

Planning Department Permit Application

Date:			(Staff Use) Projec	ct #:
Applicant	Name:			
	Street Address:			
	City:		State:	Zip:
Phone:		Alteri	nate Phone:	
e-mail:				
Property O	wner Name:			
	Street Addres	ss:		
	City:		State:	Zip:
Phone:		Alter	nate Phone:	
e-mail:				
Property Information Assessor's Parcel Number(s):				
Address:				
Latitude:		Longitu	ıde:	
Section(s):	То	wnship(s):		Range(s):
Zoning:		Genera	l Plan Designation	n:
Project Tvr	De (Check all that apply	7)		
	nal Use Permit	Tentative Trac	et Map	Mining Reclamation Plan
Variance		Tentative Parc	-	Road Abandonment
Zone Rec	elassification	Lot Line Adju	stment	Mobilehome Waiver
General I	Plan Amendment	Parcel Merger		Design Review Committee
Specific 1	Plan	Certificate of	Compliance	Time Extension
Developr	nent Agreement	Hosted Short-	Term Rental	Non-Hosted Short-Term Rental
Renewable Energy Permit Telecom Plan		or Amendment		
Renewab	le Energy Determinat	ion Other		

Applicant Name:	
Project Description	Describe in detail Project Proposal(s). Be as specific as possible. Attach additional sheets as necessary.
1	Describe the goals and project benefits (i.e. jobs, housing, services created and revenues generated for the community, etc. Attach additional sheets as necessary.

Applicant Name:

Submission Requirements	For most types of Inyo County Planning permits have a handout available. These handouts specify the requirements for submittals for the specific permit type. Listed below are some of the most common submittals required. Please check all submittals that are being included with the application.	
Site Plan	Architectural Plans	
Parking Plan	Lighting Plan	
Landscaping Plan	Grading and Drainage Plan	
Tentative Parcel Map	Tentative Tract Map	
Legal Description of Property	Property Deed	
Title Report	Color Renderings	
Color Chips or Materials Boar	d Mining Reclamation Plan	
Cultural Resources Study	Biological Resources Study	
Alquist Priolo Geologic Study	Proof of Military Notification	
List of Property Owners withi	n 300 feet List of Property Owners within 1,500 feet (cannabis)	

Property Owner Consent

I certify that I am the owner of the property at the project site, or am the trustee for a trust that owns the property, or an authorized officer for a legal entity that owns the property and that I consent to the submission of this application.

Name:

Date:

Title:

Signature*:

Applicant Certification

I hereby attest that the information contained in this application and any attachments is correct to the best of my knowledge.

Note that if the applicant is other than the property owner, the applicant must be named as an Authorized Agent on the Consent of Property Owner and Designation of Authorized Agent form that is included with the Inyo County Planning Department Permit Application.

Name:	License #
Company:	Date:
Title:	Signature*:

* By signing this application the applicant/property owner agrees to defend, indemnify, and hold the County harmless from any claim, action, or proceeding arising from this application or brought to attack, set aside, void or annul the County's approval of this application, and any environmental review associated with the proposed project.

General Information

Applicant Name:

Property Owner Name:

Address:

APN:

Project Description

Property Size:

Existing Buildings & Structures: (including Square Footage & number of Floors)

Proposed Buildings & Structures: (including Square Footage & number of Floors)

Project Schedule:

Project Phasing:

Provide a detailed description of the project (attach additional sheets as necessary):

- For Residential Projects, Describe, including number of units, size of units, anticipated sale prices or rental rates and type of household size anticipated
- For Commercial Projects, Describe, including type of operation, square footage of sales area and loading facilities
- For Industrial Projects, Describe, including type of operation, estimated employment per shift and number of shifts, loading facilities, truck traffic, and hazardous materials used onsite.
- For Institutional Projects, Describe, including services provided, estimated employment per shift, estimated occupancy and community benefits of project.

Applicant Name:

Project Checklist

		Yes	No
1.	Change in existing features of any bays, tidelands, beaches, or hills or substantial alteration of ground contours.		
2.	Change in scenic views, or vistas from existing residential areas, public lands or roads.		
3.	Change in pattern, scale or character of general area of project.		
4.	Significant amounts of solid waste or litter.		
5.	Change in dust, ash, smoke, fumes or odors in vicinity		
6.	Change in ocean, bay, lake, stream or ground water quality or quantity, or alteration		
7.	Of existing drainage patterns		
8.	Substantial change in existing noise or vibration levels in the vicinity		
9.	Site on filled land or on slope of 10 percent or more		
10.	Use of disposal of potentially hazardous materials, such as toxic substances, flammables, or explosives.		
11.	Substantial change in demand for municipal services (police, fire, water, sewage, etc.)		
12.	Substantial increase in fossil fuel consumption (electricity, oil, natural gas, etc.)		
13.	Known threatened or endangered species (animal or plant) on or near site.		
14.	Known historical, archaeological, or cultural resource on or near site.		
15.	Project is related to a larger project or a series of projects.		
	all items checked Yes , please include a written discussion/explanation below (attach addition essary).	al shee	ts as

Applicant Name:

Environmental Setting

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, as needed. Attach additional sheets as necessary.

