

HARDSHIP EXEMPTION APPLICATION

CD 10

ICO Area:

CITYWIDE

Interim Control Ordinance No.:

179027

Effective Date:

9-14-07

Council File No.:

05-0872-3494

Additional Interim Control Ordinance No.:

n/a

Applicant (Record Owner):

Medicine Sanctuary

Applicant Mailing Address

3516 Hughes Ave

Applicant's Representative

Juliette James

Representative's Mailing Address:

3516 Hughes Ave

Property Address:

3516 Hughes Ave

Legal Description:

-

Existing Zone (ZIMAS):

-

Existing Land Use Designation (From City Planning Department):

Telephone:

310) 403-2376

Zip Code:

90034

Telephone:

310) 403-2376

Zip Code:

90034

Lot Area (sq. ft.):

-

Structure/Building Construction Date:

-

Permit History (Include Permit Numbers)

n/a

BY [Signature] CITY CLERK
RECEIVED
CITY CLERK'S OFFICE
2009 MAY 12 PM 2:39
MCP

Describe Current Use (Include size in square feet, height, etc.):


MEDICAL CANNABIS COLLECTIVE
PURSUANT TO PROP 215
SB 420 + LAECO 179027

Note: A Master Land Use Application is not required.

THE FOREGOING INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Juliette James
Applicant (Record Owner) *

May 12, 2009
Date


Representative

5/12/09
Date

* *Proof of ownership will be required at the time of application submittal. A recorded grant deed and/or City Clerk's ownership records printout are acceptable.*

Note: A Master Land Use Application is not required.

**MEDICAL MARIJUANA DISPENSARY
BUSINESS INFORMATION FORM**

Business Name Medicine Sanctuary	Telephone Number 310 403-2376
Street Address, Unit # 3516 Hughes Ave	
City, State, Zip L.A. CA 90034	
Business Owner Juliette James	Telephone Number 310 403-2376
Business Operator/Manager Juliette James	Telephone Number 310 403-2376

Fill out the information form above and attach the following documents.

- a. City of Los Angeles Tax Registration Certificate
- b. State Board of Equalization seller's permit
- c. Property lease or documentation of ownership
- d. Business insurance
- e. Dispensary membership forms (blank)
- f. Los Angeles County Health Department permit (if needed)

Juliette James
Signature

May 12, 2009
Date

I certify that to the best of my knowledge and under the penalty of perjury, that the information contained on this Medical Marijuana Dispensary Business Information Form is correct.

I further certify that to the best of my knowledge and under the penalty of perjury, that attached documents are correct and true.

Describe Proposed Project and Use (Include size in square feet, height, etc.):
The collective proposes to operate as a legally registered collective in full compliance with California Prop. 215, SB420, and Los Angeles ICO #179027.

Why do you believe a hardship exists for which an exemption should be granted? (Attach a statement on a separate sheet if necessary. An economic analysis may also be submitted.)
A hardship exists in that through no fault of our patient collective, the federal government has been utilizing selective enforcement and a pattern of terror and fear upon the medical marijuana patients, collectives and caregivers. Despite the 1996 passage of Proposition 215 and subsequent clarification through SB 420, both federal and state governments have been slow to evolve and adapt. In the very recent past, within the past month, two very promising developments have occurred: 1. The Attorney General has set forth guidelines here in
CONTINUED NEXT PAGE

Do you have any ownership interest in any other parcels within 300 feet of this property? () Yes No
(If yes, submit a map showing the location and boundaries of the property for which an exemption is being requested, and the location of the other ownerships.)

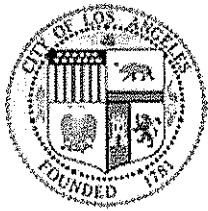
ADDITIONAL INFORMATION FILING REQUIREMENTS

In addition to this form, all below items should be included with the application, unless otherwise instructed by City Staff.

- a. Attach a map showing the location and boundaries of the property for which the exemption is being requested. (May be the same map as required in No. 7)
- b. Attach a Plot Plan showing the building footprint, parking plan, landscaping, balconies, driveways, any amenities, etc.
- c. Attach an Elevation Plan, which includes dimensions for all views.
- d. Attach Building Plans. If plans have been accepted by the Department of Building and Safety, list Plan Check No. _____ and Submittal Date _____
- e. Submit a Project History summary that includes dates and descriptions of meetings, negotiations, expenditures, commitments, etc.
- f. Submit Photographs of the subject property and all surrounding property – not over 8 1/2 x 11 inches, but of adequate size to illustrate the condition and physical context of the property under discussion.
- g. Attach any additional information as needed.

Note: A Master Land Use Application is not required.

