



County of San Diego, Planning & Development Services  
**DISCRETIONARY PERMIT APPLICATION**  
**ZONING DIVISION**

**RECORD ID(S):**

	Planning	LD Review Teams	DEH	Trails Review	Other
<b>FEES</b>	_____ +	_____ +	_____ +	_____ +	_____
<b>DEPOSITS</b>	_____ +	_____ +	_____ +	_____ +	_____

**TOTAL FEES AND INITIAL DEPOSIT: \$** \_\_\_\_\_

The submitted Initial Deposit is estimated to cover **only** the initial project review (Scoping). Additional monies will be required. A project-specific cost estimate will be provided at the conclusion of Scoping, along with a letter detailing any project issues, revisions, and studies as deemed necessary for compliance with State and County codes and ordinances.

Have you had a pre-application conference? **YES**  **NO**  If yes, Planner's Name \_\_\_\_\_

Is this project the subject of a code violation? **YES**  **NO**  If yes, provide a copy of the Warning/Citation/Violation Notice.

Are there any related, open applications such as DEH permits, Grading permits, etc? **YES**  **NO**

If yes, list permits: \_\_\_\_\_

Is there an existing Trust Account on any of the open records related to this proposed project? **YES**  **NO**

Are there any prior related cases such as a specific plan? If yes, list Case Number(s) \_\_\_\_\_

**The Financially Responsible Party is responsible for all costs related to this application (See form PDS-126).**

Assessor's Parcel No. (APN) \_\_\_\_\_

**Owner's Name** \_\_\_\_\_ Owner's Phone \_\_\_\_\_

Owner's Address \_\_\_\_\_  
Number Street City State Zip

Owner's email \_\_\_\_\_ Owner's Fax \_\_\_\_\_

**Applicant's Name** \_\_\_\_\_ Applicant's Phone \_\_\_\_\_  
(If different from owner)

Applicant's Address \_\_\_\_\_  
Number Street City State Zip

Applicant's email \_\_\_\_\_ Applicant's Fax \_\_\_\_\_

**Engineer's Name** \_\_\_\_\_ Engineer's Phone \_\_\_\_\_

Engineer's Address \_\_\_\_\_  
Number Street City State Zip

Engineer's email \_\_\_\_\_ Engineer's Fax \_\_\_\_\_

**Project Contact Person** \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_  
Number Street City State Zip

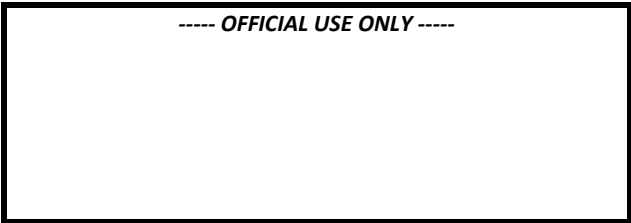
Project Contact's email \_\_\_\_\_ Project Contact's Fax \_\_\_\_\_

Project Name \_\_\_\_\_

Project Address & Nearest Cross Street \_\_\_\_\_

I declare under penalty of perjury under the laws of the State of California that the statements made as part of this application are true and correct. I hereby agree to provide the indemnification as required by Chapter 2 of Division 6 of Title 8 of the San Diego County Code.

**\*REQUIRED: an Authorized Agent signing below must attach a signed Letter of Authorization.**



----- OFFICIAL USE ONLY -----

\_\_\_\_\_  
 Signature of Owner or **\*Authorized Agent**

\_\_\_\_\_  
 Print Signator's Name Date



**FOR DEPARTMENT USE ONLY**

Existing      Proposed

General Plan Designation      \_\_\_\_\_

Regional Category      \_\_\_\_\_

<p><b>For Administrative Permits and Use Permits</b></p> <p>Describe use:</p> <p>_____</p> <p>_____</p>
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ZONE		
USE REGULATIONS		
ANIMAL REGULATIONS		
<b>DEVELOPMENT REGULATIONS</b>	Density	
	Lot Size	
	Building Type	
	Maximum Floor Area	
	Floor Area Ratio	
	Height	
	Lot Coverage	
	Setback	
Open Space		
SPECIAL AREA REGULATIONS		

Thomas Guide (Page/Grid) \_\_\_\_\_

Tax Rate Area \_\_\_\_\_

Total Acres \_\_\_\_\_ No. of lots \_\_\_\_\_

Planning Group \_\_\_\_\_

Community Plan \_\_\_\_\_

Supervisor District \_\_\_\_\_

Within: Rural Village Boundaries?  YES  NO      Village Boundaries?  YES  NO      Special Study Area?  YES  NO

Project is within a Specific Plan?  YES  NO      If yes, name of Specific Plan \_\_\_\_\_

Related Records/Permits?  YES  NO      If yes, list \_\_\_\_\_

Project is subject to the County Groundwater Ordinance?  YES  NO      FP-2  YES  NO

	<b>YES</b>	<b>NO</b>	
Project is within 1/2 mile of a Regional Park?	<input type="checkbox"/>	<input type="checkbox"/>	
Project is within 1 mile of a Highway?	<input type="checkbox"/>	<input type="checkbox"/>	
Project is within 1 mile of a City?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, name of City _____
Project is proposed for Septic?	<input type="checkbox"/>	<input type="checkbox"/>	
Project is proposed for Sewer?	<input type="checkbox"/>	<input type="checkbox"/>	
Project is a Violation Case?	<input type="checkbox"/>	<input type="checkbox"/>	
Military Notice is required?	<input type="checkbox"/>	<input type="checkbox"/>	
Project is within 150' of the International Border?	<input type="checkbox"/>	<input type="checkbox"/>	

**If yes, notify the Department of Homeland Security. See Board of Supervisor's Policy I-111.**

If the subject parcel was created through a PM or B/C, have you verified that all Covenants of Improvement have been satisfied? YES  NO  **IF NO, DO NOT ACCEPT THE APPLICATION.**

Is there a different owner of mineral rights than the owner of real property? YES  NO

If yes, identify name and address: \_\_\_\_\_

**FOR PLANNER ASSIGNMENT - PLEASE CALL (858) 694-3292**

Technician Initials: \_\_\_\_\_ Date: \_\_\_\_\_ Technician's comments: \_\_\_\_\_