

# CITY OF SAN RAMON DEVELOPMENT REVIEW APPLICATION



## I. Check type of permit(s) being requested:

- Rezoning       Home Occupation       General Plan Amendment       Variance  
 Use Permit       Development Plan       Development Plan Amendment       \_\_\_\_\_

## II. General Data Required

- A. Address or Location of Property: \_\_\_\_\_
- B. Assessor's Parcel Number(s): \_\_\_\_\_
- C. Site Area: \_\_\_\_\_ D. Present Zoning: \_\_\_\_\_ E. Proposed Zoning: \_\_\_\_\_
- F. Existing Use of Property: \_\_\_\_\_
- G. Zoning and Existing Use of Surrounding Property:
- | <i>Zone</i>    | <i>Existing Uses</i> |
|----------------|----------------------|
| ● North: _____ | _____                |
| ● South: _____ | _____                |
| ● East: _____  | _____                |
| ● West: _____  | _____                |
- H. Description of the Proposal: (Attach detailed letter of application, and, if applicable, include proposal for affordable housing)
- \_\_\_\_\_ (Continue on separate sheet, if necessary)
- I. Service Districts: Water Supply \_\_\_\_\_ Sewer Disposal \_\_\_\_\_ Fire Protection \_\_\_\_\_

## III. Authorization of Property Owner

- A. Property Owner:** In signing this application, I, as property owner, have full legal capacity to, and hereby do, authorize the filing of this application. I understand that conditions of approval are binding. I agree to be bound by those conditions, subject only to the right to object at the hearings or during the appeal period.
- Name: \_\_\_\_\_ Capacity: \_\_\_\_\_ Property Owner \_\_\_\_\_
- Address: \_\_\_\_\_ Daytime Phone: ( ) \_\_\_\_\_  
 \_\_\_\_\_ ( ) \_\_\_\_\_
- Signature: \_\_\_\_\_ Date: \_\_\_\_\_
- B. Applicant Other Than Property Owner:** In signing this application, I, as applicant, represent to have obtained authorization of the property owner to file this application. I agree to be bound by conditions of approval, subject only to the right to object at the hearings on the application. If this application has not been signed by the property owner, I have attached separate documentation of full legal capacity to file this application and agreement to conditions of approval, subject only to the right to object at the hearings or during the appeal period.
- Name: \_\_\_\_\_ Capacity: \_\_\_\_\_
- Address: \_\_\_\_\_ Daytime Phone: ( ) \_\_\_\_\_  
 \_\_\_\_\_ ( ) \_\_\_\_\_
- Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## IV. Certification

The Applicant and his Agent recognize that this application is subject to the California Environmental Quality Act of 1970. The City, in granting this application, may attach any condition or conditions necessary to ensure that the proposal will not be injurious or detrimental to the welfare of persons residing or working in the neighborhood or City.

I certify that I have the authorization of the property owner(s) to file this application. I further certify that the information and exhibits submitted are true and correct.

Name: \_\_\_\_\_ Capacity: \_\_\_\_\_

Address: \_\_\_\_\_ Daytime Phone: ( ) \_\_\_\_\_  
 \_\_\_\_\_ ( ) \_\_\_\_\_

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

**For City Use Only**

A. Property Location	Application Nos.	Fees Paid
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
B. Proposal	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	Postage	\$ _____
_____	Environmental Review	\$ _____
_____	Laserfische	\$ _____
CEQA <input type="checkbox"/> Exempt Class No. _____ <input type="checkbox"/> Non-Exempt	TOTAL	\$ <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>
Date Filed _____ Received by _____	Receipt No	_____
Planner Assigned _____		

**Additional Submittal Information Required:** \_\_\_\_\_

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