



COMMUNITY DEVELOPMENT DEPARTMENT

1700 W. 162nd Street, Gardena CA 90247

TEL: (310) 217-9530 FAX: (310) 217-9698

Development Application

| | | |
|---------------------------------|-----------|-----------|
| Project Address | | |
| Book/Parcel No.(s) | Land Area | |
| Legal Owner | | Phone No. |
| Address | Email | Fax No. |
| Applicant Name(s) | | Phone No. |
| Address | Email | Fax No. |
| Applicant's Rep. Name(s) | | Phone No. |
| Address | Email | Fax No. |

1. TYPE OF DEVELOPMENT

- | | | |
|--|---|--------------------------------------|
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Site Plan Review | <input type="checkbox"/> Zone Change |
| <input type="checkbox"/> Mergers/Lot Line Adjustment | <input type="checkbox"/> Tract Map | |
| <input type="checkbox"/> Parcel Map | <input type="checkbox"/> Variance | |

2. PROJECT DESCRIPTION/REQUEST (Describe on additional sheets and attach to this form)

3. AUTHORIZATION (Names /signatures of all persons having an interest in the property whose consent is required to authorize filing of this application)

| | | |
|------------------|-----------|-----------|
| Legal Owner Name | Name | Name |
| Address | Address | Address |
| Signature | Signature | Signature |

4. BURDEN OF PROOF is on the applicant

Community Development Department Staff will assist anyone who desires to file an application with the City. Such assistance, however, must not be interpreted as encouragement to the applicant regarding the outcome. The burden of proof is upon the Applicant to justify findings required for the agency or body authorized to grant approval in this matter.

The Applicant understands also that each matter must be carefully investigated and that after a thorough investigation and analysis of the project has been completed, or the public hearing has been held, Staff's recommendation may be contrary to the original position taken in preliminary discussions.

Staff is not permitted to assist the Applicant or any opponents to an application in preparing arguments for or against the request.

I have read the foregoing and understand that I HAVE THE BURDEN OF PROOF in the matter arising under the application made by me. I further understand and agree that the application shall not be deemed complete until such time that all materials required for application have been submitted in proper and accurate form with the Community Development Department.

| | | |
|------|-----------|------|
| Name | Signature | Date |
|------|-----------|------|

TO BE COMPLETED BY CITY

| | | |
|-------------------|------------------------------------|-------------------------------|
| Date Filed _____ | Case Nos. _____ | Categorically Exempt per CEQA |
| Accepted By _____ | _____ | Section _____ |
| Receipt No. _____ | Environmental Assessment No. _____ | Signature _____ |
| | Zone _____ GP Designation _____ | Date _____ |