



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

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

## CERTIFICATE OF COMPLIANCE

Pursuant to §66499.35 of the Subdivision Map Act, this application is required when there is evidence that the lot was created in non-conformance with the requirements of the Subdivision Map Act.

### APPLICANT INFORMATION

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

### PROPERTY OWNER/MANAGEMENT INFORMATION (If different than applicant)

Property  
Owner/Management: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### ENGINEER OF RECORD

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

### PROPERTY LOCATION

Address: \_\_\_\_\_  
Assessor Parcel No.: \_\_\_\_\_  
Tract: \_\_\_\_\_ Lot: \_\_\_\_\_

### REASON WHY A CERTIFICATE OF COMPLIANCE IS NEEDED

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

**CONTINUED ON NEXT PAGE**

**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.
- Fee**
- Three (3) copies and one (1) pdf copy** of the Certificate of Compliance
- 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)

**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: \_\_\_\_\_

**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.

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.

**PROPERTY OWNER/AUTHORIZED AGENT SIGNATURE(S)**

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