



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>	<i>Fee</i>	<u>Actions:</u>	<i>Fee</i>
<input type="checkbox"/> ADR Administrative Design Review	_____	<input type="checkbox"/> COC Certificate of Compliance only	_____
<input type="checkbox"/> Minor <input type="checkbox"/> Major		<input type="checkbox"/> CPP Citizens' Participation Program	_____
<input type="checkbox"/> ASR Administrative Sign Review	_____	<input type="checkbox"/> D Zoning Determination of Allowable Use	_____
<input type="checkbox"/> BA Boundary Adjustment with COC	_____	<input type="checkbox"/> DA Development Agreement	_____
<input type="checkbox"/> BAN Banner Permit	_____	<input type="checkbox"/> DA <input type="checkbox"/> Amendment	
<input type="checkbox"/> BP Charitable Bingo Game Permit	_____	<input type="checkbox"/> DSC Determination of Substantial Conformance	_____
<input type="checkbox"/> CDP Coastal Development Permit	_____	<input type="checkbox"/> EA Environmental Assessment	_____
<input type="checkbox"/> CUP Conditional Use Permit	_____	<input type="checkbox"/> Initial Study <input type="checkbox"/> EIR	
<input type="checkbox"/> CUP <input type="checkbox"/> Modification		<input type="checkbox"/> GPA General Plan Amendment	_____
<input type="checkbox"/> DP Demo Permit	_____	<input type="checkbox"/> HZ Horizontal Zoning Relief	_____
<input type="checkbox"/> DRB Design Review Permit	_____	<input type="checkbox"/> I Zoning Code Interpretation	_____
<input type="checkbox"/> < 500 sf <input type="checkbox"/> > 500 sf		<input type="checkbox"/> ILPF In-Lieu Parking Fee Program	_____
<input type="checkbox"/> Misc: _____		<input type="checkbox"/> LCPA Local Coastal Program Amendment	_____
<input type="checkbox"/> DRB-S Design Review Sign Permit	_____	<input type="checkbox"/> OPP Off-Hours Public Parking	_____
<input type="checkbox"/> EP Encroachment Permit	_____	<input type="checkbox"/> PLZ Plaza Tenant Improvement Review	_____
<input type="checkbox"/> Short-term <input type="checkbox"/> Long-term		<input type="checkbox"/> SDU Second-Dwelling Unit	_____
<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.: _____

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1) Is development proposed on a vacant parcel? No Yes

2) How many dwellings are currently on the parcel? _____

3) Will the proposed project result in NEW or a CHANGE to the following:

Site floor area ratio (FAR): <input type="checkbox"/> Yes <input type="checkbox"/> No	Fencing / walls: <input type="checkbox"/> Yes <input type="checkbox"/> No
Roof structures: <input type="checkbox"/> Yes <input type="checkbox"/> No	Grading (outside footprint): <input type="checkbox"/> Yes <input type="checkbox"/> No
Exterior walls: <input type="checkbox"/> Yes <input type="checkbox"/> No	Foundation: <input type="checkbox"/> Yes <input type="checkbox"/> No
Use of the site / structure: <input type="checkbox"/> Yes <input type="checkbox"/> No	Landscaping: <input type="checkbox"/> Yes <input type="checkbox"/> No
Intensification of use: <input type="checkbox"/> Yes <input type="checkbox"/> No	Hardscape / paving: <input type="checkbox"/> Yes <input type="checkbox"/> No

4) Based on the information provided above, please provide a detailed project description and explain the scope of the entire project, including the type of use and structure(s) proposed, number of stories, building materials, grading, fencing and/or hardscape improvements (attach additional sheets if necessary).

5) Is the parcel involved in any current code enforcement cases?

No Yes, describe violation: _____

6) To the best of your knowledge, answer the following supplemental questions (staff can assist if needed):

Is the parcel located within the appeal jurisdiction of the California Coastal Commission?

No Yes

Is the parcel located in/adjacent to a wetland, floodplain, beach, wildland urban area, or other sensitive area?

No Yes, describe location: _____

Does the project involve maintaining any existing structural or use non-conformities on the site such as setbacks, multiple accessory structures, floor area, insufficient parking, etc.? If so, please describe:

Are there other active projects currently in construction on the site? If so, please describe:

PROPERTY OWNER AND AUTHORIZED REPRESENTATIVE CERTIFICATIONS

I certify that I am presently the legal owner of the above-described property. I, the undersigned owner (and, when applicable, the authorized agent acting on behalf of the owner) of the property herein described, hereby make application for approval of the plans submitted and made a part of this application in accordance with the provisions of the City of Del Mar ordinances. I understand that during review of the project, additional permits and/or actions may be required. I hereby certify that the information given is true and correct to the best of my knowledge and belief.

I understand that the requested approval is for my benefit (or that of my principal). Therefore, if the City of Del Mar grants the approval, with or without conditions, and that action is challenged by a third party, I will be responsible for defending against this challenge. I, therefore, agree to accept this responsibility for defense at the request of the City and also agree to defend, indemnify and hold the City of Del Mar harmless from any costs, claims or liabilities arising from the approval, including, without limitation, any award of attorney’s fees that might result from the third party challenge.

I acknowledge that plan sets may be reproduced and distributed to City representatives and members of the public for project review purposes only.

I grant permission to the City to conduct site visits necessary to investigate the proposed project.

PROPERTY OWNER SIGNATURE PROPERTY OWNER NAME (PRINT) DATE

PROPERTY OWNER SIGNATURE PROPERTY OWNER NAME (PRINT) DATE

REPRESENTATIVE SIGNATURE REPRESENTATIVE NAME (PRINT) DATE



City of Del Mar



LETTER OF AUTHORIZATION TO SUBMIT A PROJECT

_____ is authorized by me/us, as
Owner's Representative - Print Name
 the owner(s) of the property located at _____, to
 submit an application to and obtain permits from the City of Del Mar Planning and Community
 Development Department and to act on my/our behalf to process that application. This
 authorization will be valid until revoked by me/us in writing.

Dated: _____

Property Owner Signature

Property Owner Name*

Dated: _____

Property Owner Signature

Property Owner Name

* If the property is under ownership by a Company, Trust, or Limited Liability Corporation (LLC), attach the authorizing document(s) listing the individual(s) authorized to sign on behalf of that entity.

2. Describe the purpose or reason for the proposed deviations from the approved plans.

3. Will the proposed project modification involve work within a public right-of-way? If so, please describe the extent.

Owner or Owner's Agent Certification

I certify that the information provided on this questionnaire is accurate to the best of my knowledge. I understand that additional information may be needed to process my request and, if any of the information provided herein is found to be in error or deficient, the application may not be deemed complete, may be rejected, or may constitute grounds for revocation of any approval issued.

Signature (Owner or Agent)

Date

Print Name