City of Fontana
Planning Division

(909) 350-6717

Application For Zoning Code Amendment

For Division Use Only

Z.C.A #:_____ Submittal Date:_____
Contractor #:_____ Related File #:_____
Computer I.D. #:_____ Received By:_____

Applicant Information

Applicant:_____ Phone:_____
Mailing Address:_____
Applicant: _____ Phone:_____
Mailing Address:_____

Proposed Zoning Code Amendment (Describe in detail. Provide Code Section number(s) to be amended. Use additional sheets if necessary).

_____
_____
_____

Reason(s) for Zoning Code Amendment (Describe in detail. Use additional sheets if necessary).

_____
_____
_____

Property Owner(s) Affidavit

I/We,_____
(Please Print Name(s))

Being duly sworn, depose and say that I am/ We are the owner(s) of the entire property involved in this application and I/We hereby give permission for the filing of this application.

_____
(Signature(s)) (Printed Name(s))

The property Owners Affidavit MAY NOT be signed by an agent or attorney but MUST be signed by the owner of the property, or owners of a corporation authorized to sign official documents for the corporation, before a Notary Public. **Please attach Notary Acknowledgment**

Applicant's Affidavit

I/We have familiarized myself/ourselves with requirements of the City Planning Division with respect to preparing and filing this application and that the foregoing statements and answers herein contained are in all respects true and correct to the best of my/our knowledge and belief. I/We understand that this application represents a preliminary submittal and will not be recognized as "Officially Filed" until a "Notice of Official Filing" is issued by the Planning Division.

Applicant's Signature_____ Date:_____
Type/Print Name: _____

PLANNING DIVISION

SUBMITTAL REQUIREMENTS FOR

ZONING CODE AMENDMENTS

The following items are required to be submitted at the time of application. However, prior to actual filing all applicants are encouraged to contact the Planning Division to schedule a pre-filing meeting at which time a planner can provide assistance regarding form and content of submittals as well as information regarding City ordinances and policies.

A. Completed application form.

B. Completed Environmental Information Form.

C. Filing fees.

D. A list of NAMES AND ADDRESSES of all persons owning property within six hundred sixty (660) foot of the exterior boundaries of the site. This list must be submitted with forms supplied by the City which contain an affidavit that certifies that the applicant has secured the names and addressed within the last ninety (90) days. (See attached examples entitled "Instructions for Preparation of Mailing List/Envelopes for Public Hearing" and "Ownership List and Radius Map Statement".

Two (2) pre-stamped business-size envelopes prepared for mailing for each name on the mailing list. The return address shall read:

City of Fontana
Planning Division
8353 Sierra Avenue
Fontana, CA 92335

The mailing address shall contain the following: Assessor's Parcel Number, Property Owner' Name, Address and Zip Code.

PLANNING DIVISION

INSTRUCTIONS FOR PREPARATION OF
MAILING LIST/ ENVELOPES FOR PUBLIC HEARINGS

1. Each application shall include a mailing list containing the NAMES, ADDRESSES, AND ASSESSOR'S PARCEL NUMBERS of Owners of REAL PROPERTY within a radius of 660 feet as measured from the exterior boundaries of the property. This information shall be obtained from the latest San Bernardino County Equalized Assessments Rolls. Planning Division shall not accept an ownership list which bears a date of MORE THAN 90 DAYS PRIOR to the date of the FIRST PUBLIC HEARING. The list shall be typed on 1" x 2-3/4" self-adhesive address labels.

2. Each application shall include a copy of current assessor's map, illustrating a 660-foot radius measured from the boundary of the subject site and ALL parcels within this boundary.

3. Each application shall include one (1) pre-stamped business-size envelope for EACH name on the list. Each envelope shall be clearly printed, typed, or affixed with a self-adhesive address label as follow:

City of Fontana
Planning Division
8353 Sierra Avenue
Fontana, CA 92335

Stamp

000-000-00 (Assessor's Parcel #)
Property Owners Name
Address
Fontana, CA 92335

Please note, all three items must be submitted with the application.

OWNERSHIP LIST AND RADIUS MAP STATEMENT

THE FOLLOWING STATEMENT IS TO BE SIGNED AND SUBMITTED WITH THE APPLICATION

I hereby certify that to the best of my knowledge the ownership list and radius map correctly depicts the required data obtained from records of the San Bernardino County Assessor's Office.

I further hereby certify that to the best of my knowledge and under penalty of perjury, the ownership list submitted with my application correctly shows the latest names and addresses on the San Bernardino County Assessor's records as of _____.

