



**Community & Economic Development Department
 Planning Division**
 14177 Frederick Street
 P.O. Box 88005
 Moreno Valley, CA 92552-0805
(951) 413-3206
(951) 413-3210 FAX

PROJECT APPLICATION

No.:

Application must be completely filled out to be accepted.

TYPE OF APPLICATION

(One Application Form Required for Each Type of Application)

- | | | |
|---|---|--|
| <input type="checkbox"/> Administrative Plot Plan | <input type="checkbox"/> Development Agreement | <input type="checkbox"/> Specific Plan |
| <input type="checkbox"/> Administrative Variance | <input type="checkbox"/> Development Code Amendment | <input type="checkbox"/> Specific Plan Amendment |
| <input type="checkbox"/> Amended Conditional Use Permit | <input type="checkbox"/> Extension of Time | <input type="checkbox"/> Tentative Parcel Map |
| <input type="checkbox"/> Amended Plot Plan | <input type="checkbox"/> General Plan Amendment | <input type="checkbox"/> Tentative Tract Map |
| <input type="checkbox"/> Change of Zone | <input type="checkbox"/> Plot Plan | <input type="checkbox"/> Variance |
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Pre-Application Review | <input type="checkbox"/> Other _____ |

APPLICATION INFORMATION

Project/Business Name (if any):

Project Description:

Property Address/Location:

Assessor's Parcel Number(s):

Gross Area:	Net Area:	Proposed # of Lots/Parcels:	Proposed # of Residential Units:
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Related Application(s):

Specific Plan Name/No. :

CONTACT PERSONS

APPLICANT Name: Telephone: ()

Address: Fax No. ()

City: State: Zip: E-mail Address:

Contact Person:

OWNER Name: Telephone: ()

Address: Fax No. ()

City: State: Zip: E-mail Address:

Contact Person:

REPRESENTATIVE Name: Telephone: ()

Address: Fax No. ()

City: State: Zip: E-mail Address:

Contact Person:

PROJECT INFORMATION

Existing Zoning and General Plan Designations

Proposed Zoning and General Plan Designations (if applicable)

Existing Uses and/or Structures on Site

Surrounding Uses: North _____

South _____

East _____

West _____

Lot Size(s) (Sq. Ft.) (Smallest/Largest)

Graded Area (sq. ft.)

Total Building Size (Sq. Ft.)

Impervious area (sq. ft.)

Setbacks: Front

Flood Zone

Side (interior)

Side (street side)

Rear

Maximum Building Height

Total No. of Parking Stalls:

Standard

Handicapped

APPLICATION PROCESSING

Each application must be submitted with the required processing fee and all applicable submittal requirements. Additional information or materials may be needed before an application is accepted as complete. An incomplete application may be closed if it remains inactive for 180 days or more.

OWNER'S SIGNATURE

I, _____ am the owner of the property described in this application and hereby authorize
Print Name

_____ to act on my behalf on matters pertaining to this application.
Applicant/Representative Name

Property Owner's Signature

Date

Note: If more than one owner, a separate page must be attached, listing the names and addresses of all persons (if a corporation, list officers and principals) having interest in the property ownership.

APPLICANT'S SIGNATURE

I certify under penalty of perjury that all the foregoing information is true and correct, and recognize that any false or misleading information shall be grounds for denial of this application. I also acknowledge that I am aware of and agree to indemnify the City in any legal proceedings pertaining to this request for discretionary land use approval. Section 9.02.310 of the Moreno Valley Municipal Code.

Applicant's Signature

Date