California to finally clarify the rules to proper operation of a dispensing collective. The United States Supreme Court has declined to rehear the People v. Kha case showing the unmistakable trend toward federal recognition and a new era of properly regulated and operated collectives. Our management brings extensive medical office management skills as well as compassion and knowledge as to proper and restrained medication with cannabls pursuant to the recommendation of only a licensed physician here in California. However we have been compelled to operate without full local sanction due to the federal threat. Due to this threat we were precluded by fear of harassment and selective prosecution until this last month, and this has constituted a hardship as the conflict between California and federal law had previously required that managing members of the collective literally confess a federal crime in order to register under the ICO. This is the hardship we faced. Due to the recent legal developments we are able to file without the above threat and we respectfully submit this is the basis of the hardship for which we seek exemption from the filing date set forth in the ordinance.



**City of Los Angeles
Department of City Planning**

05/11/2009

PARCEL PROFILE REPORT

PROPERTY ADDRESSES

3516 S HUGHES AVE

ZIP CODES

90034

RECENT ACTIVITY

None

CASE NUMBERS

CPC-2005-8252-CA
ORD-135339
ORD-135338
ENV-2005-8253-ND
ENV-2005-8253-MND
CFG-1500

Address/Legal Information

PIN Number: 120B165 48
Lot Area (Calculated): 6,750.8 (sq ft)
Thomas Brothers Grid: PAGE 010 - GRID 7F
Assessor Parcel No. (APN): 4313010044
Tract: TR 29533
Map Reference: M B 767-90
Block: None
Lot: LT 1
Arb (Lot Cut Reference): None
Map Sheet: 120B165

Jurisdictional Information

Community Plan Area: Palms - Mar Vista - Del Rey
Area Planning Commission: West Los Angeles
Neighborhood Council: Palms
Council District: CD 10 - Herb J. Wesson, Jr.
Census Tract #: 2701.00
LADBS District Office: West Los Angeles

Planning and Zoning Information

Special Notes: None
Zoning: C2-1
Zoning Information (ZI): None
General Plan Land Use: General Commercial
Plan Footnote - Site Req.: See Plan Footnotes
Additional Plan Footnotes: Palms
Specific Plan Area: West Los Angeles Transportation Improvement and Mitigation

Design Review Board: No
Historic Preservation Review: No
Historic Preservation Overlay Zone: None
Other Historic Designations: None
Other Historic Survey Information: None
Mills Act Contract: None
POD - Pedestrian Oriented Districts: None
CDO - Community Design Overlay: None
NSO - Neighborhood Stabilization Overlay: None
Streetscape: No
Sign District: No
Adaptive Reuse Incentive Area: None
CRA - Community Redevelopment Agency: None
Central City Parking: No
Downtown Parking: No
Building Line: None
500 Ft School Zone: No
500 Ft Park Zone: No

Assessor Information

Assessor Parcel No. (APN): 4313010044
APN Area (Co. Public Works)*: 0.133 (ac)
Use Code: 2100 - Restaurant Lounge Tavern
Assessed Land Val.: \$84,324
Assessed Improvement Val.: \$62,619
Last Owner Change: 03/19/07
Last Sale Amount: \$0
Tax Rate Area: 67
Deed Ref No. (City Clerk): 711344
599
598

	1922300
	1634470
Building 1:	
1. Year Built:	1967
1. Building Class:	SX
1. Number of Units:	1
1. Number of Bedrooms:	0
1. Number of Bathrooms:	0
1. Building Square Footage:	1,197.0 (sq ft)
Building 2:	
2. Year Built:	Not Available
2. Building Class:	Not Available
2. Number of Units:	0
2. Number of Bedrooms:	0
2. Number of Bathrooms:	0
2. Building Square Footage:	0.0 (sq ft)
Building 3:	
3. Year Built:	Not Available
3. Building Class:	Not Available
3. Number of Units:	0
3. Number of Bedrooms:	0
3. Number of Bathrooms:	0
3. Building Square Footage:	0.0 (sq ft)
Building 4:	
4. Year Built:	Not Available
4. Building Class:	Not Available
4. Number of Units:	0
4. Number of Bedrooms:	0
4. Number of Bathrooms:	0
4. Building Square Footage:	None
Building 5:	
5. Year Built:	Not Available
5. Building Class:	Not Available
5. Number of Units:	0
5. Number of Bedrooms:	0
5. Number of Bathrooms:	0
5. Building Square Footage:	0.0 (sq ft)

Additional Information

Airport Hazard:	None
Coastal Zone:	None
Farmland:	Area not Mapped
Very High Fire Hazard Severity Zone:	No
Fire District No. 1:	No
Fire District No. 2:	Yes
Flood Zone:	None
Hazardous Waste / Border Zone Properties:	No
Methane Hazard Site:	None
High Wind Velocity Areas:	No
Hillside Grading:	Yes
Oil Wells:	None
Alquist-Priolo Fault Zone:	No
Distance to Nearest Fault:	1.32889 (km)
Landslide:	No
Liquefaction:	No

Economic Development Areas

Business Improvement District:	None
Federal Empowerment Zone:	None
Renewal Community:	No
Revitalization Zone:	None
State Enterprise Zone:	None
Targeted Neighborhood Initiative:	None

Public Safety

Police Information:	
Bureau:	West
Division / Station:	Pacific
Report District:	1409