

Medical Cannabis:

Staff Report and Recommendations

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Table of Contents

1. Medical Cannabis in Florida
2. Literature Review
3. Medical Marijuana Uses
4. Review of Regulations
5. Recommendations

Medical Cannabis in Florida

History of Medical Cannabis in Florida

April 2014	HB 1183 / Florida Legislature enacted the Compassionate Medical Cannabis Act, which authorizes dispensing organizations to manufacture, possess, sell, and dispense low-THC cannabis for medical use (FSS §381.986). <ul style="list-style-type: none"> Prohibits the smoking of medical marijuana Limits the type of marijuana to that which does not produce a “high”
June 2015	The Florida Department of Health’s Office of Compassionate Use (DOH) created the administrative provisions which were adopted as Florida Administrative Code 64-4.
July 2015	DOH began accepting applications for dispensing organizations
December 2015	DOH selected the five dispensing organizations (a 6th was approved in March 2016).
April 2016	HB 307 / FSS §381.986 amended to address a multitude of issues including regulatory oversight, additional standards for dispensing organizations, use of independent laboratories etc...
September 1, 2016	DOH anticipates that medical cannabis will be available to patients by this date.
November 8, 2016	Amendment 2 “Use of Marijuana for Debilitating Medical Conditions” passed.
January 1, 2017	Amendment 2 “Use of Marijuana for Debilitating Medical Conditions” effective

Impacts of Amendment 2:

- No longer limits medical use to “Low-THC cannabis”
- Expands qualifying medical conditions **from** Cancer or a physical medical condition that chronically produces symptoms of seizures or severe and persistent muscle spasms that can be treated with low-THC cannabis **to** a patient with a condition including cancer, epilepsy, glaucoma, positive status for human immunodeficiency virus (HIV), acquired immune deficiency syndrome (AIDS), post-traumatic stress disorder (PTSD), amyotrophic lateral sclerosis (ALS), Crohn's disease, Parkinson's disease, multiple sclerosis, **or other debilitating medical conditions of the same kind or class as or comparable to those enumerated.**
- Permits the smoking of marijuana
- Permits “edibles”, oils, aerosols, and ointments.
- DOH will have 6 months from effective date to promulgate rules. Also granted any citizen of the state standing to file a lawsuit if the rules are not written in 6 months.

History of Medical Cannabis in Florida

FL SS 381.986 Compassionate use of low-THC and medical cannabis.—

(8) PREEMPTION.

- (a) All matters regarding the regulation of the cultivation and processing of medical cannabis or low-THC cannabis by dispensing organizations are preempted to the state.
- (b) *A municipality may determine by ordinance **the criteria for the number and location of, and other permitting requirements that do not conflict with state law or department rule** for, dispensing facilities of dispensing organizations located within its municipal boundaries.*

How it works and other “quick facts”

The Florida Department of Health, Office of Compassionate Use, has a one-page FAQ sheet. A copy is following.

Office of Compassionate Use

Low-THC Cannabis & Medical Cannabis

Quick Facts

HOW IT WORKS

1

A physician diagnoses a patient with a qualifying condition for low-THC or medical cannabis.

If the patient is younger than 19 or terminal, a second physician must concur and this determination must be reflected in the patient's medical records.

2

The physician treats the patient for 3 months, and obtains voluntary written, informed consent.

3

The physician submits a treatment plan to the University of Florida College of Pharmacy each quarter or if the plan changes.

4

The physician enters the order into the Compassionate Use Registry.

5

The patient may fill the order at any dispensary operated by 1 of the 6 approved dispensing organizations.

THE OFFICE OF COMPASSIONATE USE:

4052 Bald Cypress Way,
Tallahassee, FL 32399

850-245-4657

CompassionateUse@flhealth.gov

www.flhealth.gov/ocu



Compassionate Use

Governor Scott signed the Compassionate Medical Cannabis Act of 2014 into law on June 6, 2014. The Act was subsequently amended by House Bill 307, which was signed into law by Governor Rick Scott on March 25, 2016. Under section 381.986, Florida Statute, qualifying physicians are authorized to order low-THC cannabis or medical cannabis for patients with qualifying conditions. Orders must be filled by a licensed dispensing organization.

