



PLANNING DIVISION MASTER APPLICATION FORM

Project Address: _____

Project Name: _____

Project Description: (Please describe demolitions, alterations and any new construction) _____

Zoning Designation: _____ General Plan Designation: _____

Estimated Valuation (Cost of Project): _____

APPLICANT / OWNER INFORMATION

APPLICANT NAME: _____

Telephone: [] _____

Address: _____

Fax: [] _____

City _____ State: _____ Zip: _____

Email: _____

CONTACT PERSON: _____

Telephone: [] _____

Address: _____

Fax: [] _____

City _____ State: _____ Zip: _____

Email: _____

PROPERTY OWNER NAME: _____

Telephone: [] _____

Address: _____

Fax: [] _____

City _____ State: _____ Zip: _____

Email: _____

TYPE OF PLANNING REVIEW AND APPROVALS REQUIRED (Mark clearly the type of approval(s) required):

- ADJUSTMENT PERMIT, AFFORDABLE HOUSING CONCESSION OR WAIVER, CERTIFICATE OF APPROPRIATENESS, CERTIFICATE OF EXCEPTION, CHANGES TO APPROVED PROJECT, CONDITIONAL USE PERMIT, DESIGN REVIEW, DEVELOPMENT AGREEMENT, EXPRESSIVE USE PERMIT, FLOOR AREA RATIO (FAR) INCREASE, GENERAL PLAN AMENDMENT, HEIGHT AVERAGING, HILLSIDE DEVELOPMENT PERMIT, HISTORIC DESIGNATION (MONUMENT, LANDMARK, TREE OR SIGN), HISTORICAL RESEARCH/EVALUATION, LANDMARK TREE PRUNING, MASTER DEVELOPMENT PLAN, MASTER SIGN PLAN, MINOR CONDITIONAL USE PERMIT, MINOR VARIANCE, PLANNED DEVELOPMENT ZONE, PRELIMINARY PLAN CHECK, PREDEVELOPMENT PLAN REVIEW, RELIEF FROM THE REPLACEMENT BUILDING PERMIT REQUIREMENT, SIGN EXCEPTION, TENTATIVE PARCEL/TRACT MAP, TEMP. CONDITIONAL USE PERMIT, TREE PROTECTION PLAN REVIEW, TREE REMOVAL, VARIANCE, VARIANCE FOR HISTORIC RESOURCES, ZONE CHANGE (MAP AMENDMENT), OTHER: _____

Note: Space for signature is on reverse side

Master Application (without supplementals)5/27/20

INDEMNIFICATION

Applicant agrees to defend, indemnify, and hold harmless the City and its officers, contractors, consultants, employees, and commission members (collectively, "City") from any and all liability, loss, suits, claims, damages, costs, judgments and expenses (including attorney's fees and costs of litigation), including any appeals thereto (collectively, "proceeding") brought against the City with regard to any approvals issued in connection with the application(s) by the City, including any action taken pursuant to the California Environmental Quality Act. If Applicant is required to defend the City in connection with such proceeding, the City shall have and retain the right to approve counsel to so defend the City; and all significant decisions concerning the manner in which the defense is conducted; and any and all settlements, which approval shall not be unreasonably withheld. The City shall also have and retain the right to not participate in the defense, except that the City agrees to reasonably cooperate with Applicant in the defense of the proceeding. If the City's Attorney's Office participates in the defense, all City Attorney fees and costs shall be paid by Applicant. Further, Applicant agrees to defend, indemnify and hold harmless the City from and for all costs and fees incurred in additional investigation or study of, or for supplementing, revising, or amending, any document if made necessary by said proceeding.

CERTIFICATION:

I hereby certify that I am the applicant or designated agent named herein and that I am familiar with the rules and regulations with respect to preparing and filing this petition for discretionary action, and that the statements and answers contained herein and the information attached are in all respects true and accurate to the best of my knowledge and belief.

SIGNATURE OF APPLICANT OR AGENT: _____ **Date:** _____

<p><u>For Office Use Only</u></p> <p>PLAN # _____ CASE # _____ PRJ # _____</p> <p>DATE ACCEPTED: _____ DATE SUBMITTALS RECEIVED: _____ RECEIVED BY (INITIALS): _____</p> <p>FEES: BASE FEE:: \$ _____ 3% RECORDS FEE: \$ _____ TOTAL: \$ _____</p> <p>HISTORIC ARCH. RESEARCH REQUIRED? YES NO PUBLIC ART REVIEW REQUIRED? YES NO TRANSPORTATION REVIEW REQUIRED? YES NO INCLUSIONARY HOUSING REQUIRED? YES NO</p>	<p><u>REVIEW AUTHORITY:</u></p> <p><input type="checkbox"/> STAFF <input type="checkbox"/> HEARING OFFICER <input type="checkbox"/> PLANNING COMMISSION/BZA <input type="checkbox"/> DESIGN COMMISSION <input type="checkbox"/> HISTORIC PRESERVATION COMMISSION <input type="checkbox"/> CITY COUNCIL</p> <p><u>TAXPAYER PROTECTION</u> <input type="checkbox"/> DISCLOSURE REQUIRED <input type="checkbox"/> NOT REQUIRED</p>	<p><u>CEQA REVIEW:</u></p> <p><input type="checkbox"/> EXEMPTION <input type="checkbox"/> INITIAL STUDY <input type="checkbox"/> EIR</p> <p><u>CEQA REVIEW STATUS:</u></p> <p><input type="checkbox"/> PENDING <input type="checkbox"/> COMPLETED</p>	<p><u>Design & Historic Preservation:</u></p> <p><u>TYPE OF HISTORIC PRESERVATION REVIEW:</u></p> <p><input type="checkbox"/> CATEGORY 1 (DESIGNATED) <input type="checkbox"/> CATEGORY 2 (ELIGIBLE)</p> <p>LANDMARK/HISTORIC DISTRICT NAME: _____</p> <p><u>TYPE OF DESIGN REVIEW:</u></p> <p><input type="checkbox"/> CONCEPT <input type="checkbox"/> FINAL <input type="checkbox"/> CONSOLIDATED <input type="checkbox"/> PRELIMINARY CONSULTATION</p>
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