



PLANNING APPLICATION

CITY OF TULELAKE

591 Main Street, PO Box 847, Tulelake, CA 96134

Phone: (530) 667-5522 / Fax: (530) 667-5351

Application No: _____ Date Filed: _____

Fees Paid: _____ Receipt No. _____

Date Application Determined Complete: _____ *

* All required information must be submitted and all fees paid prior to the application being determined complete.

I. GENERAL DATA REQUIRED

A. Name of Applicant (please print): _____

B. Address/Location of Property (attach grant deed): _____

C. Assessor's Parcel Number(s): _____

D. Site Area (acres/sq. ft.): _____

E. Current General Plan Land Use Designation: _____

F. Proposed General Plan Land Use Designation: _____

G. Current Zoning: _____ H. Proposed Zoning: _____

I. Existing Use of Property: _____

J. Detailed Project Description: _____

(Attach additional sheets if necessary.)

II. AUTHORIZATION AND CONSENT

A. APPLICANT: In signing this application, I, as applicant, represent to have obtained authorization from the property owner to file this application.

B. PROPERTY OWNER: In signing this application, I, as property owner, have full legal capacity to, and hereby do, authorize the filing of this application.

C. PROPERTY OWNER AND APPLICANT: I understand that conditions of approval are binding and agree to be bound by those conditions, subject only to the right to object at the hearings or during the appeal period. I hereby certify that the facts, statements, and information presented within this application form are true and correct to the best of my knowledge and belief. I hereby understand and certify that any misrepresentation or omissions of any information required in this application form may result in the

application being delayed or not approved by the City. I hereby certify that I have read and fully understand all the information required in this application form and the associated application guidelines. I further agree and grant authorization to enter said property to the City for the limited purpose of examining the property with respect to the proposed project/land use. The authorization is valid from the date of this application until the date of project determination or withdrawal. In applying for this application(s), I also agree to diligently process and complete all requirements necessary for said application(s) to be considered complete and ready for processing and I hereby do agree that failure to do so constitutes an abandonment of said application(s) and my desire to withdraw said application(s).

I FURTHER AGREE TO DEFEND, INDEMNIFY AND HOLD HARMLESS THE CITY OF TULELAKE, ITS AGENTS, OFFICERS, CONSULTANTS, AND EMPLOYEES FROM ANY LEGAL CHALLENGE RESULTING FROM THIS APPLICATION. I FURTHER STIPULATE THAT IF I FAIL TO COMPLY WITH SAID AGREEMENT THAT I AGREE AND CONSENT TO THE CITY RESCINDING ANY AND ALL APPROVALS THAT ARE SUBJECT TO THIS APPLICATION.

Name (Pls. Print): _____ Daytime Telephone: _____
Company: _____ Other Telephone: _____
Address: _____ Fax: _____
City: _____ Zip: _____ E-mail: _____
Signature: _____ Date: _____
Check one: ☐ Property Owner ☐ Applicant

Name (Pls. Print): _____ Daytime Telephone: _____
Company: _____ Other Telephone: _____
Address: _____ Fax: _____
City: _____ Zip: _____ E-mail: _____
Signature: _____ Date: _____
Check one: ☐ Property Owner ☐ Applicant

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Company: _____ Other Telephone: _____
Address: _____ Fax: _____
City: _____ Zip: _____ E-mail: _____
Signature: _____ Date: _____
Check one: ☐ Property Owner ☐ Applicant

III. OTHER PROPERTY OWNERS AND PROJECT REPRESENTATIVES WHO SHOULD RECEIVE REPORTS AND LEGAL NOTICES

Name (Pls. Print): _____ Daytime Telephone: _____
Company: _____ Other Telephone: _____
Address: _____ Fax: _____
City: _____ Zip: _____ E-mail: _____
Check one: ☐ Property Owner ☐ Representative ☐ Other (describe) _____

Name (Pls. Print): _____ Daytime Telephone: _____
Company: _____ Other Telephone: _____
Address: _____ Fax: _____
City: _____ Zip: _____ E-mail: _____
Check one: ☐ Property Owner ☐ Representative ☐ Other (describe) _____

IV. ATTACHMENTS

Please list all plans and attachments included with the application: _____

- For Office Use Only -

ENVIRONMENTAL DETERMINATION

Exemption _____ Negative Declaration _____ Env. Impact Report _____
Have Mitigation Measures Been Adopted? Yes _____ No _____
Notice of Exemption/Notice of Determination Filed On: _____
State Clearinghouse Number (if available): _____

APPROVAL OR DENIAL

Date Application Heard: PC: _____ CC: _____
Approved: _____ Denied: _____ Date of Approval or Denial: _____
Approving Resolution(s): _____ Date(s) of Adoption: _____
Resulting Ordinance(s): _____ Date(s) of Adoption: _____
Is the Project Subject to Conditions of Approval? Yes _____ No _____