



CITY OF SIERRA MADRE

Planning & Community Preservation Department
232 W. Sierra Madre Blvd. Sierra Madre, CA 91024

Case No. _____

Project No. _____

Date Received: _____

01

MASTER ZONING APPLICATION FORM

Project Address: _____

APN #: _____

Project Description:

Zoning Designation _____ General Plan Land Use _____

APPLICANT / OWNER INFORMATION

Applicant Name: _____

Address: _____

Phone: _____ Email: _____

Contact Person: _____

Address: _____

Phone: _____ Email: _____

Property Owner Name: _____

Address: _____

Phone: _____ Email: _____

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

- | | |
|---|--|
| <input type="checkbox"/> ACCESSORY DWELLING UNIT | <input type="checkbox"/> HISTORIC DESIGNATION (LANDMARK) |
| <input type="checkbox"/> ADMINISTRATIVE DESIGN REVIEW PERMIT | <input type="checkbox"/> LOT LINE ADJUSTMENT |
| <input type="checkbox"/> ADMINISTRATIVE HILLSIDE DEVELOPMENT PERMIT | <input type="checkbox"/> MASTER PLAN |
| <input type="checkbox"/> CERTIFICATE OF APPROPRIATENESS | <input type="checkbox"/> MILLS ACT |
| <input type="checkbox"/> CONDITIONAL USE PERMIT | <input type="checkbox"/> MINOR CONDITIONAL USE PERMIT |
| <input type="checkbox"/> DESIGN REVIEW PERMIT | <input type="checkbox"/> MINOR MODIFICATION TO WIRELESS |
| <input type="checkbox"/> DISCRETIONARY DEMOLITION PERMIT | <input type="checkbox"/> MINOR VARIANCE |
| <input type="checkbox"/> DISCRETIONARY HOME OCCUPATION PERMIT | <input type="checkbox"/> VARIANCE |
| <input type="checkbox"/> GENERAL PLAN AMENDMENT | <input type="checkbox"/> ZONE CHANGE |
| <input type="checkbox"/> HILLSIDE DEVELOPMENT PERMIT | <input type="checkbox"/> OTHER: _____ |

<u>For Office Use Only</u>			
<u>Potential hazards zone(s)</u>	<u>Fees</u>	<u>CEQA Review</u>	<u>Review Authority</u>
<input type="checkbox"/> Landslide Zone	Application Fee \$	<input type="checkbox"/> Exemption	<input type="checkbox"/> Director
<input type="checkbox"/> Liquefaction Zone	Noticing Fee \$	<input type="checkbox"/> Initial Study	<input type="checkbox"/> Planning Commission
<input type="checkbox"/> Fault Zone	Environmental \$	<input type="checkbox"/> EIR	<input type="checkbox"/> City Council
<input type="checkbox"/> Very High Fire Hazard Severity Zone	Total \$		
<input type="checkbox"/> None			

Refund: Applicants will be entitled to refunds of relevant fees only if an application has been submitted and received in error by City Staff. Fees will not be refunded to an applicant who decides not to pursue a project which has been submitted.

APPEAL

If any person is aggrieved by a decision, an appeal may be filed to a higher decision-making body. For further information, please contact the Department of Planning & Community Preservation for the procedure and time constraints.

INDEMNIFICATION

The applicant and each successor in interest to the property which is the subject of this project application, shall defend, indemnify and hold harmless the City of Sierra Madre and its agents, officers and employees from any claim, action or proceeding against the City or its agents, officers or employees to attack, set aside, void or annul any approval of the City, City Council, Planning Commission, City Manager, or City Directors concerning this use.

Certification

I certify that I am the duly authorized applicant for this project. Further, I certify that all of the above information is true and correct. (If the undersigned is different from the legal property owner, a letter of authorization must accompany this form.)

I have read and agree to comply with the above stated conditions:

Name of Applicant

Signature

Please note: the above signature must be notarized.



