



Uniform Application

Note: In order for Applications to be deemed complete under Section 65943 of the Government Code, the following items must be provided:

1. Completed Uniform Application
2. Development Plans as required by Submittal Requirements
3. Appropriate Filing Fee

GENERAL REQUIREMENTS (Print Clearly or Type)

** Property Owner's Name:		(staff use only)
Address:		File No.:
Home/Cell No.:	Work No.:	Related Files:
E-mail Address:	Fax No.:	
** Applicant's Name:		Date Rec'd:
Address:		Rec'd by:
Home/Cell No.:	Work No.:	Fees Paid:
E-mail Address:	Fax No.:	Receipt No.:
Representative's Name:		Approved by:
Address:		Date Approved:
Home/Cell No.:	Work No.:	Resolution No(s).:
E-mail Address:	Fax No.:	

** Note: If the applicant is not the property owner, the property owner shall designate the applicant as the authorized agent to act on his or her behalf and both shall sign this application.

TYPE OF APPLICATION (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Administrative Permit (AP) | <input type="checkbox"/> Mobile Food Vendor Permit (VP) |
| <input type="checkbox"/> Annexation (ANX) | <input type="checkbox"/> Planned Development Reclassification (PDR) |
| <input type="checkbox"/> Appeal | <input type="checkbox"/> Pre-zone |
| <input type="checkbox"/> Area Plan | <input type="checkbox"/> Rezone (ZC) |
| <input type="checkbox"/> Block Party Permit | <input type="checkbox"/> Sign Review (SR) |
| <input type="checkbox"/> Conditional Use Permit (CUP) | <input type="checkbox"/> Site Plan (SP) |
| <input type="checkbox"/> Cottage Food Operations (CFO) Permit | <input type="checkbox"/> Special Events Permit (SEP) |
| <input type="checkbox"/> Donation/Collection Bins Permit | <input type="checkbox"/> Temporary Uses Permit (TUP) |
| <input type="checkbox"/> Farmers' Market Permit | <input type="checkbox"/> Tentative Parcel Map |
| <input type="checkbox"/> Final Development Plan (FDP) | <input type="checkbox"/> Tentative Subdivision Map |
| <input type="checkbox"/> General Plan Amendment (GPA) | <input type="checkbox"/> Vesting Tentative Subdivision Map |
| <input type="checkbox"/> Initial Environmental Assessment | <input type="checkbox"/> Variance |
| <input type="checkbox"/> Master Development Plan | <input type="checkbox"/> Other: _____ |

**NON-RESIDENTIAL PROJECTS
 OFFICE/ RETAIL/ INDUSTRIAL/ INSTITUTIONAL
 PROJECT SUMMARY TABLE**

SITE AREA DISTRIBUTION

Site Area: Gross acres: _____ Net acres: _____
 Proposed Phasing: _____

Building Area: Existing Structures: _____ sq ft New Structures: _____ sq ft
 Existing Floor Area Ratio (FAR): _____ Proposed Floor Area Ratio (FAR): _____
 Height: _____ sq ft Number of Floors: _____

For Commercial Developments:
 Market/Service Area: Neighborhood City Regional
 Square Footage: _____

For Industrial Developments:
 Use: Warehouse/Distribution Manufacturing Multi-tenant Other
 Square Footage: _____ Estimated Employees Per Shift: _____

For Institutional Developments:
 Use/Function: _____
 Estimated Employees Per Shift: _____
 Estimated Number of Occupants: _____

BUILDING INFORMATION

Occupancy Classification: _____
 Occupancy Code: _____
 Type of Construction: _____
 Roof Materials: _____

AREA DISTRIBUTION (based on net area)	Acres/Sq Ft	% of Net Area
Building Coverage:		
Vehicular (Paved) Coverage:		
Landscape Coverage:		

PARKING

Type of Use	Parking Ratio	# of Spaces Required	# of Spaces Provided
TOTALS			

Attach separate sheet(s) if necessary to provide complete Land Use/Unit/Density/Area/Parking breakdown.

RESIDENTIAL
PROJECT SUMMARY TABLE *(if applicable)*

PROJECT AREA

Site Area: Gross acres: _____ Net acres: _____

No. of Phases: _____

DWELLING UNITS (based on net acres)		Number	Net Density
Single Family Detached			
Single Family Attached			
Multi-Family/Condominium			
	Studio		
	One Bedroom		
	Two Bedroom		
	Three Bedroom		
	Four or More Bedrooms		
	TOTAL		

AREA DISTRIBUTION (based on net area)		Acres/Sq Ft	% of Net Area
Building Coverage			
Landscape Coverage			
Vehicular (Paved) Coverage			
Common Open Space			
Private Open Space (per unit)			N/A

PARKING	Parking Ratio	# of Units	Spaces Req'd	Spaces Provided
Single-Family Detached				
Single-Family Attached				
Multi-Family/Condominium				
TOTAL				

Attach separate sheet(s) if necessary to provide complete Land Use/Unit/Density/Area Parking breakdown.

**PROJECT LOCATION
LETTER OF AUTHORIZATION**

PROJECT LOCATION

General Location/Address of Project: _____

Assessor's Parcel No(s): _____

Precise Legal Description (Attach. Required for the following : Rezoning, Annexation, Street or Alley Abandonment): _____

AFFIDAVIT

If property owner is a trust, partnership, LLC, then the signature shall be a corporate officer. Attach additional sheets if necessary.

I, _____, hereby certify that I am the applicant in the foregoing application, that I have read the foregoing application and know the content thereof and state that the same is true and correct to the best of my knowledge.

Applicant (signature)

Applicant (print name)

I, _____, hereby certify that I am the owner (if other than the applicant) of real property involved in this application, do hereby consent to the filing of this application. Attach separate sheets if multiple property owners.

Owner (signature)

Owner (print name)