_____
(Signature)

_____
(Printed Name)

THE PLANNING DIVISION SHALL NOT ACCEPT AN APPLICATION, MAPS, AND OWNERSHIP LIST WHICH BEARS A DATE OF MORE THAN 90 DAYS TO THE DATE OF THE FIRST PUBLIC HEARING.

CITY OF FONTANA
PLANNING DIVISION
APPLICATION & APPLICANT INFORMATION

Department Use Only

Master Case No. _____

Case No. _____ **Case No.** _____

Case No. _____ **Case No.** _____

Case No. _____ **Case No.** _____

Submittal Date: _____ **Received By:** _____ **Related Case:** _____

Please check all application types that apply:

Administrative Site Plan:	_____	Lot Merger:	_____
Administrative Site Plan Amendment:	_____	Master Sign Program:	_____
Administrative Site Plan Modification:	_____	Minor Use Permit: (ABC Lic Change):	_____
Administrative Variance:	_____	Minor Use Permit: (Comm):	_____
Annexation Consent:	_____	Minor Use Permit Amendment:	_____
Annex(Irrevocable Agreement Exist):	_____	Re-Build Letter:	_____
Annex(Irrevocable Agreement New):	_____	Specific Plan:	_____
Appeal (Aggrieved Person):	_____	Specific Plan Amendment:	_____
Appeal (Project Applicant):	_____	Temporary Use Permit:	_____
City Council/Planning Comm Interp:	_____	Temporary Sign Permit:	_____
Community Plan Amendment:	_____	Tentative Parcel Map (Residential):	_____
Conditional Use Permit (Res.):	_____	Tentative Parcel Map (Comm/Indust.):	_____
Conditional Use Permit (Comm.):	_____	Tentative Parcel Map (Minor Modification):	_____
Conditional Use Permit Amendment:	_____	Tentative Parcel Map (Major Modification):	_____
Conditional Use Permit/Res. Child Care:	_____	Tentative Parcel Map Time Extension:	_____
Conditional Use Permit (New ABC Lic):	_____	Tentative Tract Map (Residential):	_____
Design Review (Residential):	_____	Tentative Tract Map (Comm/Indust):	_____
Design Review (Comm/Indust):	_____	Tentative Tract Map (Minor Modification):	_____
Design Review Amendment:	_____	Tentative Tract Map (Major Modification):	_____
Design Review Modification:	_____	Tentative Tract Map Time Extension:	_____
Design Review Sign:	_____	Tentative Tract Map (Vesting):	_____
Development Agreement:	_____	Variance:	_____
Development Code Amendment:	_____	Zone Change:	_____
General Plan Amendment (Minor):	_____	Zone Change Consistency:	_____
General Plan Amendment (Major):	_____	Zoning Determination:	_____
Home Occupation Permit:	_____	Zoning Letter:	_____
Lot Line Adjustment:	_____	Other	_____

For additional info call (909) 350-6717

Application Information

Please provide all applicable information. Failure to do so may result in significant processing delays.

Applicant's Information:

Company Name (if any): _____
Contact Person: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Bus. Phone: _____ Cell Phone: _____
Fax: _____
E-Mail (if any): _____

Contact Person: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Bus. Phone: _____ Cell Phone: _____
Fax: _____
E-Mail (if any): _____

Engineer: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Bus. Phone: _____ Cell Phone: _____
Fax: _____
E-Mail (if any): _____

Architect: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Bus. Phone: _____ Cell Phone: _____
Fax: _____
E-Mail (if any): _____

Property Owner's Information (If more than three, add separate sheet):

Name: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Bus. Phone: _____ Cell Phone: _____
Fax: _____
E-Mail (if any): _____

Name: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Bus. Phone: _____ Cell Phone: _____
Fax: _____
E-Mail (if any): _____

Name: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Bus. Phone: _____ Cell Phone: _____
Fax: _____
E-Mail (if any): _____

CITY OF FONTANA
PLANNING DIVISION
APPLICATION
PROJECT INFORMATION

The following information is required for all applications. Also, please complete specific project information.

Assessor's Parcel Number(s) Provide full nine digit number which shall include the book, page, and parcel for each parcel within the project. (If more than nine parcels, add separate sheet.)

