



# City of Red Bluff

Community Development Department  
 555 Washington Street  
 Red Bluff, CA 96080  
 (530) 527-2605 ext. 3059

# Planning Application

APPLICANT	ADDRESS	DAY PHONE
REPRESENTATIVE (IF ANY)	ADDRESS	DAY PHONE
PROPERTY OWNER	ADDRESS	DAY PHONE
CORRESPONDENCE TO BE SENT TO <input type="checkbox"/> APPLICANT <input type="checkbox"/> REPRESENTATIVE <input type="checkbox"/> OWNER		

PROJECT ADDRESS	ASSESSOR'S PARCEL NUMBER(S)	FLOOD HAZARD?
EXISTING LAND USE DESIGNATION OVERFLIGHT	SITE ACREAGE	EXISTING ZONING DISTRICT
		AIRPORT CLEAR APPROACH

APPLICANT/REPRESENTATIVE: I have reviewed this application and the attached material. The information provided is accurate.  Signed _____	PROPERTY OWNER/AUTHORIZED AGENT: I have read this application and consent to its filing.  Signed _____
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TYPE OF APPLICATION		
<input type="checkbox"/> Accessory Dwelling Unit* <input type="checkbox"/> Design Review* <input type="checkbox"/> Mobile Vender Use Permit* <input type="checkbox"/> Setback Adjustment <input type="checkbox"/> Time Extension (Exp. Date: _____) <input type="checkbox"/> Other: _____	<input type="checkbox"/> Annexation/Detachment* <input type="checkbox"/> General Plan Amendment* <input type="checkbox"/> Preliminary Plan Review* <input type="checkbox"/> Similar Use Finding/Zoning Interpretation <input type="checkbox"/> Use Permit*	<input type="checkbox"/> Appeal <input type="checkbox"/> Lot Line Adjustment/Merger* <input type="checkbox"/> Rezone* <input type="checkbox"/> Subdivision (Tentative Map)* <input type="checkbox"/> Variance*
Note: * Also complete supplemental application		

REQUIRED SUPPLEMENTAL INFORMATION	
<input type="checkbox"/> <b>Reproducible Site Plan:</b> Design Review. Lot Line adj. Setback Adjustment. Similar Use Finding. Subdivision. Use Permit. Merger. <input type="checkbox"/> <b>Letter of Justification:</b> General Plan Amendment. Similar Use Finding, Exception to Land Div Standards. Setback adjustment, Variance. <input type="checkbox"/> <b>Building Elevations:</b> Design Review. Use Permit. <input type="checkbox"/> <b>Floor Plan:</b> Adult Oriented Business. Design Review. Preliminary Plan Review. Use Permit. <input type="checkbox"/> <b>Adjoining Owners Map/Mailing List:</b> Appeal. Annexation/Detachment. General Plan Amendment. Rezone. Setback Adjustment. Subdivision. Use Permit. Variance. <input type="checkbox"/> <b>Landscape Plans:</b> Design Review. Use Permit. PD Use Permit	<input type="checkbox"/> <b>Legal Description:</b> Lot Line Adj. Voluntary Merger <input type="checkbox"/> <b>Other:</b> _____

FOR OFFICE USE ONLY			
APPLICATION NO.	PROJECT NO.	DATE RECEIVED	DATE APPLICATION CERTIFIED COMPLETE
FEES RECEIVED/CHECK NO.	CEQA DETERMINATION Exempt      N.D.      M.N.D.      EIR <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		DATE FILED

**MAKE CHECKS PAYABLE TO CITY OF RED BLUFF**

**ENVIRONMENTAL INFORMATION FORM**

Date Filed: \_\_\_\_\_

**General Information:**

1. Name and address of developer/project sponsor: \_\_\_\_\_

2. Address of PROJECT: \_\_\_\_\_

3. Assessor's Parcel Number: \_\_\_\_\_

4. Name, address and telephone number of person to be contacted concerning this project:

\_\_\_\_\_  
\_\_\_\_\_

5. List and describe any other related permits and other public approvals required for this project, including those required by city, regional, state and federal agencies:

\_\_\_\_\_

6. Existing Zoning District: \_\_\_\_\_

7. Proposed use of the site (Project for which this form is filed): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Project Description:**

8. Site size:

9. Square footage:

10. Number of floors to be constructed:

11. Amount of off-street parking provided:

**12. If residential:**

Number of units:

Design of units (i.e. single family, multi-family, etc):

Square footage of each unit:

**13. If commercial:**

Type of use:

Square footage of each building (existing and proposed):

Number of employees (if applicable):

Number of shifts (if applicable):

Hours of operation:

**14. If industrial:**

Type of use:

Square footage of each building (existing and proposed):

Number of employees (if applicable):

Number of shifts (if applicable)

Hours of operations:

**15. If institutional:**

Estimated occupancy:

Type of use:

Square footage of each building (existing and proposed):

Number of employees (if applicable):

Number of shifts (if applicable)

Hours of operations:

16. If the project involves a variance, conditional use, request for annexation, or rezoning application, state this and indicate clearly why the application is required.

17. Attach site plan(s).

***Are the following items applicable to the project or its effects? Discuss below all items checked yes (attach additional sheets as necessary):***

18. Change in existing features of any bays, tidelands, beaches, or hills, or substantial alteration of ground contours.

Yes \_\_\_\_\_ No \_\_\_\_\_

19. Change in scenic views or vistas from existing residential areas or public lands or roads.

Yes \_\_\_\_\_ No \_\_\_\_\_

20. Change in pattern, scale or character of general area of project.

Yes \_\_\_\_\_ No \_\_\_\_\_

21. Significant amounts of solid waste or litter.

Yes \_\_\_\_\_ No \_\_\_\_\_

22. Change in dust, ash, smoke, fumes or odors in the vicinity.

Yes \_\_\_\_\_ No \_\_\_\_\_

23. Change in ocean, bay, lake, stream or ground water quality or quantity, or alteration of existing drainage patterns.

Yes \_\_\_\_\_ No \_\_\_\_\_

24. Substantial change in existing noise or vibration levels in the vicinity.

Yes \_\_\_\_\_ No \_\_\_\_\_

25. Site on filled land or on slope of 10 percent or more.

Yes \_\_\_\_\_ No \_\_\_\_\_

26. Use of disposal of potentially hazardous materials, such as toxic substances, flammables or explosives.

Yes \_\_\_\_\_ No \_\_\_\_\_

27. Substantial change in demand for municipal services (police, fire, water, sewage, etc.),

Yes \_\_\_\_\_ No \_\_\_\_\_

28. Substantially increase fossil fuel consumption (electricity, oil, natural gas, etc.)

Yes \_\_\_\_\_ No \_\_\_\_\_

29. Relationship to a larger project or series of projects.

Yes \_\_\_\_\_ No \_\_\_\_\_

**Environmental Setting:**

30. Describe the project site as it exists before the project, including information on topography, soil stability, plants and animals, and any cultural, historical or scenic aspects. Describe any existing structures on the site, and the use of the structures. Attach photographs of the site. Snapshots or Polaroid photos will be accepted.

31. Describe the surrounding properties, including information on plant – and animals and any cultural, historical or scenic aspects. Indicate the type of land use (residential, commercial, etc) intensity of land use (one-family, apartment houses, shops, department stores etc.) and scale of development (height, frontage, set-back, rear yard, etc.) Attach photographs of the vicinity. Snapshots or Polaroid photos will be accepted.