



# LAND USE/ZONING APPLICATION FORM

**DEPARTMENT USE ONLY**

**APPLICATION NUMBER:** \_\_\_\_\_ - \_\_\_\_\_      **CDD FEE COLLECTED:**    \$ \_\_\_\_\_

**APPLICATION TYPE(S)**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Abandonment, Street                  | <input type="checkbox"/> Home Occupation Permit         | <input type="checkbox"/> SB-9 Application           |
| <input type="checkbox"/> Abandonment, Easement                | <input type="checkbox"/> Historic Design Review         | <input type="checkbox"/> Sign Plan                  |
| <input type="checkbox"/> Appeal (Subdivision or Land Use)     | <input type="checkbox"/> Lot Line Adjustment            | <input type="checkbox"/> Specific Plan/Master Plan  |
| <input type="checkbox"/> Certificate of Compliance            | <input type="checkbox"/> Minor Modification             | <input type="checkbox"/> Temporary Use Permit       |
| <input type="checkbox"/> Comprehensive Sign Program           | <input type="checkbox"/> Outdoor Dining Permit          | <input type="checkbox"/> Tentative Map              |
| <input type="checkbox"/> Development Code Amendment           | <input type="checkbox"/> Planned Development            | <input type="checkbox"/> Use Permit                 |
| <input type="checkbox"/> Development Permit                   | <input type="checkbox"/> Preliminary Application Review | <input type="checkbox"/> Use Permit, Minor          |
| <input type="checkbox"/> Extension (w/ Original)              | <input type="checkbox"/> Project Amendment              | <input type="checkbox"/> Variance/Historic Variance |
| <input type="checkbox"/> Final Map/Parcel Map                 | <input type="checkbox"/> Recorded Map Modification      | <input type="checkbox"/> Zoning Clearance           |
| <input type="checkbox"/> General Plan/Specific Plan Amendment | <input type="checkbox"/> Reversion to Acreage           | <input type="checkbox"/> Zoning Verification        |

SUBDIVISION \_\_\_\_\_ UNIT# \_\_\_\_\_ LOT# \_\_\_\_\_

ZONING \_\_\_\_\_ GENERAL PLAN DESIGNATION \_\_\_\_\_

**APPLICANT TO COMPLETE**

**Please submit required checklist for each application type:** <http://www.townoftruckee.com/planning-application-forms>

APPLICANT NAME(S) \_\_\_\_\_

APPLICANT EMAIL \_\_\_\_\_ PHONE \_\_\_\_\_

APPLICANT ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_ ZIP \_\_\_\_\_

AGENT NAME(S) \_\_\_\_\_

AGENT EMAIL \_\_\_\_\_ PHONE \_\_\_\_\_

AGENT ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_ ZIP \_\_\_\_\_

PROPERTY OWNER NAME(S) \_\_\_\_\_

PROPERTY OWNER EMAIL \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY OWNER ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_ ZIP \_\_\_\_\_

PROJECT NAME \_\_\_\_\_

PROJECT ADDRESS \_\_\_\_\_ ASSESSOR'S PARCEL NO. \_\_\_\_\_

PROJECT DESCRIPTION/REQUEST \_\_\_\_\_

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**I hereby certify that I:** (i) am the owner of record of the property(ies) on this application; or (ii) have been authorized to sign and submit this application on behalf of the partnership, corporation, LLC or trust which is the owner of record, as evidenced by the documents attached hereto. If the property is owned by more than one individual, I certify that all parties have agreed to the submission of this application.

OWNER'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_