

APPLICATION FORM

Humboldt County Community Development Services Department

Planning Division ♦ 3015 H Street ♦ Eureka, CA 95501-4484 ♦ ph (707) 445-7541 ♦ fax (707) 445-7446
Kirk Girard ♦ Director

INSTRUCTIONS:

1. Applicant/Agent complete Sections I, II and III below.
2. It is recommended that the Applicant/Agent schedule an Application Assistance Meeting with the Assigned Planner. A minimal fee is required for this meeting. This is not mandatory; however, prearranged appointments with the Assigned Planner will answer questions regarding application submittal requirements and help avoid processing delays (the Planner on Duty or Receptionist can identify the Assigned Planner for you).
3. Applicant/Agent needs to submit all items marked on the reverse side of this form (which will be completed by Staff).

SECTION I

APPLICANT (Project will be processed under Business name, if applicable.)

AGENT (Communications from Department will be directed to agent)

Business Name: _____
 Contact Person: _____
 Mailing Address: _____
 City, St, Zip: _____
 Telephone: _____ Fax: _____
 Email: _____

Business Name: _____
 Contact Person: _____
 Mailing Address: _____
 City, St, Zip: _____
 Telephone: _____ Fax: _____
 Email: _____

OWNER(S) OF RECORD (If different from applicant)

Owner's Name: _____
 Mailing Address: _____
 City, St, Zip: _____
 Telephone: _____ Fax: _____

Owner's Name: _____
 Mailing Address: _____
 City, St, Zip: _____
 Telephone: _____ Fax: _____

LOCATION OF PROJECT

Site Address: _____
 Community Area: _____

Assessor's Parcel No(s): _____
 Parcel Size (acres or sq. ft.): _____

Is the proposed building or structure designed to be used for designing, producing, launching, maintaining, or storing nuclear weapons or the components of nuclear weapons? YES NO

SECTION II

PROJECT DESCRIPTION

Describe the proposed project (attach additional sheets as necessary): _____

SECTION III

OWNER'S AUTHORIZATION & ACKNOWLEDGEMENT

I hereby authorize the County of Humboldt to process this application for a development permit and further authorize the County of Humboldt and employees of the California Department of Fish and Game to enter upon the property described above as reasonably necessary to evaluate the project. I also acknowledge that processing of applications that are **not** complete or do not contain truthful and accurate information will be delayed, and may result in denial or revocation of approvals.

 Applicant's Signature

 Date

If the applicant is not the owner of record: I authorize the applicant/agent to file this application for a development permit and to represent me in all matters concerning the application.

