CERTIFICATE OF COMPLIANCE

Belmont Permit Center

APPLICATION CHECKLIST

Address: ***Date:***

Project:

Please review your project with the Planning Department to determine if any additional items listed below are required.

	Required (by City)	Submitted (by applicant)	
Applications	☒	☐	**Application Checklist (this form)**
	☒	☐	**Permit Application**
	☒	☐	**Supplemental Application**
	☒	☐	**Property Owner Affidavit**

	Required (by City)	Submitted (by applicant)	
Technical	☒	☐	**Chain of Title: Dated within Six Months, Hyperlinked, and traced back to at least 1929**
Information	☐	☐	**Survey (May be requested at later date)**

	Required (by City)	Submitted (by applicant)	
Fees and Deposits	☒	☐	**Application fee**

Address: _____

Applicant's Statement: As applicant for this project, I hereby certify that the materials listed as 'submitted' on this checklist are complete and accurate. If the City of Belmont determines that the materials are incomplete or inaccurate, I understand that the entire application may be deemed withdrawn, and the application materials returned to me, with no further processing by the City.

Applicant's Name: _____ ***Date:*** _____

Applicant's Signature: _____

Required Application Material Definitions

☐ 1. Completed Application Form
Include applicant and property owner information, APN, address (if assigned), and contact info.

☐ 2. Project Description
Explain the basis for the request, including parcel history and intended use (e.g., development, sale, etc.).

☐ 3. Title Report (within last 6 months)
Provide a preliminary title report to verify ownership and historical chain of title that is hyperlinked to its references.

☐ 4. Chain of Title / Deed History
Legible Copies of deeds documenting the creation and transfer of the parcel back to the date of original subdivision (typically 1972 or earlier).

☐ 5. Recorded Maps or Surveys (if applicable)
Include tract maps, parcel maps, or record of surveys showing the parcel configuration.

☐ 6. Application Fee
Fee as established by the City's adopted Master Fee Schedule.

Notes

- A **Certificate of Compliance** will be issued if the City determines the parcel was created legally under state and local subdivision laws.
- A **Conditional Certificate of Compliance** may be issued if the parcel was not legally created; conditions will be imposed that must be satisfied prior to development (e.g., roadway improvements, utility connections, dedication requirements).
- This process does not imply development approval. Future construction may be subject to environmental review, grading permits, and planning entitlements.

CITY OF BELMONT

Belmont Permit Center

PERMIT APPLICATION

Application Number: _____

Case Type: ☐ Administrative

Zoning of Property: _____

☐ Design Review ☐ Sign Review	☐ Tentative Tract Map	■ Certificate of Compliance
☐ Variance	☐ Tentative Parcel Map	☐ General Plan Amendment
☐ Conditional Use Permit	☐ Complex Project	☐ Rezoning
☐ Floor Area Exception	☐ Grading Permit Approval	☐ Geologic Review
☐ Floor Area Transfer	☐ Conceptual Development Plan	☐ Geo-Hazards Map Amendment
☐ Lot Line Adjustment	☐ Detailed Development Plan	☐ Subdivision Ordinance Exception

Other: _____

Project Description (All properties):

Property Description (All properties):

Street Address:

Assessors Parcel Number(s):

Property Area (sg. ft.):

Nearest Cross Street:

Applicant Information:

Owner name:	Telephone Number: ( )	Fax Number: ( )
Owner Mailing Address, *if different from Site Address:*		
Applicant Name, *if different from Property Owner:*	Telephone Number: ( )	Fax Number: ( )
Applicant Mailing Address:		

Submittal Authorization:

Signature of Owner:	Date:
Signature of Applicant, *if different from Owner:*	Date:

CERTIFICATE OF COMPLIANCE

Belmont Permit Center
SUPPLEMENTAL APPLICATION

Application No.:_____(Office Use)

Address: ***Date:***

Project:

Special Conditions:

Indicate the most significant or severe flood zone and geologic hazard or hazards found on the project site. (Consult 1982 FEMA Flood Insurance Rate Map and 1988 City of Belmont Geologic Hazard Policy Maps.)

Flood Zone: _____

Geologic Hazards: _____

Findings:

In order to approve a request for Certificate of Compliance, the Director of Planning and Community Development must determine that the property conforms to the Subdivision Map Act. Please indicate how the property conforms:

PROPERTY OWNER AFFADAVIT

Application No.:_____
(Office Use)

Site Address:_____

Project Description:_____

Property Owner Name:_____

I. OWNERSHIP

I hereby declare that I am the owner of the property involved in this application.

_____
(Owner's Initials)

II. ACCURACY OF INFORMATION

I hereby acknowledge that all statements, responses and information submitted in support of this application are true and correct to the best of my knowledge and belief. I further acknowledge that if it is determined that any information related to the project description, specifications, or dimensions; proposed use; or other aspects of the project is false or inaccurate for any reason, the City of Belmont may deem the application invalid or incomplete, at its own discretion.

_____ _____

Property Owner's Signature **Date**