



**PLANNING & BUILDING SERVICES**

CASE NO:	_____
DATE FILED:	_____
FEE:	_____
RECEIPT NO:	_____
RECEIVED BY:	_____
<i>Office Use Only</i>	

**APPLICATION FORM**

**APPLICANT:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

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

**PROPERTY OWNER:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

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

**AGENT:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

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

**ASSESSOR'S PARCEL NUMBER/S:** \_\_\_\_\_

**TYPE OF APPLICATION:**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Administrative Permit                    | <input type="checkbox"/> General Plan Amendment         | <input type="checkbox"/> Use Permit – Cottage      |
| <input type="checkbox"/> Agricultural Preserve: New Contract      | <input type="checkbox"/> Land Division – Minor          | <input type="checkbox"/> Use Permit – Minor        |
| <input type="checkbox"/> Agricultural Preserve: Cancellation      | <input type="checkbox"/> Land Division – Major          | <input type="checkbox"/> Use Permit – Major        |
| <input type="checkbox"/> Agricultural Preserve: Rescind & ReEnter | <input type="checkbox"/> Land Division – Parcel         | <input type="checkbox"/> Use Permit – Modification |
| <input type="checkbox"/> Airport Land Use                         | <input type="checkbox"/> Land Division – Re-Subdivision | <input type="checkbox"/> Variance                  |
| <input type="checkbox"/> Development Review                       | <input type="checkbox"/> Modification of Conditions     | <input type="checkbox"/> Other                     |
| <input type="checkbox"/> Exception                                | <input type="checkbox"/> Reversion to Acreage           |  |
| <input type="checkbox"/> Flood Hazard Development Permit          | <input type="checkbox"/> Rezoning                       |  |

*I certify that the information submitted with this application is true and accurate.*

\_\_\_\_\_  
Signature of Applicant/Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date



**SITE AND PROJECT DESCRIPTION QUESTIONNAIRE**

The purpose of this questionnaire is to relate information concerning your application to the Department of Planning and Building Services and other agencies who will be reviewing your project proposal. Please remember that the clearer picture that you give us of your project and the site, the easier it will be to promptly process your application. Please answer all questions. Those questions which do not pertain to your project please indicate "Not applicable" or "N/A".

**THE PROJECT**

**1. Describe your project. Include secondary improvements such as wells, septic systems, grading, vegetation removal, roads, etc.**

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2. Structures/Lot Coverage	NO. OF UNITS		SQUARE FOOTAGE		
	EXISTING	PROPOSED	EXISTING	PROPOSED	TOTAL
<input type="checkbox"/> Single Family <input type="checkbox"/> Mobile Home <input type="checkbox"/> Duplex <input type="checkbox"/> Multifamily <input type="checkbox"/> Other: <input type="checkbox"/> Other:					
GRAND TOTAL (Equal to gross area of Parcel):					

**3. If the project is commercial, industrial or institutional, complete the following:**

Estimated No. of Employees per shift: \_\_\_\_\_

Estimated No. of shifts per day: \_\_\_\_\_

Type of loading facilities proposed: \_\_\_\_\_

**4. Will the project be phased?**

YES     NO    If yes, explain your plans for phasing:

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**5. Will vegetation be removed on areas other than the building sites and roads?**

YES     NO    If no, explain:

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**6. Will the project involve the use or disposal of potentially hazardous materials such as toxic substances, flammables, or explosives?**

YES     NO    If yes, explain:

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**7. How much off-street parking will be provided?**

	Number	Size
No. of covered spaces:	_____	_____
No. of uncovered spaces:	_____	_____
No. of standard spaces:	_____	_____
No. of accessible spaces:	_____	_____
Existing no. of spaces:	_____	_____
Proposed additional spaces:	_____	_____
Total:	_____	_____

**8. Is any road construction or grading planned? If yes, grading and drainage plans may be required.**

YES     NO    Also, please describe the terrain to be traversed. (e.g., steep, moderate slope, flat, etc.)

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**9. For grading or road construction, complete the following:**

Amount of cut: \_\_\_\_\_ cubic yards

Amount of fill: \_\_\_\_\_ cubic yards

Max. height of fill slope: \_\_\_\_\_ feet

Max. height of cut slope: \_\_\_\_\_ feet

Amount of import/export: \_\_\_\_\_ cubic yards

Location of borrow or disposal site: \_\_\_\_\_

10. Does the project involve sand removal, mining or gravel extraction? If yes, detailed extraction, reclamation and monitoring plans may be required.

YES  NO

11. Will the proposed development convert land currently or previously used for agriculture to another use?

YES  NO

12. Will the development provide public or private recreation opportunities?

YES  NO If yes, explain how:

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13. Is the proposed development visible from State Highway 1 or other scenic route?

