



CANNABIS FACILITY PUBLIC HEALTH PERMIT RENEWAL FORM

COUNTY OF LOS ANGELES • DEPARTMENT OF PUBLIC HEALTH
ENVIRONMENTAL HEALTH

5050 COMMERCE DR, BALDWIN PARK, CA 91706

WWW.PUBLICHEALTH.LACOUNTY.GOV/EH



Please fill out each section completely and legibly. If there has been a change in ownership, do not complete this form and notify the **Cannabis Compliance and Enforcement Program** at (626) 430-5635 or ccep@ph.lacounty.gov as a new Public Health Permit Application needs to be submitted.

Return this renewal form via email to ccep@ph.lacounty.gov. Incomplete and illegible renewal form will not be accepted.

PERMITS ASSOCIATED WITH THIS FACILITY

Retail (Storefront/Delivery) **Manufacturing** **Distribution** **Cultivation**

INFORMATION

BUSINESS

NAME OF BUSINESS

BUSINESS PHONE

BUSINESS ADDRESS

BUSINESS EMAIL

BUSINESS/CORPORATE EMAIL

OWNERSHIP

LEGAL OWNER

OWNER PHONE

*OWNER ADDRESS

EMERGENCY CONTACT NAME

EMERGENCY CONTACT PHONE

BILLING/MAILING

BILLING CONTACT NAME

BILLING MAILING ADDRESS

*Must be different from business address.

I certify that I am the owner or authorized representative of this establishment and that all the information above is true to the best of my knowledge.

Name: _____ Title: _____

Signature: _____ Date: _____