

SHASTA COUNTY DEPARTMENT OF RESOURCE MANAGEMENT  
PLANNING DIVISION

1855 Placer Street, Suite 103, Redding, California 96001 Phone (530) 225-5532 FAX (530) 245-6468

**ZONE AMENDMENT APPLICATION INFORMATION CHECKLIST**

**APPLICATION CHECKLIST:** All of the following listed items must be included when you submit your application (Please be advised that these are modified occasionally without notice):

- One (1) completed original "Master Application" form (attached). Please type or print.
- Twenty (20) copies of Environmental Information Form.
- Twenty (20) copies of Assessor's Plat map (project site outlined).
- Twenty (20) copies of United States Geological Survey (USGS) map (project site outlined, photocopies acceptable).
- All applicable filing fees (Planning, Environmental Health, and County Fire Department).
- One (1) signed original "Authorization to Enter Private Property" form.
- A Statement of Agency form signed by the applicant authorizing representation by a person or agency other than himself (if this representation is intended).
- A site plan or map showing the location of all schools within 1,000 feet of any project facility likely to emit potentially hazardous air contaminants.

**NOTE: If the zone amendment application allows for increased density or use of the site, sewage disposal and water availability information may be required by the Environmental Health Division.**

If the amendment is for a Planned Development or a Commercial Recreation district, the following additional information is required:

- Ten (10) copies of a development plan showing the location of proposed improvements.
- Ten (10) copies of building elevations.
- Ten (10) copies of preliminary grading plan.
- Ten (10) copies of narrative description of all components of the proposed development.
- Ten (10) copies of narrative description of any deviation from adopted standards being requested with justification for any requested deviations from the adopted standards.
- Two (2) copies of a will-serve letter from any water, sewer, or other service district that the site is located in, indicating the availability of service connections.
- Sewage disposal and water availability information (to be submitted to the Environmental Health Division).

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**ENVIRONMENTAL REVIEW PROCEDURE**

The California Environmental Quality Act (CEQA) required an assessment of environmental impact for all projects requiring a permit or other discretionary approval from Shasta County decision-making bodies. The County Environmental Review Officer is responsible for making initial environmental determinations and recommending appropriate environmental findings to the decision-making body for adoption.

After a review of pertinent information, the Environmental Review Officer will make an initial environmental determination. This determination will result in one of the following:

1. An Exemption - This means your project meets criteria for exemption from the requirements of the CEQA. No additional environmental review is required.
2. A Negative Declaration - This means your project will not result in any significant effects on the environment. If conditions (mitigation measures) are applied to assure that no significant effects will occur, the environmental document is called a Mitigated Negative Declaration.
3. An Environmental Impact Report (EIR) - This means your project may have a significant effect on the environment and additional information is necessary to determine appropriate mitigation measures. The Environmental Review Officer may give you an option of preparing a "special study" (i.e., traffic study, archaeological survey, etc.) to address the issue(s) instead of preparing an EIR. If an EIR is to be prepared, it must be prepared by a third party consultant selected through the established consultant selection process. An information sheet describing this process and a current consultant list are available upon request.

Please fill out the attached Environmental Information Form as accurately and completely as possible. Failure to do so may result in delays in processing your application.

If you need assistance or if you have any questions, please contact the Shasta County Planning Division. Copies of CEQA and State EIR Guidelines may be obtained from the Planning Division for a small fee which covers the cost of reproduction.



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Web: [shastacounty.gov/planning](http://shastacounty.gov/planning)  
Email: [scplanning@co.shasta.ca.us](mailto:scplanning@co.shasta.ca.us)

## 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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ENVIRONMENTAL INFORMATION FORM

INITIAL STUDY PART I

(To be completed by the Applicant or Representative)

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

I. PROJECT DESCRIPTION

1. Project Title: \_\_\_\_\_
2. Describe the proposed project in as much detail as is possible: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

II. ENVIRONMENTAL SETTING

(Use one copy of the tentative map or site plan to plot any necessary information)

1. Attach a copy of the appropriate United States Geological Survey (USGS) topographic map, and indicate the location of the proposed project. (The maps are available from sporting goods stores.)

2. Attach photographs of the site, if possible.

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

4. Describe the existing land use on adjacent properties. Also note any major natural or man-made features (i.e., highways, stream channels, etc.):

North: \_\_\_\_\_

East: \_\_\_\_\_

West: \_\_\_\_\_

South: \_\_\_\_\_

5. Describe the existing topography on-site (i.e., landforms, slopes, etc.). Any data on soils and geology would also be helpful:

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6. Describe existing drainage courses or eroded areas on or near the project site i.e., rivers, creeks, drainage ditches):

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7. Describe the existing vegetation on-site and the percentage of the site it covers:

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8. Describe the existing wildlife on-site:

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9. Are there any cemeteries, structures, or other items of historical or archaeological interest on the property?  No  Yes, specify: \_\_\_\_\_

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10. Describe any site alterations which would result from the proposed project specifically address the amount and location of grading, cuts and fills, vegetation removal, alterations to drainage, removal of existing structures, etc.):

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11. Please include a copy of any studies (soils, geology, marketing, etc.) that you had prepared for this project or project site.

III. SERVICES

1. Indicate how the following services will be provided for your project and availability of service.

- a. Electricity: \_\_\_\_\_
- b. Natural Gas: \_\_\_\_\_
- c. Water Supply: \_\_\_\_\_
- d. Sewage Disposal: \_\_\_\_\_
- e. Solid Waste Disposal: \_\_\_\_\_

2. If an extension of service lines is necessary, indicate which service(s) and the distance of the extension(s): \_\_\_\_\_  
\_\_\_\_\_

IV. INDUSTRIAL, COMMERCIAL AND INSTITUTIONAL PROJECTS

1. Total number of employees and number of employees on the largest shift:

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

2. Types of equipment and/or machines to be used:

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

3. Number of on-site parking spaces proposed: \_\_\_\_\_

4. Types of materials, chemicals, and/or products to be processed, packaged, or stored:

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

5. Describe any hazardous substances to be used on the project site:

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

6. Estimate the type and amount of air emissions or odors:

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7. Will the project change the ambient noise levels for adjacent properties?

No  Yes, specify: \_\_\_\_\_

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CERTIFICATION: *I certify that the information provided herein is true and correct to the best of my knowledge and belief.*

\_\_\_\_\_  
Signature of Applicant or Authorized Representative

\_\_\_\_\_  
Date





# DEPARTMENT OF RESOURCE MANAGEMENT

## Planning Division

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Redding, California 96001

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

Web: [shastacounty.gov/planning](http://shastacounty.gov/planning) Email: [resourcemanagement@co.shasta.ca.us](mailto:resourcemanagement@co.shasta.ca.us)

### 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



# DEPARTMENT OF RESOURCE MANAGEMENT

## Planning Division

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

### 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)