



**City of Placentia**  
**Development Services Department**  
**Application Work Sheet**

401 E. CHAPMAN AVENUE, PLACENTIA, CA 92870 - PLANNING DIVISION (714) 993-8124 - FAX (714) 961-0283

**A project will NOT be processed until all information has been determined to be adequate and complete. The following SHALL be included at the time of submittal:**

Property Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ APN #: \_\_\_\_\_

Brief Description of Project: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Zoning District: \_\_\_\_\_ Date of Submission: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_ Property Owner Phone: \_\_\_\_\_

Owner Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Please check the type of application you are submitting:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Use Permit (Special)         | <input type="checkbox"/> Development Plan Review    | <input type="checkbox"/> Lot Line Adjustment    |
| <input type="checkbox"/> Use Permit (Modification)    | <input type="checkbox"/> Site Plan Review           | <input type="checkbox"/> General Plan Amendment |
| <input type="checkbox"/> Use Permit                   | <input type="checkbox"/> Sign Plan Review           | <input type="checkbox"/> Zone Change            |
| <input type="checkbox"/> Use Permit (Alcohol)         | <input type="checkbox"/> Planned Unit Development   | <input type="checkbox"/> Variance               |
| <input type="checkbox"/> Use Conformity Determination | <input type="checkbox"/> Tentative Tract/Parcel Map | <input type="checkbox"/> Pre-Application Review |
| <input type="checkbox"/> Use Permit Time Extension    | <input type="checkbox"/> Development Agreement      | <input type="checkbox"/> Appeal of Decision     |
| <input type="checkbox"/> Temporary Use Permit         | <input type="checkbox"/> Other application: _____   |   |

Please provide a list of names and addresses of all external parties (architects, engineers, property owners etc.) to receive copies of relevant documents: (if none listed only the applicant will be sent documents)

Party 1  
 Name: \_\_\_\_\_ Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Party 2  
 Name: \_\_\_\_\_ Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Party 3 Name: \_\_\_\_\_ Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Party 4 Name: \_\_\_\_\_ Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Party 5 Name: \_\_\_\_\_ Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Party 6 Name: \_\_\_\_\_ Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signatures of both the Applicant and the Property Owner are required for submission.  
 Applicant and Property Owner are same.

Applicant _____	Date _____	Property Owner _____	Date _____
PRINTED NAME		PRINTED NAME	

By signing the above, I declare under penalty of perjury that I am the property owner for the address listed above and I personally certify the above information is true and correct. *Note: A copy of the owner's driver's license, form notarization, or other verification acceptable to the agency is required to be presented when the application is submitted to verify the property owner's signature*

**FOR CITY USE ONLY**

Date Received: \_\_\_\_\_ Accepted by: \_\_\_\_\_

Planning Commission Hearing Date: \_\_\_\_\_ Staff Review?  Yes  No

General Plan Designation: \_\_\_\_\_ Zoning: \_\_\_\_\_

FILING FEES	
Application	_____
Initial Study	_____
Neg. Dec.	_____
OCFA:	_____
County Fee	_____
Other	_____
	_____
	_____
Total	_____

CHECK LIST - SIGNATURES	
Application:	_____
Property Owner:	_____
Letter of Authorization	_____
CEQA STATUS	
EIR #	_____
Neg Dec. #	_____
Cat Exempt?	_____
Mailing List?	_____

Notes \_\_\_\_\_