



INSTRUCTIONS:

PRIMARY CHECKLIST and DEEMED COMPLETE FOR CASE FILING

Case No. _____

Staff _____

Environmental Case No. _____

Date _____

DEPARTMENT OF CITY PLANNING APPLICATION FORM

Application Type _____

(Zone Change, Plan Amendment, Zone Variance, Conditional Use, etc.)

1. Project Location

Comp.	Incomp.	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Street address in ZIMAS or BOE Referral form if address is not in ZIMAS

Legal description (*including all contiguously owned parcels*)

Assessor's Parcel Number(s)

Comp.	Incomp.	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Lot area

Lot dimensions

Total project size

2. Project Description

Comp.	Incomp.	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Present and proposed use, especially if units are to be demolished.

Description of project such as existing and proposed number of units, parking spaces, seats, hours of operation, height, use, scope and/or operation of the proposed project etc.

Existing Site Conditions

Proposed Project information

Housing Component Information

Public Right-of-Way Information

3. Action Requested

Comp. Incomp. N/A

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Authorizing Code Section |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Code Section from which deviation is required, if applicable |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Actions Request, Narrative of what is required verses what is requested |

4. Related Department of City Planning Cases

Comp. Incomp. N/A

- | | | | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | List of previous, recent or pending case numbers related to the project. |
|--------------------------|--------------------------|--------------------------|--|

5. Related Documents/Referrals

Comp. Incomp. N/A

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Specialized Requirement forms.
<input type="checkbox"/> Findings or Justification for <u>each</u> requested action |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Geographic Project Planning Referral |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Citywide Design Guidelines Compliance Review Form |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Affordable Housing Referral Form |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Mello Form |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Unpermitted Dwelling Unit (UDU) Inter-Agency Referral Form |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | HPOZ Authorization Form |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Management Team Authorization |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Expedite Fee Agreement |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Department of Transportation (DOT) Referral Form |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Bureau of Engineering (BOE) Planning Case Referral Form (PCRf) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Order to Comply |

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Building Permits and Certificates of Occupancy
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hillside Referral Form
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Low Impact Development (LID) Referral Form (Storm water Mitigation)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proof of Filing with the Housing and Community Investment Department
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are there any recorded Covenants, affidavits or easements on this property?

6. Project Team Information.

Comp.	Incomp.	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Applicant (Note: The Applicant cannot be the Representative unless the Representative has a vested interest in the project)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Owner
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Representative
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other

7. Property Owner Affidavits

Comp.	Incomp.	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ownership Disclosure if property is owned by LLC, Corporation, partnership or Trust <ul style="list-style-type: none"> <input type="checkbox"/> Agent for Service of Process <input type="checkbox"/> Names and addresses of principal owners (25% interest or greater) <input type="checkbox"/> Copy of current corporate articles, partnership agreement, or trust document as applicable
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Letter of Authorization from owner granting Power of Attorney to the Signatory (if MLU not signed by owner) <u>Notarized</u> LOA preferred if no supporting documentation to compare signature.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grant Deed (always required for CDP's)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Multiple owners
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Copy of Lease (if applicant is lessee of entire site)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Notarized

Note: If there are multiple parcels and/or owners, all owners need to give consent.

8. Applicant Declaration

Comp. Incomp. N/A

Owner

Applicant **(Note:** The Applicant cannot be the Representative unless the Representative has a vested interest in the project)

Representative

9. (Optional) Neighborhood Contact Sheet.

Comp. Incomp. N/A

Neighborhood Contact Sheet

Supplemental Filing Requirements

CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA)

Comp. Incomp. N/A

Categorical Exemption recommended _____ - _____ - _____

Environmental Assessment Form _____ - _____ - _____

Reconsideration of: _____ - _____ - _____

Existing ENV: _____ - _____ - _____

EIR _____ - _____ - _____

Additional documentation and information to be attached to all Department of City Planning Applications.

1. Photographs

Comp.	Incomp.	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Neighboring properties also, on 8 ½" x 11" paper

Index map showing from which direction photos were taken

2. Vicinity Map

Comp.	Incomp.	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Location map showing surrounding area (*should minimally show nearest Collector Street*)

3. Radius Maps (as applicable)

Comp.	Incomp.	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Ownership Map—must include all contiguously owned properties, keyed to match numbers on the ownership list (*abutting notification cases only*)

Radius Map—must include all contiguously owned properties , keyed to match numbers on the ownership and occupant lists

Original plus seven (7) copies

8 ½" x 11" copy

Dated within 180 days of submittal

Existing Plan, Proposed Plan and Existing Zoning Maps (*GPA cases only*)

