Residential Care Home - Application

Applicant Name::
Mailing Address:
Mailing Address:
Property Owner Property Owner's Address
Property Owner's Address
Property address Name of the Care Home: Describe Residential Care Home Assessor's Map:
Name of the Care Home Describe Residential Care Home Assessor's Map:
Assessor's Map: Tax Lot: Lot Size: Zoned:
Assessor's Map:
House square footageNumber of BedroomsBathrooms Number of persons in household Number of persons in Residential Care Total number of Employee(Number of Employees Per Shift Parking Spaces Provided (not including on-street): Water Source(s) Sewage Disposal Access:
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 Additional fees will be charged for reviews required by professional planners and/or engineers, if required for approval. The fees charged shall be the actual cost of providing that service.
 A building permit may be required from the Department of Building and Safety. Licensing, Access or environmental permits may be required from other county, state or federal agencies. <u>Failure to comply with terms of this permit will result in revocation.</u>
I hereby certify that the contents of this application are correct and do assume responsibility for all applicable laws, ordinances, codes and agree to comply with the condition of this permit:
Applicant Signature:Date
\$ Rect# C/Ck Date Paid 5/07

PLANNING USE:
Lot Square Footage:
X 50% Lot Coverage (SFR - Structures Allowed)
Proposed Structure Sq Ft
Total Sq Ft. of all Structures
Available Sq. Ft. for Future
Available Sq. Ft. for Future Setbacks Required: Front (20ft) Side (5ft) Side (5ft) Rear (10ft)
Parking Spaces Required Available
Easements
Comments:
PUBLIC WORKS USE:
Commercial EG/LI MFR SFR P
Lot Square footage
Setbacks: Front Side Rear
Parking Spaces Proposed Parking Spaces Required
Design Standards
Water Connection: Existing: Proposed: Location:
Sewer Connection: Existing:Proposed:Location:
. Drainage:
Backflow prevention device required: Well: □yes □no Irrigation/Sprinker system: □yes □no
Grease Trap: □yes □no
Easement
Improvement agreement Driveway culvert Driveway apron Additional Comments:
Driveway culvertDriveway apron
Additional Comments:
Conditions of Approval: 1) Driveway must conform to Municipal Code 12.08.040 A - E
In: Wiel site shoot date Pro
Initial site check date By:
Approved by: Date:
Final City inspection dateBy:
Final City inspection dateBy:

THIS PERMIT WILL EXPIRE ONE YEAR AFTER ISSUANCE

Contact City Hall after final inspection by the Building & Safety Department.