



City of Del Mar
 Department of Planning and Community Development
 1050 Camino del Mar
 Del Mar, CA 92014

Phone: 858-755-9313 Fax: 858-755-2794
 Hours: M-TH 1:00 pm – 5:30 pm
 FRI 1:00 pm – 4:30 pm
 Web: www.delmar.ca.us

UNIFORM DEVELOPMENT APPLICATION

PROPERTY INFORMATION:

Property Address: _____
 Assessor Parcel No. (APN): _____
 Zoning: _____ Overlay Zone(s): _____
 Work proposed in the public right-of-way: No Yes, note location: _____

OWNER / APPLICANT:

Name(s): _____
 Mailing Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Email: _____

AUTHORIZED REPRESENTATIVE: (LETTER OF AUTHORIZATION REQUIRED)

Name: _____
 Type: Architect/Designer Contractor Consultant Engineer Other: _____
 Del Mar Business License No.: _____
 Mailing Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Email: _____

PROJECT DESCRIPTION (BRIEF):

PERMITS, ACTIONS AND FEES TO BE PREPARED BY STAFF ONLY:

<u>Permits:</u>	<u>Fee</u>	<u>Actions:</u>	<u>Fee</u>
<input type="checkbox"/> ADR Administrative Design Review	_____	<input type="checkbox"/> ADU Accessory Dwelling Unit	_____
<input type="checkbox"/> Minor <input type="checkbox"/> Major		<input type="checkbox"/> COC Certificate of Compliance only	_____
<input type="checkbox"/> ASR Administrative Sign Review	_____	<input type="checkbox"/> CPP Citizens' Participation Program	_____
<input type="checkbox"/> BA Boundary Adjustment with COC	_____	<input type="checkbox"/> D Zoning Determination of Allowable Use	_____
<input type="checkbox"/> BAN Banner Permit	_____	<input type="checkbox"/> DA Development Agreement	_____
<input type="checkbox"/> BP Charitable Bingo Game Permit	_____	<input type="checkbox"/> DA <input type="checkbox"/> Amendment	
<input type="checkbox"/> CDP Coastal Development Permit	_____	<input type="checkbox"/> DSC Determination of Substantial Conformance	_____
<input type="checkbox"/> CUP Conditional Use Permit	_____	<input type="checkbox"/> EA Environmental Assessment	_____
<input type="checkbox"/> CUP <input type="checkbox"/> Modification		<input type="checkbox"/> Initial Study <input type="checkbox"/> EIR	
<input type="checkbox"/> DP Demo Permit	_____	<input type="checkbox"/> GPA General Plan Amendment	_____
<input type="checkbox"/> DRB Design Review Permit	_____	<input type="checkbox"/> HZ Horizontal Zoning Relief	_____
<input type="checkbox"/> < 500 sf <input type="checkbox"/> > 500 sf		<input type="checkbox"/> I Zoning Code Interpretation	_____
<input type="checkbox"/> Misc: _____		<input type="checkbox"/> ILPF In-Lieu Parking Fee Program	_____
<input type="checkbox"/> DRB-S Design Review Sign Permit	_____	<input type="checkbox"/> LCPA Local Coastal Program Amendment	_____
<input type="checkbox"/> EP Encroachment Permit	_____	<input type="checkbox"/> OPP Off-Hours Public Parking	_____
<input type="checkbox"/> Short-term <input type="checkbox"/> Long-term		<input type="checkbox"/> PLZ Plaza Tenant Improvement Review	_____
<input type="checkbox"/> ESP Emergency Shelter Permit	_____	<input type="checkbox"/> SP Specific Plan	_____
<input type="checkbox"/> FDP Floodplain Development Permit	_____	<input type="checkbox"/> SP <input type="checkbox"/> Amendment	
<input type="checkbox"/> Without hardship relief		<input type="checkbox"/> SV Street Vacation	_____
<input type="checkbox"/> With hardship relief		<input type="checkbox"/> TPM Tentative Parcel Map	_____
<input type="checkbox"/> IB Emergency Beach Barrier	_____	<input type="checkbox"/> ≤ 4 New Lots <input type="checkbox"/> Condo Conversion	
<input type="checkbox"/> LC Land Conservation Permit	_____	<input type="checkbox"/> TTM Tentative Tract Map	_____
<input type="checkbox"/> LC <input type="checkbox"/> Administrative		<input type="checkbox"/> ≥ 5 New Lots <input type="checkbox"/> Condo Conversion	
<input type="checkbox"/> MV Mobile Vending Operations Permit	_____	<input type="checkbox"/> TVS Trees, Scenic Views and Sunlight	_____
<input type="checkbox"/> NOI Notice of Intent	_____	<input type="checkbox"/> V Variance	_____
<input type="checkbox"/> NRP News Rack Permit	_____	<input type="checkbox"/> ZA Zoning Code Amendment	_____
<input type="checkbox"/> P Parking Permit	_____	<input type="checkbox"/> Other: _____	_____
<input type="checkbox"/> Off-site <input type="checkbox"/> Shared			
<input type="checkbox"/> RDP Redevelopment Permit	_____	Related Fees:	
<input type="checkbox"/> SEC Sign Encroachment Permit	_____	<input type="checkbox"/> Community (General) Plan/Zoning Update	_____
<input type="checkbox"/> SCP Sidewalk Café Permit	_____	<input type="checkbox"/> Public Notice	_____
<input type="checkbox"/> SPP Shoreline Protection Permit	_____	<input type="checkbox"/> Engineering Review Fees	_____
<input type="checkbox"/> SSP Seawall Setback Permit	_____		
<input type="checkbox"/> TRP Tree Removal Permit	_____	TOTAL FEES DUE:	
<input type="checkbox"/> TUP Temporary Use Permit	_____		
		\$ _____	

Primary File No.: _____

Additional File Nos.: _____