Qualifying Conditions

LOW-THC CANNABIS

Non-euphoric with 0.8% or less THC

Cancer

Epilepsy

Chronic seizures

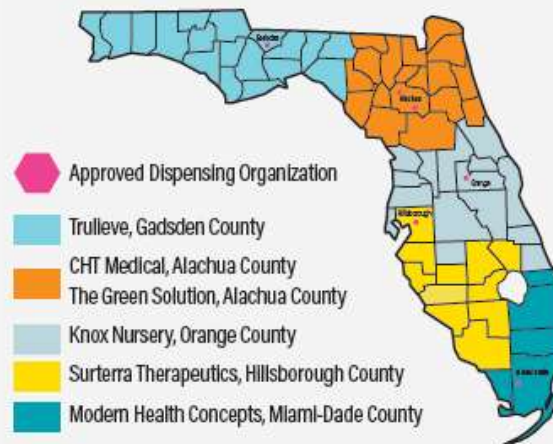
Chronic muscle spasms

MEDICAL CANNABIS

Full-potency with full THC strength

Terminal conditions

2 physicians must certify that the patient's condition is terminal within 1 year



Literature Review

Review of Literature: Impacts of uses and similar considerations

California Police Chief's Association's Task Force on Marijuana Dispensaries, "White Paper on Marijuana Dispensaries" (April 2009):

*"Because they are repositories of valuable marijuana crops and large amounts of cash, several operators of dispensaries have been attacked and murdered by armed robbers both at their storefronts and homes, and such places have been regularly burglarized. **Drug dealing, sales to minors, loitering, heavy vehicle and foot traffic in retail areas, increased noise, and robberies of customers just outside dispensaries are also common ancillary byproducts of their operations.** To repel store invasions, firearms are often kept on hand inside dispensaries, and firearms are used to hold up their proprietors."*

*"The following were **typical complaints received: high levels of traffic going to and from the dispensaries; people loitering in the parking lot of the dispensaries; people smoking marijuana in the parking lot of the dispensaries; vandalism near dispensaries;** threats made by dispensary employees to employees of other businesses; citizens worried they may become a victim of crime because of their proximity to dispensaries."*

Freisthler, B., "Examining the Locations of Medical Marijuana Dispensaries in Los Angeles" Drug and Alcohol Review (September 2015):

*"An analysis of the location of dispensaries throughout 39 California cities indicate that dispensaries are located in **block groups with higher rates of poverty, co-located next to alcohol outlets...**"*

"Census tracts with higher percentages of Hispanic residents have more dispensaries... Residents of these communities may, by default, be exposed to a larger number of dispensaries and the potential risks that they pose such as more frequent marijuana use"

Boggess et al, "Do Medical Marijuana Centers Behave Like Locally Undesirable Land Uses? Implications for the Geography of Health and Environmental Justice" Urban Geography (February 2014)

*"Thus, marijuana outlets are perceived as increasing community crime despite any evidence that they do. **It is likely that people will not want to live near these facilities if they are perceived as generating crime and violence and decreasing property values in the places where they locate.**"*

"This negative perception of medical marijuana centers will likely influence the tendency for centers to be established only in neighborhoods where there is little local opposition. Further, this negative perception may lead to the kinds of changes in neighborhoods that may exacerbate social isolation, crime, and health disparities over time. For example, the out migration of more affluent households may leave behind an increasingly impoverished community that is more susceptible to potential negative health or crime consequences."

