Vertical Addition
PROJECT FEATURES	EXISTING	PROPOSED
Building Use	Other Retail Sales and Services(790.102)	Medical Cannabis Dispensary (790.141)
Number of Stories	1	No Change
Number of Dwelling Units	0	No Change
Number of Parking Spaces	0	No Change
	PROJECT DESCRIPTION	

The proposal is to establish a Medical Cannabis Dispensary (d.b.a. "Bay Area Compassionate Health") in a currently vacant space that was last occupied by a retail service (d.b.a. "Golden Years Medical Home Health Care Products"). This application is subject to a Mandatory Discretionary Review for establishing a MCD per Planning Code Section 790.141. The Mandatory Discretionary Review application, case no. 2013.1340D, has been tentatively scheduled for the February 27, 2014 for a Planning Commission hearing. Any individuals interested with concerns about this project has the opportunity to file a separate Discretionary Review before the 30-day expiration date noted on this Section 312 notice.

Notice Date:

Expiration Date:

For more information, please contact Planning Department staff:

Planner: Jessica Look Telephone: (415) 575-6812

E-mail: jessica.look@sfgov.org

中文詢問請電: (415) 575-9010

Para información en Español llamar al: (415) 575-9010

NOTICE OF PUBLIC HEARING

Hearing Date: Thursday, May 1, 2014

Time: Not before 12:00 PM (noon)

Location: City Hall, 1 Dr. Carlton B. Goodlett Place, Room 400

Case Type: Mandatory Discretionary Review

Hearing Body: Planning Commission

PROPERT	Y INFORMATION	APPLICATI	ON INFORMATION
Project Address:	1423 Ocean Avenue	Case No.: Building Permit: Applicant: Telephone: E-Mail:	2013.1340D
Cross Street(s):	Granada and Miramar		2013.04.23.5179
Block /Lot No.:	6941/063		Gregory Schoepp
Zoning District(s):	NCT-Ocean Ave/45-X		(415) 298-0948
Area Plan:	Balboa Park Plan Area		Gregschoepp@aol.com

PROJECT DESCRIPTION

Mandatory Discretionary Review of Building Permit Application No. 2013.04.23.5179 to establish a Medical Cannabis Dispensary (d.b.a. "Bay Area Compassionate Health") in a currently vacant space that was last occupied by a retail service (d.b.a. "Golden Years Medical Home Health Care Products").

A Planning Commission approval at the public hearing would constitute the Approval Action for the project for the purposes of CEQA, pursuant to San Francisco Administrative Code Section 31.04(h).

ADDITIONAL INFORMATION

ARCHITECTURAL PLANS: If you are interested in viewing the plans for the proposed project please contact the planner listed below. The plans of the proposed project will also be available one week prior to the hearing through the Planning Commission agenda at: http://www.sf-planning.org

Members of the public are not required to provide personal identifying information when they communicate with the Commission or the Department. All written or oral communications, including submitted personal contact information, may be made available to the public for inspection and copying upon request and may appear on the Department's website or in other public documents.

FOR MORE INFORMATION, PLEASE CONTACT PLANNING DEPARTMENT STAFF:

Planner: Jessica Look Telephone: (415) 575-6812 E-Mail: jessica.look@sfgov.org

中文詢問請電: (415) 575-9010

Para información en Español llamar al: (415) 575-9010



APPLICATION TO OPERATE A Medical Cannabis Dispensary

1. Owner/	Applicant Infor	mation				
PROPERTY OW	VNER'S NAME			nau (1) Jacoba (1)		
	Pang +Yan Me `		To be one to be a second of the second of th			
PROPERTY OW	NER'S ADDRESS:		TELEPHONE			
			(415) 533 - 5400			
1211 Stoci	kton St. SF, CA. 9	4133	EMAIL			
			N/A			
APPLICANT'S N	JAME:			336		
Gregory So	choepp		Same as Ab	ove		
APPLICANT'S A	ADDRESS:		TELÉPHONE			
- 2645 D. II	c. c . c		(415) 298 - 0948			
3615 Balb	oa St. SF, CA. 94	114	EMAIL	i de		
			gregschoepp@aol.com			
CONTACT FOR	PROJECT INFORMATIO	V				
Gordon At	tkinson		Same as Ab	ove		
ADDRESS:			TELEPHONE	7-76 D		
	10.05.05.0		(415) 731 - 9927			
/35 A Tara	aval St. SF, CA. 94	116				
			gordonatkinson@sbcglobal.net			
2. Locatio	n and Dispens	eary Information				
STREET ADDRE	ESS OF PROJECT		ZIP CODE:			
1423 Ocea	an Ave		94112			
CROSS STREE	TS:			KAZLE.		
Miramar						
ASSESSORS B	LOCK/LOT:	ZONING DISTRICT:		godlave		
6941	/ 064	NCT - OCEAN AVENUE N	NEIGHBORHOOD COMMERCIAL TRANSIT	20000000		
DISPENSARYS	G FT	SQ FT. ACCESSIBLE TO PAT	TRONS: FLOOR ON WHICH DISPENSARY IS LOCAT	TEO.		
2472		672	Ground			
2000774/20000000000000000000000000000000						
:	ISINESS NAME (IF KNOV	CONTRACTOR				
	Compassionate l	lealth	記念が開発を表現では実施して、高点性機能を指す。ETTPに対象を認識的は「空間を機能を呼ばれるのののです。			
y	Kinit Jinnin 1914 I. Davy Pe Davi Weenen					
Business (отопр м					

3. Dispensary Proximity

PROXIMITY TO SCHOOLS

I have used all reasonable resources available to me, including maps and zoning information made available by the Planning Department and a personal and thorough inspection of the broader vicinity of the subject property and have found that, to the best of my knowledge, the property is not within 1,000 feet of an elementary or secondary school, public or private.

(Initial Below)

PROXIMITY TO RECREATION BUILDINGS

I have used all reasonable resources available to me, including maps and zoning information made available by the Planning Department and a personal and thorough inspection of the broader vicinity of the subject property and have found that, to the best of my knowledge, the property is not within 1,000 feet of a recreation building, as defined in the Planning Code.

 \mathcal{M}

(Initial Below)

(Initial Below)

PROXIMITY TO SUBSTANCE ABUSE TREATMENT FACILITIES

I have used all reasonable resources available to me, including a personal inspection of the subject property and have found that, to the best of my knowledge, the property does not contain a substance abuse treatment facility.

M

4. Dispensary Services

ON SITE MEDICATING	
Will you allow patrons or employees to smoke or vaporize medical cannabis, or of medicate with medical cannabis, on the premises?	herwise
MEDICAL CANNABIS EDIBLES	
Will you offer medical cannabis in the form of food or drink or will medical cannabis be produced on-site? If so, please check the appropriate boxes and, if applicable, the proposed square footage to be dedicated to on-site production of edibles. (Note that Planning Code standards may prohibit [1] the dedication of more than 1/4 of the total floor area of the dispensa production of food and/or [2] the off-site dispensing of any products that are made on-site. Also please note that if food is produced, additional permits will be required from the Department of Public Health.)	declare YES Dispensing
ON-SITE MEDICAL CANNABIS CULTIVATION	
Will any live marijuana plants be kept on the premises for purposes of harvesting a product? If so, please declare the proposed square footage to be dedicated to greativities.	medical 🔼 NO owing 🗌 YES
(Note that additional safety measures may be required. Consult with the Department of Public Health regarding the use an of chemicals associated with the growing process and with the Department of Building Inspection regarding associated but issues. Also note that the Planning Code may prohibit the use of more than 1/4 of the total area of the dispensary for such	ilding safety
OFF-SITE MEDICAL CANNABIS CULTIVATION	
Will any medical cannabis distributed on the premises have been grown elsewher the premises? If so, please declare whether medical cannabis cultivation will occu or outside the City and County of San Francisco. (Note that any off-site growing facility located in San Francisco must be properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san properly permitted under applicable state and located to the san prope	r within X YES

5. Applicant's Statemer	5.	Ap	plica	nt's	State	men
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Please discuss:

 $1. \ \ The \ business \ plan \ for \ the \ proposed \ Medical \ Cannabis \ Dispensary;$

Please see attached.

2. Specific factors which contribute to the compatibility and appropriateness of the Medical Cannabis Dispensary with the immediate neighborhood and broader City environment;

We have been operating family owned businesses in San Francisco since 1957. We are knowledgeable and practiced MCD operators, including all business practices related to operating a MCD. We are familiar with and abide by all state and city regulations and guidelines. Currently, we serve over 8,000 patients in the Ingleside, Sunset, West Portal, Lake Merced, Excelsior, and Outer Mission neighborhoods.

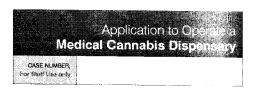
Our location will maintain full-time security which includes indoor and outdoor video cameras. In addition, security guards will be provided inside and outside our location.

3. Neighborhood outreach efforts made and the results/input from those efforts;

The owners and staff are familiar with the neighborhood business owners having coordinated local events and numerous fund-raisers which in turn raised revenue and exposure around the Ocean Avenue commercial area. We are active members of the community and at City Hall. Our managers currently hold seats on multiple committees that work directly with the board of supervisors and local law enforcement. Our staff has a passion for helping people and is very active in charity work and assistance in the local community and beyond the medical cannabis community. We have contacted our immediate neighbors and landlords, on both sides of our location, and they support and look forward to our proposed MCD and feel it would be positive addition to the area.

4. Any other circumstances applying to the property involved which you feel support your application.

1423 Ocean Avenue is an ideal site for our MCD. This location complies with all required code and ordinances set in place by the San Francisco Department of Public Health, Department of Building Inspection, and all other agencies involved with the overseeing of this endeavor. In particular, this site is ADA compliant and meets the 1000 foot distance requirement from schools, recreation centers, and rehabilitation centers. It is also conveniently accessible to both BART and MUNI transit stops.



Priority General Plan Policies Findings

Proposition M was adopted by the voters on November 4, 1986. It requires that the City shall find that proposed projects and demolitions are consistent with eight priority policies set forth in Section 101.1 of the City Planning Code. These eight policies are listed below. Please state how the project is consistent or inconsistent with each policy. Each statement should refer to specific circumstances or conditions applicable to the property. Each policy must have a response. IF A GIVEN POLICY DOES NOT APPLY TO YOUR PROJECT, EXPLAIN WHY IT DOES NOT.

1.	That existing neighborhood-serving retail uses be preserved and enhanced and future opportunities for resident
	employment in and ownership of such businesses enhanced,

The new MCD is a retail business and will provide employment opportunities. Local residents will be given the opportunity to be hired.

2. That existing housing and neighborhood character be conserved and protected in order to preserve the cultural and economic diversity of our neighborhoods;

This commercial retail MCD will be consistent with this priority, as the outside of the dispensary will not be changed.

3. That the City's supply of affordable housing be preserved and enhanced;

The dispensary will operate in an existing commercial space and will not affect affordable housing in the area.

- 4. That commuter traffic not impede Muni transit service or overburden our streets or neighborhood parking;

 Dispensary informs our patient-members of the no double-parking policy, which is strictly enforced by the staff.

 Many patients use MUNI to get to the dispensary and a large number of patients live in the neighborhood and the surrounding are and walk or bike to the dispensary.
- That a diverse economic base be maintained by protecting our industrial and service sectors from displacement due to commercial office development, and that future opportunities for resident employment and ownership in these sectors be enhanced;

We are part of the diverse economic base in our neighborhood. There are no industrial sectors in our zone. Dispensary will not impact the existing service sectors. We have no intentions to develop a commercial office space on the subject property. Future opportunities for resident employment and ownership in the service sector are are enhanced because the dispensary provides employment.

- 6. That the City achieve the greatest possible preparedness to protect against injury and loss of life in an earthquake; The dispensary has an emergency preparedness plan and the fixtures comply with local earthquake safety requirements.
- 7. That landmarks and historic buildings be preserved; and
 Site is not on or near a landmark or historic building, nor does the dispensary wish to expand into any other parcel.

That our parks and open space and their access to sunlight and vistas be protected from development.
 The site is not in or near parks or open spaces, therefore this project will not affect access to sunlight or vistas.

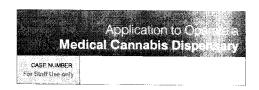
5. Applicant's Statement

1. The Business Plan for the Proposed MCD.

Bay Area Compassionate Health Dispensary is committed to providing a convenient, safe and commodious source for medical cannabis to the community. Our priorities are: 1) to respect and comply with all State regulations and guidelines that apply to this industry and to help insure its viability in the future as a legitimate and critical partner in the San Francisco health community. 2) To operate and maintain a safe and secure establishment with full-time security personnel on site, a state of the art video monitoring and recording system inside and out interconnected to a 24-hour, licensed security system provider with alarm, strobe, and smoke detectors. 3) To monitor and maintain a responsible membership base by requiring and verifying California State medical cannabis user identification cards and a registered California Doctor's Recommendation for all members and by posting and enforcing all club rules scrupulously. Club rules will include immediate revocation of privileges for smoking on site or in front of the establishment, re-dispensing or re-selling of any cannabis product provided by BACH, threatening or harassing any BACH employee or member or violating any State Law or local regulation regarding the use or transfer of any cannabis product. 4) To promote the understanding and availability of medical cannabis among our membership and citywide through research, education and neighborhood outreach.

Our goal at BACH is to create a facility that can serve as a model, statewide, for this nascent industry. We endeavor to prove, by example, that medical cannabis dispensaries can serve a growing population, in need of safe and reliable access to a medicine not available through traditional sources, in a way that poses no threat to the community, does not diminish property values and does not attract crime or vandalism.

BACH wishes to become a vital partner in the business community and will make a commitment to donating a portion of its profits to local charities.



Applicant's Affidavit

Under penalty of perjury the following declarations are made:

a: The undersigned is the owner or authorized agent of the owner of this property.
b: The information presented is true and correct to the best of my knowledge.
c: The other information or applications may be required.

Signature:

Date: 11-12-13

Print name, and indicate whether owner, or authorized agent:

A. Gordon Atkinson

Owner Authorized Agent (circle one)

For Department Use Only

Application received by Planning Department:

Date:

Bay Area Compassionate Health Center Neighborhood Outreach

1423 Ocean Ave, San Francisco, CA 94112

For our community outreach, we contacted the surrounding neighborhood associations to set up a time to meet and to see if we could be placed on the agenda at their upcoming meetings to discuss our project. We did extensive outreach with those groups as well as meeting with all businesses on the block and individuals. We made all our source documents, including security plan, building plans, rules and policies available to anyone who asked. We also provided a direct line of communication to our community liaison Christina Jajeh via e-mail and phone.

These groups were the Ocean Ave Association, the Ingleside Terraces Homes Association, the Westwood Park Neighborhood Association, and the Sunnyside Association, OMI Neighbors in Action, as well as the Reverend Roland Gordon at the Ingleside Presbyterian Church.

Over the course of our meetings, we received a lot of positive response and support. We also were able to address concerns from constituents regarding crime statistics, our security plan, and potential clustering issues.

Most of the groups asked about the relationship between BACH and the dispensary at 1545 Ocean Ave. We explained that the BACH team, which started Waterfall Wellness, did not want to be associated with former Nor-Cal Herbal Relief management team who has controlled the dispensary at 1545 Ocean Ave since April 2012. This is what motivated the BACH team to start looking for a new location for our collective.

Ocean Avenue Association

On Wednesday, March 19, BACH was on the Ocean Ave Association Board Meeting's agenda. Director Greg Schoepp and community liaison Christina Jajeh addressed the board and those in attendance at the Ingleside Public Library about BACH and had a meaningful and productive dialogue to address any questions and concerns by the neighbors. We provided a brochure explaining the project to interested parties, highlighting our security plan, our transparent storefront we plan on keeping, and other general information.

On Wednesday April 16, BACH gave an update on the permit process and what to expect next. We created a flyer with up coming dates for both

planning dept. and DPH hearing dates. We encouraged people to attend and if they had any questions to contact us or stop by our open house.

Street Life-O.A.A.

On April 9, at Lick-Wilmerding High School, BACH attended the Street Life meeting, which is an extension of the O.A.A. This group is involved in the SF Shine Program, which is working on helping 4 businesses along Ocean Avenue update or improve their buildings façade. The Ocean Ave corridor study presented a survey they conducted in the community. The survey asked people about their experience along Ocean Avenue and what they think would be improved. They also discussed future design ideas and upgrades.

Ingleside Presbyterian Church

On Tuesday, March 11, we had a meeting with Rev. Roland Gordon at Ingleside Presbyterian Church to discuss BACH. Rev. Gordon expressed his concerns regarding security and access but was satisfied when we explained our security plan. Over all he seemed very supportive of the project.

Ingleside Terrace homes Association

On Thursday, March 20, representatives from BACH attended the Ingleside Terraces Homes Association Monthly meeting at Saint Francis Episcopal. Although there was no room on the agenda to speak, we were able to discuss our project with neighbors after the meeting.

After attending that meeting, they placed us on their agenda for their next April 17th meeting. At this meeting, they prepared questions to ask us about 1545 Ocean, the new clustering ordinance, and the future green zones. This association does not necessarily deal with businesses, so our main priority was to provide a point of contact to them for any questions or concerns. We presented the project and introduced ourselves. After answering questions from the board, we made ourselves available to individuals on a one-on-one basis and cleared up some misconceptions regarding the past history of 1545 Ocean Ave.

