City of Dixon Community Development Dept 600 East A Street Dixon, CA 95620



Planning Division
(707) 678-7000
www.cityofdixon.us
PlanningDepartment@cityofdixon.us

## PLANNING APPLICATION

FOR PLANNIN	NG OFFICE USE ONLY			
Filing Date:	Project #:			
Filing Fees:	Receipt #:			
Application Type:	Application Type (Cont'd):			
Accessory Dweling Unit  Pre Application Determination of Permitted Use Time Extension Conditional Use Permit Temp Use Permit Design Review Sign Permit Sign Program Modification Variance Other  Level of Review Staff Planning Commission City Council	Tentative Map (4 or fewers lots) Tentative Map (5+ lots/Condo Map Vesting Tentative Map Lot Line Adjustment/Consolidation Certificate of Compliance Planned Development Rezoning (Map Amendment) Rezoning (Text Amendment) Pre Zoning Annexation General Plan Amendment  Type of Project Residential Non-Residential Mixed Use			
	Assessor's Parcel Number(s):			
Building Floor Area (Existing):	Site Area (acres)			
Building Floor Area (Proposed):	Lot Coverage (Proposed):			
Zoning:General Plan:				

## **CONTACT INFORMATION**

Applicant Name:	(	Company:		
Applicant's Mailing Address:				
City:	State:	Zip Code:		
Phone:	Cell:	E-mail:		
Applicant's Signature:		Date:		
Property Owner:		Company <u>:</u>		
Mailing Address:				
City:	State:	Zip Code:		
Phone:	Cell:	E-mail:		
Prop Owner's Signature:		Date:		
additional sheets if necessary	r):	use, modification, and/or variance (attac		

#### **NOTICE TO ALL APPLICANTS:**

- 1. Applications submitted for review will be processed in accordance with Section 65941 of the California Government Code.
- 2. All forms must be completely filled out and signed, all fees must be paid, and supplemental information provided before the application will be deemed complete and processed. Supplemental information that must be submitted with this application form is listed in the attached submittal requirements by type of application.
- 3. Filing fees are non-refundable.
- 4. Submitting an application is not a guarantee of approval. Approval of projects is contingent on meeting required findings or other requirements of the General Plan, Zoning Ordinance or Specific Plan or Municipal Code.
- 5. The State of California requires the payment of a fee to the State Department of Fish and Wildlife, as a condition for filing Notices of Determination required by the California Environmental Quality Act (Stats. 1990, ch 1706). The fee as of 2024 is \$2,916.75 for a Negative Declaration/Mitigated Negative Declaration, or \$4,051.025 for an Environmental Impact Report (EIR). These fees are adjusted annually by the State of California. A \$50 administrative charge will also be collected with the fee. <a href="#">Checks shall be addressed to Solano County.</a>

#### INDEMNIFICATION

To the fullest extent permitted by law, Applicant agrees to defend, indemnify, and hold harmless the City and its officers, agents, contractors, consultants, and employees (collectively, "City") from any and all liability, loss, suits, claims, damages, costs, judgments and expenses (including attorney's fees and costs of litigation), including any appeals thereto (collectively, "proceeding") brought against the City with regard to any approvals issued in connection with the application(s) by the City, including any action taken pursuant to the California Environmental Quality Act. Applicant shall execute an indemnification agreement memorializing this indemnification requirement.

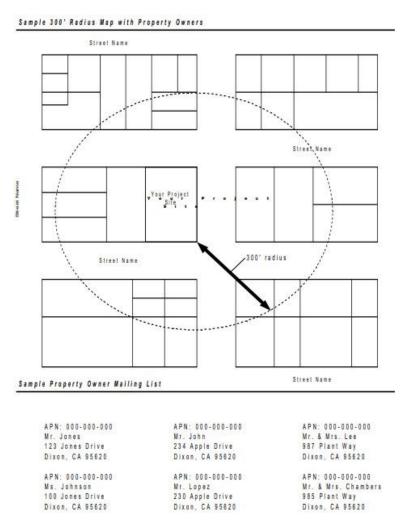
agreement memorianzing this macinimication requirement.	
Applicant's initials	Date:
CERTIFICATION: I hereby certify that I am the applicant agent named herein and that and regulations with respect to preparing and filing this petition for the statements and answers contained herein and the information and accurate to the best of my knowledge and belief.	or discretionary action, and that
Applicant's Signature:	Date:

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General Planning Application Form (Rev 11/2023)

### MAILING NOTICE REQUIREMENTS

The City of Dixon requires that all applications submitted for Staff or Planning Commission review shall include a list of the current owners of property within 300 feet of the project site (500 feet for Design Review applications). The list must include the property owners' names, addresses, and Assessor's Parcel Number. Preparation, verification, and submission of the property owners list is your responsibility as the applicant. The list must be certified by a title insurance company as being from the most recent County tax roll.

Following are the requirements for mailing lists. Your application cannot be deemed complete without the mailing list, labels, and base map. Please submit base maps at the same scale used by the Assessor's Office and a copy of the Assessment Roll. On the base map, the subject property must be outlined in red and noted as the subject parcel(s). An additional red line must be drawn at a 300 foot radius (500 feet for Design Review applications) from the subject parcel(s). The figure below shows how the maps should be prepared and how the 300/500 foot radius as determined.



If your application requires a public hearing, you should be present at the meeting to briefly explain your request and answer questions. Failure to attend may delay the review process and require that your application be continued. If you desire notice of the meeting to be sent to parties other than the applicant and property owner, please include their name(s) and address(es) on the mailing list.

# COMMUNITY DEVELOPMENT DEPARTMENT HAZARDOUS WASTE AND SUBSTANCES STATEMENT

Pursuant to Section 65962.5 (f) of the California Government Code, an applicant must submit the Following Statement before City staff can determine if your development application is complete. The completed statement needs to accompany your project application at the time of its submittal.

A copy of the List of Hazardous Waste and Substance Sites is available for review at the Planning Division

PART I Name of Project:			
Name of Applicant			
Is the project identified on the development Section 65962.5 of the Government			piled pursuant to
	□ Yes	□ No	
PART II			
Assessor's Parcel Number:			
Specify the list consulted pursuant	to Section 65962.	5:	
Regulatory Identification Number:			
Date of List:			
PART III			
Please sign and date that the inform	nation above is tru	e and correct.	
Applicant Signature:		Date:	