Continued on next page

Review of Literature: Impacts of uses and similar considerations

Trevarthen, Susan L., “Zoning and Business Regulations - Medical Marijuana: An Engaging Dialogue” Broward League of Cities (October 17, 2014):

“Business Regulations: Security Plan and CPTED Survey, Public Safety and Fire Issues; Operations plan; Video surveillance; Display and storage security planning requirements; Cash storage and protection planning requirements; Alarm system; Implementation of Police Crime Prevention Through Environmental Design Review (CPTED) standards; Armed security personnel on-site during business hours; Environmental Controls - Odor, Air Quality, etc.; No Tourists/Gawkers – Only Those Authorized to be On Premises; Anti Loitering and Lines - Pedestrian and Vehicular; Designated Ombudsman for Neighborhood Issues; No Employment of or Access To Minors Other Than Minor Patient with Guardian; and Control of Garbage”

Marijuana Policy Group, “Municipal Dispensary License Allocation: Florida” (2016):

*Optimal number of dispensaries: The optimal number of dispensaries depends upon the number of patients likely to register, the local area population, and the required scale of operation for dispensaries to remain profitable. The average resident ration among similar states (with laws similar to Amendment 2) is **one dispensary per 67,222 residents**. This ratio is found to be “optimal” by the MPG for cities and counties in Florida.*

*Risks of Unprofitable Dispensaries: Unlike conventional businesses, cannabis failure creates risks because the product is still prohibited by federal law. **Small and struggling cannabis entities are more likely to sell (or “divert” into illegal markets (e.g., minors and out-of-state smuggling).** For example, struggling entities can utilize their license to legally cultivate or purchase cannabis, and then re-sell to illegal markets, if they cannot survive in Florida’s legal market.*

Review of Literature: Economic Development Impacts

BOTEC Analysis Corporation – various reports drafted for the Washington State Liquor Control Board including: “Economies of Scale in the Production of Cannabis”, “Estimating Adequate Licensed Square Footage for Production”, “Cannabis Testing Labs: Standards and Accreditation” and “Modeling Marijuana Businesses and Costs of Legal Compliance” available at: http://liq.wa.gov/marijuana/botec_reports

“Revenues from the sales of medical cannabis in Washington are estimated at roughly \$480 million”

“At a minimum an SOP (for a testing lab) should contain sections that address: Security of the facility, encompassing the type of security in place, both lock and key or security cards; who has access to the facility; and security cameras or alarm systems in place...Disposition of excess sample.”

“Indoor production allows for 4-6 harvests per year (5 being typical).

“There is also the complicated question of ancillary space that is essential to production, but which is not itself harvested. There are three types of ancillary space: 1) Space for growing plants that are not at the harvestable stage (mother plants, seedlings); 2) Dead space that is intertwined with the area to be harvested (e.g. walkways); 3) Other areas not directly involved in growing (space used for drying, storing tools, record keeping, bathrooms, etc...)”

Various articles regarding jobs:

Borchardt, Debra, “The Five Best Marijuana Jobs” Forbes.com (May 27, 2016) available at: <http://www.forbes.com/sites/debraborchardt/2016/05/27/the-5-best-marijuana-jobs/#24ea12ac2495>

Weeks, Linton, “13 Spliffy Jobs In The Marijuana Industry” NPR (May 8, 2014) available at <http://www.npr.org/sections/theprotojournalist/2014/05/08/310707885/13-spliffy-jobs-in-the-marijuana-industry>

Dresser, Michael, “Rural Maryland sees jobs, not vice, in medical marijuana” The Washington Post (August 6, 2015) available at: https://www.washingtonpost.com/local/rural-maryland-sees-jobs-not-vice-in-medical-marijuana/2015/08/06/5abe7ec2-3a0c-11e5-b3ac-8a79bc44e5e2_story.html

Medical Marijuana Uses

What are Medical Cannabis Uses?

