



DEPARTMENT OF RESOURCE MANAGEMENT

Planning Division

1855 Placer Street, Suite 103

Redding, California 96001

Phone: (530) 225-5532 Fax: (530) 245-6468

Web: shastacounty.gov/planning Email: resourcemanagement@co.shasta.ca.us

Administrative Permit Application Checklist

- [] 1. Application (attached): Original [Planning Permit Master Application](#) form completed (typed or printed and wet signed).
- [] 2. Site Plan: Five (5) copies of a site plan. An 8-1/2" x 11" size paper works well for drawing the property outline. Once the property outline is drawn, please draw the existing and proposed improvements (driveway, well, septic, disposal field, etc.), structures (home, garage, shop, etc.), uses (pasture, orchard, etc.), and features (creeks, drainages, etc.) for the property. Site plan should be to scale, or at least proportionate, write in distances to show location, and label the use of all existing and proposed structures (such as house, mobile home, garage, or barn), as well as all items in the list below. (See attached example for guidance.)
- Make sure the following required information is shown on the plot plan
(*Certain uses may require additional site plan information. See applicable supplemental checklist*)
1. The parcel in its entirety, and if necessary, an inset map to show detail.
 2. All attached and detached structures both existing and proposed, labeled clearly with square footage and use for each.
 3. Setback distances from proposed and existing structures to all property lines.
 4. Property owner's name.
 5. Assessor's Parcel Number(s) for the property.
 6. Address of property.
 7. North arrow and scale.
 8. Acreage of property.
 9. Type and width of easements.
 10. Septic system and well location, both existing and proposed. Also show the distance to the neighbor's septic system and well if less than 90 feet from your property line.
 11. Dedicated septic system expansion/replacement area (if on private on-site septic system).
 12. Roads and driveways, including length and width, turn radius (used for Fire Department and Public Works), and estimated grade.
 13. Drainages and waterways. Include distances from existing and proposed structures and indicate the toe and top of bank including seasonal or dry creek beds, also include any ponds on the parcel or neighbor's parcel.
 14. Location of soil profile pit and percolation test holes (for new septic systems).
 15. Existing and proposed utility locations (electric, cable, phone, water including meter location(s), and sewer connection).
 16. If the proposed building is to be connected to electric, water, or sewer facilities, including on-site wastewater treatment systems, show the location and route of the connection and label whether the connection is above or underground. Nearest fire hydrant.
- [] 3. Five (5) copies of **floor plans** and **elevations** (label square footage and total height) for all projects with proposed new buildings or structures, conversion or new uses of existing structures, and/or additions to or modification of existing structures. (*Certain uses may require additional floor plan information. See applicable supplemental checklist*)

Administrative Permit Application Checklist

- [] 4. Project Background Information Form (attached): **Original plus five (5) copies** completed (typed or printed).
- [] 5. Authorization to Enter Private Property (attached): Signed by property owner or authorized agent.
- [] 6. Authorized Representation (attached): If someone is to submit the application on behalf of the applicant or property owner, for property not owned by the applicant, and/or is to be the representative of the applicant in any other capacity, a notarized statement of agency signed by the property owner authorizing representation by a person or agency must be submitted.
- [] 7. The appropriate non-refundable filing fees.
- [] 8. SCFD Exception for projects requesting reduced setbacks.
- [] 9. Completed Administrative Permit Application Checklist form, noting any items which are not applicable.
- [] 10. F2 Zone District - Provide a completed Flood Hazard Information Request from Department of Public Works (if a building permit is currently in process, provide the building permit application number: _____); If not, submit a request and fee directly to DPW and provide a copy of the completed FHIR or receipt).

Note: For projects which involve or may require installation of a new on-site wastewater treatment system (OWTS) or expansion of an existing OWTS; and/or for projects on lots that area substandard in size or exhibit other physical qualities that may limit suitable area for future replacement of a failed OWTS, soil percolation testing data may be requested as part of the administrative permit application review process. It is advisable to visit or call the Shasta County Environmental Health Division for information about sewage disposal requirements and standards and feedback on your proposal prior to submittal in order to avoid delay during the review process.



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PLANNING DIVISION MASTER APPLICATION

Application No: _____

APPLICANT:

Name: _____ Phone: _____

Mailing Address: _____

City: _____ State/Zip: _____ Email: _____

PROPERTY OWNER:

Name: _____ Phone: _____

Mailing Address: _____

City: _____ State/Zip: _____ Email: _____

AGENT:

Name: _____ Phone: _____

Mailing Address: _____

City: _____ State/Zip: _____ Email: _____

<u>PROJECT ADDRESS (or specific location)</u>	<u>LOT SIZE (Acreage)</u>	<u>ASSESSOR'S PARCEL NUMBER (S)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