Sunnyside Neighborhood Association

We are scheduled on their agenda for May 5th.

Westwood Park Association

We met the president of this group Kate Favetti at the O.A.A. meeting. We had reached out to her group with no response but after our presentation at the O.A.A. group she followed up with us and scheduled us on her group's agenda April 23. We have also attended other meetings with Kate and have had some dialogue.

O.M.I. N.I.A.

We met the president of this group Mary Harris at the O.A.A. meeting. We had reached out to her group with no response but after our presentation at the O.A.A. group she followed up with us and scheduled us on her group's agenda April 24,

Open Houses

We have been holding weekly open houses every Tuesday night starting in March from 6:00 to 8:00pm and publicized this through a posting on our storefront as well as through phone and email invites to the contacts listed for the neighborhood associations. We are continuing to hold these open houses until the date of our hearing. Attendance at these open houses varied greatly, but we estimate we were visited by 70 neighborhood constituents and other interested parties. At these open houses, we made ourselves available to answer any questions. We also had copies of our security plan, proposed blueprints, member rules and policies and information regarding the medicinal benefits of cannabis and other relevant news articles on hand to review.



On April 5, representatives from BACH attended a volunteer planting event through OAA at the Ocean-Phelan Community Garden at Phelan Loop near

CCSF from 10:00am to 12:00pm.



We are continuing to meet with groups and individuals throughout our hearing process.

Bay Area Compassionate Health Center Security Plan

A review of the security and safety procedures that will be implemented at BACH, INC.

BAY AREA COMPASSIONATE HEALTH CENTER FACILITY SECURITY PLAN

Project Address: 1423 Ocean Ave San Francisco, CA

Introduction

This facility security plan describes the methods, procedures and measures to be used by Bay Area Compassionate Health Center (registered to do business in San Francisco as Bay Area Compassionate Hith Cntr and regarded as BACH for purposes of this document) in order to maximize the safety of the surrounding community, prevent loss, and stop diversion of medical cannabis.

BACH considers the security of the proposed facilities, the patients that will use its facilities, and security of its employees to be a priority. BACH will implement measures to prevent crime and conserve law enforcement resources.

BACH will use physical security enhancement equipment including physical barriers, electronic systems, access control, video surveillance, security personnel, and other means to provide security and safety. Permissions for entry will be strictly controlled to provide for only the amount of access necessary to carry out the functions of the collective.

Security Personnel

BACH will be contract guard service from a state licensed security firm. There will be a minimum of 2 guards on duty during open hours; one armed and one unarmed.

There will be an in house safety manager that will oversee the training and placement of the guards. All guards that are assigned to the dispensary will receive in house training in our anti-diversion policy.

All guards and managers will each be assigned a two-way radio allowing them to all stay in constant contact with each other.

The guards will be assigned to the following posts:

A. Building exterior

The armed guard will be stationed outside the front of the building to greet patients as they arrive and verify their paperwork. Once an hour the guard will conduct a foot patrol of the exterior of the building to verify it is secure. This guard will act as a visual deterrent. It will also help keep people from loitering and prevent diversion of medical marijuana purchased at the dispensary.

B. Vending Area

The unarmed guard will monitor the product vending area. This guard will act as a visual deterrent and will look for any signs of diversion. There will be a flat screen monitor at the guards post. From that monitor the guard will be able to view the exterior guard and the rest of the building.

Surveillance Systems

A 24 hour Electronic Surveillance System (ESS) consisting of 24 cameras. All video received from the ESS will be digitally recorded onto a secured hard drive and stored for 1 year. The video system for the cameras will be stored in a locked container. The ESS will record everything that takes place on the interior and exterior of the building 24 hours a day.

The interior and exterior of the building will be evaluated for optimal camera placement and a detailed writeup of locations will be prepared.

Management will be able to access all the security cameras 24 hours a day via a secure online stream.

Alarm System

The alarm system will also be controlled by a keypad and is monitored 24 hours a day by a state licensed alarm company.

There will be motion detectors in all rooms including; attic, basement, reception area, reception office and both sides of the product vending area. All windows and doors have been re-enforced.

The manager and assistant manager will always have a remote panic button for emergencies. The alarm will be tested on the 1st of every month.

Security Lighting

There will be a minimum of one security flood lights mounted to each exterior wall. These lights will illuminate the exterior building, the sidewalk and parking area on the east side of the building. There will be one light installed over the main entrance.

(It should be noted that prior to installing any security lights we will check with the surrounding neighbors to make sure that the lights are installed in a fashion that will not disturb them)

Patient Entry Procedures

Access to the facility is only possible through one entrance. When a patient wants to enter the building they are required to wait in a secured screening room.

A staff member will screen every individual to verify that they are a qualified patient. Every person entering the building has their face recorded by a surveillance camera in the screening room. When the patient has been verified they will be allowed inside the facility.

Verification Process:

First time patient

If the patient has a paper doctor's recommendation, staff will examines the document to ensure it has the following information:

- i. M.D. Signature
- ii. M.D. Medical license number
- iii. Website or phone number for verification
- iv. The length of time it is valid (usually a year)
- v. Date issued/Expiration

The intake staff will verify that the doctor has a valid license by checking it here: www.medbd.ca.gov/lookup.html

Staff will call the doctors office listed and verify that the subject is a qualified patient. If there is a concern regarding a patient, management has the option to call the doctor's office to speak with them directly.

Once verified, the staff member will have the patient complete a collective membership form. When the patient completes the form, staff will verify that it has been filled out correctly. Staff will then initial form indicating they have performed the verification.

Staff will scan a copy of the original doctor's recommendation, and the patient's California State driver's license/identification card. The patient will be given a *BACH* patient intake flyer containing our anti-diversion policy and BACH membership card.

Returning patient

Staff will check the subjects BACH membership card. If they are found in the system, and all the individuals' information is current and up to date, they will be allowed into the product vending area as soon as it is available.

Caregiver

If a patient brings in a non-patient for the purpose of signing them up as a caregiver, staff will verify the subject has valid caregiver paperwork signed by the patient's doctor. If the subject possesses proper caregiver documentation, it will be scanned into the computer with the caregivers California identification/ driver's license and filed with patient's paperwork. The caregiver will be given a *BACH intake flyer* containing our antidiversion policy and a BACH membership card.

Minors that are qualified patients.

Minors are not allowed in BACH at anytime.

Anti-Diversion

All staff/management/security guards will receive in house training on our Anti-Diversion policy. They will be trained how to observe and report any behavior suggesting that a patient is involved in the diversion of medical cannabis.

Patients that are found to be unlawfully diverting medical cannabis will have their membership permanently revoked, the on site manager will immediately document the incident and add the subjects name to a list of people banned from the premises. All patients will be given a BACH patient intake flyer containing our anti-diversion policy. The flyer will contain the following information:

Diversion

"Diversion" is a term given to the act of supplying a non-Prop. 215 qualified patient with cannabis from a medical source. It is the number one argument used to make the medical cannabis community appear to be a threat. Diversion is a violation of the law!!! It is a serious crime and can have devastating consequences for those caught diverting.

Here at the Bay Area Compassionate Health Center we have pledged to do all we can to prevent the diversion of this medicine to non-patients. You have signed the club rules promising you will not partake in the act of diverting. If our staff observes any indicator that you are diverting, be it something you say or do you, will have your membership permanently revoked.

To avoid the appearance of diverting we ask that you follow these simple rules:

- 1) Do not use your phone while in the dispensary.
- 2) Do not exchange money with people outside the building, before entering or leaving Holistic Health Center.
- 3) After you leave Holistic Health Center, do not hand products to people outside the building. We cannot know if a person is qualified unless we have checked them so if we ever hear discussion of sharing it will result in revocation of membership.
- 4) Avoid using shopping lists, as they give the appearance of diverting.
- 5) Numerous visits in one days may appear as diversion and may get you membership suspended.

It is important that we do everything we can to prevent diversion to help keep medical cannabis accessible and credible as a viable medical alternative.

At home be sure your medicine is secured in a locked storage space. If you have children understand that if they access your medicine of any kind you can be held on **criminal charges**. Be sure all storage containers are completely free of any plant matter, resins, and ash. If you eat edibles be sure they are kept secure from children, pets, and non-patients in your home. Be sure all warning labels stay intact until the product has been completely consumed. Do not throw stale or partially consumed edibles in the trash where others who find them may consume them. Ideally compost them, or run down a garbage disposal.

Smoking while driving is prohibited. Patients with valid Prop 215 card can be charged with DUI if caught smoking while driving. Smoking in unmoving vehicle is not illegal, but not recommended. Residual smell in the vehicle is probable cause for law enforcement to search your vehicle. Partially consumed cannabis found can be used as evidence to accuse you of DUI.

We at the Holistic Health Center want your medical cannabis experience to be as safe and healthy as possible. Compliance with all the rules of the Holistic Health Center and state and local law are vital for this system to remain a

safe and credible medical alternative,	
	END OF FLYER

Loitering

The only people allowed on site are employees, qualified patients and caregivers. No one else is allowed inside the building unless they have prior approval from management (electricians, water delivery drivers, etc).

No individual, patient or otherwise, including staff, will be permitted to loiter outside the building. If staff or security observes someone loitering, they will be first asked to leave. If they refuse, security will notify the on duty manager. Any person observed using cannabis anywhere around the collective will be told to cease immediately and asked to leave the area. This includes cannabis infused food products.

Neighboring businesses will be given an information sheet on whom to contact at the dispensary if they see any suspicious behavior pertaining to diversion, security, or consumption near the collective.

Opening Safety Procedures

Before opening the collective in the morning, the security guards will walk around the exterior of the building and verify that it has not been broken into. Once that has been verified security and the staff members will enter the building. Once security verifies that the interior is secure, staff will remove the product from the safe.

Closing Safety Procedures

Once the dispensary is closed for business and all non-employees have left, security will conduct a sweep of the entire premises to ensure no is hiding in the building. Once they verify that the building is secured, the staff will secure the product in the vault located in the secured storage room. Security will conduct one final security sweep of the exterior of the building to ensure the safety of employees leaving the dispensary. If the guard observes anything suspicious they will immediately report it to law enforcement.

Deliveries Procedures

Medical cannabis deliveries will only be delivered twice a week. Delivery times and days will be stager for the protection of our employees.

Prior to the arrival of the delivery, security will conduct a protective sweep of the area. Security will then meet the driver outside and safely escort them into the building.

All products are weighed and documented by the manager. The product will then be labeled and stored in the safe until it is needed.

At no time will an employee, volunteer, security guard, or collective member bring medical marijuana products into the store without prior approval from management and following of the preceding procedures. Any staff, security guard, or manager violating this policy will be terminated.

Product Storage

All products will be locked inside of a T15 vault in our secured storage room. The vault is wired into the alarm system. During operating hours all product not being displayed will be stored in the vault. At night all display products are secured in the vault.

Neighborhood Outreach

All surrounding businesses and neighbors will be given a contact card with the store number, and the phone numbers of our managers. We will encourage them to keep an eye out and report any behaviors that may suggest a security breach. We will also keep in close communication with respect to any burglaries/robberies that may have happened to our neighbors and will provide our surveillance camera footage if necessary.



Bay Area Compassionate Health Center 1423 Ocean Ave (at Granada Ave) Ocean Avenue Commercial Corridor, San Francisco

Frequently Asked Questions

- 1. What is Bay Area Compassionate Health Center?
- 2. What is a medical cannabis dispensary?
- 3. Why are you doing this? Marijuana is illegal.
- 4. Aren't cannabis dispensaries associated with high incidence of crime?
- 5. What will stop our children from using medical cannabis?
- 6. There are many medical cannabis dispensaries in San Francisco. Why can't sick people go somewhere else?
- 7. Isn't marijuana addictive?
- 8. I've heard that marijuana is a "gateway drug." Won't it create heroin addicts?
- 9. Where do you get the cannabis that you have in the dispensary?
- 10. What do you mean "medical grade" cannabis?
- 11. Why don't these sick people just use conventional prescription drugs? If they must use marijuana, isn't it available in pill form from a pharmacy.
- 12. Won't it be dangerous on the streets with all these people driving under the influence of medical marijuana?
- 13. I have heard that anyone can get a recommendation. How can you be sure that your members are "Qualified Patients?"

Responses to Frequently Asked Questions

1. What is Bay Area Compassionate Health Center?

Bay Area Compassionate Health Center (BACH) is a non-profit mutual benefit corporation registered with the State of California and the Franchise Tax Board. BACH is comprised entirely of legally qualified medical cannabis patients and primary caregivers who have chosen to collectively and cooperatively associate with one another in order to more effectively provide for their health care needs, including but not limited to, the cultivation of medical cannabis.

2. What is medical cannabis dispensary?

Most of California's estimated 200,000 patients obtain their medical marijuana from a Medical Cannabis Dispensing Collective (MCDC), often referred to as a "dispensary." Dispensaries are usually storefront facilities that provide medical marijuana and other services to patients who have obtained a doctor's recommendation to use cannabis to treat their illness.

Today, there are many legal dispensaries operating in California. In order for patients and primary caregivers to be admitted to the dispensary, they MUST be members of the collective; only members may obtain medical marijuana at the dispensary. Membership is only accepted when the appropriate documentation (valid doctor's recommendation and valid CA driver's license or CA identification card) is verified by BACH.

3. Why are you doing this? Marijuana is illegal.

California's original medical cannabis law, the Compassionate Use Act (Prop. 215), directs local officials to implement ways for qualified patients to access their medicine.

With the passage of state legislation (SB 420) in 2003, and the 2005 court ruling in *People v. Urziceanu*, medical cannabis dispensing collectives (or dispensaries) are now recognized as legal entities. Since most of the estimated 203,000 cannabis patients in California rely on dispensaries for their medicine, communities across the state are facing requests for business licenses or zoning decisions related to the operation of dispensaries.

While the Compassionate Use Act does not explicitly discuss medical cannabis dispensaries, it calls for federal and state governments to "implement a plan to provide for the safe and affordable distribution of marijuana to all patients in medical need of marijuana" (Health & Safety Code § 11362.5). This portion of the law has been the basis for the development of compassionate, community-based systems of access for patients in various parts of California. In some cases, this has meant the creation of patient-run collectives that allow those with cultivation expertise to help other patients obtain medicine.

The majority of medical marijuana (cannabis) patients cannot cultivate their medicine for themselves or find a caregiver to grow it for them. Most of California's estimated 200,000 patients obtain their medicine from a Medical Cannabis Dispensing Collective (MCDC), often referred to as a "dispensary." Dispensaries are typically

storefront facilities that provide medical cannabis and other services to patients in need. There are 23 dispensaries operating in San Francisco as of August 2009. Dispensaries operate with a closed membership that allows only patients and caregivers to obtain cannabis and only after membership is approved (upon verification of patient documentation).

Legally regulated dispensaries can benefit the local community by providing:

- A safe convenient environment for member patients;
- Legal access to marijuana for medicinal use in the patients neighborhood;
- Social support programs, including convenient seminars and clinics for (medical marijuana) patients;
- Community outreach and charitable contributions to the neighborhood being served;

Legally regulated dispensaries reduce neighborhood crime because:

- Dispensary provides their own security cameras and security guards serve as a deterrent to criminal activity and other problems on the street. This reduces crime in the vicinity;
- Illegal street sales in the neighborhood decrease;
- More criminal activity in the neighborhood gets reported to police.

Legally regulated dispensaries:

- Help to revitalize and promote the well-being of patients in their own neighborhoods;
- Encourage more foot traffic, bringing new customers to neighboring businesses;
- Abide by local regulations and community input and not a source of community complaints.

4. Aren't cannabis dispensaries associated with a high incidence of crime?

Some reports have suggested that dispensaries are magnets for criminal activity or other behavior that is a problem for the community, but the experience of those cities with dispensary regulations says otherwise. Crime statistics and the accounts of local officials surveyed by Americans for Safe Access indicate that crime is actually reduced by the presence of a dispensary. Complaints from citizens and surrounding businesses are either negligible or are significantly reduced with the implementation of local regulations.

This trend has led multiple cities and counties to consider regulation as a solution. Kern County, which passed a dispensary ordinance in July 2006, is a case in point. The sheriff there noted in his staff report that "regulatory oversight at the local levels helps prevent crime directly and indirectly related to illegal operations occurring under the pretense and protection of state laws authorizing Medical Marijuana Dispensaries." Although dispensary related crime has not been a problem for the county, the regulations will help law enforcement determine the legitimacy of dispensaries and their patients.

The sheriff specifically pointed out that, "existing dispensaries have not caused noticeable law enforcement of secondary effects and problems for at least one year." As a result, the focus of the proposed Ordinance is narrowed to ensure Dispensary compliance with the law" (Kern County Staff Report, Proposed Ordinance Regulating Medical Cannabis Dispensaries, July 11, 2006). The presence of a dispensary in the neighborhood can actually improve public safety and reduce crime. Most dispensaries take security for

their members and staff more seriously than many businesses. Security cameras are used both inside and outside the premises, and security guards employed to ensure safety. Both cameras and security guards serve as a deterrent to criminal activity and other problems on the street. Those likely to engage in such activities will tend to move to a less-monitored area, thereby ensuring a safe environment not only for dispensary members and staff but also for neighbors and businesses in the surrounding area.

