



Department of Community Development

**CONDITIONAL USE PERMIT APPLICATION**

*(Please type or print)*

Date Filed \_\_\_\_\_ Fees Paid \_\_\_\_\_

Name of applicant: \_\_\_\_\_

Address of applicant: \_\_\_\_\_

Phone number of applicant: \_\_\_\_\_

The applicant is proposing development of the following described property. Legal description from deed, attach additional sheet if more space is needed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Project address: \_\_\_\_\_

General location: \_\_\_\_\_

\_\_\_\_\_

Specific use applied for:

(Describe in detail the nature of the business, occupation or purpose for which the building, structure, improvement or premises are to be used, and what is to be done on or with the property in the way of additional improvements).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please describe why the proposed use is necessary or desirable for the future development of the community:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please describe why the proposed use is in harmony with the comprehensive General Plan:

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Please describe why the proposed use would not be detrimental to existing or proposed uses in the surrounding area:

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Please describe why the size and shape of the site is adequate to accommodate the proposed use:

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NOTE: A plot plan of this property and proposed development are attached hereto and made a part of this request.

The checklist below has been prepared as an aid for both you and the Department of Community Development, to insure that your application is submitted in complete form. This will help insure a timely and effective review process for all applicants.

Prior to the submission of your application it is highly recommended that you review the attached conditions of approval. These conditions will apply to your project and it is often helpful to applicants to understand what these conditions will require of your project early in the application process. Understanding said conditions will assist you in making the appropriate accommodations within your project and will further expedite the processing of your application.

Please check each item to insure that it is contained within this packet before submitting your application. If an item is not applicable, please indicate with N/A. Upon submission, a member of the Community Development staff will verify the contents in your presence, and accept it for review or return the packet to you for completion. It is extremely important that you submit your application with all items, as requested, since an incomplete packet will not be accepted for review.

Should you have any questions, please feel free to contact either myself at (562) 860-0311, extension 6907, or the Planner you are working with. Thank you for your cooperation.

Applicant Check	Precise Plan and/or Conditional Use Permit Applications Requirements	Staff Check
	1. Appendix H (Environmental Checklist Form)	
	a. Certification (signed)	
	b. Site Photos and Photo Key	
	2. Conditional Use Permit Application (if applicable)	
	3. Plot Plan Tabulation (residential only)	
	4. Property Owner's Consent to File Application (signed and notarized)	
	5. Legal Description	
	6. Current title report OR both a grant deed and a recent property tax bill	
	7. Precise Plan Application (if applicable)	
	8. Parcel Map Application (if applicable)	
	9. Property Owner's List Preparer's Affidavit (signed and notarized)	
	10. Base Map- One (1) copy with each parcel within 500 feet numbered	
	11. Gummed Labels (typed): Listing of names and addresses of all parcel owners within 500 feet, numbered corresponding to base map above (2 sets/1 copy)	
	12. Architectural Plans - Five (5) full size copies (folded 8-1/2" x 11"): a. Plot/Site Plan      b. Conceptual Landscape Plan      c. Floor Plans d. Elevations          e. Sections                                  f. Pedestrian Circulation Plan	
	13. Colored perspective rendering	
	14. Reductions - One (1) colored copy and one (1) black-and-white copy (both 8-1/2" x 11") of clearly readable reductions of all renderings/drawings listed items 12 and 13 above.	
	15. Bound Presentation Packet - Fifty (50) copies (11" x 17"). Packet to include colored versions of all renderings/drawings listed in items 12 and 13 above.*	
	16. CD containing electronic copies of the following items listed herein: a. JPEG copy of site photos required with Appendix H in item 1b above b. PDF copy of all renderings/drawings listed in items 12 and 13 above c. JPEG copy (200 dpi) of all renderings/drawings listed in items 12 and 13 above	
	17. Color/material sample board	
	18. Application fees	
	19. Other items required by Staff	

\* Requirement applicable to all commercial/industrial development proposals as well as multi-family residential developments. Requirement shall not apply to single-family room additions or single unit residential construction.

Site Address: \_\_\_\_\_ Project Name: \_\_\_\_\_

Accepted for review by: \_\_\_\_\_ Date: \_\_\_\_\_

**ENVIRONMENTAL INFORMATION FORM**

Appendix H

**Date Filed:** \_\_\_\_\_

**GENERAL INFORMATION**

- 1. Name and address of developer or project sponsor: \_\_\_\_\_  
\_\_\_\_\_
- 2. Address of project: \_\_\_\_\_  
Assessor's Book, Page and Lot Number: \_\_\_\_\_
- 3. Name, address, and telephone number of person to be contacted concerning this project: \_\_\_\_\_  
\_\_\_\_\_
- 4. Existing zoning district: \_\_\_\_\_
- 5. Proposed use of property (project for which this form is filed): \_\_\_\_\_  
\_\_\_\_\_

**PROJECT DESCRIPTION**

- 6. Property size: \_\_\_\_\_ acres, \_\_\_\_\_ square feet.
- 7. Proposed building square footage: \_\_\_\_\_
- 8. Number of floors and square footage of each floor: \_\_\_\_\_  
\_\_\_\_\_
- 9. Amount of off-street parking provided: \_\_\_\_\_ spaces.
- 10. Anticipated phasing of development: \_\_\_\_\_  
\_\_\_\_\_
- 11. If multifamily residential, include the number of units, schedule of unit sizes, range of sale prices or rents and type of household size expected: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 12. If commercial, include the type of use, whether neighborhood, city or regionally oriented, square footage of sales area and loading facilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 13. If industrial, indicate type of use, estimated number of employees per shift and loading facilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. If institutional, indicate the major function, estimated number of employees per shift, estimated occupancy, loading facilities and community benefits to be derived from the project:

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15. If the project involves a variance, conditional use or rezoning application, state this and indicate clearly why the application is required: \_\_\_\_\_

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*(Continues on Next Page)*

Are the following items applicable to the project or its effects? Discuss below all items checked yes (attach additional sheets as necessary).