8½" x 11" size maps (*color preferred, old ZIP-a-tone acceptable, individually prepared—not just ZIMAS printouts*)

Five (5) copies each

4. Zimas Profile Report

Comp.	Incomp.	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

One (1) copy of Parcel Profile Report selecting all contiguously owned properties

One (1) copy of ZIMAS aerial view

5. Public Noticing

Comp. Incomp. N/A

- | | | | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | BTC receipt number _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Perjury affidavit (<i>never waived</i>) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Labels of abutting property owners (<i>never waived</i>) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Copy of abutting property owners list (<i>never waived</i>) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Copy of owners and occupants list (for projects requiring radius maps only) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Applicant, owner and representative must be on all labels and copies (cannot be handwritten) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Dated within 180 days of submittal |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Posting to be done by: <input type="checkbox"/> BTC <input type="checkbox"/> Applicant or Representative |

6. Plans Required (each folded to 8 ½" x 11")

Comp. Incomp. N/A

- | | | | |
|--------------------------|--------------------------|--------------------------|--|
| | | | Size and number of all Plans |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | One (1) full size on 24" x 36" paper |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Four (4) reduced size on 11" x 17" paper, (APC cases 6 copies, CPC cases 11 copies) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | One (1) reduced size on 8 ½" x 11" paper (<i>for Expedite Processing cases only</i>) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Plot Plan |
| | | | <input type="checkbox"/> Includes all contiguously owned parcels (<i>identify which parcels are not a part of project</i>) |
| | | | <input type="checkbox"/> Summary of information table |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Floor Plans |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | For CUB cases, Floor Plans include # of seats, alcohol storage area and outdoor seating areas |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Elevations |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Color renderings of project in conjunction with landscaping (all PPB cases) |

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sections (<i>if project involves multiple levels or subterranean parking or basement floors</i>)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Landscape Plan (<i>for projects with 6+ new units, include Open Space area and summary table</i>)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Trees

7. Duplicate Case Files

Comp.	Incomp.	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Certified Neighborhood Council in an unsealed, postage affixed envelope with Public Counter return address (<i>for all cases</i>)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	California Coastal Commission (<i>for CDP's only</i>)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LAPD (<i>for CUB's only</i>)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Council Office (<i>for CUB's only</i>)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire Department (<i>for Amateur Radio Antenna only</i>)

8. Electronic Copy of Application Materials

Comp.	Incomp.	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Copy of significant documents on flash drive or CD (<i>PDF format only</i>)

Staff: Please check the appropriate box.

- Your project has been accepted for review to determine completeness for filing. The review will be completed within 30 days of the date of this form. The assigned planner will contact you if additional information or corrections are required.

Staff:
Date:

- There are portions of your application that have been determined to be "incomplete" for filing purposes, those items have been checked incomplete above. Please provide the completed/corrected items to the Department of City Planning Department as soon as possible in order to continue processing your request.

Staff:
Date:

- Your project has been reviewed for completeness for filing purposes. Your corrections and revised documents have been accepted and your project is deemed complete for filing purposes. The entitlement request will now be process as requested.

Staff:
Date:

Applicant name

Company/Firm: _____
Address: _____ Unit/Space Number: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ E-mail: _____

Representative name

Company/Firm: _____
Address: _____ Unit/Space Number: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ E-mail: _____

Owner name

Company/Firm: _____
Address: _____ Unit/Space Number: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ E-mail: _____

STAFF REQUIREMENTS

1. PCTS Entry

Complete

- Project Description (*200 character maximum*) field must include relevant information such as:
 - Existing/Proposed use
 - Existing/Proposed zone
 - Existing/Proposed number of units
 - Existing/Proposed floor area
 - Existing/Proposed height
 - Existing Proposed number of parking spaces
 - Existing/Proposed number of seats/hours (*for food/beverage establishments*)
 - Affordable Housing Data (Including Type and Income Level).
- Requested Entitlement (*2,000 character maximum*) field must include a list of all requested entitlements
- Input Housing Dwelling Unit Count Data (Including non-residential floor area).
- Upload digital attachments to E-Submit

2. Application Acceptance

Complete

- For Priority Housing Project case filings, affix Priority Housing Project sticker on folder
- For Expedite Processing case filings, affix red Expedite stickers on case folders and MLUA
- For CUB filings, include Date Information and LAPD notification sticker on inside cover of case file
- For Coastal Development Permit filings, include "All Areas" and Specified Coastal Zone labels
- Photocopy Neighborhood Council packet envelope and insert in case file
- Give posting instructions to applicant if BTC is not posting
- Invoice and receipt number recorded in PCTS
- Provide a copy of the Complete/Incomplete form to the applicant/representative and place a copy in the file.