On 1/16/2010, Los Angeles Police Department Chief Charlie Beck told reporters at the Daily News that medical cannabis collectives do not attract crime, adding that "banks are more likely to get robbed than medical marijuana dispensaries."

Residents in areas surrounding dispensaries have reported improvements to the neighborhood. Kirk C., a long-time San Francisco resident, commented at a city hearing, "I have lived in the same apartment along the Divisadero corridor in San Francisco for the past five years. Each store that has opened in my neighborhood has been nicer, with many new restaurants quickly becoming some of the city's hottest spots. My neighborhood's crime and vandalism seems to be going down year after year. It strikes me that the dispensaries have been a vital part of the improvement that is going on in my neighborhood."

Oakland's city administrator for the ordinance regulating dispensaries, Barbara Killey, notes that "the areas around the dispensaries may be some of the safest area of Oakland now because of the level of surveillance since the ordinance passed."

Likewise, Santa Rosa Mayor Jane Bender noted that since the city passed its ordinance, there appears to be "a decrease in criminal activity. There certainly has been a decrease in complaints. The city attorney says there have been no complaints either from citizens or from neighboring businesses."

5. What will stop our children from using medicinal cannabis?

There are many activities that only adults may legally engage in, such as purchasing and consuming alcohol and purchasing and smoking cigarettes. However, we do not forbid adults from responsibly engaging in these activities in order to dissuade our children from doing so. Nor can we justify depriving adult cannabis patients from their medicine on the grounds of sending a message to children. Like alcohol and cigarettes, medical cannabis is legally regulated.

Therefore like alcohol and cigarettes, medical marijuana dispensaries do not permit anyone under the age of 18 to obtain medical marijuana from the dispensary.

6. There are many medical cannabis dispensaries in San Francisco. Why can't sick people go somewhere else?

San Francisco is divided into many districts, each having their own personality and character. The need for access to a patient's medication, however, is citywide. Currently the dispensaries are located disproportionately to the population of the city.

The BACH location at Ocean Ave and Granada Ave serves San Francisco as a whole by affording convenient access proportionate to the city. It also serves the district directly by providing local access to qualified patients and their caregivers.

7. Is marijuana addictive?

Substantial research exists regarding marijuana and addiction. While the scientific community has yet to achieve full consensus on this matter, the majority of epidemiological and clinical research demonstrate that the reinforcing properties of marijuana in humans is low in comparison to other drugs of abuse, including alcohol and nicotine. According to the U.S. Institute of Medicine (IOM), fewer than one in 10 marijuana smokers become regular users of the drug, and most voluntarily cease their use after 34 years of age. By comparison, 15 percent of alcohol consumers and 32 percent of tobacco smokers exhibit symptoms of drug dependence.

According to IOM, observable cannabis withdrawal symptoms are rare and have only been identified under unique patient settings. These remain limited to adolescents in treatment facilities for substance abuse problems, and in a research setting where subjects were given marijuana or THC daily. Compared with the profound physical syndrome of alcohol or heroin withdrawal, marijuana-related withdrawal symptoms are mild and subtle. Symptoms may include restlessness, irritability, mild agitation and sleep disruption. However, for the overwhelming majority of marijuana users, these symptoms are not severe enough to re-initiate their use of cannabis.

8. I've heard that marijuana is a "gateway drug." Won't it create heroin addicts?

There is no conclusive evidence that the effects of marijuana are linked to the subsequent use of other illicit drugs. Preliminary animal studies alleging that marijuana "primes" the brain for other drug-taking behavior, have not been replicated, nor are they supported by epidemiological human data. Statistically, for every 104 Americans who have tried to marijuana, there is only one regular user of cocaine, and less than one user of heroin. Marijuana is clearly a "terminus" rather than a gateway for the overwhelming majority of marijuana smokers.

For the minority of marijuana smokers who do graduate to other substances, it is marijuana prohibition – which forces medical marijuana patients to associate with the illegal drug market – rather than the use of marijuana itself, that may lead to the use of other drugs. The more medical marijuana patients are required to obtain it from sources where other illegal drugs can also be obtained, the greater the chances that these substances will be the subject of experimentation.

In Holland, where politicians decided over 25 years ago to separate marijuana from the illegal drug market by permitting coffee shops to sell small amounts of marijuana to adults, the use of marijuana and other drugs are used at rates that are less than half of their American counterparts.

9. Where do you get the cannabis that you have in the dispensary?

Within BACH's membership, there are experienced master gardeners and cultivators with facilities in northern California that are both legal and safe. Special attention is paid to growing methods and practices to ensure that the end product is:

- 1. Safe Free from bacteria, mold, and harmful pesticides;
- 2. Legal Cultivating plants that will meet the needs of its members:
- 3. Medicinal medical grade

There has been much publicity about "grow houses:" houses where marijuana is illegally cultivated and distributed, endangering local communities in residential

neighborhoods. BACH has neither the need to nor the intention of obtaining medical marijuana from illegal sources. BACH provides a legal, safe alternative.

10. What do you mean by "Medical Grade" Cannabis?

Medical marijuana patients are hoping to achieve specific medical benefits from its use, so the production of medical marijuana must be strictly tested and controlled. While cannabis is a weed and can be easily grown in many climates, medical grade marijuana is unlike other types preferred by recreational users.

For example, of the more than 60 compounds that provide benefits to patients, THC (tetrohydrocannabinol) and CBD and CBN (Cannabidiol and Cannabinol) are the best understood. BACH is committed to providing the highest quality medical cannabis available to its members.

11. Why don't these sick people just use conventional prescription drugs? If they must use marijuana, isn't it available in pill form from a pharmacy?

For many patients, traditional medications \underline{do} work and they do not need or want to use medical marijuana. However, for a significant number of patients, including those suffering from:

Aids, cancer, glaucoma, epilepsy, multiple sclerosis, chronic pain, etc

Traditional medications do not provide symptomatic relief as effectively as medicinal cannabis. These patients should not be branded as criminals or endure serious pain and hardship.

Dronabinol (trade name Marinol), a pill made up of marijuana's most psychoactive ingredient, THC, is available by prescription. It is a legal, synthetic THC alternative to cannabis. Nevertheless, many patients claim they find minimal relief from it, particularly when compared to inhaled marijuana. The active ingredient in Marinol, delta-9-tetrahydrocannabinol, is only one of the compounds isolated in marijuana that appears to be medically beneficial to patients. Marinol does not contain other beneficial compounds such as cannabidiol (CBD), an anti-convulsant, and cannabichromine (CBC), an anti-inflammatory.

Marinol is effective for some patients. But for others, this highly potent synthetic drug has significant side effects.

- 1. Patients complain of being "knocked out" shortly after taking the pill.
- 2. Marinol also does not stimulate appetite as well as "whole marijuana" commonly does.
- 3. Marinol is also expensive as much as \$30,000 a year for one patient's prescription.

12. Won't it be dangerous on the streets with all these people driving under the influence of medical marijuana?

The response cannabis patient does not operate a motor vehicle or other dangerous machinery under the influence of cannabis, using the same caution as driving when consuming alcohol or taking prescription drugs.

Although cannabis is said by most experts to be safer than alcohol and many prescription drugs, responsible cannabis patients never operate mother vehicles under the influence of marijuana. Authorities will take steps to ensure that objective methods are developed to test a driver's capacity to drive safely.

13. I have heard that anyone can get a recommendation. How can you be sure that your members are "qualified patients?

Legally, a patient need only produce a recommendation and a valid ID to obtain medicine from a dispensary. BACH takes the extra step to verify a potential member's recommendation by calling the doctor directly or verifying online, as well as checking the license of the recommending doctor with the state board.

BACH will only take care of its verified members. Membership is allowed after and only after a BACH staff member verifies the doctor's recommendation. If a patient comes to BACH requesting membership and the doctor cannot be reached we will keep trying until it is verified. No transactions will occur until this process is complete. We will then issue a BACH card that expires on the date the recommendation expires. The member must renew every year with a new recommendation.

If the patient has a CA State card the verification has already been performed and membership would be granted once the identity is verified and agreement with the rules and policies are signed. Membership with BACH is free.

Thank you for taking the time to understand our mission. We hope this information helps you answer your questions.

We would like to hear your comments and answer any questions you might have. We will be holding an Open House in the near future to meet with the community. Please email us at the address below and we will put you on our mailing list. Also please feel free to contact us for more details, or to leave feedback.

Bay Area Compassionate Health Center

info@bachcares.com

Bay Area Compassion Health Center Inc., (BACH)

Collective Cultivation Agreement

Name:	Ca. State ID#
*Address:	
City of Residence:	
*Phone number:	
*Email: *optional	
Bay Area Compassion Health Center In licensed medical cannabis dispensary, and has compliance with all State and City of San France regulations. The legal rights and protection of a utmost priority. In order to provide both the pawith the greatest possible degree of legal protection sign the following before registering with Eservices.	been organized in full cisco laws and all BACH patients is our atients and staff of BACH ection, we request that
BACH is a project of the Bay Area Compas Inc. and is composed entirely of legally qualify patients and caregivers who have chosen to cooperatively associate with each other in order provide for their health care needs, including be cultivation of medical cannabis (CA H&S Cd. 12 below, I understand that I am entering my medinto the BACH database. I also state my agrees so associate with other BACH members, and to BACH rules and policies as outlined in the patients.	ied medical cannabis ollectively and er to more effectively out not limited to, the 1362.775). By signing edical cannabis number ement and intention to a faithfully follow all
Patient Signature:	-3-0-1
Date:	

D₂₃₇ ? 7

Bay Area Compassion Health Center Inc., (BACH)

BACH RULES AND POLICIES

- 1. Physician recommendation or approval for use of medical cannabis (e.g. state identification cards) must be kept current at all times. Patient/member is responsible for knowing when their recommendation or approval expires and submitting renewals or other new paperwork prior to said exemption. All recommendations and approvals, both initial and renewals will be verified before membership is granted.
- 2. Submission of false or intentionally misleading forms, documents, and/or records shall be grounds for expulsion and cancellation of membership from the Bay Area Compassionate Health Centers Inc, herein named BACH, a mutual benefit non profit corporation.
- 3. Medical cannabis obtained through the Collective is for personal medical use of patient/member only, and may not be redistributed to any other person for any purpose. Such redistribution shall be grounds for expulsion from the Collective and cancellation of membership.
- 4. Member/patient state identification card holders hereby authorize the Collective to use a copy of their identification card to support the Collective's cultivation of medical cannabis.
- 5. All Collective members shall be respectful and cognizant of the Collective members, employees, and neighbors at all times. No abusive or offensive conduct, re-distribution or resale of medicine, loitering, loud noise, or littering is allowed in the Collective facility. None of these activities, as well as ingestion of medicine, is allowed in or about the vicinity of the Collective facility. Violation of this rule shall be grounds for expulsion from the Collective and cancellation of membership.
- 6. Only the Collective members may enter the facility.

I hereby agree to the Collective's above-stated rules and policies.

- 7. No patient/member under the age of 21 years may enter the facility unless accompanied by an adult (Parent/Guardian)
- 8. The Collective patient/member agrees to reimburse the Collective for actual cost of cultivation or acquisition of medical cannabis, services, and the maintenance and expenses of the Collective. Services of the Collective may include, but are not limited to, massage, counseling, acupuncture, and food. Maintenance and expenses of the Collective may include, but are not limited to, rent, salaries, insurance, utilities, and other expenses incurred by the Collective as a direct result of providing for the member's Collective medical needs.
- 9. Any funds remaining after all expenses incurred by the Collective are paid, shall be redistributed to the members of the Collective as medicine and/or services, and/or disbursed in a manner to be determined by a vote of the membership's board of directors with the limitation that any such disbursement shall be for the benefit of the patients/members of the Collective including, but, not limited to charitable donations.

, E	1	
	Signature	Print Name
Date:		

MEDICAL MARIJUANA PROVIDER

BAY AREA COMPASSIONATE HEALTH CENTERS INC (BACH) Memorandum of Understanding Health and Safety Code Sections 11362.5/11362.7

This Memorandum of Understanding (MOU), made as of thisday ofhereby memorializes the verbal understanding previously made by the undersigned: After reading the following statements, please initial in the space provided before each statement to certify you have read and understand each statement.
1. The undersigned is a resident of the State of California; is over the age of 21; and is a qualified patient, person with a valid State issued identification card, or a primary caregiver of a qualified patient.
2. Bay Area Compassionate Health Centers Inc (hereafter BACH) is a not-for-profit, unincorporated community of qualified patients, , and or their designated primary caregivers of qualified patients who associate within the State of California in order to collectively and cooperatively cultivate marijuana for medical purposes.
3. BACH's primary purpose is to establish community gardens and a central distribution center that will facilitate the safe and affordable access of cannabis for medical purposes.
4. The day-to-day operating responsibility of BACH is assigned to Bay Area Compassionate Health Centers Inc.
5. The undersigned is aware that the cannabis made available under this MOU is exclusively for medical purposes and is either: (a) provided free to qualified patients and caregivers who have signed this MOU; (b) provided in exchange for services rendered to BACH; (c) allocated based on fees that are reasonably calculated to cover overhead costs and operating expenses; or (d) any combination of the above.
6. The undersigned understands and agrees that he/she shall work on some aspect of BACH that is directly or indirectly related to BACH's primary purpose. (Initial activities in which you contribute):
CULTIVATION (labor, transportation, real estate management, equipment,
security);
DISTRIBUTION (real estate management, administration, security, tax/license compliance);
PATIENT SERVICES (care giving, transportation/delivery, peer counseling);
FUND RAISING(donations, public relations);
LEGAL AFFAIRS (public hearings, testimonials, trial assistance).

reater. igned that the marijuana cultivated ical use only and may not be divert
ical use only and may not be divert
of marijuana that will be cultivated ss of marijuana due to crop failure
individual(s) designated in item ms of liability resulting from the under this MOU.
he date in which the undersigned's ated when the undersigned present proval.
ersigned's affiliation with BACH
a for non-medical use.
Print name
Time name



ARTICLES OF INCORPORATION

SEP 2 3 2009

I

The name of the corporation is **Bay Area Compassion Health Centers, Inc**

 Π

This corporation is a nonprofit **Mutual Benefit Corporation** organized under the Nonprofit Mutual Benefit Corporation Law. The purpose of this corporation is to engage in any lawful activity, other then the credit union business, for which a corporation may be organized under such law.

Ш

The specific purpose of this corporation is to operate as a patient medical supply
provider for outpatient services, respirator services and other products for the benefit,
and/or use of the handicapped.

IV

The name and address in the State of California of this corporation's initial agent for service of process is:

Name:

Gregory Schoepp

Address:

3729 Balboa Street

City:

San Francisco,

California

94121

V

Notwithstanding any of the above statements of purposes and powers, this corporation shall not, except as to an insubstantial degree, engage in any activities or exercise any powers that are not in furtherance of the specific purposes of this corporation.

GREGORY SCHOEPP, INCORPORATOR



SI-100 (REV 01/2008)

State of California



E-841437

APPROVED BY SECRETARY OF STATE

Secretary of Sta	ate 💮		LED
STATEMENT OF INFORMATION (Domestic Nonprofit, Credit Union and Consumer Cooperati Filing Fee \$20.00. If amendment, see instru IMPORTANT - READ INSTRUCTIONS BEFORE COMF	ctions.	of the Sta Nov	he Secretary of State ate of California - 5 2009 For Filing Use Only
CORPORATE NAME (Please do not alter if name is preprinted.)			N
C3231196 BAY AREA COMPASSION HEALTH CENTERS, INC			<u> </u>
DUE DATE:			
COMPLETE PRINCIPAL OFFICE ADDRESS (Do not abbreviate the na	ame of the city. Item 2 c	cannot be a P.O. Box.)	
 STREET ADDRESS OF PRINCIPAL OFFICE IN CALIFORNIA, IF ANY 3619 BALBOA STREET SAN FRANCISCO CA 94121 	CITY	STATE	ZIP CODE
3. MAILING ADDRESS OF THE CORPORATION, IF REQUIRED	CITY	STATE	ZIP CODE
NAMES AND COMPLETE ADDRESSES OF THE FOLLOWING (comparable title for the specific officer may be added; however, the preparable title for the specific officer may be added; however, the preparable title for the specific officer may be added; however, the preparable title for the specific officer may be added; however, the preparable title for the specific officer may be added; however, the preparable title for the specific officer may be added; however, the preparable title for the specific officer may be added; however, the preparable title for the specific officer may be added; however, the preparable title for the specific officer may be added; however, the preparable title for the specific officer may be added.	OFFICERS (The corporinted titles on this form	oration must have them in must not be altered.)	se three officers. A
4. CHIEF EXECUTIVE OFFICER/ ADDRESS GREGOERY SCHOEPP 3619 BALBOA STREET SAN FRANCIS	CITY CO, CA 94121	STATE	ZIP CODE
5. SECRETARY/ ADDRESS GREGORY SCHOEPP 3619 BALBOA STREET SAN FRANCISCO	CITY CA 94121	STATE	ZIP CODE
6. CHIEF FINANCIAL OFFICER/ ADDRESS GREGOERY SCHOEPP 3619 BALBOA STREET SAN FRANCIS	CITY CO CA 94121	STATE	ZIP CODE
AGENT FOR SERVICE OF PROCESS (If the agent is an individual, the a California street address (a P.O. Box address is not acceptable). If the California Secretary of State a certificate pursuant to Corporations Code	e agent must reside in C e agent is another corpo	oration, the agent must I	st be completed with have on file with the
7. NAME OF AGENT FOR SERVICE OF PROCESS		·	
GREGORY SCHOEPP			
8. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN IF	NDIVIDUAL CITY	STATE	ZIP CODE
3621 BALBOA STREET SAN FRANCISCO, CA 94121			
DAVIS-STIRLING COMMON INTEREST DEVELOPMENT ACT (Californ	nia Civil Code section 1	350, et seq.)	
9. Check here if the corporation is an association formed to manage composed by Development Act and proceed to items 10, 11 and 12.	non interest development	under the Davis-Stirling Co	mmon interest
NOTE: Corporations formed to manage a common interest development must SI-CID) as required by California Civil Code section 1363.6. Please sec			ent Association (Form
10. ADDRESS OF BUSINESS OR CORPORATE OFFICE OF THE ASSOCIATION, IF ANY	CITY	STATE Z	IIP CODE
11. FRONT STREET AND NEAREST CROSS STREET FOR THE PHYSICAL LOCATION O (Complete if the business or corporate office is not on the site of the common interest development of the common interest development.)		DEVELOPMENT 9	-DIGIT ZIP CODE
12. NAME AND ADDRESS OF ASSOCIATION'S MANAGING AGENT, IF ANY	CITY	STATE Z	IP CODE
13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.			
11/05/2009 GREOGRY SCHOEPP	PRESIDEN ²	Т	
DATE TYPE OR PRINT NAME OF PERSON COMPLETING THE FO	ORM TITLE	E	SIGNATURE



State of California Secretary of State

Statement of Information

E-K82321 **FILED**

In the office of the Secretary of State of the State of California

May - 2 2012

This Space For Filing Use Only

(Domestic Nonprofit, Credit Union and Consumer Cooperative Corporations) Filing Fee \$20.00. If amendment, see instructions.

IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. CORPORATE NAME		-	
C3231196 BAY AREA COMPASSION HEALTH CENTERS, INC GREG SCHOEPP			
3615 BALBOA STREET			
SAN FRANCISCO CA 94121		· · · · · · · · · · · · · · · · · · ·	
Due Date:			
Complete Principal Office Address (Do not abbreviate the name of the city	y. Item 2 cannot be a	P.O. Box.)	
2. STREET ADDRESS OF PRINCIPAL OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
3615 BALBOA STREET SAN FRANCISCO CA 94121			
3. MAILING ADDRESS OF THE CORPORATION, IF REQUIRED	CITY	STATE	ZIP CODE
GREG SCHOEPP 3615 BALBOA STREET SAN FRANCISCO CA 9412	21		
Names and Complete Addresses of the Following Officers (The corpor specific officer may be added; however, the preprinted titles on this form mus	ration must list these st not be altered.)	three officers. A	comparable title for the
4. CHIEF EXECUTIVE OFFICER/ ADDRESS GREG SCHOEPP 3615 BALBOA STREET SANFFRANCISCO, CA 9-	CITY 94121	STATE	ZIP CODE
5. SECRETARY ADDRESS	CITY	STATE	ZIP CODE
GREG SCHOEPP 3615 BALBOA STREET SAN FRANCISCO CA 9412	1		
6. CHIEF FINANCIAL OFFICER/ ADDRESS	CITY	STATE	ZIP CODE
GREG SCHOEPP 3615 BALBOA STREET SAN FRANCISCO CA 94			
Agent for Service of Process (If the agent is an individual, the agent must r California street address (a P.O. Box address is not acceptable). If the agent California Secretary of State a certificate pursuant to California Corporations (t is another corporation	n, the agent must h	nave on file with the
7. NAME OF AGENT FOR SERVICE OF PROCESS			
GREG SCHOEPP			
8. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVID	DUAL CITY	STATE	ZIP CODE
3615 BALBOA STREET SAN FRANCSICO, CA 94121			
Davis-Stiring Common Interest Development Act (California Civil Code sec	ction 1350, et seq.)		
9. Check here if the corporation is an association formed to manage common into Development Act and proceed to items 10, 11 and 12.	terest development under	er the Davis-Stirling C	ommon interest
NOTE: Corporations formed to manage a common interest development must also fil SI-CID) as required by California Civil Code section 1363.6. Please see instri	le a Statement by Commuctions on the reverse s	non Interest Developmide of this form.	nent Association (Form
10. ADDRESS OF BUSINESS OR CORPORATE OFFICE OF THE ASSOCIATION, IF ANY	CITY	STATE	ZIP CODE
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12. NAME AND ADDRESS OF ASSOCIATION'S MANAGING AGENT, IF ANY	CITY	STATE 2	ZIP CODE
13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.			
05/02/2012 GREG SCHOEPP	DIRECTOR		
DATE TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM	TITLE		SIGNATURE







All UFCW5 Cannabis Division Collective Bargaining Agreements include our Industry Code of Conduct

Code of Conduct

We, as medical cannabis patients, employees and employers, acknowledge that we are an industry of vulnerability and that we must take certain, deliberate and consistent action to protect those that are most vulnerable within the communities that we serve. We have proactively initiated this public pledge of the standards and commitment that we make as the leading organized representatives of our local industry.

We, pledge to: obey the law; provide excellence in service to our patient members; provide dignity, equality and opportunity to our employees; and dedicate our operations to the highest standards of social and environmental responsibility in the communities in which we operate.

- We pledge to honor the trust of our community by devotedly adhering to California state law including proposition 215 and the Attorney General's guidelines, as well as all reasonable local ordinances.
- We pledge to only associate with qualified patients and their caregivers who are residents of the state of California and possess a valid and verifiable CA doctor's recommendation for medical cannabis.
- We pledge that we shall not provide medical cannabis to any patient in an amount not consistent with personal medical use.
- We pledge to go over and above what is required to prevent the illegal sale, barter or distribution of medical cannabis, including educating our members regarding compliance with existing State and local laws.
- We pledge that our cultivation and food processing facilities, where edibles are prepared, comply with all relevant federal, state and local health and safety laws pertaining to the preparation of food for our private collective memberships.
- We pledge to operate a safe and secure environment, including adequate security officers
 and surveillance that will monitor the grounds and the immediate vicinity to assure that all
 patrons of the property immediately leave the site and do not consume medical cannabis in the
 vicinity of any club or any adjacent property or parking lot.
- We pledge to be both proactive and responsive to the concerns of the neighbors and the communities where we operate.
- We pledge to employ best accounting practices and maintain transparency with the municipalities where we are operating. We believe in paying our fair share of taxes to support the communities, of which we are a vital part.
- We pledge to provide a dignified, professional and enjoyable place of work for our employees. We pledge to follow, all state and federal employment laws as well as our own union contract.
- We pledge to work collaboratively with all community stakeholders to establish a safe, friendly and dignified industry for the patients of Cannabis in our community that is sustainable, commerce friendly, job producing, tax revenue generating and predictable for the entire local community.



CONDUCT AND NEUTRALITY AGREEMENT BETWEEN UFCW LOCAL 5 AND BAY AREA COMPASSIONATE HEALTH CENTER

WHEREAS, Bay Area Compassionate Health Center (hereafter, "the Employer") and UNITED FOOD AND COMMERCIAL WORKERS UNION LOCAL 5 (hereafter, "the Union") agree that it is in the mutual interest of the parties to cooperate to achieve a relationship that recognizes and advances their respective goals and objectives; and

WHEREAS, Bay Area Compassionate Health Center employees, who are not currently represented, seek to join a union, and the Employer agrees to not interfere with or oppose its employees' efforts to form or join a union of their choice; and

WHEREAS, seeing mutual benefit and interest, the Employer and Union agree to adopt a non-adversarial position on the issue of Union representation of its employees.

WHEREAS, the National Labor Relations Act guarantees to employees the right to exercise freedom of choice whether or not to belong to a labor union and the Employer and the Union mutually want to ensure such free choice can be fully exercised;

THEREFORE, THE PARTIES HEREBY AGREE AS FOLLOWS:

The employer shall remain neutral on the issue of Union representation of its employees. This shall also apply to the Employer's management employees. The Employer will communicate to all employees that the choice of union representation is a matter for each individual to decide and that the Employer will respect the decision of the majority of employees making such choice.

The Union, during the course of organizing the Employer's employees, will communicate with employees in a non-adversarial, positive manner. In the course of attempting to organize employees of the Employer, the Union will not promote, state or otherwise imply that the Union can assure the employees of any improvement or change in Employer policy, practice, wage, benefit or other condition of employment.

The Employer shall allow employees reasonable access to non-work areas during non-work time in order to solicit and otherwise communicate with other employees on the issue of unionization.

In the event the Union is recognized as the bargaining representative of the company's employees, the parties agree to immediately enter into good-faith negotiations for the purpose of reaching a mutually acceptable collective bargaining agreement.

The Employer shall instruct its management on the terms of this Agreement. The Union shall instruct its organizers and representatives on the terms of this Agreement. Both parties, by accepting this Agreement will make every effort to cause their respective organizations and personnel to abide by the terms of this Agreement.

For the Employer:	For the Union:		
Date	Date		
(Bay Area Compassionate Health Center)	United Food and Commercial Workers Union Local 5		









Recognition Agreement

Bay Area Compassionate Health Center ("the Employer") and the United Food & Commercial Workers Union ("the Union") hereby agree to the following terms:

- 1. <u>Access rights</u>. Accredited Union representatives will be allowed onto the Employer's premises during working hours to speak with employees during non-working time. The Employer will make arrangements to permit these conversations to be held in an area where the employee(s) will be able to speak to the Union representative without monitoring by the Employer.
- 2. <u>Contact information</u>. Upon certification by the Union that more than 30% of current full-time and regular part-time employees have indicated that they wish to be represented by the Union in collective bargaining with the Employer, the Employer shall furnish to the Union the names, home addresses, home telephone numbers and home email addresses, if known, of all current full-time and regular part-time employees.
- 3. <u>Recognition</u>. Upon confirmation that a majority of its current full-time and regular part-time employees have authorized the Union to represent them for the purpose of collective bargaining, the Employer hereby recognizes the Union as the exclusive representative of its employees in the following bargaining unit:

All full-time and regular part-time current full-time and regular part-time employees employed by Bay Area Compassionate Health Center in the City of San Francisco in the State of California.

Bay Area Compass	sionate Health Cen	ter	UFCW5		
Address			Address		
City	State	Zip Code	City	State	Zip Code
Signed:			Signed:		
Date:			Date:		<u>.</u>

Exploring the Ecological Association Between Crime and Medical Marijuana Dispensaries

NANCY J. KEPPLE, M.S.W., a.* AND BRIDGET FREISTHLER, PH.D. a.b

^aDepartment of Social Welfare, University of California, Los Angeles, Luskin School of Public Affairs, Los Angeles, California ^bLewis Center Faculty Fellow, University of California, Los Angeles, Luskin School of Public Affairs, Los Angeles, California

ABSTRACT. Objective: Routine activities theory purports that crime occurs in places with a suitable target, motivated offender, and lack of guardianship. Medical marijuana dispensaries may be places that satisfy these conditions, but this has not yet been studied. The current study examined whether the density of medical marijuana dispensaries is associated with crime. Method: An ecological, cross-sectional design was used to explore the spatial relationship between density of medical marijuana dispensaries and two types of crime rates (violent crime and property crime) in 95 census tracts in Sacramento, CA, during 2009. Spatial error regression methods were used to determine associations between crime rates and density of medical marijuana dispensaries, controlling for neighborhood characteristics associated with routine activities. Results: Violent and property crime rates were positively associated with percentage of commercially zoned areas, percentage of one-person

households, and unemployment rate. Higher violent crime rates were associated with concentrated disadvantage. Property crime rates were positively associated with the percentage of population 15–24 years of age. Density of medical marijuana dispensaries was not associated with violent or property crime rates. Conclusions: Consistent with previous work, variables measuring routine activities at the ecological level were related to crime. There were no observed cross-sectional associations between the density of medical marijuana dispensaries and either violent or property crime rates in this study. These results suggest that the density of medical marijuana dispensaries may not be associated with crime rates or that other factors, such as measures dispensaries take to reduce crime (i.e., doormen, video cameras), may increase guardianship such that it deters possible motivated offenders. (J. Stud. Alcohol Drugs, 73, 523–530, 2012)

WITHIN THE PAST 15 YEARS, a new type of drug outlet has developed in the United States that combines place-based distribution with an illicit substance—medical marijuana dispensaries. At present, 17 states and the District of Columbia have passed legislation legitimizing the use of medical marijuana and its distribution (National Organization for the Reform of Marijuana Laws, 2012). Thus, marijuana distribution in the United States is for the purpose of medical use and only recognized by state-level policies.

Internationally, similar place-based dispensaries have been present since the late 1970s as "coffee houses" or "hash clubs." They are perceived to be a breeding ground for criminal networks, attracting individuals prone to crime and increasing potential for crime around these locations (Asmussen, 2007, 2008; Ministry of Health, Welfare, and Sport, 1995; Møller, 2008). In the United States, the increase in medical marijuana outlets (often referred to as dispensaries or collectives) during the mid to late 2000s has created per-

ceptions that dispensaries support conditions that encourage crime in and around their locations (California Police Chief's Association, 2009). Although the concerns of place-based related crime are consistent across geographic contexts, little is known empirically about medical marijuana dispensaries (Penick, 2006; Reiman, 2007). In fact, only one study has assessed the ecological effects of dispensaries: Jacobson et al. (2011) observed that crime was higher around medical marijuana dispensaries 10 days after their mandated closures compared with 10 days before the closure. Although contrary to previously discussed perceptions, the results cannot be fully evaluated because this technical report was withdrawn after the authors determined that a systematic review of the study's methodology and conclusions was required.

Routine activity theory of crime

Routine activity theory provides a framework to understand how the presence of medical marijuana dispensaries may contribute to criminal activity. According to this theory, crime occurs when three necessary conditions are met: (a) the presence of a motivated offender; (b) a suitable target defined by its value, visibility, access, and/or likelihood of low resistance to crime; and (c) the absence of guardians against crime, such as place managers (i.e., owners and the agents they hire to monitor and regulate behaviors), inadequate security, and/or low levels of informal social control in the surrounding environment (Clarke and Felson, 1993; Cohen and Felson, 1979; Eck and Weisburd, 1995).

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^{*}Correspondence may be sent to Nancy J. Kepple at the Department of Social Welfare, University of California, Los Angeles, Luskin School of Public Affairs, 3250 Public Affairs Building, Box 951656, Los Angeles, CA 90095-1656, or via email at: njwilliams@ucla.edu.

Neighborhood demographic and structural characteristics are not constant over space and thus create opportunities where these three conditions may converge in a geographic area that increase the potential for victimization and encourage crime (Brantingham and Brantingham, 1993; Clarke and Felson, 1993). First, demographic neighborhood characteristics capture the concentration of motivated offenders and potential targets. Various studies have observed that the concentration of potential offenders in neighborhood areas, measured by neighborhood economic deprivation (e.g., concentrated poverty and unemployment rate), is positively associated with neighborhood crime rates (Andresen, 2006; Miethe and McDowall, 1993). The concentration of populations identified as suitable targets has also been observed to be associated with neighborhood crime rates. Neighborhood areas with high concentrations of young males (ages 15-24 years) residing in single-adult households and/or disrupted family (or single-parent) households are likely targets because of the increased likelihood that these neighborhoods are composed of populations who socialize outside of the home and have an increased amount of goods per household (Cohen and Felson, 1979; Sampson and Wooldredge, 1987).

Guardianship of a place or geographic area is related to the presence of individuals or systems that can monitor and regulate behavior to protect against crime, such as place managers, formal authorities (e.g., security guards or police), and/or informal social control provided by individuals within the surrounding environment (e.g., friends or neighbors) (Clarke and Felson, 1993; Cohen and Felson, 1979). Thus, demographic factors can indicate potential guardianship of an area based on informal monitoring and the presence of individuals who may deter crime. For example, a higher percentage of vacant housing units can increase the absence of guardians, such as neighbors and place managers, and thus increase the potential for crime both in and around these vacant locations (Roncek and Maier, 1991; Spelman, 1993). Conversely, high population density may increase the presence of guardians in an area, resulting in the often observed negative association between population density and crime (Andresen, 2006). This additional monitoring of individuals is likely to offset crime expected from the concentration of potential targets and goods within a given amount of space (Cohen et al., 1980).

In addition, structural neighborhood features can contribute to both violent and property crime. Commercially zoned areas are associated with a higher level of street activity and cash flow. These conditions tend to attract crime and/or create opportunities where the three conditions of crime accidentally converge. As a result, there is typically a positive relationship between percentage of a neighborhood area identified as commercially zoned and crime outcomes (Brantingham and Brantingham, 1993; Cohen and Felson, 1979; Sampson and Wooldredge, 1987). Roadway features, such as the presence of highway ramps, may also encourage

crime in the general area by easing a potential offender's ability for a quick getaway. Neighborhood areas with highway ramps, then, may be viewed as more suitable for crime through increased access (Felson, 1987). Therefore, those neighborhoods composed of demographic and structural factors associated with crime may create conditions in which both the physical location of a business and the surrounding areas are at risk for higher crime incidents (Brantingham and Brantingham, 1993).