**YES NO**

- |                          |                          |     |  |
|--------------------------|--------------------------|-----|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 16. | Change in existing property features or substantial alteration of ground contours.                                   |
| <input type="checkbox"/> | <input type="checkbox"/> | 17. | Change in scenic views or vistas from existing residential areas or public lands or roads.                           |
| <input type="checkbox"/> | <input type="checkbox"/> | 18. | Change in scale or character of general areas surrounding project.   |
| <input type="checkbox"/> | <input type="checkbox"/> | 19. | Add significant amounts of solid waste or litter.  |
| <input type="checkbox"/> | <input type="checkbox"/> | 20. | Change in the level of dust, ash, smoke, fumes or odors in vicinity.   |
| <input type="checkbox"/> | <input type="checkbox"/> | 21. | Change in ocean, bay, lake, stream or ground water quality or quantity, or alteration of existing drainage patterns. |
| <input type="checkbox"/> | <input type="checkbox"/> | 22. | Substantial change in existing noise or vibration levels in the vicinity.  |
| <input type="checkbox"/> | <input type="checkbox"/> | 23. | Property on filled land or on slope of 10 percent or more.   |
| <input type="checkbox"/> | <input type="checkbox"/> | 24. | Use or disposal of potentially hazardous materials, such as toxic substances, flammables or explosives.              |
| <input type="checkbox"/> | <input type="checkbox"/> | 25. | Substantial change in demand for municipal services (police, fire, water, sewage, etc).                              |
| <input type="checkbox"/> | <input type="checkbox"/> | 26. | Substantially increase fossil fuel consumption (electricity, oil, natural gas, etc).                                 |
| <input type="checkbox"/> | <input type="checkbox"/> | 27. | Relationship to a larger project or series of projects.  |

**Environmental Setting**

28. Describe the property as it exists before the project, including information on topography, soil stability, plants and animals, and any cultural, historical or scenic aspects. Describe any existing structures on the property and the use of said structures. Attach photographs of the site.
29. Describe the surrounding properties, including information on plants and animals, and on any cultural, historical, or scenic aspects. Indicate the type of land use (residential, commercial, etc.), intensity of land use (one-family, apartment, houses, shops, department stores, etc.), and scale of development (height, frontage, set-back, rear yard, etc.). Attach photographs of the vicinity.

**Certification:**

I hereby certify that the statements furnished above and in the attached exhibits present the data and information required for this initial evaluation to the best of my ability, and that the facts, statements, and information presented are true and correct to the best of my knowledge and belief.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

For: \_\_\_\_\_

**PROPERTY OWNER'S CONSENT TO FILE APPLICATION**

I (we), \_\_\_\_\_, hereby certify that I am (we are) the owner(s) of the property located at \_\_\_\_\_, and identified as

APN \_\_\_\_\_ and that I (we) have reviewed this application and that this application is being filed with the full knowledge and consent of the above property owner(s). I (we) further acknowledge and understand that if the application is approved by the City, the application shall subject the property to conditions of approval. I (we) certify, under penalty of perjury, that the foregoing statements presented herein are in all respects true and correct to the best of my (our) knowledge and belief.

Signature: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )  
County of \_\_\_\_\_ ) ss.

On \_\_\_\_\_, before me, \_\_\_\_\_  
(insert name and title of notary public)

personally appeared \_\_\_\_\_

\_\_\_\_\_ who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the state of California that the foregoing paragraph is true and correct.

WITNESS, my hand and official seal.

\_\_\_\_\_  
Signature of Notary

**ADJACENT PROPERTY OWNER'S LIST PREPARER'S AFFIDAVIT**

I, \_\_\_\_\_ being duly sworn, depose and certify that I am the owner of all or part of the property located at \_\_\_\_\_, and identified as APN \_\_\_\_\_ or am a duly appointed representative of such owner(s), and hereby certify that the attached list contains the names and addresses of all persons to whom all property is assessed as they appear on the latest available assessment roll of the County of Los Angeles within the area described and for a distance of five hundred (500) feet from the exterior boundaries of property legally described as:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )  
County of \_\_\_\_\_ ) ss.

On \_\_\_\_\_, before me, \_\_\_\_\_  
(insert name and title of notary public)

personally appeared \_\_\_\_\_

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the state of California that the foregoing paragraph is true and correct.

WITNESS, my hand and official seal.

\_\_\_\_\_  
Signature of Notary

**ALL SIGNATURES MUST BE ACKNOWLEDGED BEFORE A NOTARY PUBLIC**



**PROPERTY OWNER'S LIST MAILING LABEL FORMAT**


1. Mailing labels must be completed in this format or an equivalent matrix on an 8-1/2" x 11" sheet, with three equal rows across and ten or eleven rows down.
2. Labels submitted in formats other than that specified will not be accepted.
3. Use Xerox matrix, gummed labels, or an equivalent product.

	SAMPLE LABEL	
	<div style="border: 2px solid black; padding: 5px;">                 John Doe                  1234 Main Street                  Cerritos, CA 90703             </div>	Label borders  14  This number corresponds to the number on your property owner base map with 500' radius.