

CONDITIONAL USE PERMIT

I.C. PLANNING & DEVELOPMENT SERVICES DEPT.
801 Main Street, El Centro, CA 92243 (442) 265-1736

- APPLICANT MUST COMPLETE ALL NUMBERED (black) SPACES - Please type or print -

| | | |
|--|-----------------|---------------|
| 1. PROPERTY OWNER'S NAME | EMAIL ADDRESS | |
| 2. MAILING ADDRESS (Street / P O Box, City, State) | ZIP CODE | PHONE NUMBER |
| 3. APPLICANT'S NAME | EMAIL ADDRESS | |
| 4. MAILING ADDRESS (Street / P O Box, City, State) | ZIP CODE | PHONE NUMBER |
| 4. ENGINEER'S NAME | CA. LICENSE NO. | EMAIL ADDRESS |
| 5. MAILING ADDRESS (Street / P O Box, City, State) | ZIP CODE | PHONE NUMBER |

| | | |
|---|--|-------------------|
| 6. ASSESSOR'S PARCEL NO. | SIZE OF PROPERTY (in acres or square foot) | ZONING (existing) |
| 7. PROPERTY (site) ADDRESS | | |
| 8. GENERAL LOCATION (i.e. city, town, cross street) | | |
| 9. LEGAL DESCRIPTION | | |

PLEASE PROVIDE CLEAR & CONCISE INFORMATION (ATTACH SEPARATE SHEET IF NEEDED)

| | |
|---|--|
| 10. DESCRIBE PROPOSED USE OF PROPERTY (list and describe in detail) | |
| 11. DESCRIBE CURRENT USE OF PROPERTY | |
| 12. DESCRIBE PROPOSED SEWER SYSTEM | |
| 13. DESCRIBE PROPOSED WATER SYSTEM | |
| 14. DESCRIBE PROPOSED FIRE PROTECTION SYSTEM | |
| 15. IS PROPOSED USE A BUSINESS? <input type="checkbox"/> Yes <input type="checkbox"/> No | IF YES, HOW MANY EMPLOYEES WILL BE AT THIS SITE? |

I / WE THE LEGAL OWNER (S) OF THE ABOVE PROPERTY CERTIFY THAT THE INFORMATION SHOWN OR STATED HEREIN IS TRUE AND CORRECT.

| | |
|------------|------|
| Print Name | Date |
| Signature | |
| Print Name | Date |
| Signature | |

REQUIRED SUPPORT DOCUMENTS

| | |
|--------------|--|
| A. SITE PLAN | |
| B. FEE | |
| C. OTHER | |
| D. OTHER | |

| | | | | |
|---------------------------------|---|------|--|---|
| APPLICATION RECEIVED BY: | | DATE | | REVIEW / APPROVAL BY OTHER DEPT'S required. |
| APPLICATION DEEMED COMPLETE BY: | | DATE | | <input type="checkbox"/> P. W. |
| APPLICATION REJECTED BY: | | DATE | | <input type="checkbox"/> E. H. S. |
| TENTATIVE HEARING BY: | | DATE | | <input type="checkbox"/> A. P. C. D. |
| FINAL ACTION: | <input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED | DATE | | <input type="checkbox"/> O. E. S. |
| | | | | <input type="checkbox"/> _____ |
| | | | | <input type="checkbox"/> _____ |

CUP #

SITE PLAN REQUIREMENTS

PLAN MUST:

- a. Be drawn to scale upon substantial paper, 11" x 14" (min.) – (20 copies must be submitted.)
- b. Show name of owner, legal description and Assessor's Parcel Number.
- c. Show existing property dimensions, size, adjacent roads, canals, right-of-ways, easements, etc.
- d. Show all existing and proposed structures (both above and below ground) location of sewer and water systems.
- e. Show adjacent property uses and approximate distances to nearest structures.
- f. Indicate name of person preparing site plan.
- g. Show North orientation.
- h. Show sufficient dimensions and information for proper evaluation to be done.

CAUTION: Incomplete or inaccurate applications, plans will cause the entire application to be rejected.