Routine activities approach to medical marijuana dispensaries

Previous work has established the spatial relationships between crime locations and place (Eck and Weisburd, 1995; Greenbaum and Tita, 2004; Gruenewald et al., 2004; Roncek et al., 1991). Places such as medical marijuana dispensaries provide an opportunity where the conditions for crime outlined by routine activities theory can also converge. However, there have been no peer-reviewed studies that explore whether medical marijuana dispensaries are related to crime.

Applying routine activity theory to medical marijuana dispensaries suggests that dispensaries may uniquely contribute to crime even when other contextual factors associated with crime have been controlled. They have on-site stock and sales of marijuana and are a predominantly cash-based business (California Police Chief's Association, 2009). The centralized location of the goods—marijuana and cash—within the dispensaries makes the location a suitable target for a potential offender who might be motivated to seek out ways to obtain the desirable goods, particularly where security appears to be absent.

Based on the conditions described above, dispensaries can be at risk for property crimes, such as burglary. Employees of the dispensaries can be at risk for violent crimes, such as robbery or assault, because they are gatekeepers to both the marijuana products and the cash at the site. Estimates from the western United States and other countries show that users of medical cannabis are primarily male (i.e., two thirds to three fourths of all users) and White, with a wide range of ages (i.e., late teen years to old age; median age between 30 and 50) (Aggarwal et al., 2009; O'Connell and Bou-Matar, 2007; Ogborne and Smart, 2000; Penick, 2006; Reiman, 2007; Ware et al., 2005). The typical clientele for dispensaries (i.e., older White men) are not associated with being at risk for perpetrating crime (Cottle et al., 2001; Hirschi and Gottfredson, 1983). However, they are at risk for being targets of violent crimes, such as robbery, because they are likely carrying cash on entry and some physical amount of marijuana product on exit. In addition, medical marijuana dispensaries have a diverse clientele, with some who are older, frail, and/or diagnosed with chronic, debilitating conditions (O'Connell and Bou-Matar, 2007; Reiman, 2007; Swift et al., 2005; Ware et al., 2003). These more vulnerable

clients may appear to be easier targets for a motivated offender and are at higher risk for victimization (Cohen and Felson, 1979).

Study aims

To date, only preliminary quantitative evidence exists for the relationship between these medical marijuana dispensaries and crime. Thus, the current study investigated the relationship of crime rates in Sacramento, CA, during 2009 to medical marijuana dispensaries to better understand their ecological impact. We hypothesized that medical marijuana dispensaries would be associated with higher crime rates, controlling for other aggregate neighborhood measures of routine activities known to contribute to crime.

Method

Study design

This study used an ecological, cross-sectional design to explore the spatial relationship between the density of medical marijuana dispensaries and crime rates in the City of Sacramento. California recognized distribution of marijuana through collectives in 2004; however, Sacramento did not implement local regulatory policies until 2010. Thus, data are from 2009, a period that represents the longest time for growth before regulations of medical marijuana dispensaries in Sacramento. The sample for the study included all census tracts with centroids within Sacramento City boundaries (N = 95). All data were aggregated to 2000 U.S. Census tract boundaries. Census tracts approximate neighborhood areas with regard to size and composition: (a) average population is 4,000 residents, (b) boundaries align with visible features of the environment, and (c) homogeneous with respect to population characteristics and/or living conditions (U.S. Census Bureau, Geography Division, 2008).

Measures

The dependent variables in the study were violent crime and property crime as measured by police crime incident data obtained from the Sacramento Police Department. Crime incidents were available by crime code and location of incident. Data were recoded into violent crime and property crime categories and geocoded to greater than 99%. Violent crimes were recoded based on the Uniform Crime Reporting definitions, which included homicide, sexual assault, robbery, and aggravated assault. Sexual assaults were excluded from the analysis because address information is confidential to protect the victim; those crimes were not able to be geocoded. Property crimes also were recoded based on the Uniform Crime Reporting definitions, which included burglary, larceny-theft, motor vehicle theft, and arson. For

Table 1. Descriptive statistics for dependent and independent variables across census tracts in Sacramento, CA (N=95)

Variable	M	SD
Crime rates		
Violent crime rate per 1,000 population	12.72	22.46
Property crime rate per 1,000 population	67.03	107.98
MMD density		
MMDs per 10 roadway miles	0.41	0.90
Routine activity theory controls		
Total population, in 1,000s	5.07	2.67
% Vacant housing units	6.14	3.97
Population density, in 1,000s	7.07	3.66
Male-to-female ratio	0.99	0.23
% of population 15-24 years old	13.60	4.41
% One-person household	33.49	17.47
% Disrupted family household	11.94	6.06
Unemployment rate	14.84	13.45
Index of concentration at the extremes	-0.25	0.23
% Commercial zoning	12.16	13.71

Note: MMD = medical marijuana dispensary.

each type of crime category, the number of crime incidents in a census tract was divided by the total population of the tract and multiplied by 1,000 to create the associated crime rate variable. Table 1 provides descriptive statistics for crime rates per census tract. Because of the right-skewed distributions of the dependent variables, violent crime rate and property crime rate were transformed by a natural log. Table 2 provides zero-order correlations between the natural log of each type of crime rate and each continuous independent variable.

The locations of medical marijuana dispensaries were determined by comparing multiple sources: (a) Sacramento City's listing associated with Ordinance No. 2009-033, An Ordinance Establishing a Moratorium; (b) news publications; (c) discussion boards on the Internet; (d) trade publications; and (e) survey of dispensary owners/managers. Locations were verified by having at least three sources document that a dispensary was operating on or by June 16, 2009, which provided a midpoint estimate for locations opened during the year. All outlets were geocoded based on point location to 100%. A total of 40 medical marijuana dispensaries were located within 28 of the 95 census tracts (29.5%) in Sacramento. The density of medical marijuana dispensaries was measured by the number of dispensaries per roadway mile in a census tract; this measure was scaled to density per 10 roadway miles. The aggregation to census tracts provided the best variability of density for the smallest areal unit that approximates a neighborhood area. The number of dispensaries ranged from 0 to 3 outlets per tract with density per tract ranging from 0 to 4.95 dispensaries per 10 roadway miles. Figure 1 shows the location of medical marijuana dispensaries mapped onto an unweighted gradient of violent crime rates and property crime rates per 1,000 population by census tract. Those areas with the highest rate of violent or property crime are not necessarily the areas with the greatest population.

Table 2. Zero-order correlation coefficients of independent variables with violent crime rate and property crime rate (N = 95)

Variable	Violent crime rate (LN)	Property crime rate (LN)
MMD per 10 RWM	.421***	.423***
1,000 population/square mile	208*	414***
% Vacant housing units	.509***	.425***
Male-to-female ratio (LN)	.523***	.470***
% Population 15-24 years old	207*	590***
% One-person household	.462***	.656***
% Disrupted family household	.440***	.137
Unemployment rate (LN)	.528***	.161
Index of concentration at the extremes	675***	367***
% Commercially zoned	.609***	.735***

Notes: LN = natural log; MMD = medical marijuana dispensary; RWM = roadway mile.

To control for neighborhood population and place characteristics that routine activity theory would suggest contribute to observed crime rates, several control variables were created and included in the model. The following variables were selected to control for neighborhood contextual factors commonly associated with aggregate patterns of crime:

population density (1,000 population per square mile), male-to-female ratio, percentage of population ages 15–24 years, percentage of one-person households, percentage of disrupted family (or single-parent) households, unemployment rate, and percentage of housing units that were vacant. Data for the measures were from the 2009 estimates of population and housing characteristics obtained from GeoLytics Inc. (2009). Geocoding rates for these census measures are, by definition, 100%. Table 1 provides a summary of descriptive statistics for all control variables. Male-to-female ratio and unemployment rate were transformed using the natural log to address right-skewed distributions.

In addition, neighborhood disadvantage was measured by the index of concentration at the extremes representing concentrated poverty (-1.0) to concentrated affluence (1.0) on a continuous scale. The variable was constructed by subtracting the number of poor households from the number of affluent households and dividing the result by the total number of households (Massey, 2001). Poor households were determined by using 2008 poverty guidelines. Any household composed of two or more individuals and with a combined income less than \$26,400 (all dollar values are in

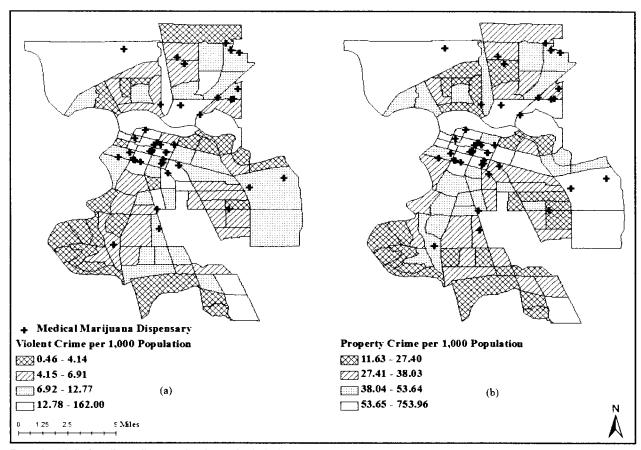


FIGURE 1. Medical marijuana dispensary locations and neighborhood crime rates per 1,000 population (N = 95): (a) violent crime rate by census tract, (b) property crime rate by census tract

^{*}p < .05; ***p < .001.

U.S. dollars) were considered to be below the 200% poverty level. As a result, all households with an income of less than \$25,000 were included in the poor household count. Affluent households were determined by any income that was more than two standard deviations above median income, resulting in all households with an income of \$100,000 or more being included in the affluent household count.

A categorical variable for the presence of highway onramps was created as a proxy measure for physical characteristics that allowed for quick and easy entry and exit into a census tract. We used a categorical measure because of the limited variability in the number of highway ramps per census tract (i.e., 56 of the 95 census tracts had no highway exits; less than 5 census tracts had more than one highway exit). All roadway segments with the Census Feature Class Code (CFCC) A63 (i.e. access ramp) were selected and then aggregated to the census tract; the variable was coded 0 for no highway ramp present and 1 for highway ramp present. ESRI 2008 Streets for United States and Canada (based on 2003 Tele Atlas Dynamap Transportation Version 5.2 product) was used to identify highway ramps (ESRI, 2008). The geocoding rate for highway ramps was 100%; however, the street file is based on 2003 streets and does not account for development in the 5 years between 2004 and 2009.

Finally, all areas defined as commercial zoning for the City of Sacramento (i.e., C1 = limited commercial; C2 = general commercial: C3 = central business district: SC = shopping center; HC = highway commercial; C4 = heavy commercial; ORMU = office/residential mixed use; EC = employment center; OB = office zone) were selected and were parsed into polygons that aligned with census tract boundaries so square mile area could be calculated. The percentage of commercially zoned area was calculated by dividing the aggregate square mile area of commercial zoning by the total square mile area of the census tract and then multiplying by 100. The shapefile for commercially zoned areas from 2010 was obtained from Sacramento County and the City of Sacramento, Geographic Information Systems Division. Geocoding rates for commercially zoned areas were 100% for areas within Sacramento City boundaries.

Statistical analyses

This study used geospatial methods, which have become standard practice for studying ecological relationships between place and crime (Gruenewald et al., 2006). Area units (e.g., census tracts) located next to each other often share similar characteristics that may bias results because they are highly correlated, a phenomenon called *spatial autocorrelation* (Cliff and Ord, 1973). Spatial techniques address this bias by accounting for the spatial autocorrelation. To test if spatial autocorrelation was an issue for these

data, the Univariate Moran's I, which is a global measure of spatial autocorrelation, was calculated for the dependent variables (Bailey and Gatrell, 1995). Moran's I was statistically significant for violent crime rate (I = 0.3257, p < .05) and property crime rate (I = 0.4625, p < .05).

Spatial regression models were used to address spatial autocorrelation observed for the dependent variables. This study used a Rook's connection matrix to identify adjacencies between census tracts using an $n \times n$ (in this case 95 × 95) matrix, where census tracts that shared a boundary were given a 1 and those that did not, a 0 (Bailey and Gatrell, 1995). One challenge to using this approach with smaller geographic areas, such as census tracts, is that the model assumes all areas have the same population. This assumption results in census tracts with small populations and with large populations being weighted equally. To address this, all variables were weighted by the square root of the census tract population to address issues of heteroscedasticity, providing more weight to census tracts with higher population (Greene, 1993). In addition, the condition index was used to test for collinearity in the geographically weighted regressions; any value above 30 indicates problematic collinearity issues within the model (Belsley, 1991; Wheeler, 2007). The condition index for the final models was 21.2 (Table 3), which is not indicative of severe multicollinearity. The fit of the model was examined using the likelihood ratio test, which compared the log-likelihood from the full model (i.e., medical marijuana dispensary density variable plus routine activity variables) with that of the restricted model (i.e., medical marijuana dispensary density variable) to determine if the contribution of routine activity variables improved the overall fit of the model (Greene, 1993).

Results

Table 3 shows the results of the spatial error regression models for violent and property crime rates with the associated condition index, pseudo-R2, and model-fit statistics. Model I for violent crime rates indicated that medical marijuana dispensaries per 10 roadway miles were not significantly related to violent crime rates. When routine activity theory control variables were added in Model II, the density of medical marijuana dispensaries remained not significantly related to violent crime rates. Model II showed that violent crime rates had a significant positive association with percentage of one-person households, unemployment rate, and percentage of commercial zoning when controlling for other variables. As expected, lower population density was associated with higher levels of violent crime. In addition, lower levels of index of concentration at the extremes (or higher levels of concentrated disadvantage) were significantly associated with higher violent crime rates.

For property crime rates, Model I indicated that medical marijuana dispensaries per 10 roadway miles were not

Table 3. Spatial error regression of MMD density on the log of violent crime rate and log of property crime rate by census tract (N = 95)

Variable	Violent crime rate (LN)				Property crime rate (LN)			
	Model I MMD density		Model II +RAT controls		Model I MMD density		Model II +RAT controls	
	b	SE	b	SE	b	SE	<i>b</i>	SE
Constant	1.752***	0.167	-0.068	0.259	3.575***	0.144	0.798***	0.198
MMD density								
MMD per 10 RWM	0.214	0.138	0.006	0.093	0.107	0.140	0.002	0.069
RAT controls								
1,000 population/square mile			-0.033*	0.016			-0.019	0.012
% Vacant housing units			0.019	0.021			-0.013	0.016
Male-to-female ratio (LN)			-0.973	0.684			-0.787	0.506
% Population 15-24 years old			0.023	0.018			0.107***	0.013
% One-person household			0.018**	0.006			0.034***	0.005
% Disrupted family household			0.003	0.009			-0.012	0.007
Unemployment rate (LN)			0.291**	0.105			0.211**	0.081
Index of concentration								
at the extremes			-1.241*	0.537			0.421	0.406
Highway ramp present			-0.098	0.123			0.123	0.092
% Commercially zoned			0.018*	0.007			0.027***	0.006
Spatial autocorrelation								
Λ	0.508***	0.108	0.077	0.145	0.392**	0.121	-0.128	0.151
Model-fit statistics								
Condition index	1.6092		21.2062		1.6092		21.2062	
Pseudo-R ²	.2462		.6944		.1374		.8083	
Log-likelihood	-112.9175		-66.8066		-116,1663		-43.0518	
$D\left(\Delta df,p\right)$			92.22 (10,<.001)				146.23 (10,<.001)	

Notes: MDD = medical marijuana dispensary; LN = natural log; RAT = routine activity theory; RWM = roadway mile. *p < .05; **p < .01; ***p < .001.

significantly related to property crime rates. In Model II, the density of medical marijuana dispensaries remained not statistically significant when routine activity control variables were added to the model. Model II showed a significant positive association with percentage of population ages 15–24 years, percentage of one-person households, unemployment rate, and percentage of commercial zoning when controlling for other variables.

Discussion

In sum, the statistically significant variables for the violent crime rate and property crime rate models were consistent with aggregate neighborhood measures reported within the routine activity theory literature (Andresen, 2006; Cohen and Felson, 1979; Sampson and Wooldredge, 1987). Percentage of a census tract that was commercially zoned, percentage of housing units in a census tract that were one-person households, and unemployment rate were positively related to violent and property crime rates. However, no cross-sectional associations were observed between the density of medical marijuana dispensaries and violent or property crime rates, controlling for ecological variables traditionally associated with routine activity theory.

These findings suggest two possible conclusions. First, the density of medical marijuana dispensaries may not be associated with neighborhood-level crime rates. For example, dispensaries may be associated with crime but

no more than any other facility in a commercially zoned area with conditions that facilitate crime. Alternatively, the relationship between density of medical marijuana dispensaries and crime rates is likely more complex than measured here. The study did not measure on-site security or guardianship at the dispensaries. If medical marijuana dispensaries have strong guardianship, such as security and monitoring systems, routine activity theory would suggest that the three necessary conditions for crime are not met. Place-specific guardianship would decrease the accessibility and increase the risk of being caught, decreasing the suitability of a target.

The findings are based on an ecological, cross-sectional study. As a result, no conclusions can be made about causation. First, the study cannot demonstrate whether increasing density of medical marijuana dispensaries is associated with an increase in crime rates over time and space. At an aggregate level, dispensaries in Sacramento are not associated with crime cross-sectionally; however, the introduction of these dispensaries in these areas may have served to increase crime rates from the prior year. This hypothesis can only be tested by examining the changes in medical marijuana dispensary locations and crime rates over time. Second, the ecological design does not allow individual-level variation to be factored into the models, specifically owners' selection of the location of a dispensary. Future studies should address the issue of endogeneity by obtaining information from dispensary owners on their decision-making processes associated with medical marijuana dispensary locations.

