

# CITY OF GUSTINE

PO BOX 16 - 352 5<sup>TH</sup> STREET  
 GUSTINE CA 95322  
 OFFICE (209) 854-6471 – Fax (209) 854-2127  
 www.cityofgustine.com



## UNIFORM APPLICATION FORM

Type of Application		
<input type="checkbox"/> Development Agreement	<input type="checkbox"/> Tentative Map Extension	<input type="checkbox"/> Subdivision Map
<input type="checkbox"/> Annexation (Special Submittal Package)	<input type="checkbox"/> General Plan Amendment (Special Submittal Package)	<input type="checkbox"/> Lot Line Adjustment (Special Submittal Package)
<input type="checkbox"/> Minor Plan Modification	<input type="checkbox"/> Variance/Minor Zone Modification	<input type="checkbox"/> Sign Permit
<input type="checkbox"/> Specific Plan/Amendment	<input type="checkbox"/> Use Permit	<input type="checkbox"/> Municipal Code Amendment
<input type="checkbox"/> Rezone/Prezone	<input type="checkbox"/> Appeal	<input type="checkbox"/> Major Sign Permit
<input type="checkbox"/> PUD	<input type="checkbox"/> Site Plan Review	<input type="checkbox"/> Other:

### Project Detail

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

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

APN: \_\_\_\_\_

Is the property within the Redevelopment Agency's (RDA) Project Area?     Yes     No  
 (Property within the RDA Project area must sign the acknowledgement on page 2).

Project Description (submit separate attachment if necessary) (e.g. Expansion of existing use, establishment of a new use or new construction, etc.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### Property Owner:

Name: \_\_\_\_\_

Contact: \_\_\_\_\_

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

City, Zip: \_\_\_\_\_

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

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

#### Applicant:

Name: \_\_\_\_\_

Contact: \_\_\_\_\_

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

City, Zip: \_\_\_\_\_

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

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Office Use Only – Fees**

Fees	Account Number	Application Type
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Receipt Number: \_\_\_\_\_ Date: \_\_\_\_\_ Accepted By: \_\_\_\_\_

File Number(s): \_\_\_\_\_

**Other Contact Information**

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
City, Zip: \_\_\_\_\_ City, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_ Email: \_\_\_\_\_

**Miscellaneous**

General Plan Designation: \_\_\_\_\_  
Proposed General Plan Designation: \_\_\_\_\_  
Zoning: \_\_\_\_\_ Proposed Zoning: \_\_\_\_\_  
General Property Dimensions: \_\_\_\_\_  
Acres/Square Feet: \_\_\_\_\_  
Land Use:             Undeveloped/Vacant     Developed

## Hazardous Waste Affidavit

Government Code Section 65962.5 requires each applicant for any development project to consult the State Hazardous Waste and Substance Sites List. Based on this list (available from the Planning Division of the Community Development Department) the applicant is required to submit a signed statement to the City of Gustine indicating whether the project is located on a site which is included on the list before the City accepts the application as complete. If the project site is listed by the State as a hazardous waste or substance site, the applicant must fully describe the nature of the attached hazard and potential impacts in the Initial Study, Part I. In either situation, the applicant must complete and sign the Affidavit in the space below.

I have been informed by the City of Gustine of my responsibilities pursuant to Section 65962.5 to notify the City as to whether the site for which a development application has been submitted is located within an area which has been listed as the location of a Hazardous Waste or substance Site by the Office of Planning and Research, State of California.

- The project site is located in an area listed as a Hazardous Waste or Substance Site.
- The project site is **not** in an area listed as a Hazardous Waste or Substance Site.

I declare under penalty of perjury of the laws of the State of California that the foregoing is true and correct.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_



