



# \_\_\_\_\_

## MODIFICATION 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 \_\_\_\_\_

### PLEASE ANSWER THE FOLLOWING QUESTIONS:

1. What is your modification request? Please specify code section(s) from which the modification is sought and other details of the modification request.

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\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

*(continue on next page if necessary)*

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

(question 1 cont.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Arcadia Municipal Code Section 9292.1.4 permits the Modification Committee/Planning Commission to approve only certain types of modifications which would result in the following changes:
- i. Secure an appropriate improvement of a lot; or
  - ii. Prevent an unreasonable hardship (non-economic); or
  - iii. Promote uniformity of development.

Fully explain why you feel your request qualifies for a modification based upon the aforementioned findings:

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

**Signature of Property Owner or Authorized Agent**, evidenced by attached letter signed by property owner authorizing this person to act on the owner's behalf:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Telephone No.

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

\_\_\_\_\_  
Email

## **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
- Filing fee of \$540
- 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 check will be returned to you.

- A 100 foot radius map

The radius map accompanying the application must be a dark line print or ink tracing, correctly prepared. It must show each lot within 100 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 100' 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 - **MUST BE FOLDED** (Maximum size 8 1/2" by 14")  
(6 sets if before the Modification Committee, 15 sets if before the Planning Commission)

**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.
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- 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 Modification 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 either the Modification Committee or Planning Commission.

**PROCESSING TIME:** 1-2 months

**APPEALS:** The Modification Committee's decision may be appealed to the Planning Commission (\$540 fee). The Planning Commission's decision may subsequently be appealed to the City Council (\$540 fee). Appeals must be submitted in writing and delivered to Planning Services within five working days of the decision.

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

**EXTENSION:** A request for the extension of a Modification will be considered by the Planning Commission upon submittal of a written request and extension fee, and is to be filed with the Planning Offices 30 days prior to expiration (\$105 fee).

**AFFIDAVIT**

STATE OF CALIFORNIA  
CITY OF ARCADIA  
COUNTY OF LOS ANGELES

I, \_\_\_\_\_ hereby certify that  
(print name)  
the 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 certify under penalty of perjury that the foregoing is true and correct.

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

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

Application No.: \_\_\_\_\_

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**FOR OFFICE USE ONLY**

- COMPLETED APP.                       SIGNATURES                       REDUCED PLANS
- PLANS & ELEV.                               RADIUS MAP                       2 \$75 CHECKS (L.A. COUNTY RECORDER)
- LABELS INCLUDING 1 FOR ALL INTERESTED PARTIES
- LABELS FOR APPLICANT, OWNER, ENGINEER, ARCHITECT 5 SETS

Received by \_\_\_\_\_                      Receipt No. \_\_\_\_\_                      Date \_\_\_\_\_