Health Care Use:

- A physician who is authorized to order medical cannabis or low-THC cannabis for treating qualified patients
 - May be an accessory use to a larger medical practice (i.e. a family practice where one or more doctor's have authorization to prescribe medical cannabis for patients)
 - May be the principal use (i.e. Doctor whose entire practice is treating qualified patients – “Green Bliss Clinic”)
 - Some states permit to collocate with retail use



Compassionate Medical Cannabis CME Course

Includes Clinical Indications for the Legal and Appropriate use of "Low-THC" and medical Cannabis in Florida



ONLY \$995

- Complete your FMA/FOMA Compassionate Medical Cannabis Act of 2014 Course
- Learn conditions, restrictions and requirements of the Compassionate Medical Cannabis Act
- Provided through FMA and FOMA
- Florida Physician-Specific for ordering low-THC and medical cannabis

REGISTER NOW!

What are Medical Cannabis Uses?

Retail Use:

- An establishment that sells and dispenses medical marijuana, but does not engage in any other activity related to preparation, wholesale storage, distribution, transfer, cultivation, or processing of any form of Marijuana or Marijuana product, and does not allow on-site consumption of Marijuana.



What are Medical Cannabis Uses?

Industrial Uses:

- **Laboratory Use:** A laboratory engaged in the testing of marijuana or marijuana products
- **Cultivation Use:** An establishment engaged in the planting, growing, harvesting, drying, or processing of marijuana plants or any part thereof.
 - A map of existing permitted locations on next page
- **Warehouse & Distribution Use:** An establishment engaged in the storage and/or wholesale distribution of medical marijuana or any part thereof

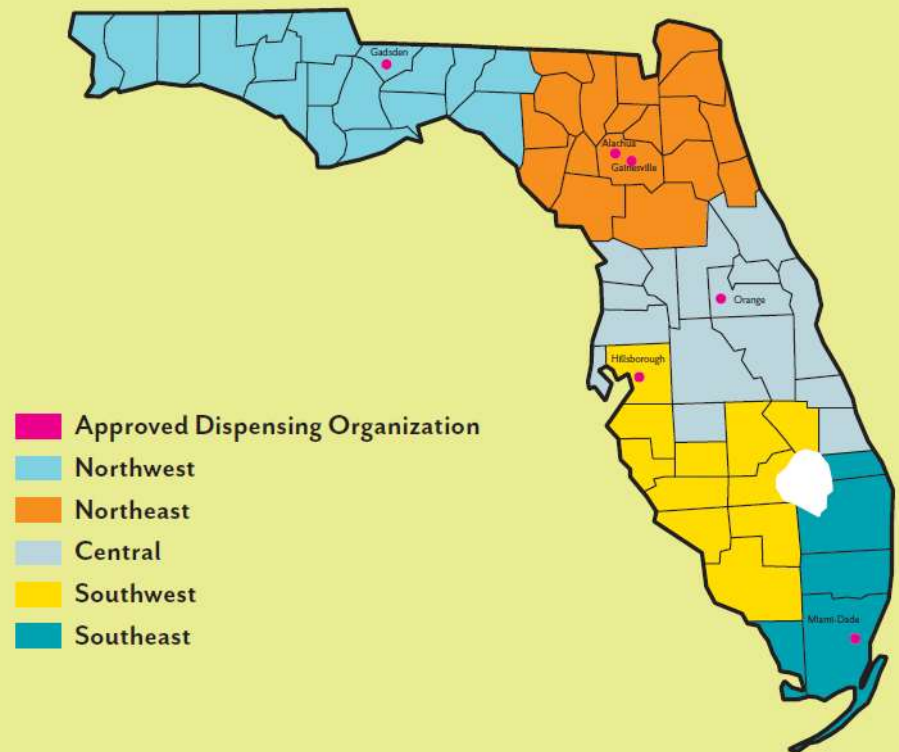


Medical Marijuana Cultivation & Processing

- *Prior to passage of Amendment 2, the FL DOH approved six dispensing organizations to **cultivate, process and dispense** low-THC cannabis and medical cannabis.*
- *Prior to passage of Amendment 2, these were the only locations where medical marijuana may be cultivated and processed*
- Amendment 2 does not limit the locations of cultivation and processing...



