



CITY OF SEASIDE
Planning Division
Architectural Review Application

AR-2026-_____

InCode # _____

TO BE COMPLETED BY APPLICANT

Project Address or Location: _____ **APN:** _____

Project Description (attach if needed): _____

Applicant / Primary Contact:

Name: _____

Address: _____ **City:** _____ **State:** _____ **Zip Code:** _____

Phone Number: _____ **Email Address:** _____

Property Owner:

Name: _____

Address: _____ **City:** _____ **State:** _____ **Zip Code:** _____

Phone Number: _____ **Email Address:** _____

Property Owner's Statement: *"By my signature, I hereby certify that I am the legal owner of record of the property identified in this application and that I approve of the requested action herein. I further certify that all data, information, plans and evidence submitted as part of this application is true and correct to the best of my knowledge."*

Signature: _____ **Date:** _____

Submittal Requirements

1. **Plan Sets:** All plans shall be accurate and clearly drawn to scale on a minimum size of 11"x17" using either an engineer's or architect's scale.
2. **Project Description / Data Table:** Provide on project plans a description of the project scope, vicinity map, address, and/or APN, site area, existing and proposed parking spaces, number and locations of trees proposed for removal, calculations of existing floor area, proposed floor area, and site coverage, and any other pertinent information about the project.
3. **Site Plan:** Show all property lines and dimensions, all easements, adjacent streets and alleys, required setbacks, structures, driveways, parking spaces, landscaped areas, signs, trash enclosures, etc. on a scaled plan of the entire subject property. Include a north arrow, structure dimensions, distances from other structures, and distances to adjacent property lines.
4. **Floor Plan:** Include existing and proposed plans for all tenant spaces, interior living spaces, windows, walls, and doors.
5. **Lighting Plan:** Show all proposed outdoor lighting, including the proposed placement of fixtures, types of fixtures, and, for multifamily or nonresidential projects, illumination levels.



6. **Landscape / Irrigation Plan:** Detail the color, number, spacing, location, size, and type of plant materials, and provisions for maintenance and the protection of landscaped areas. Provisions for irrigation shall be included unless irrigation is not required because all plants are proposed to be Low or Very Low water usage per the Water Use Classification of Landscape Species database. When required, include landscape plan, plant schedule, and irrigation plan.
7. **Elevations:** Show and label all existing and proposed exterior elevations with the maximum structure height from existing and finished grade to the roof peak for each elevation. All exterior features must be shown on elevations including light fixtures, utilities/cabinets, railings/stairs, walls/fences, entry doors, etc. Colors and materials should be identified on all elevations.
8. **Product Specifications:** Provide manufacturer specifications for all proposed exterior materials, colors, windows, and light fixtures.
9. **Roof Plan:** Provide a roof plan for all existing and proposed structures for projects that involve roof modifications.

Additional information may be required following initial review of the project.

How to Submit

Option 1: Electronic Plans:

- a. Via email¹ to planning@ci.seaside.ca.us, or
- b. Via USB drive delivered in person

¹ Emails 25 MB or larger will not be received. If the cumulative attachments are 25 MB or greater in size, please email via a file hosting service.

Option 2: Physical Plans:

- a. For plans 11"x17", one set of plans, or
- b. For plans larger than 11"x17", four sets of plans

How to Pay

- a. In person via credit card, check, or cash, or
- b. Over the phone via credit card (arranged by the project planner), or
- c. Through the mail via check

Applications are not deemed submitted until both the application and the payment are accepted by staff.

TO BE COMPLETED BY STAFF

Fees Charged Per Adopted Fee Schedule

- | | |
|--|--|
| ☐ 1 & 2 FAMILY RESIDENTIAL NEW CONSTRUCTION | ☐ COMMERCIAL NEW CONSTRUCTION |
| ☐ 1 & 2 FAMILY RESIDENTIAL ADDITION <50% | ☐ COMMERCIAL ADDITION <50% |
| ☐ MULTIFAMILY RESIDENTIAL NEW CONSTRUCTION | ☐ COMMERCIAL FAÇADE |
| ☐ MULTIFAMILY RESIDENTIAL ADDITION <50% | |



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ACCEPTED BY: _____ DATE ACCEPTED: _____

FEE COLLECTED: _____ RECEIPT #: _____

FEE COLLECTED BY: _____ DATE PAID: _____