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**COUNTY OF MENDOCINO
DEPARTMENT OF PLANNING & BUILDING SERVICES
120 WEST FIR STREET
FORT BRAGG, CALIFORNIA 95437**

COASTAL DEVELOPMENT PERMIT EXCLUSION REQUEST

Most development projects within the coastal zone require a Coastal Development Permit (CDP). However, the Coastal Commission has granted “categorical exclusions” to the County of Mendocino whereby certain categories of development do not require a CDP. In certain geographical areas and subject to specific criteria, the exclusions generally apply to the construction of single- family residences, water wells and septic system repair and replacement. If your project is eligible for an exclusion from CDP requirements, you will need to obtain a Notice of Coastal Development Permit Exclusion from the County prior to issuance of building, septic, and well permits.

To determine if your proposed project is excluded from the CDP requirement, the following materials must be submitted to the Department of Planning & Building Services:

1. One completed copy of the attached CDP Exclusion application form, questionnaire, Certification and Site View Authorization, and Indemnification Agreement.
2. Two copies of a vicinity map showing the project’s location within the surrounding area.
3. Two copies of a site plan identifying all existing and proposed improvements.
4. Filing Fee payable to the County of Mendocino.

Applications for CDP Exclusions generally take between 1-3 weeks to process once the application is deemed to be complete.

Notices of CDP Exclusions are valid for a period of three years.

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Case No(s) _____
Date Filed _____
Fee \$ _____
Receipt No. _____
Received by _____

Office Use Only

COASTAL DEVELOPMENT PERMIT EXCLUSION APPLICATION FORM

Name of Applicant	Name of Owner(s)	Name of Agent
Mailing Address	Mailing Address	Mailing Address
Telephone Number	Telephone Number	Telephone Number

Project Description:

Driving Directions
The site is located on the _____ (N/S/E/W) side of _____ (name road)
approximately _____ (feet/miles) _____ (N/S/E/W) of its intersection with

(provide nearest major intersection).

Assessor's Parcel Number(s)

Parcel Size <input type="checkbox"/> Square Feet <input type="checkbox"/> Acres _____	Street Address of Project
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COASTAL DEVELOPMENT PERMIT EXCLUSION APPLICATION QUESTIONNAIRE

The purpose of this questionnaire is to relate information concerning your application to the Planning & Building Services Department to determine whether your project requires a coastal development permit. Please answer all applicable questions.

GENERAL

1. Is the subject parcel immediately adjacent to a coastal bluff or beach? Yes No N/A
2. Would any proposed development be located within 100 feet of any stream, wetland, marsh, estuary, or other environmentally sensitive habitat area (ESHA)? Yes No N/A
3. Would any proposed development be located on areas containing pygmy vegetation and/or pygmy soils? Yes No N/A
4. Are there any existing structures or improvements on the property? If yes, please describe. Yes No N/A

SINGLE FAMILY RESIDENCE

5. Does project site contain slopes which are greater than 20% in the area to be developed? Yes No N/A
6. Will vegetation be removed on areas other than the building sites and roads? If yes, please describe: Yes No N/A

SEPTIC SYSTEMS - REPAIR, REPLACEMENT, OR EXPANSION

7. Will the replacement or repair increase septic capacity? If yes, please describe. Yes No N/A
8. Is the replacement or repair for a new Wisconsin mound system? Yes No N/A

WATER WELLS

9. Is the proposed well a **test well** or a **production well**? (Circle one)
10. Is the proposed well a replacement or supplemental well which services an existing legal use on the parcel? Yes No N/A

OFFICE USE ONLY

PROJECT DESCRIPTION: _____

CONDITIONS

- | | | | |
|---------------------------------|------------------------------|-----------------------------|------------------------------|
| Mapped SFR Cat Ex area | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Cat Ex by definition | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 100' from coastal waters | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| If SFR, less than 20% slope | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Shall conform to LCP | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| If SFR, limited by Cat Ex order | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |

OTHER PERMITS REQUIRED

- | | | | |
|--------------|------------------------------|-----------------------------|------------------------------|
| Septic Well* | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Building | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Other: _____ | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |

MISC.