_____ _____ _____

_____ _____ _____

_____ _____ _____

Project Location (Must be given as appropriate by street address, closest cross street, and most recent available Thomas Brothers Coordinates, or other information that may convey the location of the property):

_____

_____

_____

General Plan Designation(s)
(If more than one GP land use Designation, list designation for each parcel)

_____

_____

_____

_____

Zoning District(s)
(If more than one Zoning District list District for each parcel)

_____

_____

_____

_____

Specific Plan Designation(s)
(If more than one Specific Plan Designation, list Designation for each parcel)

_____ _____

_____ _____

_____ _____

Project Name (if any):

_____

Miscellaneous Information, notes, comments, etc that you wish to provide.

_____

_____

_____

CITY OF FONTANA
PLANNING DIVISION
APPLICATION
AFFIDAVITS

An application affidavit is required for all applications except the following: Appeal, Development Code Amendment, Re-build letter, or Zoning Letter application.

Property Owner(s) Affidavit:

I/We, _____
Please Print Name(s)

hereby state that I/we are the property owner(s) of the entire property involved in this application and I/we give permission for the filing of this application.

Property Owner(s) Signature: _____ Property Owner(s) Signature: _____

Print/Type Name: _____ Print/Type Name: _____

The property owner affidavit must be signed by the property owner or authorized representative of a corporation, before a notary. **(Please attach Notary Acknowledgement)**

Applicant's Affidavit:

I/we have familiarized ourselves with the requirements of the City of Fontana Planning Division filing requirements and the information provided in this application are true and correct to our knowledge. I/we understand that this application represents a preliminary submittal and will not be officially filed until such time as Notice of Official Filing is issued by the Planning Division.

Applicant's Signature: _____

Print/Type Name: _____

CITY OF FONTANA
PLANNING DIVISION
APPLICATION
SUBMITTAL REQUIREMENTS

The following items are required to be submitted at time of application. **Prior to actual filing an application all applicants are strongly encouraged to contact the Planning Division (909.350.6728) to schedule a pre-filing meeting.**

The following items are required for all applications (Also, see specific application requirements):

- ❑ **Application Form:** The appropriate application forms shall be completed.

- ❑ **Filing Fee:** The appropriate filing fees will need to be submitted a time of application. A fee schedule is attached.

- ❑ **Mailing List:** One list of all persons owning property within 300 feet for an Administrative Site Plan and Administrative Variance applications or 660 feet for a Community Plan Amendment, Design Review, Specific Plan, Tentative Tract Map, Time Extension, Zone Change, Annexation, Development Code Amendment, Community Plan Amendment, Conditional Use Permit, Minor Use Permit, General Pan Amendment, Specific Plan Amendment, Tentative Parcel Map, and Variance application. A mailing list is not required for an Appeal, Temporary Sign Permit, Design Review Sign, or Temporary Use Permit application. The mailing list shall contain the following:
  - ❑ 1" x 2 ¾" Self-adhesive address labels
  - ❑ Names, addresses and assessor's parcels numbers

    (Note: the mailing list information shall be obtained from the latest San Bernardino County Equalized Assessments Rolls. Planning Division shall not accept an ownership list which bears a date MORE THAN 90 DAYS PRIOR to the date of the FIRST PUBLIC HEARING.)

  - ❑ Assessor's maps showing the subject site and all properties within 300 (Administrative Site Plan) or 660 feet (all other projects) of the exterior boundaries of the project site. The Assessor's pages shall be full size (11"x17") with the appropriate radius clearly drawn in red ink or pencil.

  - ❑ One pre-stamped business size envelope prepared for mailing for each name on the mailing list. The return address on the envelope shall read:

City of Fontana Planning Division 8353 Sierra Avenue Fontana, CA 92335	Stamp
000-000-00 (Assessor's Parcel No.) Property Owners Name Address Fontana, CA 92335/6	

  - ❑ The mailing address on the envelope shall contain the assessor's parcel number and the property owner's name and address.

    - ❑ A second set of envelopes shall be submitted for projects requiring a public hearing before the City Council (Zone Changes, Development Code Amendments, General Plan Amendments, Specific Plans, Community Plans, and Specific or Community Plan Amendments.

- ❑ **Environmental:** A completed Environmental Information Form (attached).
- ❑ **Preliminary Title Report:** A current Title Report within the last three (3) months.
- ❑ **Water Quality Management Plan:** A complete Water Quality Management Plan prepared by a registered Civil Engineer licensed by the State of California.

- ❑ **Notification Sign:** Installation of one 4' x 8' notification sign on each street. (See information sheet for required sign information, sign height, letter height, etc.)