Describe the surrounding properties, including information on plant and animals and any cultural, historical 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, setback rear yard, tec.). Attach photographs of the vicinity, as needed. Attach additional sheets as necessary.

Certification

I hereby attest that the information contained in this Environmental Information Worksheet and any attachments is correct to the best of my knowledge.

Note that if the signatory of this worksheet is other than the property owner, the signatory must be named as an Authorized Agent on the Consent of Property Owner and Designation of Authorized Agent form that is included with the Inyo County Planning Department Permit Application.

Name:	License #
Company:	Date:
Title:	Signature:



Consent of Property Owner and Designation of Authorized Agent

Date:	(Staff Use) Project #:	
General Information		
Property Owner Name:		
Applicant/Authorized Agent Name:		

Project Address:

APN:

Permit Type:

- **Consent** I (we) the undersigned owner of record of the fee interest in the parcel of land identified by the address and Assessor Parcel Number(s) noted above, for which a land use permit, land division, general plan or ordinance amendment, or LAFCO application referral is being filed with the Inyo County Planning Department requesting an approval for the permit type listed above, do hereby certify that:
- 1. Such Application may be filed and processed with my (our) full consent.
- 2. I (we) hereby grant consent to Inyo County, its officers, agents, employees, independent contractors, consultants, sub-consultants and their officers, agents, and employees to enter the property identified above to conduct any and all surveys and inspections that are considered appropriate by the inspecting person or entity to process this application. This consent also extends to governmental entities other than the County, their officers, agencies, employees, independent contractors, consultants, sub-consultants, and their agents or employees if the other governmental entities are providing review, inspections and surveys to assist the County in processing this application. This consent will expire upon completion of the project.
- 3. If prior notice is required for entry to survey or inspect the property, please contact:

Name:

Address:

Telephone #:

e-mail:

4. I (we) hereby give notice of the following concealed or unconcealed dangerous conditions on the property:

Authorization I (we) the undersigned owner of record of the fee interest in the parcel of land located at the address noted above and identified by the Assessor Parcel Number(s) noted above have authorized the person noted above as "Applicant/Authorized Agent" to act as my (our) agent in all contacts with Inyo County and to sign for all necessary permits in connection with this matter. *If the Applicant/Authorized Agent field above and the signature below are left blank it is assumed that the Property Owner will be acting as his own Agent, and no one will be acting on his behalf.*

Signatures

Signature of Property Owner

Date



Notification of Proximate Property Owners

Applicant Name:			
Date:		(Staff Use) Project #:	
The following applications require t within 300 feet of the boundary of t	· ·		
Conditional Use Permit	Tentative Tract Ma	ap	Mining Reclamation Plan
Variance	Tentative Parcel M	lap	Road Abandonment
Zone Reclassification	Certificate of Com	pliance	Mobilehome Waiver
General Plan Amendment	Specific Plan		Telecom Plan or Amendment
Development Agreement	Renewable Energy	Determination	Renewable Energy Permit
Non-Hosted Short-Term Rental	Hosted S	Short-Term Rental (or	n form provided by Planning Staff)

The following applications require the provision of public hearing notices to surrounding property owners within 1,500 feet of the boundary of the project property. Please check if this applies to this project.

Commercial Cannabis Conditional Use Permit (CUP for cultivation, retail, manufacturing or microbusiness)

If you would like the Planning Department staff to act on your behalf to obtain the addresses of all property owners within 300' or 1,500' as applicable, and to mail the hearing notices, please select this box. Do note that staff time and expenses (stamps, etc.) will be billed against your account.

If you would like to obtain addresses of all property owners within 300' or 1,500', as applicable, and provide the Planning Department addressed and stamped envelopes, select this box. Note that you must also provide the following to demonstrate that you have properly obtained the addresses that are in the notification radius:

- The County assessor map(s) or GIS maps covering your project site with the 300' or 1,500' surrounding area shown outlined. This information must be obtained from the latest Assessor's roll.
- The list of Assessor Parcel Numbers, property owners, and addresses for all properties within 300' or 1,500', as applicable, of the project site.
- Number 10 envelopes (letter-sized) with first class postage affixed and addressed to each owner.
- This form signed and dated at the bottom.