Compassionate Medical Cannabis Act **Dispensing Regions**



Review of Regulations

United States Code (USC) Controlled Substances Act

Title 21 / §860. Distribution or manufacturing in or near schools and colleges

(a) Penalty

Any person who violates section 841(a)(1) of this title or section 856 of this title ***by distributing, possessing with intent to distribute, or manufacturing a controlled substance in or on, or within 1,000 feet of, the real property comprising a public or private elementary, vocational, or secondary school or a public or private college, junior college, or university, or a playground, or housing facility owned by a public housing authority, or within 100 feet of a public or private youth center, public swimming pool, or video arcade facility,*** is (except as provided in subsection (b) of this section) subject to (1) twice the maximum punishment authorized by section 841(b) of this title; and (2) at least twice any term of supervised release authorized by section 841(b) of this title for a first offense...

FL SS 381.986(6)

Operational Requirements for Dispensing

The below statutory requirements may be revised due to Amendment 2.

Enforcement of OCU-Related Violations



- **Dispensary Operation Requirements**
 - Maintain fully operational security alarm system
 - Maintain 24 hour video surveillance and retain recordings for 45 days or longer if requested by a law enforcement agency
 - Ensure sufficient lighting from dusk until dawn
 - Establish a tracking system approved by the Department
 - No dispensing between 9 p.m. and 7 a.m.
 - Two employees must be on premises at all times
 - Report to local law enforcement within 24 hours after notification or awareness of theft, diversion, or loss of products

Review of FL Municipal Regulations

- In Florida, existing municipal regulations are focused on *retail uses* (aka dispensaries).
 - Many of the standards could rationally be applied to other uses involved with medical marijuana.

Cities reviewed: Cocoa Beach | Coral Gables | Edgewood | Flagler Beach | Gainesville | Glades County | Hollywood | Indian Harbor | Jacksonville | Lauderdale by the Sea | Maitland | Miami-Dade County | Miramar | Mount Dora | Osceola County | Palmetto | Plantation | Ponce Inlet

Standards analyzed

1. Distance / Separation Requirements
2. Parking Requirements
3. Approvals Required
4. Hours of Operation
5. Noticing Requirements
6. Limitations on Transfer or Approval of License to New Business Owners
7. Limitations on Drive Through Services
8. Building Requirements
9. Indoor Waiting Room
10. Limitation on Size of Use Within Building
11. Maximum ratio per population

Distance / Separation Standards #1

By Distance: Retail Use

Separation by 200 Feet

Use	Cities
Residential Zoning District	Cocoa Beach

Separation by 250 Feet

Use	Cities
Day Care	Osceola County
School	Osceola County

Separation by 300 Feet

Use	Cities
Day Care	LBTS, Palmetto
Medical Marijuana Dispensary	LBTS, Palmetto
Park	LBTS, Palmetto
Place of Worship	LBTS
School	LBTS, Palmetto

Separation by 500 Feet

Use	City
Pain Management Clinics	Hollywood
Pharmacy less than 9,000 sq. ft.	Hollywood
Residentially Zoned Property	Hollywood, Miami-Dade County
Social Service Facility	Hollywood
Substance Abuse and Rehabilitation Center	Hollywood

Separation by 1,000 Feet

Use	Cities
Central Business District	Coral Gables
Day Care	Coral Gables, Hollywood, Plantation, Miami-Dade County
Hospital	Plantation
Medical Marijuana Dispensary	Coral Gables, Plantation
Park	Coral Gables, Hollywood, Plantation
Place of Worship	Cocoa Beach, Coral Gables, Hollywood, Plantation, Miami-Dade County
Recreational Buildings	Hollywood
Residentially Zoned Property	Plantation
School	Cocoa Beach, Coral Gables, Hollywood (proposed), Plantation, Miami-Dade County

Separation by 1,500 Feet

Use	City
Schools, Public or private	Glades County
House of worship	
Park	
Day Care or Senior Care	
Government Building	

