



CUP _____

CONDITIONAL USE PERMIT APPLICATION

PLEASE COMPLETE THE FOLLOWING INFORMATION:

PROJECT ADDRESS _____

ZONE CLASSIFICATION _____

APPLICANT _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE No _____

E-MAIL ADDRESS _____

PROPERTY OWNER'S NAME _____

PROPERTY OWNER'S MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PROPOSED USE: (State exactly what use is intended for the property. If you are applying for an eating establishment, restaurant, or place of assembly, include the seating capacity and hours of operation).

Date _____ Receipt No. _____ Amount \$ _____ By _____

PREREQUISITE CONDITIONS: (The law requires that the conditions set forth below be clearly established before a conditional use permit can be granted.)

EXPLAIN IN DETAIL WHEREIN YOUR CASE CONFORMS TO THE FOLLOWING FIVE CONDITIONS:

1. That the granting of such conditional use permit will not be detrimental to the public health or welfare or injurious to the property or improvements in such zone or vicinity.

2. That the use applied for at the location indicated is one for which a conditional use permit is authorized.

3. That the site for the proposed use is adequate in size and shape to accommodate said use, including all yards, spaces, walls, fences, parking, loading, landscaping and other features required to adjust said use with the land and uses in the neighborhood.

4. That the site abuts streets and highways adequate in width and pavement type to carry the kind of traffic generated by the proposed use.

5. That the granting of such conditional use permit will not adversely affect the comprehensive General Plan.

NOTE: The Planning Commission is required by law to make a written finding of facts, based upon the information presented at the time of the public hearing, that beyond a reasonable doubt the five above enumerated conditions apply.

APPLICANT(S) VERIFICATION

I/We hereby certify (or declare) under penalty of perjury that the following information and attached ownership list are true and correct.

SIGNATURES:

Applicant Telephone No. _____

Address (including street, city, state and zip code)

Applicant (if more than one) Telephone No. _____

Address (including street, city, state and zip code)

Owner of Record (signature) Telephone No. _____

Address (including street, city, state and zip code)

Owner of Record (if more than one) Telephone No. _____

Address (including street, city, state and zip code)

APPLICATION WILL NOT BE ACCEPTED WITHOUT THE OWNER'S SIGNATURE

Owner of record (signature) Telephone No. _____

Address (include street, city, state and zip code)

Owner of record (if more than one) Telephone No. _____

Address (include street, city, state and zip code)

FILING REQUIREMENTS AND INSTRUCTIONS WORKSHEET:

Note: Incomplete applications will not be scheduled for public hearing. If it is determined after an application is filed that further information is necessary, a hearing will not be scheduled until said information is provided and the application deemed complete. To ensure that your application package is ready for review, please check-off the boxes next to the required application materials.

Required Application Materials:

- Completed application form.
- Environmental Information form
- Filing fee of \$840-\$1290 (depending on square footage)
- In addition to the filing fee, ***two separate checks*** in the amount of \$75.00 ***each*** payable to the Los Angeles County Recorder (required at the time of the filing).

These fees are charged by the County for the filing of the "Public Hearing Notice/Notice of Intent" and "Notice of Determination/Certificate of Fee Exemption" for your project. Your project is not operative, vested or final until the handling fee is paid to the County and the documents are filed.

If your project is denied, the above mentioned checks will be returned to you.

- A 300 foot radius map.

The 300 foot radius map accompanying the application must be a dark line print or ink tracing, correctly prepared. It must show each lot within 300 feet of the exterior boundaries of the property involved (including those lots within adjacent cities and county). Each lot must be consecutively numbered to correspond to the property owners list as explained below.

- Property owners/tenants/occupants list and labels of the subject property as well as all properties within the 300' radius.
 - a. The names and addresses of current property owners may be obtained at the Los Angeles County Assessor's office located at 1190 Durfee Avenue, South El Monte, CA 91733. A physical inspection of the properties may be necessary to determine the number of units.

Alternatively, applicants may retain the services of a mapping consultant to generate the radius map, list, and mailing labels on their behalf. A list of local mapping consultants may be obtained at the Planning Services offices.
 - b. The property owners list should be typewritten and must include each owner's name, mailing address and property assessment identification numbers (AIN).
 - c. Each property owner's name on this list must be numbered to correspond with the numbering placed on the aforesaid radius map.
 - d. A self-sticking label must be provided by the applicant for each name on the property owners list, the name and mailing address of the applicant (also the owner of the property if different from the applicant), and the engineer/ architect if it is desired they receive copies of the public hearing notice.

- On a **separate** label sheet, provide 5 labels each for the property owner, applicant, architect and contractor.

* (list continued on next page)

- Preliminary Plans and Elevations (15 sets) - **MUST BE FOLDED** (Maximum size 8 1/2" by 14")
Plans must be drawn to scale showing all dimensions necessary to determine compliance with the Arcadia Municipal Code. i.e., parking spaces, driveway areas, landscape areas, building sizes, building heights, setbacks from all property lines and curbs of adjacent streets.