- | | | | |
|------------------------|------------------------------|-----------------------------|------------------------------|
| Pygmy Soils/Vegetation | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
|------------------------|------------------------------|-----------------------------|------------------------------|

*Coastal Groundwater Study SWR MWR CWR CWRbr

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 One of the application form.

Name	Name	Name
Mailing Address	Mailing Address	Mailing Address

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.

Date: _____

Applicant



COUNTY OF MENDOCINO

DEPARTMENT OF PLANNING & BUILDING SVCS.

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

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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, 19-170, 21-194 and 23-190)

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 **\$98.00/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.

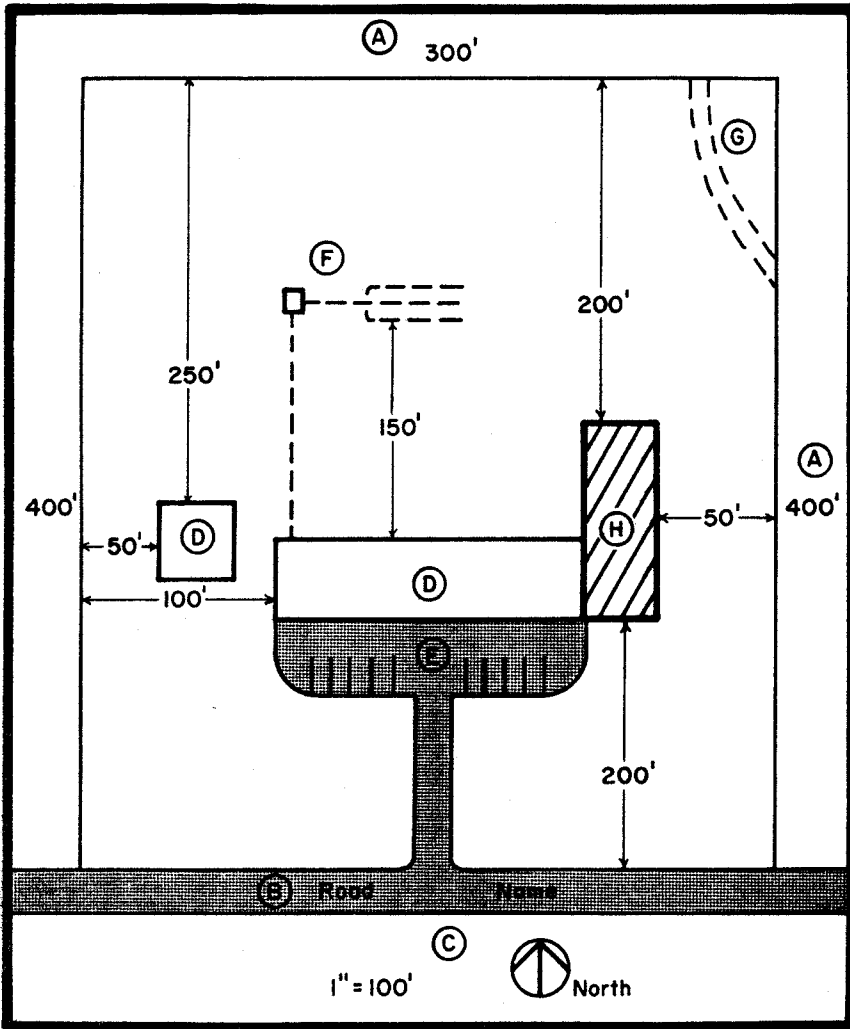
Applicant Signature

Date

OFFICE USE ONLY:

Project or Permit Number

Sample Plot Plan



- A. Parcel Shape and Dimensions.
- B. Adjacent Streets.
- C. North Arrow and Scale.
- D. Existing Buildings including distance from property lines.
- E. Driveways, Parking and Loading Areas.
- F. Existing and proposed septic system and wells including distances from structures.
- G. Easements and Utility lines (power, sewer, water etc.).
- H. Proposed structure or addition including distance from property lines.

Sample Location Map