The small sample size of 95 census tracts may have limited the power of the final model. Limited power may have contributed to why variables theorized to affect crime (e.g., percentage of vacant housing, percentage of population ages 15–24 for violent crime rates) were not significant. However, the power was sufficient to establish whether the density of medical marijuana dispensaries would be associated with crime in the univariate models (i.e., Model I).

Other unmeasured ecological factors may also be influencing results. Because of sample size limitations, the current study omitted the locations of illicit drug market activity (Eck, 1995; Gorman et al., 2005; Weisburd and Mazerolle, 2000) and alcohol outlets (Gruenewald et al., 2006; Scribner et al., 1999), both of which are associated with higher crime rates. In addition, dispensaries may be located in areas that reflect the demographics of their clientele (i.e., older White men). The routine activity literature indicates that areas with these local neighborhood characteristics are not likely to have high crime rates (Cohen and Felson, 1979). Exploration of ecological factors associated with location of dispensaries is essential to better understand the role of neighborhood context related to these findings.

The focus on one mid-sized city in California limits the context to which these findings can be generalized. Future studies need to expand spatial methods of this type to other regions of California, other U.S. states, and international regions where marijuana place-based distribution occurs. In addition, the sample size did not allow for the inclusions of variables, such as interaction of place and population characteristics (e.g., Medical Marijuana Dispensary Density × Commercial Zoning) or spatial lags. Finally, measures of premise-based features and operation procedures may provide a better indication of guardianship and employee vulnerabilities that may be associated with findings.

These findings run contrary to public perceptions (California Police Chief's Association, 2009). The cross-sectional results suggest that dispensaries are not associated with crime rates; however, current media and policy efforts have focused their attention on the place-based regulation of these dispensaries to protect the public against crime (California Police Chief's Association, 2009; City of Los Angeles, 2010; Lopez, 2010). Based on the limited evidence presented by this study, it is unclear if place-based policies will be effective. Future studies should address previously described limitations, such as longitudinal studies, to assess the influence of medical marijuana dispensaries on existing crime rates, to gain a better of understanding of the relationship between medical marijuana dispensaries and crime. In addition, future studies should explore specific elements that make dispensaries vulnerable or resistant to crime to better guide future policies.

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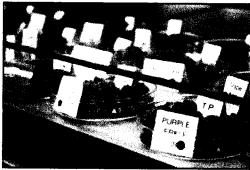
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Oaksterdam: California's Experiment with Medical Marijuana

March 18, 2010 01:11:40 am



Welcome to the Bay Area, where Grape Diesel is

on sale and the police call pot shops "good neighbors." Part Two of a Special Report.

The Harborside Health Center occupies one end of a low stucco building in a small office park overlooking Oakland's Embarcadero Cove. Sailboats sway on slight waves on one side of the street, and on the other side, a steady stream of men and women (black, white, Hispanic; old and young; dapper and down-trodden) step up to the front entrance.

"Is this your first visit?" John, a burly twenty-something in shorts who checks ID at the front door, asks an African American woman in nursing scrubs. He's wearing a baseball cap with the California bear and a pot leaf on it. The woman nods her head.

John hands her ID back with a smile. "Welcome back, ma'am."

The woman climbs a short staircase and steps through a metal detector — where her ID is checked again, this time by a Filipino man in a Cheech & Chong T-shirt. Inside, Harborside feels like a yoga studio or new-age herbal medicine store. With big windows facing the harbor, the center is flooded with natural light; and the shop smells faintly of marijuana.

As it should. This is one of Oakland's central dispensaries for medical marijuana, legal since 1996, in the state of California. Although Los Angeles has more dispensaries than the Bay Area, the city of Oakland last July became the first place in the U.S. to levy a tax on the drug: for every \$1,000 of marijuana sold here and at the three other dispensaries in the city, \$18 goes to the city. I visited what marijuana activists wryly call "Oaksterdam" as part of *The Crime Report's* two-part investigation (http://thecrimereport.org/2010/03/14/pipedreams/) into the status of the nationwide movement for legalization of the drug.

Kronic Krispies

At Harborside, patients check in at the front counter, then step into a long, open room with five glass cases that display dozens of varieties of marijuana buds, as well as tinctures, pot-infused honey and oils, and other "edibles," including "Kronic Krispies" and ginger snaps by a company called Butter Brothers. Across from the display cases is a comer with nearly a hundred small potted pot plants. A very pregnant woman works behind the counter, dispensing growing advice along with the clones.

My tour guide, a young woman named Dani Geen, tells me that all 80 employees are "patients." That's mainly defined by the fact that they have a physician's recommendation for medical marijuana which in California you can obtain from a doctor for dozens of ailments from anxiety to migraines to sinusitis.

TCR at a Glance

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MARCH 5, 2014

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SPECIAL REPORT FEBRUARY 26, 2014

Leading press observers deliver a mixed verdict on media coverage of crime and justice in 2013 Many patients use that recommendation to get a medical marijuana ID card, which is issued by both the state and individual counties and looks a little like a drivers license: typically it displays the patient's name, address and photograph, an expiration date and a seal to make it more difficult to counterfeit. According to Stephen DeAngelo, executive director of Harborside, some patients choose not to get the card because it can cost up to \$150, which is why most dispensaries also accept a copy of a doctor's recommendation (which they then verify with the prescribing physician).

Dani tells me she got her medical marijuana card four years ago to obtain relief from fibromyalgia. She rarely uses the word marijuana; instead, it's "medicine." And patients don't smoke or get high, they "medicate."

Harborside sees 600 to 800 patients a day, of whom as many as 80 are new ones. According to DeAngelo, the dispensary last year grossed \$20 million, \$2 million of which went back to the government in sales taxes. The clinic is open seven days a week, between 11am and 8pm. A sister store recently opened 40 miles south in San Jose.

I remark on how airy and inviting the place feels, and Dani smiles, flashing a silver tongue stud: "We're definitely out of the shadows."

In addition to pot, Harborside offers Reiki, massage, substance abuse counseling and acupuncture. But politics is not forgotten: there's a computer terminal in the waiting area which patients are encouraged to use to write letters to their political representatives supporting medical marijuana, as well as correspond with the movement's "prisoners of war" – those behind bars for marijuana offenses. One hour of such volunteer time earns a free gram of medicine.

DeAngelo says the employees, most of whom are full-time, start at \$14 an hour; they also receive health insurance, a 401K plan, and a free gram of medicine for each shift they work. To work at Harborside, you have to be a patient.

After showing me the small library, where books about how to roll a joint, the history of the marijuana movement, and cannabis horticulture can be checked out by patients, Dani takes me to a counter manned by Seth Rogers, a young man with shaggy brown hair, who sports a hemp necklace and tortoise shell eyeglasses.

Seth walks me though the wares in the display case, where each "strain," which is how the dispensary refers to the different varieties, is carefully marked with prices, item numbers and bar codes. Harborside sells marijuana by the gram and the ounce. Prices vary, but typically an eighth of an ounce costs between \$45 and \$55, with some as low as \$20. On the day I visited, there was a sale on Grape Diesel.

Patients are limited to buying two ounces per week. According to DeAngelo, Harborside sells about eight pounds of medical marijuana each day, and keeps about a week's worth in storage. Security is tight: to get to the back room, you need to pass through a fingerprint identification system.

Oakland's dispensaries consider themselves upstanding members of their city's business community. The pathbreaking municipal decision to levy taxes on medical marijuana sales was the result of lobbying by DeAngelo and other dispensary directors. "We saw that the city was struggling, and looking at closing institutions we care about, like the Children's Hospital," says DeAngelo. "We thought we could assist."

Checking for Quality

According to DeAngelo, Harborside gets its marijuana from between 300 and 400 "vendors," all of whom are patients, which allows them to grow a certain amount of the weed legally. Typically, these vendors bring about one pound per month each to Harborside.

In Oakland, according to the non-profit marijuana advocacy group NORML (http://canorml.org/prop/local215policies.html), the law permits patients to grow 20 plants outdoors and 72 inside. But in late January the California Supreme Court affirmed a district court ruling that such limits were an unconstitutional amendment of the 1996 Compassionate Use Act, so private marijuana growing may soon expand.

DeAngelo concedes that the system is imperfect. Vendors with grow rooms have had house fires and been the victims of armed robbery. But he argues that it is necessary, because federal law levies stiff mandatory minimum sentences on people who are found growing more than 100 plants. Currently, DeAngelo is working with the city of Oakland to develop a larger scale grow operation which Harborside can run on its own.

After the marijuana is brought to Harborside, a sample of it is sent to the Steep Hill Medical Collective, a lab

their gravely ill patients.

I ask Dani what her parents think of her working with pot for a living. "My dad just left (the center)," she says, laughing. "He's a patient, too. And my mom smoked while she was pregnant with me. So they're cool with it."

Smoking (excuse me, medicating) and cell phone use are not permitted inside Harborside, and Dani scolds me a bit when mine rings. DeAngelo tells me that, while they are not allowed to medicate in the clinic, employees *can* come to work medicated. If their state hinders their job performance—which DeAngelo says is rare—they'll be pulled aside and asked to adjust their dose.

After the tour, I sit outside on one of the benches in the parking lot for a few minutes and watch the steady flow of patients exiting—each with their medicine inside a plain white paper bag. One man makes the mistake of placing a joint between his lips and flicking his lighter as he steps outside.

"I'm sorry, sir," says John, the ID checker. "There's no smoking right here."

He directs the patient across the parking lot to a wooded median where another patient is sitting on a bench, enjoying the sunny day with his skinny cigarette. There isn't a uniformed cop in sight. But even if there were, it's unlikely he or she would make much fuss. In theory at least, if a patient with pot can is also in possession of a valid medical marijuana ID or doctor's recommendation, he or she shouldn't be subject to arrest.

I ask John about other medical marijuana dispensaries in the Bay Area. Are they all this...nice? He says that Harborside is high end, and tells me to check out a smaller place in San Francisco called HopeNet.

The 420 Room

HopeNet is a small dispensary located in a railroad-style floor-through on a low-rent block in the city's SOMA district. Steel bars cover the display window and front door. A light-skinned man of indeterminate race greets patients and checks for medical marijuana ID.

I have no such ID, and unlike at Harborside, had no appointment. So the man (who I soon learn is called Silver) is skeptical when I say I'm a reporter and would like to look around. He pulls up a stool and tells me to wait a minute near the front desk in a small room that, like the rest of the place, is swirling with marijuana smoke.

After a few minutes, a middle-aged woman, followed by a German Shepherd, comes out to greet me. The woman is owner Cathy Smith, a former Bangor, Maine policewoman- tumed-cannabis activist whom the patrons refer to as "mom." The dog, Sugar, is part of the security team.

Like Dani and Seth, Cathy refers to pot as "medicine" and her clients as "patients." But unlike the earnest young people at Harborside, Cathy has a healthy sense of humor about the new lingo.

"We've had to re-educate ourselves," says Cathy. "We're our own spin doctors."

Cathy leads me into what she calls "the 420 Room," where patients are encouraged to medicate. With a giant bud leaf tapestry on one wall and two low couches and a coffee table opposite, the room feels like the basement of that kid in high school whose parents didn't have rules. Just off the 420 room is a tiny atrium with (non-medical) plants, a bench and an open sky light so patients can smoke "outside."

On one of the couches, a man with deep brown circles beneath his eyes holds a two-foot glass bong on his lap. As Cathy tells me about the events they sponsor through HopeNet—Bingo, movie night, open mike, homeless outreach—the man listens, and chimes in.

"I want you to know," he says slowly, "that this woman here is probably the kindest person to veterans in the whole city." The man pulls a long suck of smoke from his bong. Next to him, a younger woman smokes a blunt and watches us silently.

Cathy smiles at the compliment. Others apparently agree. On the wall of the back room where the medication is sold is an award from the National Association of Professional Women, honoring Cathy for her work in the community. Among the civic contributions the association had in mind may be HopeNet's policy of providing free marijuana to about 100 patients in hospice care nearby, including some veterans.

The plastic bins of buds in the back room are neatly marked. As Cathy shows me the microscope used to check for mold, an employee and patient light up. "Whoa, that's some real Sour Diesel," says the patient, sounding just like stongs ions left Spineli, of the movie "Fact Times at Pidgement High." "They's better than the

lask Cathy if there are drawbacks to smoking on the job and she shrugs. "Most everyone here is stoned and everyone is working," she says. And indeed, the employees, while somewhat glassy eyed, are alert, friendly, and seem to be engaged in their tasks. "I was high when I was working in Maine," she continues, prompting one male employee to pipe up: "It's better than being all pilled out."

That was Cathy's motivation as well. She obtained her medical marijuana card 11 years ago to relieve the chronic pain suffered as a result of a major car accident when she was a teenager (she's now 54). "I used to be addicted to Percodan," she says. "I tried everything, but finally found that marijuana worked best. I know it sounds hokey, but getting my medical prescription was life-changing."

Though San Francisco technically allows some dispensaries to remain open 24 hours a day, Cathy closes up shop at 7 pm. "I don't want my clients wandering the street here at night," she says, adding with no apparent irony, "In this neighborhood, there's a lot of drug use."

Policing Pot

After visiting both dispensaries, I call the San Francisco Police Department and speak with Public Information Officer Boaz Mariles.

"The police culture has changed in terms of understanding that [for some people] it's not just weed, it's medicine," explains Mariles. "The public has spoken and it's our job to work with the marijuana dispensary clubs to keep them and the community safe."

Mariles says there has been no spike in thefts or violent crime—or even in DUI arrests—in the areas surrounding the city's 26 dispensaries: "It's just the opposite," he says. "People are taking ownership. Now they're stakeholders in the community. If we do our job right and they do theirs, crime should go down."

He adds that dispensary owners and employees have "done their part" by keeping the sidewalks outside their businesses clean, discouraging loitering, and generally acting as friendly neighbors.

That sounds familiar. Rick Holman, Chief of Police in the ski resort of Breckenridge, Colorado, where locals passed a bill last year legalizing pot for adults, told me during a telephone interview that he had seen "very little negative impact" from the law.

"We haven't seen an increase in criminal activity around dispensaries and haven't seen a real impact from decriminalization." Holman went on: "We don't see people walking around in a stupor."

But Holman is still a cop. During our conversation, he admitted that he was having a hard time accepting the notion of legalized marijuana. "(But) whether I agree or not, the will of the people of Breckenridge is that private possession is not a municipal crime," he said.

Still, having been in law enforcement for more than 30 years, he says he "doesn't associate" with people who smoke pot—as far as he knows.

Back in California, voters are now being asked to take an even more dramatic step than tiny Breckenridge by approving <u>The Regulate Control and Tax Cannabis Act</u>

(http://www.taxcannabis.org/index.php/pages/initiative/), an upcoming referendum that would legalize and tax the drug. Even if it wins passage, Holman's unease illustrates how difficult it may be to duplicate California's laissez-faire attitude about marijuana in the rest of the country.

HopeNet's Cathy Smith says she thinks the movement will have a tough slog nationally. Indeed, in Washington State (http://www.nytimes.com/2010/03/17/us/17marijuana.html?ref=us), a man was killed last week when he tried to protect his pot plants from theft, and a marijuana activist who grows pot at home is under arrest for shooting intruders. And in Canada, often considered more socially progressive than the U.S., the prime minister recently hotomarijuana.html?ref=us), a man was killed last week when he tried to protect his pot plants from theft, and a marijuana activist who grows pot at home is under arrest for shooting intruders. And in Canada, often considered more socially progressive than the U.S., the prime minister recently https://snational/harper_youtube) hopes of legalizing the drug.

"I see this as a civil rights fight," Smith says, comparing the marijuana movement to the gay marriage movement. "But just like Proposition 8, I worry that at the last minute the conservative forces will come out and crush [the cannabis act]."

Harborside's DeAngelo believes that the key to keeping the movement growing is to make sure that regulation, including "reasonable" caps on the number of dispensaries and a rigorous screening process for owners, is built into new laws. He observes there is a vast difference between Oakland's four tightly regulated dispensaries, and the sea of cannabis outlets on "virtually every corner" in Los Angeles.

"There are all sorts of nefarious characters running those places," says DeAngelo. "Hopefully, the rest of the country can learn from Oakland's example."

Both Smith and DeAngelo think that, eventually, medical marijuana will be legal and accessible nationwide. Smith estimates that within ten years, two-thirds of the states will have passed laws allowing medical marijuana, which she hopes will spur the federal government to action.

"Sometimes the government lags behind what the people want," she says. "But they'll come around—it's a domino effect."

If she's right, that will mean an historic transformation of the country's attitude towards marijuana—and perhaps of some of the underlying concepts of the long (and ineffective) war on drugs.

Julia Dahl is contributing editor of The Crime Report





INSTITUTO LABORAL DE LA RAZA

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March 3, 2014

John Rahaim, Director of Planning & Planning Commissioners SF Planning Department City and County of San Francisco 1650 Mission Street, Room 400 San Francisco, CA 94103

Dear Director Rahaim & Members of the Commission:

I am writing this letter to support the Bay Area Compassionate Heath Center (BACH), and its planned medical cannabis dispensary at 1423 Ocean Avenue.