The following information shall be CLEARLY DELINEATED on all preliminary plans:

- a. Scale and North arrow.
 - b. Street addresses and Assessor's Identification Number(s) (AIN) of lot or lots proposed for development.
 - c. Size and location of lot or lots proposed for development with accurate dimensions.
 - d. Location and size of all proposed structures (new and/or existing).
 - e. Location, size and number of all parking stalls.
 - f. Location of all landscaped areas. Percentage of landscaping shall be identified.
 - g. All existing easements.
 - h. Zone category in which the lots exists.
 - i. Owner's name, and applicant's name and telephone number.
 - j. Architect's or designer's name and telephone number.
-
- One set of plans reduced to 8 1/2" x 11"
 - Photographs of the property involved on a scale large enough to illustrate the subjects under discussion
 - Renderings, on a scale large enough to illustrate the subjects under discussion are always helpful and are suggested as exhibits with this application

APPLICATION REVIEW PROCESS

STAFF REVIEW: Upon receipt of a Conditional Use Permit Application, City Staff has 30 days to review the application for completeness.

PUBLIC HEARING: Once the application is deemed complete, it will be scheduled for a public hearing before the Planning Commission.

PROCESSING TIME: 2-4 months

APPEALS: The Planning Commission's decision may be appealed to the City Council (\$540 fee). Such an appeal must be submitted in writing and delivered to the Planning Offices within five working days of the decision.

EXPIRATION: If for a period of 12 months, any authorization granted by a Condition Use Permit is or has been unused, abandoned or discontinued, or any of the conditions of approval have not been complied with, the Conditional Use Permit shall become null and void.

EXTENSION: A request for the extension of an unused Conditional Use Permit will be considered by the Planning Commission upon submittal of a written request and extension fee, and is to be filed with Planning Services prior to the expiration of the Conditional Use Permit (\$105 fee).

AFFIDAVIT

STATE OF CALIFORNIA
CITY OF ARCADIA
COUNTY OF LOS ANGELES

I, _____ hereby certify that the
(print name)

attached list contains the names and addresses of all persons to whom all property is assessed as they appear on the latest available equalized assessment roll of the County of Los Angeles, within the area described on the attached application and for the required distance of notification from the exterior boundaries of the property described on the attached application. I also certify that the subject site described on the attached application contains no illegal lot splits or other divisions of land not specifically authorized by the City of Arcadia.

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

Signature: _____

Date: _____

FOR OFFICE USE ONLY

- | | | |
|---|--|---|
| <input type="checkbox"/> COMPLETED APP. | <input type="checkbox"/> SIGNATURES | <input type="checkbox"/> REDUCED PLANS |
| <input type="checkbox"/> PLANS & ELEV. | <input type="checkbox"/> ENV. INFO FORM | <input type="checkbox"/> 2 \$75 CHECKS (L.A. COUNTY RECORDER) |
| <input type="checkbox"/> RADIUS MAP | <input type="checkbox"/> LABELS INCLUDING 1 FOR ALL INTERESTED PARTIES | |
| | <input type="checkbox"/> LABELS FOR APPLICANT, OWNER, ENGINEER, ARCHITECT 5 SETS | |

Received by _____ Receipt No. _____ Date _____



ENVIRONMENTAL INFORMATION FORM

Date Filed: _____

Filing Fee: \$75

General Information

1. Name and address of developer or project sponsor:

2. Address of project (Location):

3. Name, address and telephone number of person to be contacted concerning this project:

4. List and describe any other related permits and other public approvals required for this project including those required by city, regional, state and federal agencies:

5. Zoning: _____

6. General Plan Designation: _____

Project Description

7. Proposed use of site (project description):

8. Site Size: _____ Sq. Ft. / _____ Acre(s)

9. Square footage per building:

10. Number of floors of construction:

11. Amount of off-street parking provided:

12. Proposed scheduling of project:

13. Associated projects:

14. Anticipated incremental development:

15. If residential, include the number of units, schedule of unit sizes, range of sale prices or rents, and type of household sizes expected:

16. If commercial, indicate the type, i.e. neighborhood, city or regionally oriented, square footage of sales area, and loading facilities, hours of operation:

17. If industrial, indicate type, estimated employment per shift, and loading facilities:

18. If institutional, indicate the major function, estimated employment per shift, estimated occupancy, loading facilities, and community benefits to be derived from the project:

19. If the project involves a variance, conditional use permit or zoning application, state this and indicate clearly why the application is required:

20. 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"/> | 21. Change in existing features of any 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 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. Is site on filled land or on any slopes of 10 percent or more? |
| <input type="checkbox"/> | <input type="checkbox"/> | 29. Use or disposal of potentially hazardous materials, such as toxic substances, flammable 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. Substantial increase in 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"/> | 33. Has a prior environmental impact report been prepared for a program, plan, policy or ordinance consistent with this project? |
| <input type="checkbox"/> | <input type="checkbox"/> | 34. If you answered YES to question no. 33, may this project cause significant effects on the environment that were not examined in the prior EIR? |

Environmental Setting

- 35. Describe (on a separate sheet) the project site as it exists before the project, including information on topography, soil stability, plants and animals, 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.)

- 36. Describe (on a separate sheet) the surrounding properties, including information on plants, animals, any cultural, historical or scenic aspects. Indicate the type of land uses (residential, commercial, etc.), intensity of land use (one-family, apartment houses, shops, department stores, etc.), and scale of development (height, frontage, set-backs, rear yards, 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 _____

Related Fees

- Certified Regulatory Program - \$941.25
- Negative Declarations and Mitigated Negative Declaration - \$1,993.00
- Environmental Impact Report - \$2,768.25