



**Community Development Department**  
**14000 City Center Dr., Chino Hills, CA 91709**  
**P: (909) 364-2740**  
**E: communitydevelopment@chinohills.org**

EASMT No.: \_\_\_\_\_  
 Submittal Date: \_\_\_\_\_  
 Accepted By: \_\_\_\_\_

## **GRANT OF EASEMENT/QUITCLAIM**

This application is required to grant an entity the right to use a piece of property belonging to a separate individual or entity for a specific purpose or to remove such right.

### **APPLICANT INFORMATION**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Company/Business Name (if applicable): \_\_\_\_\_  
 Address: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

### **ENGINEER OF RECORD**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Company/Business Name (if applicable): \_\_\_\_\_  
 Address: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ License Number: \_\_\_\_\_

### **PARCEL INFORMATION**

Nearest Cross Streets:

| APN: | Tract: | Lot: | General Plan Land Use: | Zoning: | Original Lot Size: | Proposed Lot Size: |
|------|--------|------|------------------------|---------|--------------------|--------------------|
|      |        |      |                        |         |                    |                    |
|      |        |      |                        |         |                    |                    |
|      |        |      |                        |         |                    |                    |

### **REASON FOR GRANT OF EASEMENT OR QUITCLAIM**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### **APPLICANT CERTIFICATION**

**I/we certify under penalty of perjury that I/we am/are the Applicant for the project and that, to the best of my/our knowledge, the information contained in this application is true and correct.**

I/we further agree that if any such information proves false or incorrect, the City of Chino Hills shall be released from any liability incurred if the application is approved.

### **APPLICANT SIGNATURE(S)**

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

## **SUBMITTAL CHECKLIST:**

ALL ITEMS MUST BE INCLUDED AT THE TIME OF SUBMITTAL

- One (1) signed and dated** copy of the “Trust Deposit Account Procedures/ Agreement” Form.
- Application Fee** – Refer to current fee schedule.
- One (1) signed and dated** copy of the “Parcel Information and Owner Certification Form (Page 3).
- Three (3) copies and one (1) pdf copy** of Grant Deed.
- Three (3) copies and one (1) pdf copy (with active hyperlinks)** of Preliminary Title Report (dated within last 6 months).
- Three (3) copies and one (1) pdf copy** of Exhibit “A” – Legal Description (Wet stamped/signed by Licensed Professional Engineer or Land Surveyor).
- Three (3) copies and one (1) pdf copy** of Exhibit “B” – Property Plat Map (Wet stamped/signed by Licensed Professional Engineer or Land Surveyor Engineer).
- Three (3) copies and one (1) pdf copy** of Conforming Deeds for the affected parcels. The Conforming Deeds are parcel specific and shall include the following:
  - a. Grant Deed
  - b. Property Description (Exhibit “A”)
  - c. Plat Map (Exhibit “B”)
- Three (3) copies and one (1) pdf copy** of any/all reference maps, deeds or easements relative to the subject parcel.

### **Plan Check Review Process:**

1. Applicant submits application, along with supporting documents, to the Community Development Department for processing.
2. The Community Development Department routes the submitted documents to a 3rd party engineering consultant (at the applicants cost) for review. A supplemental deposit may be required depending on the scope of the application.
3. Upon approval of the application and exhibits by the City, the Applicant is responsible to have the document recorded at the San Bernardino County Recorder’s office.
4. After recordation, the applicant shall provide the Community Development Department with a copy of the recorded document.

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**PARCEL INFORMATION AND OWNER CERTIFICATION\***

**PARCEL INFORMATION**

**PROPERTY OWNER – (PARCEL “A”)**

Property Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**PROPERTY LOCATION – PARCEL “A”**

Address: \_\_\_\_\_

Assessor Parcel No.: \_\_\_\_\_

Tract: \_\_\_\_\_ Lot: \_\_\_\_\_

**PROPERTY OWNER – (PARCEL “B”)**

Property Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**PROPERTY LOCATION – PARCEL “B”**

Address: \_\_\_\_\_

Assessor Parcel No.: \_\_\_\_\_

Tract: \_\_\_\_\_ Lot: \_\_\_\_\_

**PROPERTY OWNER CERTIFICATION**

I/we, the undersigned owner(s) or authorized agent for the person/organization owning the land(s) for which this application is made, state that I/we am/are aware that the application is being filed with the City of Chino Hills Community Development Department, and that, to the best of my/our knowledge, the information contained in this application is true and correct. I/we further agree that if any such information proves false or incorrect, the City of Chino Hills shall be, released from any liability incurred if the application is approved.

I (We) further agree that if any such information proves to be false or incorrect, the City of Chino Hills, special party or taxing district affected thereby are and shall be released from any liability incurred if a certificate of compliance is or has been issued on the basis of this application. I (We) understand that under such circumstances any such certificate shall be null and void and shall be returned to the City for cancellation.

When signing on behalf of the owner(s) as an “Authorized Agent”, attach a notarized copy of the Power of Attorney or a notarized letter of authorization. If a corporation, partnership, or other group owns property, signer should indicate corporation position or title and submit corroborating documentation.

**PROPERTY OWNER/AUTHORIZED AGENT SIGNATURE(S) – PARCEL “A”**

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

**PROPERTY OWNER/AUTHORIZED AGENT SIGNATURE(S) – PARCEL “B”**

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

**\*ATTACH ADDITIONAL SHEETS IF MORE THAN TWO (2) PARCELS.**