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02

ENVIRONMENTAL INFORMATION FORM

CEQA: California Environmental Quality Act _____
(To be completed by the applicant if required)

Date Filed _____

General Information

1. Name and address of developer or project sponsor: _____
2. Address of project: _____
Assessor's Block and Lot Number: _____
3. Name, address, and telephone number of person to be contacted concerning this project:

4. Indicate number of the permit application for the project to which this form pertains: _____
5. List and describe and other related permits and other public approvals required for this project, including those required by city, regional, state and federal agencies:

6. Existing District _____
7. Proposed use of site (Project for which this form is filed): _____

Project Description

8. Site size
9. Square footage
10. Number of floors of construction
11. Amount of off-street parking provided.
12. Attach plans
13. Proposed scheduling
14. Associated projects
15. Anticipated incremental development
16. If residential, include the number of units, schedule of unit sizes, range of sale prices or rents, and type of household size expected
17. If commercial, indicate the type, whether neighborhood, city or regionally oriented, square footage of sales area, and loading facilities

- 18. If industrial, indicate type, estimated employment per shift, and loading facilities.
- 19. If institutional, indicate the major function, estimated employment per shift, estimated occupancy, loading facilities, and community benefits to be derived from the project.
- 20. If the project involves a variance, conditional use or rezoning application, state this and indicate clearly why the application is required.

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

	Yes	No
21. Change in existing features of any bays, tidelands, beaches, or hills, or substantial alteration of ground contours.	<input type="checkbox"/>	<input type="checkbox"/>
22. Change in scenic views or vistas from existing residential areas or public lands or roads.	<input type="checkbox"/>	<input type="checkbox"/>
23. Change in pattern, scale or character of general area of project.	<input type="checkbox"/>	<input type="checkbox"/>
24. Significant amounts of solid waste or litter.	<input type="checkbox"/>	<input type="checkbox"/>
25. Change in dust, ash, smoke, fumes or odors in vicinity.	<input type="checkbox"/>	<input type="checkbox"/>
26. Change in ocean, bay, lake, stream or ground water quality or quantity, or alteration of existing drainage patterns.	<input type="checkbox"/>	<input type="checkbox"/>
27. Substantial change in existing noise or vibration levels in the vicinity.	<input type="checkbox"/>	<input type="checkbox"/>
28. Site on filled land or on slope of 10 percent or more.	<input type="checkbox"/>	<input type="checkbox"/>
29. Use of disposal or potentially hazardous materials, such as toxic substances, flammables or explosives.	<input type="checkbox"/>	<input type="checkbox"/>
30. Substantial change in demand for municipal services (police, fire, water, sewage, etc.).	<input type="checkbox"/>	<input type="checkbox"/>
31. Substantially increase fossil fuel consumption (electricity, oil, natural gas, etc.).	<input type="checkbox"/>	<input type="checkbox"/>
32. Relationship to a larger project or series of projects.	<input type="checkbox"/>	<input type="checkbox"/>

Environmental Setting

- 33. Describe the project site 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 site, and the use of the structures. Attach photographs of the site. Snapshots or polaroid photos will be accepted.
- 34. Describe the surrounding properties, including information on plants and animals and any cultural, historic 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. Snapshots or polaroid photos will be accepted.

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 _____

ENVIRONMENTAL INFORMATION FORM

Any trees, shrubs, or vegetation to be removed?	NO	YES	If YES, please describe type and total numbers
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Proposed Landscaping includes:
(if there is landscaping, describe whether it is new or rehabilitated landscaping, and the area of the landscape in square feet)

Any existing structure(s) to be demolished?	NO	YES	If YES, please describe structure.
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Is the site on the Register of Historic Cultural Landmarks? **NO** **YES**

Will the site be graded? **NO** **YES**

If YES:

Cubic Yards: _____ Cut _____ Fill _____ Import _____ Export

Will a retaining wall/property line wall be constructed? **NO** **YES**

If YES:

_____ Height _____ Length _____ Material



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03

ENTRY ONTO PRIVATE LAND FORM

In the performance of their functions, the members of the Planning Commission and the staff of the City of Sierra Madre may enter upon my land located at

Project address

and make examinations provided that the entries and examinations do not interfere with the use of the land by those persons lawfully entitled to the possession thereof.

Signature of Landowner

Date



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03

OWNER'S AFFIDAVIT

I am the owner of the property located at

Project address

I have read the foregoing application for the planning permits and know the contents thereof and give the City of Sierra Madre permission to process such permit.

I certify under penalty of perjury that the foregoing is true and correct.

Signature

Date

Please Print:

Name _____

Address _____

Telephone _____

Please note: the above signature must be notarized.