I am the Executive Director of Instituto Laboral de la Raza, a non-profit, non-partisan Workers Resource Center in San Francisco, serving the working poor of California for 30 years. The Instituto provides free employment law and other services to the working poor and their families in San Francisco and throughout the Bay Area, the majority of who are recent immigrants and mono-lingual. In addition to our direct services, we are well known for our annual National Labor-Community Awards. We are also active in community advocacy on local policy issues that affect the working poor. We are pleased to be able to take a leadership role in advancing areas where community based organizations, organized labor, business and government have common ground and shared goals.

We know that Greg Schoepp and the BACH management have been very proactive in their commitment to best practices at the proposed medical cannabis dispensary. Greg Schoepp and the BACH management has demonstrated their level of commitment to the local community by engaging in public outreach efforts and has garnered the support of patients, local businesses, and community groups. We are aware of their public commitment to the Medical Cannabis Dispensary Code of Conduct.

We believe this business will bring jobs to the community, provide assistance in cleaning up the neighborhood, cooperate with local law enforcement to reduce crime in the area, and lend their support to local charities. Furthermore, we support their intention to be a UFCW Local 5 shop and provide a unionized workplace.

Instituto Laboral de la Raza, and its board of directors, urges your department and the Planning Commission to allow them to operate a medical cannabis dispensary at 1423 Ocean Avenue.

Sincerely,

Sarah Shaker, Executive Director Instituto Laboral De La Raza







March 4, 2014

John Rahaim, Director of Planning SF Planning Department City and County of San Francisco 1650 Mission Street, Room 400 San Francisco, CA 94103

Dear Director Rahaim:

I am writing to you on behalf of the United Food and Commercial Workers Union Local 5 (UFCW5) to support the application of Bay Area Compassionate Heath Center (BACH), for its planned medical cannabis dispensary at 1423 Ocean Avenue.

UFCW Local 5 is a 33,000 member labor union based in San Jose, California. We are the Bay Area affiliate of the United Food and Commercial Workers International union based in Washington DC, with 1.3 million members in the US and Canada. Local 5 members work primarily in retail grocery, drug and department stores with growing numbers employed in the medical cannabis industry. We organized the very first cannabis workers into UFCW in 2010. We bring dignity, legitimacy, stability, standards and strength to both workers and employers. UFCW works with medical cannabis dispensaries in 20 states, plus Washington, D.C. where medical cannabis is legally distributed to authorize patients suffering from illnesses like cancer, HIV/AIDS, multiple sclerosis and epilepsy.

Greg Schoepp and the BACH management has a recognition agreement in place with UFCW5 for our union to have access to BACH workers when their staff is hired and their doors are open for business. UFCW5 does not organize just any medical dispensary. We screen and reveiw the operators and their operations, and make sure they meet a level of legitimacy, stability and standards that we require. All UFCW5 contracts include a commitment to the Medical Cannabis Dispensary Code of Conduct. Please be assured that Greg and the BACH management team are well known to us, and that we know them to be diligent in their compliance to all relevant California State laws, the highest standards and our inductry code of conduct.

I can attest to their honesty and integrity in their business dealings, and the agreements that we maintain with them. Please do not hesitate to contact me directly at 415-243-8900, or by email at brian.ufcw@gmail.com.

Respectfully,

Brian Webster

Brian Webster, Special Projects Union Representative

UFCW5 Cannabis Division Field Office 240 Golden Gate Avenue, Room 103, San Francisco, CA 94102 www.ufcw5.org www.unioncannabis.com

Dear Supervisor Yee,

Thank you for your leadership on behalf of our community. I am writing concerning the opening of a Medical Cannabis Dispensary on Ocean Ave in District 7. Such an action should allow law-abiding medical marijuana patients and their primary caregivers, in District 7, to receive their medicine in a safe and convenient location and in accordance with state and local laws. This is something that District 7 needs and deserves to have.

There are some pre-conceived fears amongst some people regarding dispensaries in general and I understand that those fears have proven to be unfounded in numerous reports and studies. The stigma of "Drug Dealers" unfortunately has been connected (in some peoples minds) with these medicinal dispensaries.

Legally regulated dispensaries actually benefit the local community.

cc: San Francisco Planning Commission Members

- Crime does NOT increase in fact crime is less prevalent in areas where there are dispensaries due
 largely to the fact that they have their own private security systems including metal detectors,
 cameras, and trained guards. This acts not only as a deterrent but fewer crimes go unreported and
 illegal street sales decrease.
- Neighboring business does NOT suffer in fact the increased foot traffic stimulates local businesses.
- The community, as a whole, benefits with the community outreach programs and charitable contributions in the neighborhood.
- Legally regulated dispensaries abide by local regulations and the communities input and are not a source of community complaints.
- These dispensaries also regularly pay all applicable state and local fees and taxes.

I understand that there is an application for such a dispensary to be located at 1423 Ocean Ave, near Granada Ave. I am not opposed to this and feel it would benefit patients, improve the community, and I can see no serious detrimental effects on this great city. I hope that you feel this way as well.

Sincerely,	Jarsica Jaich	94112
Signature	First & Last Name	Zip Code
Optional: If you'd like a response from	n Supervisor Yee's office, please fill	out your address as well:
Address	San Francisco City	California State

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Sincerely,	BRENDA ARVI	Ę.
Signature	First & Last Name	Zip Code
Optional: If you'd like a response fr	om Supervisor Yee's office, please fill	out your address as well:
300 GRACES Address	San Francisco City	<u>California</u> State

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Signature

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Signature	First & Last Name	Zip Code
muld I	Michael Stales	94132
Sincerely,	t.	

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Address City San Francisco Californ State

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Sincerely,	_	
Molar	e la station	94132
Signature	First & Last Name	Zip Code

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438 Gonzalez DR, San Francisco California
Address City State

My name is	nding this and I am not the patients but to the o	at there is an an Ave near opposed to such
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Klut Dynnus Kerih Signature First & Last 1	Denniv	7 4/1 6 Zip Code
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cc: San Francisco Planning Commission Members		

Dear Supervisor Yee,		
My name isat	and I am a mero in District 7. I understand	chant / professional that there is an
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(Sturn Moore) STEVEN	MOORE 94112
Signature	First & Last Name	Zip Code
Optional: If you'd like a response from S	Supervisor Yee's office, please fill out y	vour address as well:
	San Francisco	<u>California</u>
Address	City	State
cc: San Francisco Planning Commission	Members	

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Nami Dencests	Daniel Vendetti	94112
Signature	First & Last Name	Zip Code
Optional: If you'd like a response from		
Address	San Francisco City	<u>California</u> State
	·	
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Signature First & Last	Name	Zip Code
Optional: If you'd like a response from Superviso address as well: 519 ELLIS St #302 5F,		l out your
Address St 30L JIF	San Francisco City	<u>California</u> State
cc: San Francisco Planning Commission Member	S	

415-375-1111 KATRINAARCIERIODGMAIL, COM

cc: San Francisco Planning Commission Members

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Almi Carta		94014
Signature First & L	ast Name	Zip Code
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	Hard Lyons	94112
Signature	First & Last Name	Zip Code

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San Francisco California City State 94112

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August Crans. 94102

Signature First & Last Name Zip Code

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N-W_/	James Ward	94102
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	San Francisco	<u>California</u>
Address	City	State

Norman Yee

City Hall Office of San Francisco Supervisors

1 Dr. Carlton B. Goodlett Place, Room #244

San Francisco, CA 94102

Norman.Yee@sfgov.org

Dear Supervisor Yee,

The Bay Area Compassionate Health Center in the process of opening a new Cannabis Dispensary in the Ingleside District. I am a home owner in the Sunset District. Though I have been a supporter of the opening of a dispensary in the Sunset District, people have stopped these efforts. When advances were made to try and open dispensaries in the Sunset District, more and more people complained and this area became a no green zone.

I am disabled. I am very sick. I cannot leave my house and if I do leave my house I must have a driver for I am unable to physically drive. Therefore, the Sunset district would be the ideal location to open a dispensary. But this cannot happen unless San Francisco opens the green zone in the Sunset District. There is no other choice for business owners to open dispensaries close to the Sunset District other than Ingleside. Ingleside is the only close option for disabled people like myself who need medicine. Frankly speaking, these rules seem somewhat backwards. Dispensaries cannot open in the Sunset District, but there is a limitation on how many can open in the Ingleside District. I can see the issue of there being a "cluster" but dispensaries have no other option than the Ingleside District if the Sunset District is completely shut out of the location possibilities.

I hope BACH is allowed the permit to open there dispensary. This would be the closest and safest dispensary for me to receive medicine from. I support the efforts of BACH. They have been delivering free compassion medication to my house for a few months. They are reliable and compassionate people themselves. They are helping many people such as myself. I am permanently disabled. I rely on BACH for my compassion deliveries. It is the only way I receive medicine for free. Being disabled, it is hard to travel large distances to obtain my medicine. BACH's services are unparalleled.

The space where they have held open house is very clean and most importantly, ADA accessible. There is good parking and it is in a safe and newly constructed area of the Ingleside District. This is where they wish to open the new dispensary. I have visited the site believe this would be an ideal location for the reasons stated above. Not only do

they provide free compassion medication, but also helpful information regarding programs and services I need.

They are looking to expand there compassion program by opening the dispensary on Ocean Avenue. To do so, they must receive a permit from the San Francisco Health Department. I truly hope you grant them the permit to move forward with their operations. They provide much better services than any other dispensary in this district. They are professional people who help the needy and disabled like me. They provide extra services like food and health groups at there open houses. I believe they will continue to do such and even more after they are able to open this new dispensary.

If this business is allowed to open it will reduce crime, it will allow disabled people the ADA access to a safe facility to obtain medicine. BACH will provide a safe and legal place for patrons to get relief from serious illness and debilitation. They offer a variety of services and they should be allowed to expand to help more of those in need. Please allow them to open. Not only will it have a positive impact on my life but also for those who need a safe place to go to receive proper medicine in a good location.

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Sincerely,	Joe Jalen	94112
Signature	First & Last Name	Zip Code
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Address	San Francisco City	<u>California</u> State

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There are some pre-conceived fears amongst some people regarding dispensaries in general and I understand that those fears have proven to be unfounded in numerous reports and studies. The stigma of "Drug Dealers" unfortunately has been connected (in some peoples minds) with these medicinal dispensaries.

Legally regulated dispensaries actually benefit the local community.

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see no serious detrimental effects on this great city Sincerely,	. I hope that you feel this w	ay as well.
January Sau	innah Drive	0410
Signature First &	& Last Name	Žip Co
Optional: If you'd like a response from Supervisor		
Address	San Francisco City	<u>California</u> State
cc: San Francisco Planning Commission Members		

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Sincerely,		
Drat A BI	renda Arrie	94103
Signature First	& Last Name	Zip Code
Optional: If you'd like a response from Superviso Address	or Yee's office, please fill out y San Francisco City	our address as well: <u>California</u> State

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	g. cm. c, op c u y c a root u	,
Sincerely,	mary Naster	94112
Signature //	First & Last Name	Zip Code
Optional: If you'd like a response from		
Address	San Francisco City	<u>California</u> State

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Sincerely,		o 91	ora Salas	94134	
Signature		First & Las	t Name	Zip Code	_
Optional: If you	'd like a response	e from Supervis	or Yee's office, please	fill out your address as well	<u>!</u> .
			San Francisco	California	
Address	•		City	State	
cc: San Francisc	o Planning Com	mission Membe	ers		

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a r · pi · a	M. Law	

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Sincerely,			
(Lufot coste	Jonathan Acosta	94134	
Signature	First & Last Name	Zip Code	
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	San Francisco	<u>California</u>	
Address	City	State	
cc: San Francisco Planning Co	ommission Members		

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Sincerely, Gabria Gabri Signature Signature Signature Signature	ele Gonzale	Z 94134	
Stenature U O Tirst & Last 1	Name	Zip Code	
Optional: If you'd like a response from Supervisor Yee's office, please fill out your address as well:			
Address	San Francisco City	<u>California</u> State	
	•		

Brian Clausnitch and Norman Yee City Hall Office of San Francisco Supervisors 1 Dr. Carlton B. Goodlett Place, Room #244 San Francisco, CA 94102

Dear Supervisors Clausnitch and Yee,

Please help facilitate the opening of a new Cannabis Dispensary in the Ingleside District. I am a constituent in this district and I support the progressive efforts of the Bay Area Compassionate Health Center, otherwise known as BACH. They have been helping me receive medicine by delivering it to my house at no charge and in a safe environment. They are doing remarkable work for myself and other disabled people. I solely rely on BACH for my compassion deliveries. It is the only way I receive medicine for free. Being disabled, it is very hard to go a long distance to obtain my medicine. BACH not only delivers, but they are in the process of opening up shop in my neighborhood. The services they provide are professional, kind and uplifting. And there location is very convinient.

I have been to one of their open houses on Ocean Avenue. The space is clean and beautiful. They provide helpful information regarding programs and services I need, along with free food and medicine. They are very generous and are solely looking out for those in need and not to make a profit. They are looking to expand by receiving a permit to open on Ocean Avenue. I hope you grant them the permit and allow them to move forward with their operations. They provide much better services than any other dispensary in this district.

Overall, the unlimited compassion services they provide cannot be matched or surpassed. Furthermore, they are professional and compassionate people who help disabled patrons like myself by providing extra services like food and health groups. Other dispensaries may offer compassion medicine, but they don't offer extra and alternative services that are mind, body and spiritually fulfilling, like BACH does. If this business is allowed to open it will reduce crime, it will allow disabled people the ADA access to a secure facility to obtain medicine or the option of reliable delivery services. BACH will provide a safe and legal place for patrons to get relief from serious illness, pain and debilitation. The best part about BACH is they do not pressure one to only use cannabis through smoke or vapor, but through alternative ways such as ingesting cannabis and topical cannabis relief. They offer many positive services and they should be allowed to expand to help a variety of those in need.

Thank you.

Norman Yee City Hall Office of San Francisco Supervisors 1 Dr. Carlton B. Goodlett Place, Room #244 San Francisco, CA 94102-4689 Norman. Yee@sfgov.org

Dear Supervisor Yee,

I would be eternally grateful if you could please help the Bay Area Compassionate Health Center in the opening of a new Cannabis Dispensary in the Ingleside District. I am a constituent in the Sunset District. This would be the closest and safest dispensary for me to go to receive medication. I support the efforts of BACH. They have been delivering free compassion medication to my house for a few months now. They are helping many people such as myself. I am permanently disabled. I rely on BACH for my compassion deliveries. It is the only way I receive medicine for free. Being disabled, it is hard to travel large distances to obtain my medicine. BACH's services are unparalleled.

The space where they have held open house is very clean and most importantly, ADA accessible. There is good parking and it is in a safe and newly constructed area of the Ingleside District. This is where they wish to open the new dispensary. I have visited the site believe this would be an ideal location for the reasons stated above. Not only do they provide free compassion medication, but also helpful information regarding programs and services I need.

They are looking to expand there compassion program by opening the dispensary on Ocean Avenue. To do so, they must receive a permit from the San Francisco Health Department. I truly hope you grant them the permit to move forward with their operations. They provide much better services than any other dispensary in this district. They are professional people who help the needy and disabled like me. They provide extra services like food and health groups at there open houses. I believe they will continue to do such and even more after they are able to open this new dispensary.

If this business is allowed to open it will reduce crime, it will allow disabled people the ADA access to a safe facility to obtain medicine. BACH will provide a safe and legal place for patrons to get relief from serious illness and debilitation. They offer a variety of services and they should be allowed to expand to help more of those in need. Please allow them to open. Not only will it have a positive impact on my life but also for those who need a safe place to go to receive proper medicine in a good location.

Brian Clausnitch and Norman Yee City Hall Office of San Francisco Supervisors 1 Dr. Carlton B. Goodlett Place, Room 244 San Francisco, CA 94102

Dear Supervisors Clausnitch and Yee,

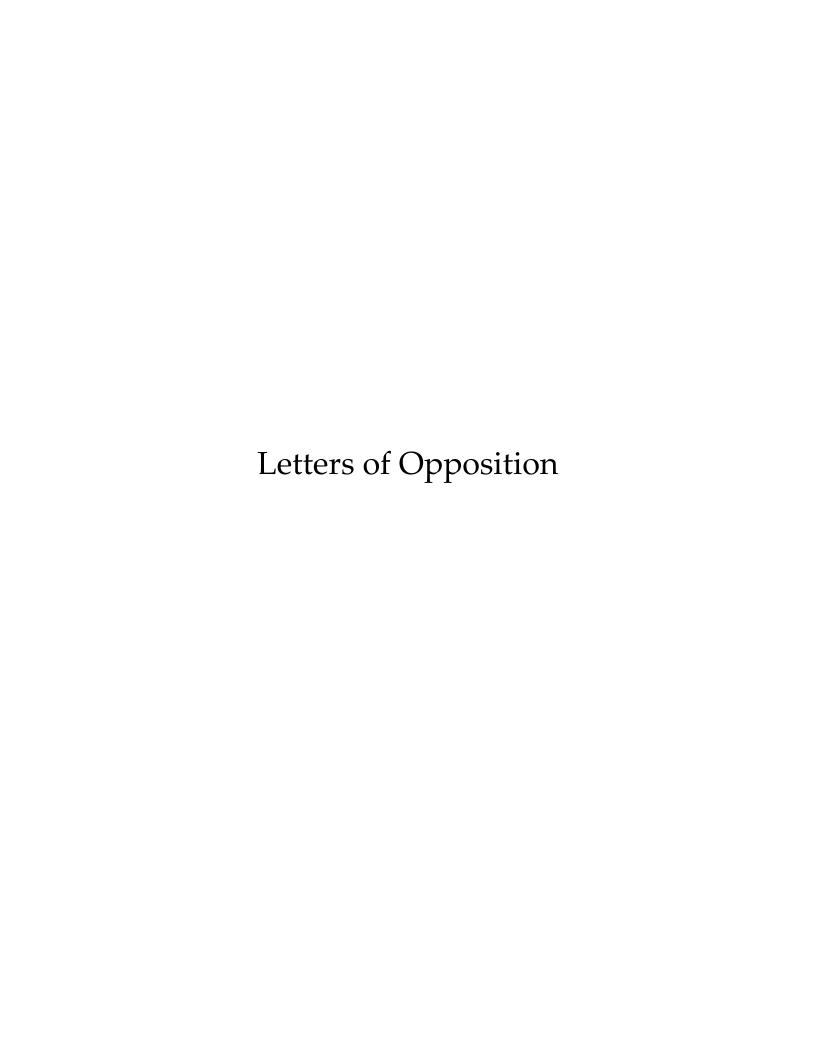
I am a home owner in the Ingleside Terraces District. I am permanently disabled. I rely solely on neighboring Cannabis Clubs for my medication. Though I appreciate there being two dispensaries on Ocean Avenue, at this point in time neither one of them meet my disability needs.