Separation by 2,500 Feet

Uses	Cities
Day Care	Edgewood, Flagler Beach, Indian Harbor, Maitland, Ponce Inlet
Medical Marijuana Dispensary	Edgewood, Flagler Beach, Indian Harbor, Maitland, Ponce Inlet
Medical Office	Indian Harbor
Park / Park and Playgrounds	Edgewood, Flagler Beach, Indian Harbor, Maitland, Ponce Inlet
Pharmacy	Indian Harbor
Place of Worship	Edgewood, Flagler Beach, Indian Harbor, Maitland, Ponce Inlet
Residentially Zoned Property	Indian Harbor
School	Edgewood, Flagler Beach, Indian Harbor, Maitland, Ponce Inlet

Separation by 1 Mile

Use	City
Medical Marijuana Dispensary	Jacksonville
Medical Marijuana Dispensary	Miami-Dade County

Separation by 5 Mile

Use	City
Medical Marijuana Dispensary	Osceola County

Distance / Separation Standards #2

By Use : Retail Use

Separation from Day Care

Distance (ft)	Cities
250	Osceola County
300	LBTS, Palmetto
1,000	Coral Gables, Hollywood, Plantation, Miami-Dade County
1,500	Glades County
2,500	Edgewood, Flagler Beach, Indian Harbor, Maitland, Ponce Inlet

Separation from Dispensary

Distance (ft)	Cities
300	LBTS, Palmetto
500	Hollywood
1,000	Coral Gables, Plantation
2,500	Edgewood, Flagler Beach, Indian Harbor, Maitland, Ponce Inlet
1 Mile	Jacksonville, Miami-Dade County
5 Miles	Osceola County

Separation from Medical Uses

Distance (ft)	City
500	Hollywood (proposed) – Pain Management Clinic, Substance Abuse Rehabilitation Facility, Pharmacy less than 9,000 sq ft
1,000	Plantation - Hospital
2,500	Indian Harbor – Medical Office, Pharmacy

Separation from Park

Distance (ft)	City
300	LBTS, Palmetto
1,000	Coral Gables, Hollywood, Plantation
1,500	Glades County
2,500	Edgewood, Flagler Beach, Indian Harbor, Maitland, Ponce Inlet

Separation from School

Distance (ft)	City
250	Osceola County
300	LBTS, Palmetto
1,000	Cocoa Beach, Coral Gables, Hollywood, Plantation, Miami-Dade County
1,500	Glades County
2,500	Edgewood, Flagler Beach, Indian Harbor, Maitland, Ponce Inlet

Separation from Residential Zoning

Distance (ft)	Cities
200	Cocoa Beach
500	Hollywood (proposed)
600	Coral Gables
1,000	Plantation
2,500	Indian Harbor
1 Mile	Jacksonville

Separation from Place of Worship

Distance (ft)	City
300	LBTS
1,000	Cocoa Beach, Coral Gables, Hollywood, Plantation, Miami-Dade County
1,500	Glades County
2,500	Edgewood, Flagler Beach, Indian Harbor, Maitland, Ponce Inlet

- Most cities require separation from Day Care, Dispensary, Parks, Schools, Residential Zoning, and Place of Worship
- Three cities require separation from a medical use or pharmacy
- While Pompano Beach does not require distance between ABE and Park, this recommended for medical marijuana use due to possible allowance of smoking of medical marijuana

Parking Requirements: *Retail Use*

City	Parking Standard
Cocoa Beach	Parking Study
Coral Gables	1 per 150 square feet of floor area + 1 per full time employee and 1 per 2 part time employees
Hollywood	Parking Study
Indian Harbor	6 per 1000 square feet of gross floor area
Jacksonville	1 per 2 employees + 1 per company vehicle + 2 for patron parking
Lauderdale by the Sea	1 per 175 square feet of floor area + 1 per full time employee and 1/2 per part time employee
Osceola County	1 per 200 square feet
Plantation	1 per 300 square feet of gross floor area

