



Community Development Department
14000 City Center Dr., Chino Hills, CA 91709
(909) 364-2740 Fax (909) 364-2795
www.chinohills.org

Related
Case No(s): _____
Submittal Date: _____

LAND USE QUESTIONNAIRE

This document is required in conjunction with following applications:
Conditional Use Permit (including Wireless), General Plan and Municipal Code Amendments,
Major Variance, Planned Development, Pre-Application Review, Site Plan Review,
Tentative Parcel Map/Minor Subdivision and Gate Guarded Neighborhood Plan.

Applicant: All sections must be completed in their entirety or the application will not be accepted. If the answer is unknown or the question is not applicable, please indicate, as appropriate. If additional space is needed, please use attachments.

APPLICANT INFORMATION:

Applicant: _____

Address: _____

Phone: _____ Email: _____

Contact Person: _____

Phone: _____ Email: _____

PROJECT LOCATION:

Project Address: _____

Side of Street: _____ Nearest Cross Street: _____

Assessor Parcel Number: _____ Tract: _____ Lot: _____ Parcel Size: _____

Current Zoning District: _____ Current General Plan Land Use: _____

Current Zoning District: _____ Current General Plan Land Use: _____

PROJECT DESCRIPTION: (provide in-depth details)

PROPOSED PROJECT INFORMATION: (If Applicable)

Proposed Zoning District: _____ Proposed General Plan Land Use: _____

Proposed Zoning District: _____ Proposed General Plan Land Use: _____

APPLICATION CONTINUED ON NEXT PAGE

SITE INFORMATION: (Please provide in-depth details)

1. Describe the existing development within 300 feet of the site.

2. Is the site within a Planned Development (PD)? No Yes If "Yes": Which PD? _____

3. Are there any deed restrictions, covenants, conditions and restrictions (CC&Rs), or other restrictions that affect the property? No Yes (if "Yes", explain below)

4. Identify if the site is presently served by the following utilities:

- | | | | | |
|-------------|--------------------------|----|--------------------------|-----|
| Electricity | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes |
| Gas | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes |
| Water | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes |
| Sewer | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes |
| Telephone | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes |

If "No," have any contacts been made with the agencies providing these services? No Yes

If "Yes," please provide information and/or attach correspondence:

5. Are there any potential hazardous materials on or near the project site? No Yes

Please provide appropriate Phase 1 and/or 2 Environmental Site Assessment Report.

PROJECT CONSTRUCTION INFORMATION:

1. Will your project require any permits from local, state or federal agencies? No Yes

If "Yes", which agency and permit description:

APPLICATION CONTINUED ON NEXT PAGE

2. Will any earth material be exported from or imported to the site? No Yes

If "Yes", please indicate the approximate quantity in cubic yards, whether imported or exported and the location of the borrow pit or dump site?

3. Approximately how many square feet of impermeable surface (building and paving) will be created by the development of the proposed project? *Please express in square feet and as a percentage of the whole site.*

4. What is the projected "opening year" or first phase for the project? _____

5. Is the project proposed in phases? No Yes

If "Yes" a phasing plan may be required. Please describe the phasing.

PROJECT OPERATIONAL INFORMATION:

Provide the following information for all industrial, commercial, professional office or institutional projects (churches, social care facilities, private schools, etc.).

1. Provide an estimate of how many people will work at and visit the project each day or will stay overnight at the project site, per use. If school or social care facility, state age and numbers of students/patients and staff.

2. Indicate the days and hours of operation anticipated for each use proposed for the project site.

APPLICATION CONTINUED ON NEXT PAGE

DOCUMENT CERTIFICATION:

I certify that under penalty of perjury that I am the (check one below) and that the foregoing information is true and accurate to the best of my knowledge:

- Legal Owner (all names that appear on the Deed must sign their names)
- Owner's Legal Agent

I further certify that the statements furnished in this application, and in the attachments thereto, present the data and information required to adequately evaluate the proposed project to the best of my ability, and that the facts, statements, and information presented are true and correct to the best of my knowledge.

I further understand that additional information may be required to be submitted to the City of Chino Hills before an adequate evaluation of the proposed project can be made.

Print Name: _____ Signature: _____

Print Name: _____ Signature: _____

Print Name: _____ Signature: _____

Date: _____

PROPERTY OWNERS AUTHORIZATION

All property-owners of record must sign this application certificate.

I (we), the undersigned owner(s) or officer(s) in the organization, owning the land(s) for which this application is made, state that I (we) is (are) aware that the application is being filed with the City of Chino Hills Community Development Department and I (we) certify under penalty of perjury that the information contained in the application is true and correct.

I (we) further agree that if any information proves to be false or incorrect, the City and any special purpose or taxing district affected thereby are and shall be released from any liability incurred if the application is approved.

Any persons signing with Power of Attorney for the property-owner(s) must print the names of those individual(s) in the signature block and attach a Notarized copy of the Power of Attorney.

PROJECT SITE APN(s): _____

Owner/Agent Signature(s)

Print Name: _____ Signature: _____

Print Name: _____ Signature: _____

If signed by Legal Agent, provide name(s) of property owner(s):

Print Name: _____

Print Name: _____

ADDITIONAL REQUIRED FORM ON NEXT PAGE



CERTIFIED SURROUNDING PROPERTY OWNERS LIST DECLARATION

The list is required to provide surrounding property owners notification of the public hearing for the proposed project and is valid for six (6) months. If the original list is more than six (6) months old, a new list must be provided for the public hearing notification.

This list includes all properties: 300 foot radius from project site 500 foot radius from project site*
 Adjacent to project site

EXAMPLE:

| |
|---|
| Assessor's Parcel Name Address City, State, Zip Code |
|---|

* Automobile Maintenance, Automobile Service Stations and Car Wash Uses require 500 feet of notification.

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I (we) further agree that if any such information proves false or incorrect, the City of Chino Hills and any special purpose or taxing district affected thereby are, and shall be, released from any liability incurred if the application is approved.

Any persons signing with Powers of Attorney for the property-owner(s) must print the names of those individuals in the signature block and attach a notarized copy of the Power of Attorney.

I certify under penalty of perjury that I am the (check one below) and that, to the best of my knowledge, the enclosed list contains the name and addresses of all persons to whom all property is assessed as they appear on the latest equalized assessment roll maintained by the County Assessor or Tax Collector.

- Legal Owner (all names that appear on the Deed must sign their names)
- Owner's Legal Agent

PROJECT SITE APN(s): _____

Owner/Agent Signature(s)

Print Name: _____ Signature: _____

Print Name: _____ Signature: _____

Print Name: _____ Signature: _____

If signed by Legal Agent, provide name(s) of property owner(s):

Print Name: _____

Print Name: _____

Print Name: _____