



Los Angeles County
Department of Regional Planning

Planning for the Challenges Ahead



ZONING PERMIT APPLICATION

PLEASE READ INSTRUCTIONS CAREFULLY

The following information is necessary for all applications. Failure to provide accurate and complete information will delay review. Applications must be submitted in person by appointment only. Call (213) 974-6438 to schedule an appointment.

FOR STAFF USE ONLY

Permit No.: _____
 Project No.: _____
 RENV / Exempt: _____
 Zone: _____ Plan/Land Use: _____
 ESHA/SEA: _____
 CSD/TOD: _____
 Sup. Dist.: _____ Zone Dist.: _____
 Coastal Y / N Housing Permit Y / N
 RFS: _____ CHW: Y / N

1. Subject Property (Sujeto Propiedad)

Assessor's Parcel Number(s) (Attach additional sheets if necessary):

 Property Address(es) or Location(s):

 All existing and proposed structures and gross square footage:

2. Project Description and Proposed Use (Descripción del Proyecto y El Uso Propuesto)
 Attach additional sheets if necessary.

3. Owner(s) (Dueño/a Registrado)

Name:		Phone:
Address:		Fax:
City:	Zip:	E-mail:

4. Applicant (Solicitante) If different from owner

Name:		Phone:
Address:		Fax:
City:	Zip:	E-mail:

5. Agent (Agente) If different from owner/applicant

Name:		Phone:
Address:		Fax:
City:	Zip:	E-mail:

PROJECT NO.: _____

6. Project and Property Data (Datos de la Propiedad y Proyecto)

Existing Use(s) and Structure(s) (gross square feet): Existing structure(s) to be demolished (if applicable):	Is grading proposed? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many cubic yards? Cut: _____ Fill: _____ Will grading be balanced on-site? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, indicate quantities to be transported off-site. Export: _____ Import: _____ Natural and finished grade and finished floor must be depicted on the elevations.
Total number of existing residential buildings/units: Total number of proposed residential buildings/units:	Are there slopes of 25% or more on the subject property? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, a slope map is required and the topographic lines must be depicted on the site plan.
Proposed height of structure(s):	Are retaining walls proposed? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, submit wall cross-sections and heights.
Does the proposal meet all required setbacks? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, a yard modification is required. Specify what setback is to be modified:	Water source: <input type="checkbox"/> Public Water (source name) _____ <input type="checkbox"/> Private Well Shared well? <input type="checkbox"/> Yes <input type="checkbox"/> No If a shared well is proposed, a Shared Water Well application is required.
Applying for a second unit? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, all supplemental information must be attached.	Applying for a density bonus? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, all supplemental information must be attached.
Project Density (DU/gross acre): _____ (Please round down to the nearest 100th of an acre)	
Are future phases planned for this Project? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:	

7. Requested Permits (permisos solicitados)

DESCRIPTION: Describe the purpose of each Zoning Permit request. Attach additional sheet if necessary.

<input type="checkbox"/> Conditional Use Permit	
<input type="checkbox"/> Community Standard District (CSD) Modification	
<input type="checkbox"/> Oak Tree Permit	
<input type="checkbox"/> Parking Permit	
<input type="checkbox"/> Plan Amendment	
<input type="checkbox"/> Variance	
<input type="checkbox"/> Zone Change	
<input type="checkbox"/> Housing, Senior	
<input type="checkbox"/> Housing, Affordable	
<input type="checkbox"/> Other Permit(s)	

PREVIOUS CASES: List all previous entitlements, plot plans, tract or parcel maps, and zoning permits, if known.

PROJECT NO.: _____

8. Residential Parking (Estacionamiento Residencial)

Number of covered on-site spaces provided: _____ Number of uncovered on-site spaces provided: _____

9. Non-Residential Parking (Estacionamiento Residencial)

Gross building area square footage (include all buildings) Existing: _____ Proposed: _____
 Landscaping area (square footage) Existing: _____ Proposed: _____

Existing or Proposed Use	Square Feet or Occupancy Load	Spaces/Square Footage	Required Parking
Existing Retail			
Proposed Retail		1/250	
Medical Office		1/250	
Professional Office		1/400	
Industrial		1/500	
Warehouse*		1/1,000*	
Restaurant**		1/3 occupants**	
Churches***		1/5 occupants***	
Other		Disabled Spaces Provided:	
		Compact Spaces Provided:	
		Total Parking Spaces Required:	

*A minimum of 80% of the floor area must be dedicated to warehouse use to apply the parking ratio of 1/1,000.
 **Parking for entertainment, assembly and dining are based on the occupancy load determined by Building & Safety Office (a minimum of 10 spaces are required). Occupancy load determination "Form A" from Building & Safety must be attached.
 ***Parking for Churches is based on the occupancy load determined by Building & Safety Office.

10. Environmental Information (Información del Medio Ambiente) Add additional sheets if necessary

1. Environmental Setting—Project Site

- a. Existing Uses/Structures:
- b. Topography/Slope:
- c. Vegetation:
- d. Animals:
- e. Watercourses:
- f. Cultural/historical resources:
- g. Other:

2. Environmental Setting—Surrounding Area

- a. Existing uses/structures:
- b. Topography/slopes:
- c. Vegetation:
- d. Animals:
- e. Watercourses:
- f. Cultural/historical resources:
- g. Other:

PROJECT NO.: _____

12. Oak Tree Certification (*Certificación de Árboles Robles*) (Pursuant to Chapter 22.56, Part 16)

Are there any oak trees on the subject property or next to the subject property?

Yes No

If you marked **yes**, please check **one** of the following boxes:

I certify that no activity will occur within five feet of any oak tree dripline (canopy) or within 15 feet of any oak tree trunk, whichever distance is greater. This applies to both oak trees located on the subject property AND oak trees next to the subject property. All oak tree dimensions, including trunk diameter and canopy, are accurately depicted on the plans and are drawn to scale for verification.

Activity will occur within five feet of any oak tree dripline (canopy) or within 15 feet of any oak tree trunk and I have concurrently filed for an oak tree permit. All oak tree dimensions, including trunk diameter and canopy, are accurately depicted on the plans and are drawn to scale.

Signature: _____ Date: _____

(SIGN ORIGINAL SIGNATURE IN BLUE INK)

13. Lobbyist Statement (*Información de un Grupo de Presión*)

The Los Angeles County Lobbyist Ordinance, effective May 7, 1993, requires certification that each person who applies for a County permit is familiar with the requirements of Ordinance No. 93-0031 (Lobbyist Ordinance), and that all persons acting on behalf of the applicant have complied and will continue to comply with the requirements of said Ordinance through the application process.

I hereby certify that I am familiar with the requirements of Ordinance No. 93-0031. I further understand that the making of such a certification, and compliance with this ordinance, shall be conditions precedent to the granting of the requested permit, license, contract or franchise.

Signature: _____ Date: _____

(ORIGINAL SIGNATURE IN BLUE INK)

LOBBYIST PERMIT NO.(S) IF APPLICABLE: _____

14. Archaeological Statement (*Declaración Arqueológico*)

Under the discretion of the Impact Analysis Section, projects may be forwarded to the University of California Los Angeles (UCLA) Archeological Information Center for review regarding potential impacts to historical and cultural resources in order to assure preservation of Los Angeles County's resources. This review requires processing fee which will be billed directly to the applicant by UCLA. By signing this document, the application is aware of this required cost in the Initial Study process.

Signature: _____ Date: _____

(ORIGINAL SIGNATURE IN BLUE INK)