- Not all cities have a distinct parking requirement for retail sales of medical marijuana
- The evidence of heavier traffic at retail outlets justifies not only standards addressing loitering, but also increased parking

Approval Required: *Retail Use*

City	Approval Mechanism / Board
Cocoa Beach	Special Exception / ZBA
Coral Gables	Conditional Use / P&Z Board
Edgewood	Special Exception / City Commission
Flagler Beach	Special Exception / City Commission
Gainesville	Permitted Use / City Commission
Hollywood	Special Exception / P&Z Board
Indian Harbor	Conditional Use / City Commission
Jacksonville	Permitted Use / City Commission
Lauderdale by the Sea	Conditional Use / City Commission
Maitland	Conditional Use / City Commission
Plantation	Conditional Use / City Commission
Ponce Inlet	Special Exception / City Commission

- Almost all reviewed cities require approval by the City Commission
- The remaining cities require approval by another advisory board

Hours of Operation*: *Retail Use*

City	Mon – Fri	Saturday	Sunday
Cocoa Beach	7:00 a.m. to 7:00 p.m.	7:00 a.m. - noon	7:00 a.m. - noon
Hollywood	7:00 a.m. to 7:00 p.m.	7:00 a.m. - noon	7:00 a.m. - noon
Indian Harbor	8:00 a.m. to 6:00 p.m.	8:00 a.m. - noon	8:00 a.m. - noon
Lauderdale by the Sea	8:00 a.m. to 6:00 p.m.	8:00 a.m. – 6:00 p.m.	No operation permitted
Miramar	8:00 a.m. to 5:00 p.m.	8:00 a.m. – 5:00 p.m.	No operation permitted
Palmetto	7:00 a.m. to 7:00 p.m.	7:00 a.m. to 7:00 p.m.	7:00 a.m. to 7:00 p.m.
Plantation	8:00 a.m. to 6:00 p.m.	No operation permitted	No operation permitted

- *DOH already restricts the hours for dispensing / no dispensing between 9:00 p.m. and 7:00 a.m..

Additional Standards: *Retail Use*

Noticing Requirements:

- Coral Gables – 1,000 ft
- LBTS – 300 ft

Transfer of Approval to New Business Owner Prohibited:

- Hollywood, LBTS, Miramar, and Plantation

Drive Through Prohibited:

- Cocoa Beach, Coral Gables, Edgewood, Flagler Beach, Hollywood, Indian Harbor, Maitland, Palmetto, Ponce Inlet

Multiple Use Prohibited:

- Coral Gables, LBTS, Miramar
 - If located in a freestanding building it shall be the only use permitted on the property.
 - If located in a bay or multi-bay space within a multi-tenant structure, the Center shall be the only use permitted within the bay or multi-bay space it occupies.

Adequate Indoor Seating:

- Jacksonville, Miramar, Palmetto, Plantation
 - Shall provide adequate indoor seating for its customers, clients, patients and business invitees

Prohibit Loitering:

- Glades County, Jacksonville, Hollywood, Osceola County, Palmetto, Plantation
 - Shall not permit any patient or business invitee to stand, sit including in a parked car, or gather or loiter outside of the building where the dispensary operates, including in any parking areas, for any period of time longer than that reasonably required to arrive and depart.
 - Shall post conspicuous signs on at least three sides of the building that no loitering is allowed on the property.

Limit based on optimal ratio:

- Glades County, Hollywood, Osceola County
 - One for every 65,000 residents (Hollywood)
 - One for every 67,600 residents (Glades County)
 - One for every 100,000 residents (Osceola County)

Recommendations

City's Zoning Considerations

Concerns	Health Care Use	Retail Use	Industrial Uses
Perception of Crime and Blight		X	
Crime		X	X
Safety		X	X
Parking and Traffic	X	X	X
Loitering	X	X	
Hours of Operation	X	X	
Signage and Exterior Appearance	X	X	X
Odor Control	X	X	X
Clustering of Uses		X	
Adjacency to Liquor Stores and Sexually Oriented Businesses		X	
Adjacency to Parks and Schools		X	X
Adjacency to Residential uses	X	X	X

Recommended Text Amendments

- ❖ Create 3 Medical Marijuana Establishments (“MME”) uses.