TYPE OF APPLICATION

- | | | |
|--|---|--|
| <input type="checkbox"/> Administrative Permit Commercial | <input type="checkbox"/> Use Permit | <input type="checkbox"/> Interim Management Plan |
| <input type="checkbox"/> Administrative Permit Residential | <input type="checkbox"/> General Plan Amendment | <input type="checkbox"/> Planning Director's Zoning Interpretation |
| <input type="checkbox"/> Zone Permit Commercial | <input type="checkbox"/> Zone Amendment | <input type="checkbox"/> Pre Application |
| <input type="checkbox"/> Zone Permit Residential | <input type="checkbox"/> Tract Map | <input type="checkbox"/> General Plan Consistency Determination |
| <input type="checkbox"/> Certificate of Compliance | <input type="checkbox"/> Parcel Map | <input type="checkbox"/> Written Land Use Verification |
| <input type="checkbox"/> Property Line Adjustment | <input type="checkbox"/> Reversion to Acreage | <input type="checkbox"/> Williamson Act Contract |
| <input type="checkbox"/> Variance | <input type="checkbox"/> Airport Land Use | <input type="checkbox"/> Minor Modification: _____ |
| <input type="checkbox"/> Short Term Rental | <input type="checkbox"/> Specific Plan | <input type="checkbox"/> Extension of Time: _____ |
| | <input type="checkbox"/> Reclamation Plan | <input type="checkbox"/> Other: _____ |

STAFF USE ONLY:

Related Applications: _____ Fire District: _____

Adjacent Zoning/GP: N _____ S _____ E _____ W _____

Zoning/General Plan: _____ Project Description: _____

Received By: _____ Date: _____

Generally, Zoning Permits and Residential Administrative Permits will not require the completion of the following sections: "Hazardous Site Review Statement", "Hazardous Materials Disclosure Statement", or "Military Land Use Compatibility", as part of this Application Form. These sections must be completed for all applications that require Planning Commission and/or Board of Supervisors approval.

I/We, the applicant, certify that the following responses are true and correct. Yes No

HAZARDOUS MATERIALS DISCLOSURE STATEMENT

Government Code Section 65850.2 requires the owner or authorized agent for any development project to disclose whether:

1. Compliance will be needed with the applicable requirements of Section 25505 and Article 2 (commencing with Section 25531) of Chapter 6.95 of Division 20 of the Health and Safety Code or the requirements for a permit for construction or modification from the air pollution control district or air quality management district exercising jurisdiction in the area governed by the County.

Yes No

2. The proposed project will have more than a threshold quantity of regulated substance in a process or will contain a source or modified source of hazardous air emissions.

Yes No

HAZARDOUS SITE REVIEW STATEMENT

Government Code Section 65962.5 (f) requires the applicant for any development project to consult specified state-prepared lists and submit a signed statement to the local agency indicating whether the project is located on an identified site. Under the statute, no application can be accepted as complete without this signed statement.

I/We certify that I/We have investigated this development project with respect to the Cal EPA's Cortese List Data Resources webpage and that my/our answers are true and correct to the best of my/our knowledge. My/Our investigation has shown that:

- The project is NOT located on any of the lists compiled pursuant to Section 65962.(e) of the Government Code.
- The project IS located on one of the lists compiled pursuant to Section 65962.(e) of the Government Code. Please specify the list, the date of the list, and the property's regulatory identification number:

MILITARY LAND USE COMPATIBILITY

Using the California Military Land Use Compatibility Analyst website, the owner or authorized agent has determined whether the project is located within 1,000 feet of a military installation, beneath a low-level flight path or within special use airspace as defined in Section 21098 of the Public Resources Code, and within an urbanized area as defined by Government Code Section 65944.

Yes No

BY SIGNING THIS APPLICATION, THE APPLICANT/PROPERTY OWNER AGREES TO DEFEND, INDEMNIFY, AND HOLD THE COUNTY HARMLESS FROM ANY CLAIM, ACTION, OR PROCEEDING BROUGHT TO ATTACK, SET ASIDE, VOID, OR ANNUL THE COUNTY'S APPROVAL OF THIS APPLICATION AND ENVIRONMENTAL REVIEW ASSOCIATED WITH THE PROPOSED PROJECT, AS MORE FULLY DESCRIBED IN CHAPTER 1.18 OF THE SHASTA COUNTY CODE.

APPLICANT/AGENT: I have reviewed this application and attached material. The information provided is accurate.
If other than the owner, this signature must be accompanied by a Shasta County notarized statement of agency form.

Signed: _____ Date: _____

PROPERTY OWNER: I have read this application and consent to its filing. **THIS SIGNATURE IS REQUIRED**

Signed: _____ Date: _____



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Project Information Form for Administrative Permits

(To be completed by Applicant or Representative)

NOTE: Please answer all questions as accurately and completely as possible to avoid delays in processing.

1. Project Title: _____

2. Describe the proposed project in as much detail as possible (attach additional sheets if necessary).

3. Will the project include a proposed residential accessory building(s)?

YES NO If yes, describe *in detail* the activity to be carried out and/or items to be stored in the proposed building(s).

ENVIRONMENTAL SETTING (Use one copy of the site plan to plot any necessary information.)

