

**SAN BERNARDINO COUNTY DEPARTMENT OF PUBLIC HEALTH**  
**MEDICAL MARIJUANA IDENTIFICATION CARD PROGRAM (MMICP)**  
**How to Apply**

**Application Packet:**

Application packets are available in English and Spanish at the San Bernardino County Department of Public Health office at 351 North Mountain View Avenue, 2<sup>nd</sup> Floor, in San Bernardino. Office hours are Monday – Friday, from 8:00 a.m. – 5:00 p.m., except holidays.

You can call to have an application packet mailed to you at 1 (800) 782 – 4264. To get an online application packet, go to [www.sbcounty.gov/dph](http://www.sbcounty.gov/dph) and click on the MMICP link.

**Appointment:**

Completed applications are accepted by appointment only. Appointments are scheduled Monday and Wednesday, 8:30 a.m. – 12:00 noon and 1:00 p.m. – 4:30 p.m. Please arrive on time. To schedule an appointment, call 1 (800) 782 – 4264.

**Before Your Appointment:**

1. Get written documentation from your physician recommending the use of medical marijuana as appropriate for one or more serious medical conditions. The physician can use the “**Written Documentation of Patient’s Medical Record**” form, (download CDPH Form No. 9044), or official letterhead. Ensure a copy is in your medical file.
2. Complete an “**Application/Renewal**” form (download CDPH Form No. 9042).
3. Call to confirm your appointment at 1 (800) 782 – 4264.
4. Verify you have all items listed on the “**Appointment Check List**” (download form).

**Bring to Your Appointment:**

1. A completed original “**Application/Renewal**” form (download CDPH Form No. 9042).
2. The original written documentation from your physician recommending the use of medical marijuana on the “**Written Documentation of Patient’s Medical Record**” form (download CDPH Form No. 9044), or official letterhead.
3. Your physician’s name, contact information and California medical license number.
4. A government-issued photo identification (i.e. California State Driver’s License, a California State ID Card, United States Passport, Veteran’s Administration ID Card).
5. Proof you live in San Bernardino County (i.e. current utility bill, or mortgage/rent payment receipt). **A P.O. Box address is not acceptable for address verification.**
6. Non-refundable application fee of \$166, or \$83 for Medi-Cal beneficiaries (qualified Medi-Cal participants get a 50% reduction in fees).
  - cash (**Change in the exact amount is required.**)
  - cashier check or money order
7. Current Medi-Cal card if you are a Medi-Cal participant.

**After Submitting Your Application:**

It can take up to 35 days to receive your MMIC. To ensure delivery, we will contact you to pick-up your ID card when it is available. If you have any questions, please call 1 (800) 782 – 4264 or visit the Frequently Asked Questions link by going to [www.sbcounty.gov/dph](http://www.sbcounty.gov/dph).