		COMMERCIAL DISTRICTS						INDUSTRIAL DISTRICTS				SPECIAL DISTRICTS					PLANNED DEVELOPMENT DISTRICTS					
		B-1	B-2	B-3	B-4	M-1	CR	I-1	I-X	OIP	M-2	TO	PR	CF	PU	T	RPUD	PCD	PD-TO	LAC	PD-I	
<u>Medical Marijuana Establishments</u>	<u>Medical Marijuana Retail Establishment</u>				<u>S</u>			<u>S</u>		<u>S</u>								<u>P</u>				<u>155.4702.A</u>
	<u>Medical Marijuana Health Care Establishment</u>			<u>S</u>	<u>S</u>			<u>S</u>		<u>S</u>								<u>P</u>				<u>155.4702.B</u>
	<u>Medical Marijuana Industrial Establishment</u>							<u>S</u>	<u>S</u>	<u>S</u>								<u>P</u>				<u>155.4702.C</u>

- MME’s would not be permitted in DPOD or future ETOC due to prohibition in TO.
- Retail and Industrial Uses would not be permitted in AOD as they are not permitted in RM, B-1, B-2, or B-3 Districts. Health Care use would be prohibited in AOD.
- The Industrial Use includes cultivation, processing, laboratory, storage and wholesale distribution.
- While the current FAC rules limit cultivation and processing to six locations, it is possible the statutory changes could permit additional locations. Also the FAC’s rules are unclear as to the use of off-site independent testing laboratories. FAC 64-4.002.16 requires Dispensing Organization applicants to describe their relationship(s) with an independent laboratory(ies) with cannabis testing protocols and methods. Finally it is unclear in current FAC rules if off-site storage and wholesale distribution must be at the same location as the cultivation.

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Recommended Text Amendments

❖ Create 7 Standards applicable to ***All*** MMEs:

1. Minor Site Plan is required even for change of use
2. A Security Plan is required and must be approved by BSO.
3. No marijuana plants (or depictions), paraphernalia etc... can be visible from the sidewalk or ROW.
4. Garbage control plan
5. Odor control plan
6. Only permitted in PCD if located on Industrial Land Use and listed as a permitted use at the time the PCD was created.
7. No Variances permitted

❖ Create 6 additional Standards applicable only to MME ***Retail Use***:

1. Separation 1,000 ft: All Residential Zoning Districts / Schools / Public Parks / ABE / SOB / MME Health Care or Industrial Use
2. Separation 1 mile: Another MME Retail Use
3. Prohibit in the NW CRA
4. Hours of Operation limited to 7:00 a.m. to 7:00 p.m. (2 hours less than permitted by state)
5. Multiple Uses prohibited (can not be collocated with another use)
6. Indoor waiting area is required.
7. Drive Through Service Prohibited. If there is an existing drive through facility at the location, it must be demolished

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Recommended Text Amendments

- ❖ Create 3 additional Standards applicable only to MME ***Health Care Use***
 1. Must comply with the use specific standards for Specialty Medical Facilities
 - Specialty Medical Facilities have limits on hours of operation and require 500 feet from RS and RD Districts
 2. Separated by 1,000 ft from MME Retail Use
 3. On-Site dispensing of medical marijuana is prohibited
- ❖ Create 2 additional Standards applicable only to MME ***Industrial Use***
 1. Separated by 1,000 ft from MME Retail Use and Residential Districts
 2. No retail sales of Medical Marijuana permitted
- ❖ Parking Standards.
 1. Retail uses: 1 space per 150 gfa.
 2. Industrial uses: Parking will be required for accessory offices in addition to warehouse / manufacturing areas.

Medical Cannabis:

Staff Report and Recommendations

Karen Friedman, Principal Planner
Development Services Department
February 2017