YES  NO

14. Is the proposed development visible from a park, beach or other recreational area?

YES  NO

15. Does the development involve diking, filling, dredging or placing structures in open coastal water, wetlands, estuaries or lakes?

Diking:  YES  NO

Filling:  YES  NO

Dredging:  YES  NO

Structures:  Open Coastal Waters  Wetlands  Estuaries  Lakes

If so, what is the amount of material to be dredged/filled?: \_\_\_\_\_ cubic yards

Location of dredged material disposal site?: \_\_\_\_\_

Has a U.S. Army Corps of Engineers permit been applied for?  YES  NO

16. Will there be any exterior lighting?

YES  NO If yes, describe below and identify the location of all exterior lighting on the plot and building plans.

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17. Utilities will be supplied to the site as follows:

Electricity:  Utility Company (service exists to parcel)

Utility Company (requires extension of service to site): \_\_\_\_\_ feet \_\_\_\_\_ miles

On Site Generation – Specify:

Gas:  Utility Company/Tank

On Site Generation – Specify:

None

Telephone:  YES  NO

**18. What will be the method of sewage disposal?**

- Community Sewage System (specify supplier): \_\_\_\_\_
- Septic Tank
- Other (specify): \_\_\_\_\_

**19. What will be the domestic water source:**

- Community Water System (specify supplier): \_\_\_\_\_
- Well
- Spring
- Other (specify): \_\_\_\_\_

**20. Are there any associated projects and/or adjacent properties under your ownership?**

- YES       NO      If yes, explain: (e.g., Assessor's Parcel Number, address, etc.)

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**21. List and describe any other related permits and other public approval required for this project, including those required by other County departments, city, regional, State and Federal agencies:**

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**22. Describe the location of the site in terms of readily identifiable landmarks: (e.g., mailboxes, mile posts, street intersections, etc.)**

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**23. Are there existing structures on the property? If yes, describe below and identify the use of each structure on the plot plan or tentative map if the proposal is for a subdivision.**

- YES       NO

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**24. Will any existing structure be demolished or removed? If yes, describe the type of development to be demolished or removed, including the relocation site, if applicable.**

- YES       NO

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## CERTIFICATION AND SITE VIEW AUTHORIZATION

1. I hereby certify that I have read this completed application and that, to the best of my knowledge, the information in this application, and all attached appendices and exhibits, is complete and correct. I understand that the failure to provide any requested information or any misstatements submitted in support of the application shall be grounds for either refusing to accept this application, for denying the permit, for suspending or revoking a permit issued on the basis of such misrepresentations, or for seeking of such further relief as may seem proper to the County.
  
2. I hereby grant permission for County Planning and Building Services staff and hearing bodies to enter upon and site view the premises for which this application is made in order to obtain information necessary for the preparation of required reports and render its decision.

\_\_\_\_\_

Owner/Authorized Agent \_\_\_\_\_  
Date

**NOTE:** IF SIGNED BY AGENT, OWNER MUST SIGN BELOW.

AUTHORIZATION OF AGENT

I hereby authorize \_\_\_\_\_ to act as my representative and to bind me in all matters concerning this application.

\_\_\_\_\_

Owner \_\_\_\_\_  
Date

### MAIL DIRECTION

To facilitate proper handling of this application, please indicate the names and mailing addresses of individuals to whom you wish correspondence and/or staff reports mailed if different from those identified on Page 1 of the application form.

<b>Name</b>	<b>Name</b>	<b>Name</b>
<b>Mailing Address</b>	<b>Mailing Address</b>	<b>Mailing Address</b>



COMPLETE FOR PROJECTS  
LOCATED IN THE COASTAL  
ZONE ONLY

### DECLARATION OF POSTING

At the time the application is submitted for filing, the applicant must **Post**, at a conspicuous place, easily read by the public and as close as possible to the site of the proposed development, notice that an application for the proposed development has been submitted. Such notice shall contain a general description of the nature of the proposed development and shall be on the standard form provided in the application packet. If the applicant fails to post the completed notice form and sign the **Declaration of Posting**, the Department of Planning and Building Services cannot process the application.

As **Proof of Posting**, please sign and date this Declaration of Posting form when the site is posted; it serves as proof of posting. It should be returned to the Department of Planning and Building Services with the application.

Pursuant to the requirements of Section 20.532.025(H) of the Mendocino County Code, I hereby certify that on \_\_\_\_\_ (date of posting), I or my authorized representative posted the "NOTICE OF PENDING PERMIT" for application to obtain a Coastal Development Permit for the development of:

\_\_\_\_\_  
\_\_\_\_\_  
(Description of development)

Located at:

\_\_\_\_\_  
\_\_\_\_\_  
(Address of development and Assessor's Parcel Number)

The public notice was posted at:

\_\_\_\_\_  
\_\_\_\_\_  
(A conspicuous place, easily seen by the public and as close as possible to the site of proposed development)

\_\_\_\_\_  
Owner/Authorized Representative

\_\_\_\_\_  
Date

(A copy of the notice which was posted shall be attached to this form).