 Owner of Record Signature

 Date

 Owner of Record Signature

 Date

THIS SIDE TO BE COMPLETED BY STAFF

***** THE FOLLOWING ITEMS MUST BE SUBMITTED WITH THIS APPLICATION *****

Item	Received	Item	Received
<input checked="" type="checkbox"/> Filing Fee of \$ _____	<input type="checkbox"/>	<input type="checkbox"/> Agricultural Feasibility Study	<input type="checkbox"/>
<input type="checkbox"/> Archaeological Review Fee \$75.00 payable to: North Coast Information Center, NCIC	<input type="checkbox"/>	<input type="checkbox"/> Architectural Elevations	<input type="checkbox"/>
<input checked="" type="checkbox"/> Fee Schedule (see attached, please return completed fee schedule with application)	<input type="checkbox"/>	<input type="checkbox"/> Design Review Committee Approval	<input type="checkbox"/>
<input type="checkbox"/> Plot Plan 12 copies (folded if > 8½" x 14")	<input type="checkbox"/>	<input type="checkbox"/> Environmental Assessment	<input type="checkbox"/>
<input type="checkbox"/> Tentative Map 12 folded copies (Minor Subd)	<input type="checkbox"/>	<input type="checkbox"/> Exception Request Justification	<input type="checkbox"/>
<input type="checkbox"/> Tentative Map 18 folded copies (Major Subd)	<input type="checkbox"/>	<input type="checkbox"/> Joint Timber Management Plan	<input type="checkbox"/>
[Note: Additional plot plans/maps may be required]		<input type="checkbox"/> Lot Size Modification Request Justification	<input type="checkbox"/>
<input checked="" type="checkbox"/> Tentative Map/Plot Plan Checklist (complete and return with application)	<input type="checkbox"/>	<input type="checkbox"/> Parking Plan	<input type="checkbox"/>
<input type="checkbox"/> Division of Environmental Health Questionnaire	<input type="checkbox"/>	<input type="checkbox"/> Plan of Operation	<input type="checkbox"/>
<input type="checkbox"/> On-site sewage testing (if applicable)	<input type="checkbox"/>	<input type="checkbox"/> Preliminary Hydraulic and Drainage Plan	<input type="checkbox"/>
<input type="checkbox"/> On-site water information (if applicable)	<input type="checkbox"/>	<input type="checkbox"/> R1 / R2 Report (Geologic/Soils Report, 3 copies with "wet" signature)	<input type="checkbox"/>
<input type="checkbox"/> Solar design information	<input type="checkbox"/>	<input type="checkbox"/> Reclamation Plan, including engineered cost estimate for completing reclamation	<input type="checkbox"/>
<input type="checkbox"/> Chain of Title	<input type="checkbox"/>	<input type="checkbox"/> Second Dwelling Unit Fact Sheet	<input type="checkbox"/>
<input type="checkbox"/> Grant Deed		<input type="checkbox"/> Variance Request Justification	<input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/> Current <input type="checkbox"/> Creation	<input type="checkbox"/>	<input type="checkbox"/> Vested Right Documentation/Evidence	<input type="checkbox"/>
<input type="checkbox"/> Lot Book Guarantee (prepared within the last six months prior to application)	<input type="checkbox"/>	<input type="checkbox"/> Other _____	<input type="checkbox"/>
<input type="checkbox"/> Preliminary Title Report (<u>two copies</u> , prepared within the last six months prior to application)	<input type="checkbox"/>	<input type="checkbox"/> Other _____	<input type="checkbox"/>
		<input type="checkbox"/> Other _____	<input type="checkbox"/>
		<input type="checkbox"/> Other _____	<input type="checkbox"/>
		<input type="checkbox"/> Other _____	<input type="checkbox"/>

FOR STAFF USE

<input type="checkbox"/> Ag. Preserve Contract	<input type="checkbox"/> General Plan Amendment	<input type="checkbox"/> Reclamation Plan
<input type="checkbox"/> Certificate of Compliance	<input type="checkbox"/> General Plan Petition	<input type="checkbox"/> Surface Mining Permit
<input type="checkbox"/> Coastal Development Permit	<input type="checkbox"/> Information Request	<input type="checkbox"/> Surface Mining Vested Right Determination
<input type="checkbox"/> <input type="checkbox"/> Administrative	<input type="checkbox"/> Modification to _____	<input type="checkbox"/> Timber Harvest Plan Information Request
<input type="checkbox"/> Planning Commission	<input type="checkbox"/> Lot Line Adjustment	<input type="checkbox"/> Use Permit
<input type="checkbox"/> Design Review	<input type="checkbox"/> Preliminary Project Review	H.C.C. § _____
<input type="checkbox"/> <input type="checkbox"/> Inland	<input type="checkbox"/> Special Permit	<input type="checkbox"/> Variance
<input type="checkbox"/> Coastal	<input type="checkbox"/> <input type="checkbox"/> Administrative	H.C.C. § _____
<input type="checkbox"/> Determination of Legal Status	<input type="checkbox"/> <input type="checkbox"/> Planning Commission	<input type="checkbox"/> Zone Reclassification
<input type="checkbox"/> Determination of Substantial Conformance	H.C.C. § _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Extension of _____	<input type="checkbox"/> Subdivision	<input type="checkbox"/> Other _____
<input type="checkbox"/> Fire Safe Exception Request	<input type="checkbox"/> <input type="checkbox"/> Parcel Map	
	<input type="checkbox"/> <input type="checkbox"/> Final Map	
	<input type="checkbox"/> Exception to the Subdivision Requirements	

Application Received By: _____ Date: _____ Receipt Number: _____

General Plan Designation: _____

Plan Document: _____

Land Use Density: _____

Zone Designation: _____

Coastal Jurisdiction Appeal Status: Appealable Not Appealable

Preliminary CEQA Status:

Environmental Review Required

Categorically Exempt From Environmental Review: Class _____ Section _____

Statutory Exemption: Class _____ Section _____

Not a Project

Other _____