I hereby certify that the attached information contains all of the assessor parcel numbers from the latest Assessor's Roll under preparation of all the properties with the area described on the attached maps and within a distance of three hundred (300) feet or one thousand five hundred (1,500) feet, as applicable, from all exterior boundaries of the project property.

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

Signature of Applicant	Signature	of	Ap	plicant
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Processing Fee Agreement				
Date:	(Staff Use) Project #:			
General Information				
Applicant Name:				
Property Owner Name:				
Project Address:				
APN:	Permit Type:			
Party Responsible for Payment of Fees (check):	Applicant	Property Owner		

Basis of Fees

By County ordinance, Planning Department Processing Fees recover the costs of processing applications. These costs include personnel and overhead costs, as well as the cost of materials necessary to process the application. The deposit you pay is an estimate of the cost of processing the application and may not cover the entire cost for which you will ultimately be responsible.

Your initial deposit amount of \$ (see attached) will be applied toward processing your application(s). Interest does not accrue on this deposit. Monthly withdrawals against this deposit will be made based on the costs incurred in processing your application(s). Statements will be sent to you each month documenting the draws against your deposit. If the deposit reaches a balance of \$400.00 or less you will be asked to make a subsequent deposit. You will be expected to deposit these additional fees within 30 days of a request for additional funds. If there is a balance remaining after reconciling the final bill, a refund check will be mailed to you within 45 days of the final closure of the project.

In order to implement the cost recovery provisions, please sign this statement indicating your agreement to the cost recovery procedure. This signed agreement is required for you application(s) to be accepted for processing. If you have questions regarding your application(s), or the billing status of your application(s), contact the **Inyo County Planning Department** at (760) 878-0263, and provide your project name and/or file number.

Agreement

I, the undersigned, agree to pay the Inyo County Planning Department Processing Fee, which consists of the costs, as described above, incurred by Inyo County in processing this application. Such payment will be made to the Inyo County Planning Department, P.O. Drawer L, Independence, CA 93526. I understand and agree that processing of my application will be suspended pending receipt by the Planning Department of all requested deposits. In the event of default of my obligations, I agree to pay all costs and expenses incurred by Inyo County in securing performance of this obligation, including the cost of reasonable attorneys' fees.

Signature

Name of Responsible Party

Signature	of Rest	oonsible	Party
Signature	OI ICES	JOHSIDIC	raity

Date



Application Fee Deposits

Pre-application fees (fee to be credited to formal application if submitted within 6 months)	\$500
Conditional Use Permit (new or major amendment)	\$1,490
Minor Amendment to a Conditional Use Permit	\$745
Variance	\$1,500
Zone Reclassification	\$1,450
General Plan Amendment	\$1,525
Specific Plan	\$3,080
Hosted Short Term Rental	\$350
Non-Hosted Short Term Rental	\$1,250
Telecommunications Plan	\$2,460
Road Abandonment	\$1,450
Certificate of Compliance	\$1,000
Lot Line Adjustment	\$900
Parcel Merger	\$600
Parcel Map	\$1,800
Parcel Map with Rezoning	\$2,525
Tract Map	\$2,325
Tract Map with a rezoning	\$3,050
Reclamation Plan	\$3,030
Reclamation Plan Amendment with Expansion	\$3,030
Reclamation Plan Amendment without Expansion	\$1,515
Interim Management Plan for Mine	\$370
Mine Inspection Fee	\$450
	Rev 3/2018

Categorical Exemption	\$120
Initial Study	\$500
Negative Declaration (Includes Initial Study Fee)	\$600
Review of Special Environmental Studies	\$970
Mitigation Monitoring and Report Program	\$920
Environmental Impact Report	Estimated Cost
Special Meeting of the Planning Commission	\$750 + Mileage
Time Extension	\$480
Appeal of Planning Commission Action	\$300
Planning Director's Interpretation	\$100
Appeal of Planning Director's Interpretation to Planning Commission	\$300
Mobile Home Waiver	\$870
Building Permit Plan Check Fee	\$50
Zoning Confirmation Letter	\$50
Sign Permit	\$30
Mobile Home Waiver	\$870
Projects Installed without Authorization or Permits	Double the Standard Fees
Research Fee	Burdened Hourly Rate
Lone Pine Architectural Review Board	\$200

NOTE: The above fees are a deposit only. If the cost for processing the application exceeds the amount of the deposit, the applicant will be responsible for payment of additional monies to cover the cost of processing. Upon payment of fees, all applicants must also complete and submit the Processing Fee Agreement form.