4. Describe the existing use(s) on the project site (including the type and number of any structures, roads, etc.):

Project Background Information Form for Administrative Permits

5. Indicate the surrounding land uses:

	Vacant	Residential	Agriculture	Commercial	Industrial	Public Facility	Timberland	Other (please specify)
North:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
East:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
South:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
West:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____

6. Describe the existing topography on-site (i.e., landforms - level, rolling hills, or steeply sloped, etc).

7. Are there existing drainage courses or eroded areas on or near the project site (i.e., rivers, creeks, drainage ditches)?

YES NO If yes, please show on site plan and explain below:

8. Will trees or other vegetation be removed to facilitate proposed project?

YES NO If yes, please show area of tree and/or vegetation removal on site plan and explain below:

9. Are there existing structures on the property?

YES NO If yes, please show and identify each structure on the plot plan including all setbacks to property lines and other structures.

10. Will any structures be demolished as a result of the proposed project?

YES NO If yes, please show building to be demolished on site plan.

Project Background Information Form for Administrative Permits

GRADING

11. **How will the building(s) and/or uses be accessed? (check any that apply and show on site plan)**
- Existing Driveway New driveway New encroachment Existing encroachment
 Other _____
12. **Will any alterations be made to existing drainage courses or eroded areas on or near the project site (i.e., rivers, creeks, drainage ditches)?**
- YES NO If yes, please show on site plan and explain below and show on site plan:
- _____
- _____
- _____
13. **For grading, road/driveway construction, installation of culverts etc., complete the following:**
- Amount of cut: _____ cubic yards
- Amount of fill: _____ cubic yards
- Max. height of fill slope: _____ feet
- Max. height of cut slope: _____ feet
- Amount of import/export: _____ cubic yards
- Area of disturbance: _____ square feet
- Number of culverts: _____ Size(s): _____
- Location of borrow or disposal site: _____
14. **Is the project in an MS4 area? YES NO**

SERVICES

15. **Indicate how the following services are provided to your parcel and the availability of services (if services are to be extended for the project or to the building, must be shown on site plan):**
- Electricity:** Utility company provider: _____
- Existing service
- Requires extension of service to site: _____ feet
- Onsite Generation- Specify type: _____
- None

Project Background Information Form for Administrative Permits

- Gas:**
- Utility company provider: _____
 - Existing service
 - Requires extension of service to site: _____ feet
 - None

- Water Supply:**
- Public and/or Community Water System (specify supplier): _____
 - Well
 - Spring
 - Other (specify): _____
 - None

- Sewage Disposal:**
- Public and/or Community Sewage System (specify supplier): _____
 - Septic Tank
 - Other (specify): _____
 - None



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Authorization to Enter Private Property

PROJECT# _____

Government Code Section 65105 authorizes County Planning Division personnel, in the performance of their duties, to enter property and make examinations and surveys which do not interfere with use of the land by those persons lawfully entitled to the possession thereof. Oftentimes other responsible and trustee agencies must also be consulted and given the opportunity to review and comment on proposed projects, necessitating their entry onto the property in order to obtain relevant information needed to process an application in a timely way.

If County and consulting agency personnel are not able to enter the project site/property, significant delays in the processing of the project, particularly the environmental review of the project, could occur and the project applicant may be required to hire consultants to submit information necessary to prepare additional environmental documents addressing the project site.

I have read and understand the foregoing. I authorize the County and other consulting personnel to enter the property located at:

_____ for the purposes of examining the property with respect to the proposed project/land-use, upon making reasonable efforts to give me a 24-hour advance notice of intended entry.

Property Owner/Authorized Agent Signature

Contact Telephone Number



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Notarized Statement of Agency

I, the undersigned, am an owner of a record title interest in the property involved with this proposed project.

I hereby appoint _____ as my agent(s) for purposes of this project, as set forth below.

My agent(s) is/are hereby authorized and empowered to: (check as appropriate)

___ Represent me in all matters relating to the proposed project, except execution of certificates of ownership, offers of dedication, dedications, and agreements to construct improvements;

OR

___ Submit the application(s) and related information to the Planning Division;

___ Represent me before the Planning Commission or Board of Supervisors;

___ Consent to conditions imposed if and when the application(s) is/are approved;

___ Represent me before the Board of Supervisors in case of appeal.

I agree to be bound by all the representations, drawings and statements tendered by my agent(s) to the County of Shasta for purposes of this proposed project as if the same were made by me personally. I further agree to be bound by all the conditions imposed by the County of Shasta on the approval of this proposed project pursuant to State law and the Shasta County Ordinance Code.

I understand that I may revoke the authority granted by this statement at any time by written notice sent to: Department of Resource Management, Planning Division, 1855 Placer Street, Suite 103, Redding, CA 96001.

SIGNATURE OF OWNER(S):

(Note: Signature of Owner(s) must be notarized)

Notarized Statement of Agency

ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California, County of Shasta

On _____ before me, _____, **Notary Public**, personally appeared

_____ who 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.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____

(Seal)