**NOTE:** YOUR APPLICATION CANNOT BE PROCESSED UNTIL THIS "DECLARATION OF POSTING" IS SIGNED AND RETURNED TO PLANNING AND BUILDING SERVICES.



COMPLETE FOR PROJECTS  
LOCATED IN THE COASTAL  
ZONE ONLY

## NOTICE OF PENDING PERMIT

A COASTAL PERMIT APPLICATION FOR DEVELOPMENT ON THIS SITE IS PENDING BEFORE THE COUNTY OF MENDOCINO.

PROPOSED DEVELOPMENT: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

LOCATION: \_\_\_\_\_  
\_\_\_\_\_

APPLICANT: \_\_\_\_\_  
\_\_\_\_\_

ASSESSOR'S PARCEL NUMBER: \_\_\_\_\_  
\_\_\_\_\_

DATE NOTICE POSTED: \_\_\_\_\_

### FURTHER INFORMATION IS AVAILABLE AT:

COUNTY OF MENDOCINO  
DEPARTMENT OF PLANNING & BUILDING SERVICES  
[pbs@mendocinocounty.org](mailto:pbs@mendocinocounty.org)  
860 North Bush Street, Ukiah, CA 95482, 707-234-6650  
120 West Fir Street, Fort Bragg, CA 95437, 707-964-5379  
HOURS: 8:00 - 5:00



## **Indemnification And Hold Harmless**

ORDINANCE NO. 3780, adopted by the Board of Supervisors on June 4, 1991, requires applicants for discretionary land use approvals, to sign the following Indemnification Agreement. Failure to sign this agreement will result in the application being considered incomplete and withheld from further processing.

### **Indemnification Agreement**

As part of this application, applicant agrees to defend, indemnify, release and hold harmless the County of Mendocino, its agents, officers, attorneys, employees, boards and commissions, as more particularly set forth in Mendocino County Code Section 1.04.120, from any claim, action or proceeding brought against any of the foregoing individuals or entities, the purpose of which is to attack, set aside, void or annul the approval of this application or adoption of the environmental document which accompanies it. The indemnification shall include, but not be limited to, damages, costs, expenses, attorney fees or expert witness fees that may be asserted by any person or entity, including the applicant, arising out of or in connection with the approval of this application, whether or not there is concurrent, passive or active negligence on the part of the County, its agents, officers, attorneys, employees, boards and commissions.

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Date

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Applicant





**COUNTY OF MENDOCINO**  
**DEPARTMENT OF PLANNING & BUILDING SVCS.**

860 NORTH BUSH STREET • UKIAH, CALIFORNIA 95482  
120 WEST FIR STREET • FORT BRAGG, CALIFORNIA 95437

JULIA KROG, DIRECTOR  
PHONE: 707-234-6650  
FAX: 707-463-5709  
FB PHONE: 707-964-5379  
FB FAX: 707-961-2427  
[pbs@mendocinocounty.org](mailto:pbs@mendocinocounty.org)  
[www.mendocinocounty.org/pbs](http://www.mendocinocounty.org/pbs)

**ACKNOWLEDGEMENT OF DEPOSIT/HOURLY FEE**

By signing below, the applicant acknowledges that the staff at Planning and Building Services has discussed the potential for collection of a deposit fee for the projects listed below (as adopted by the Board of Supervisors Resolution No.'s 11-072, 16-150, 18-122 and 19-170)

1. Division of Land Project
2. General Plan Project
3. Coastal Project
4. Zoning Project
5. Administrative Project
6. Cannabis Project
7. Private Road Naming

Once an application has been submitted and the processing costs approach 80% of the application fee, additional staff processing time will be billed at \$90.00/hour. Staff will notify the applicant/owner that a deposit equal to 50% of the initial filing fee is required for further processing, and more than one deposit may be required depending on the complexity of the project and the staff time necessary to complete application processing.

*I acknowledge that I was advised of the deposit fee for continued processing after the initial application fee has been expended.*

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Applicant Signature

Date

**OFFICE USE ONLY:**

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Project or Permit Number





# Coastal Zone Development

Complete for projects located in the coastal zone only

List all property owners within 300 feet and occupants within 100 feet along with the corresponding Assessor's Parcel Number for each owner/occupant. **This form must be typed.**

APN Lastname, Firstname Street Address City, State Zip		