However, I would like to go on record and say that for the past couple years I had been receiving excellent care from the dispensary: Waterfall Wellness, on Ocean Avenue. They established a strong compassion program which supplied free medicine to me and other disabled persons in need. Aside from their compassion program, Waterfall Wellness had ADA compliant access and professional management. I'm sad to say that this no longer exists.

The business Waterfall Wellness has changed ownership, though their name is still the same. I am not sure how this was able to happen. Was there a transfer in title or in permits? Are background checks being done? The new Waterfall Wellness is now being managed by the same people who owned NorCal and were responsible for the fire that occured several years back. These NorCal people who have taken oven Waterfalls have been known to operate illegally. I have heard the staff talking and they are obviously growing cannabis on the property illegally. I've heard staff talking about other illegal business being handled there also.

I worry for the safety of myself and other disabled customers who are just trying to get there medication. To hear that there is illegal activity going on in the building's business area is scary. The security is worthless. I have seen people being attacked while leaving the facility and security enforcing no protection for its patrons. And whose to say that the same people who allegedly caused the NorCal fire will not cause another fire in the future.

Please regulate these people, check in on the allegedly illegal activity and make sure that this business is living up to other businesses ADA accessible rules. It is my hope that this kind of behavior stops, or that another brand new dispensary with good owners and management opens up soon in this area. I am unable to get to dispensaries that are far away from me. Please allow for another dispensary to open



From: Carl Petersen
To: Look, Jessica (CPC)
Subject: cannabis DISPENSARIES

Date: Monday, April 21, 2014 6:19:09 PM

We DONOT need additional cannabis dispensaries on Ocean Ave. Don't grant additional permits

Winifred Harrison-Petersen

Look, Jessica (CPC)

From:

Richard Untalan < r.untalan@sbcglobal.net>

Sent:

Tuesday, April 01, 2014 7:09 AM

To:

Look, Jessica (CPC)

Subject:

Medical Cannabis on Oncea Case #2013.134D

To Whom it My Concern,

I am a 20 year resident of Westwood park and live around the corner from this location. I am totally opposed to the building of another medical cannabis dispensary. We already have one down the block that draws a very seedy crowd. We do not need another. Ocean Ave. is trying to clean up its act with Whole Foods, new apt, etc. This will only take away from that. If you need me to rally up more of my neighbors, please let me know.

Thank you Kerry Onishi

From:

Barbara Llorente <sfpipeline@comcast.net>

Sent:

Saturday, February 15, 2014 3:19 PM

To:

Look, Jessica

Subject:

Case 2013.1340D

This is absolutely ridiculous! We already have two cannibis dispensaries on Ocean Ave - that's more than enough. We don't need any more. We are trying to upgrade the atmosphere Ocean Ave between Victoria and Phelan, but the City seems intent on turning this area into a slum.

Barbara Llorente on Cerritos Ave

From:

Judith Heuser < hfhe@aol.com>

Sent:

Thursday, February 13, 2014 11:01 AM

To:

Look, Jessica

Subject:

Pot store on Ocean Avenue - Case # 2013.134OD

Hello Jessica, I am a resident and homeowner on Cerritos Avenue in Ingleside Terraces. We live close to the corner of Ocean Avenue.

Within a few blocks of our home there are two pot stores carrying on business. One is located at 1545 Ocean and the other at 1944 Ocean near Victoria Street. Victoria is a residential street located within Ingleside Terraces. This neighborhood is comprised of over 700 single-family homes, many with young children.

Nearby on Ocean are located two schools - Aptos Middle School (grades 6-8) and a Christian school (grades K-12). There also is a pre-school within one block of one shop.

We understand from our homeowners' association president that a third shop is seeking approval to open along this corridor at 1423 Ocean Avenue - case # 2013.134 OD.

I totally oppose another shop opening in the vicinity of homes, apartments and schools. It is completely inappropriate for another pot store located in this vicinity, medicinal or otherwise.

Please respond to let me know that my letter of opposition has been received and what other steps I might take to prevent this store's permit from being approved.

Thank you.

Sincerely, Judith Heuser

From:

David Supan <david@supanconsulting.com>

Sent:

Wednesday, February 12, 2014 7:33 PM

To:

Look, Jessica

Subject:

Case 2013.1340D

Dear Ms. Look,

It has come to my attention that another cannabis dispensary Case 2013.1340D is looking for a retail space on Ocean Ave.

As a long time resident, father of two young children (5 and 7) and a member of the board of Ingleside Terraces Homes Association, I am opposed to having yet another dispensary in the neighborhood. There is no need for more competition for this type of retail sales and I can only see it leading to more problems in the neighborhood and decreasing property and family values in the area.

Please do not allow this business, or any additional dispensaries, to go into the area.

Sincerely,

David Supan 135 Cedro Ave. San Francisco, CA 94127 415-235-8727

From:

Gina Deignan <gpazdan@gmail.com>

Sent:

Wednesday, February 12, 2014 12:21 PM

To:

Look, Jessica

Subject:

Re: Dispensary at 1423 Ocean

Hi Jessica,

Once again I am writing regarding the topic of a new medical dispensary at 1423 Ocean Ave, for which there is a Mandatory DR opened by Planning for which the hearing is currently scheduled for 2/27, Case 2013.1340D.

I would like to re-iterate my concern for another dispensary, only 1 block away from an existing one, and the negative effect this would have on the neighborhoods around and commerce on Ocean Avenue. As a new family in the Ingleside Terraces neighborhood, we are hoping to see this area continue to grow and improve in a positive, family-friendly direction with business that make a positive impact to both the immediate community and the property value. Not with more businesses requiring bouncers at all hours and metal gates on all of the windows and doors. I will not repeat my previous email, but do I wish to reiterate my sincere concern for how the increase of these businesses will impact our neighborhood. We want to raise my family in a neighborhood where people want to come to eat and shop and spend time with their families, partly due to a thriving commerce area and a family-friendly feel. I do not want to raise my family in a neighborhood known for the number of places to buy marijuana, full of barred storefronts with bouncers and neighboring businesses of the same unwelcoming, unsafe and intimidating feel.

Thanks again for considering my opinion on this matter. For the record, I honestly have no problem with medical marijuana or the patients who benefit from it. Another one on Ocean Ave is just unnecessary and simply does not contribute to positive development of the area. I hope we can stop this business from opening on Ocean Avenue, and affirm that this is an area where people want to see positive commercial and community development!

Kind regards,

Gina Deignan

On Tue, Oct 29, 2013 at 5:20 PM, Gina Deignan <gpazdan@gmail.com> wrote: Hello Jessica,

I understand that there is an application under review for a medical cannabis dispensary at 1423 Ocean Avenue. I live near that address and I oppose additional cannabis dispensaries on Ocean. I would like to understand what I can do to prevent this or similar businesses from opening in the area. We very recently moved to Ingleside Terraces to raise our family because the area is family-friendly and seemed as though it is becoming increasingly family-friendly. It is clear that, with the addition of some other businesses (Whole Foods, coffee shops, etc.) this stretch of Ocean Avenue is just starting to turn around for the better. I fear an additional dispensary will sharply set back the forward momentum of this development. This business would impact not only the storefront at 1423 Ocean, but also what types of businesses will want to move in around it.

Further, I have a small daughter and, having lived near a dispensary before, I have seen and I am concerned about the possible customers this type of business can attract.

Thank you, Gina Deignan

From:

Rene Casis < renecasis@gmail.com>

Sent:

Wednesday, February 12, 2014 10:41 AM

To:

Look, Jessica

Subject:

Case 2013.1340D

Ms Look.

As a local resident, I would like to express my disapproval with moving forward with a new cannabis dispensary at 1423 Ocean Ave. Currently, there are two existing dispensaries on Ocean Avenue - 1545 Ocean Avenue 1944 Ocean Avenue.

Though I consider myself a liberal minded and tolerant person, I feel as a resident I do want to be bombarded by cannabis dispensaries. One with a 5 block radius is more than sufficient. I feel Ocean Avenue would benefit with diversity in businesses. Furthermore, I feel there are liberties taken with dispensaries. Is it really a coincidence that the clientele are unkept 20-somethings loitering about the radius of these establishments. I believe that businesses should be allowed to emerge and the market will decide its viability and profitability. In businesses such as cannabis dispensaries, there is an asymmetric disadvantage to the local residents as those seeking to circumvent the current illegality will flock to any and all dispensaries willing meet their cannabis needs.

I think overall, San Francisco needs to assess the implementation of cannabis distribution. Otherwise, saturation will occur (already has!) so long is this product is restricted and in high demand. What is the rationale of allowing this many distributors on Ocean Avenue? Interesting that there are no dispensaries of this kind in Noe Valley, Marina, Pacific Heights, etc.

I think you and your offices need to do more due diligence and exercise more discretion on operations specific to cannabis.

-Rene Casis

From:

Gina Deignan <gpazdan@gmail.com>

Sent:

Tuesday, October 29, 2013 5:21 PM

To:

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Subject:

Dispensary at 1423 Ocean

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Thank you, Gina Deignan

From:

Robert Karis < rckaris@gmail.com>

Sent:

Thursday, October 17, 2013 1:13 PM

To:

Look, Jessica

Subject:

1423 Ocean Avenue

Dear Ms. Look,

I just became aware of the "Discretionary Review request to change use from vacant retail location to a Medical Cannabis Dispensary" for 1423 Ocean Avenue date 9/20/13. Is a hearing scheduled? Please keep me posted regarding developments about this topic.

As you are no doubt aware, we already have two Medical Cannabis Dispensaries nearby on Ocean Avenue, at 1545 and 1944, which is already at least one too many. I am opposed to a third dispensary on Ocean Avenue.

Sincerely, Robert Karis 727 Victoria St. San Francisco

Look, Jessica (CPC)

From:

Tiara Mitchell <tiaramitchell630@yahoo.com>

Sent:

Wednesday, February 19, 2014 5:44 PM

To:

Look, Jessica

Subject:

Regarding New Dispensay Location 1423 Ocean Avenue

Hi,

my name is Tiara Mitchell, permit holder of Waterfall Wellness. I am inquiring about the building permit for the location 1423 Ocean Avenue. I have concerns of the new Medical Cannabis Dispensary opening up with Gregory Scheopp as the permit holder.

He has been involved in doing bad business practices with me and I want to forbid him from carrying in this type of behavior any further.

Here are some examples:

Doing business with Gregory over the past couple years has resulted in him withholding company accounting files and documents which is currently obstructing me from performing a forensic analysis of the company's accounting records and filing corporate taxes.

On Gregory Scheopp's last day here, he fired all the employees, took all of the money out of the registers totaling close to \$7,000 and emptied our bank accounts which had close to \$31,000.

He has removed sick pay from our employees and not followed San Francisco Law about sick pay.

His management skills has resulted in two San Francisco Labor Board suits against us with previous employees.

Could you please give me a call at (415) 317-2075, so we can discuss further and/or set up an appointment time for sometime this week.

Thank You
Tiara Mitchell

From:

Sue Grazioli <smgraz2001@aol.com>

Sent:

Thursday, February 20, 2014 1:57 PM

To:

Look, Jessica

Cc:

smgraz2001@aol.com; BTHA

Subject:

MMD at 1423 Ocean Ave. #2013.04.23.5179

Hello Jessica,

Proposed Change of Use

I am writing to you to express my concern about the proposed opening of a Medical Marijuana Dispensary at 1423 Ocean Ave. As a parent and Director on the Balboa Terrace Board, I oppose the MMD. This new location is close to CCSF and a ten minute walk to the main entrance of the school. Also, the location is within 500 feet of the Teen Program at 1345 Ocean.

Waterfall Wellness located at 1545 Ocean, another MMD, just recently opened a block away. The other MMD located at 1944 Ocean has been open the longest and has a guard posted at the door. This MMD is located two doors away from the Christian School. How did that location get approved?

I implore you to reconsider the 1423 Ocean Ave MMD from being approved. This is a family neighborhood and two MMD are two more than we need. Mayor Lee and Norman Yee had an event to kick off the revitalization of Ocean Ave. There is a new library, Whole Foods, stores with new awnings, some new restaurants all adding to a fresh new look and more family and student activity.

Perhaps, Greg Schoepp could open up some MMD near Crown Hardware, Noe Valley, Bernal Heights. Or is Ocean Ave. slated to become a GREEN Zone? Taraval Street was able to stop him from opening up a MMD near Lincoln High school. Carmen Chu and local merchants were very involved.

I see that the March 6 meeting has been postponed. There is community interest and we are interested in attending.

In conclusion, please help us keep moving forward with the revitalization of Ocean Ave. and stop any more MMD.

Sincerely, Sue Grazioli

Sent from my iPad

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April 11, 2014

Glenn Cabreros, President Jonas Ionin, Secretary Jessica Look, Planner San Francisco Planning Department 1650 Mission Street, Suite 400 San Francisco, CA 94103 GEA DEST

To whom it may concern:

I am writing you regarding the Notice of Public Hearing for Thursday, May 1, 2014 concerning Case No. 2013.1240D – the Medical Carnabis Dispensary.

I was born and raised on Granada Avenue in San Francisco and am currently living and taking care of my Mother who still resides in the home I grew up in.

Its very disturbing to me to see Ocean Avenue in its current condition while all the other neighborhoods in San Francisco are slowing improving with time. What has happened to Ocean Avenue? Why has this happened? The homes are beautiful, the neighbors are friendly, most people own their own homes. How many nail salons, Chinese restaurants, Laundromats and pot clubs do we need? How many empty store fronts occupy this neighborhood? I find it very sad to walk along Ocean Avenue these days thinking of the places that are mere ghosts of memories past. The Red Roof, where I would sit in the window with my hot fudge sundae on special occasions, the record store where I bought my first 45 and my classmates and I would listen to 45's and dance after school, Oringo's the local 5 & dime store, the bakery with its chocolate éclairs, the butcher with the wood shavings on the floor, the cute little shoe repair shop with the wooden figure of a tinker, the hobby shop where my brother used to go with his allowance to buy model cars and airplanes, Legg's ice skating rink where we spent each and every Friday night skating, the El Rey movie theater, the pet store. I know that was a different time but what a charming neighborhood I picture in my memory of walking to school on Ocean Avenue. Now as I walk the street I smell the odor of acrylic nail polish, greasy fried food, Clorox from washing down the sidewalks and smoke from the local pot club! College kids tossing their cigarette butts all over the sidewalks and litter from fast food places litter the streets and blow up into the residential areas.

I am against any plans for a future pot club in our neighborhood. There are TWO already within blocks of each other and this new location is only ONE block away from the club on Capital and Ocean Avenue. When most Mom and Pop establishments can't afford the rents on Ocean Avenue why is it that pot clubs can? How much money are these establishments making – is it regulated on how many cars it brings to our neighborhood? The hours of operation? Dark store fronts with a bouncer sitting outside chain smoking is not an enjoyable view walking down the street nor is the smell of burning marijuana. I have seen with my own eyes the exchange of pot between individuals right outside the door of these cannabis dispensaries.

The fact that Ocean Avenue is easy access from Highway 280 and 101 is probably the main culprit – knowing that many of the buyers are coming from the South Bay this location makes it convenient for them to jump on and off the freeway to pickup their pot.

I am not against medical cannabis but who are we kidding here. I know for a fact how easy it is to get a club membership. \$350.00 and you buy yourself a doctor's note – register with Sacramento and there you go. Anyone can be a member who has the money to buy into the "club".....

How many of these clubs are in West Portal, North Beach, Pacific Heights, the Marina or other wealthy neighborhoods in San Francisco?

Having owned a home on Wildwood Way for a number of years and raising my own children in this area I am actively seeking the support of the neighborhood in my fight against further pot clubs or slumming down our neighborhood.

Please consider what I have to say and my concern for the future of this wonderful neighborhood. Thank you for your help in this matter.

Catherine Pearson

cc: Westwood Park Association Supervisor Norman Yee – District 7