City of Fontana
Planning Division

Temporary Use Permit/Christmas Tree Lot Application

Applicant Information

Property Owner ___________________________ Phone: ___________________________
Mailing Address: ___________________________ Phone: ___________________________
Applicant: ___________________________ Phone: ___________________________
Mailing Address: ___________________________ Phone: ___________________________
E-Mail Address: ___________________________
General Description of Project: ___________________________
Address or Location: ___________________________
Assessor’s Parcel Number(s): ___________________________

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))

State of California
County of ___________________________

On ______________ before me, __________________________, personally appeared __________________________

Date Notary Signer(s)

Personally known to me-OR- [ ] proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed
to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their
signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
WITNESS my hand and official seal.

__________________________________________
Notary’s signature

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)
1. DISPLAY LOCATION SUBJECT TO APPROVAL OF CODE COMPLIANCE, PLANNING, POLICE, FIRE, AND OTHER APPROPRIATE CITY DEPARTMENTS AND/OR DIVISIONS.

2. PERMIT SUBJECT TO THE CONDITIONS OF FONTANA MUNICIPAL CODE SECTION 30-89 (See Attached).

I AGREE TO COMPLY WITH ALL PROVISIONS OF FONTANA MUNICIPAL SECTION CODE 30-89 AND TO PAY A PERMIT FEE OF $90.00 TO THE CITY OF FONTANA.

Applicant Signature   Approved By

Relationship To Business   Title

Date
DIVISION 14. TEMPORARY USE

Sec. 30-89. Application.

Applications for temporary use permit shall be filed with the Community Development Department upon such forms and accompanied by such data, information and fees as may be required by the Community Development Department, to ensure a full presentations of the facts. A temporary use permit shall be required for the following activities and shall be subject to conditions as may be prescribed by the Community Development Director.

5. Christmas trees or pumpkin and fireworks, and seasonal sales lots subject to the following guidelines and conditions:

1. All such uses shall be limited to 30 days of operation per calendar year.

2. All lighting shall be directed away from shielded from adjacent residential areas.

3. Adequate provisions for traffic circulation, off-street parking, and pedestrian safety shall be provided to the satisfaction of the Community Development Director.
Christmas Tree Lot

Plot Plan Description:

To scale, fully dimensioned, with a north arrow, indicating all property lines; parking areas and driveways; all existing structures and buildings; and the location of the proposed new building(s), structure(s) or improvements. Indicate the distance to property lines from all structures and between all other structures on the property.

Sample Plot Plan: Available at the City of Fontana
CITY OF FONTANA  
PLANNING DIVISION  
APPLICATION & APPLICANT INFORMATION

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Please check all application types that apply:

- Administrative Site Plan: ____________
- Administrative Site Plan Amendment: ____________
- Administrative Site Plan Modification: ____________
- Administrative Variance: ____________
- Annexation Consent: ____________
- Annex(Irrevocable Agreement Exist): ____________
- Annex(Irrevocable Agreement New): ____________
- Appeal (Aggrieved Person): ____________
- Appeal (Project Applicant): ____________
- City Council/Planning Comm Interp: ____________
- Community Plan Amendment: ____________
- Conditional Use Permit (Res.): ____________
- Conditional Use Permit (Comm.): ____________
- Conditional Use Permit Amendment: ____________
- Conditional Use Permit/Res. Child Care: ____________
- Conditional Use Permit Amendment: ____________
- Conditional Use Permit Amendment: ____________
- Conditional Use Permit Amendment: ____________
- Conditional Use Permit Amendment: ____________
- Design Review (Residential): ____________
- Design Review (Comm./Indust): ____________
- Design Review Amendment: ____________
- Design Review Modification: ____________
- Design Review Sign: ____________
- Development Agreement: ____________
- Development Code Amendment: ____________
- General Plan Amendment (Minor): ____________
- General Plan Amendment (Major): ____________
- Home Occupation Permit: ____________
- Lot Line Adjustment: ____________

- Lot Merger: ____________
- Master Sign Program: ____________
- Minor Use Permit: (ABC Lic Change): ____________
- Minor Use Permit: (Comm): ____________
- Minor Use Permit Amendment: ____________
- Re-Build Letter: ____________
- Specific Plan: ____________
- Specific Plan Amendment: ____________
- Temporary Use Permit: ____________
- Temporary Sign Permit: ____________
- Tentative Parcel Map (Residential): ____________
- Tentative Parcel Map (Comm/Indust.): ____________
- Tentative Parcel Map (Minor Modification): ____________
- Tentative Parcel Map (Major Modification): ____________
- Tentative Parcel Map Time Extension: ____________
- Tentative Tract Map (Residential): ____________
- Tentative Tract Map (Comm/Indust): ____________
- Tentative Tract Map (Minor Modification): ____________
- Tentative Tract Map (Major Modification): ____________
- Tentative Tract Map Time Extension: ____________
- Tentative Tract Map (Vesting): ____________
- Variance: ____________
- Zone Change: ____________
- Zone Change Consistency: ____________
- Zoning Determination: ____________
- Zoning Letter: ____________
- 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 Plan 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

  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.)