REQUIREMENTS FOR DIRECTOR’S USE PERMIT APPLICATIONS

The following items are REQUIRED for a complete application:

☐ COMPLETED AND SIGNED APPLICATION FORM

☐ APPLICATION AND ENVIRONMENTAL REVIEW FEES are required at the time the application is submitted to the Planning Department.

NOTE: Additional fees may be required after initial application review

☐ SITE PLAN drawn to scale and/or noted setbacks, and north arrow showing proposed and existing development, particularly the location of buildings, driveways, wells, etc. and their distance from property lines. Indicate other information pertinent to the project (see example site plan). For commercial or multiple family residential development, provide a parking area layout (existing & proposed stalls), site landscape plan and site drainage plan.

☐ SIGNED AND DATED PLANNING DEPARTMENT AUTHORIZATION FORM

☐ SIGNED AND DATED ACKNOWLEDGEMENT OF MAINTAINING EXISTING SITE CONDITIONS FORM

☐ COMPLETED AGENT AUTHORIZATION FORM required only if applicant is other that the property owner

☐ LAND USE ENTITLEMENT FORM

NOTE: Not included in packet, will be discussed and provided at later date.

☐ ADDITIONAL INFORMATION FOR SIGN PERMITS

If the proposed sign is within 600 ft. of any State Highway either:

a. A State sign permit for the proposed sign(s) must be included in this application; or

b. A letter from the California state Dept. of Transportation indicating that a State sign permit is not necessary for the proposed sign.

☐ ADDITIONAL INFORMATION FOR MOBILE HOMES

Mobile homes manufactured prior to October 1973 do not have roof load ratings and require a Ramada constructed over them. A separate building permit is required for Ramada’s.

Additional materials may be required upon review of the application.
PLANNING DIRECTOR ISSUED USE PERMIT APPLICATION

☐ Pre-1974 Mobile Home 17.27.404(B) ☐ RV (90-day-yr seasonal) 17.30.080(D) ☐ RV (temp const. support) 17.30.080(E)
☐ Detached Accessory Bldg. 17.300.040 ☐ Sign 15.08/Wvle Community Plan ☐ Floodplain Dev. Permit 17.298.220/230

APPLICANT

Name: ___________________________ Email: ___________________________ Day Phone: ___________________________
Mailing Address: ___________________________
City: ___________________________ State: ___________________________ Zip: ___________________________

PROPERTY OWNER  ☐ Check if same as Applicant

Name: ___________________________ Email: ___________________________ Day Phone: ___________________________
Mailing Address: ___________________________
City: ___________________________ State: ___________________________ Zip: ___________________________

If more than one parcel owner, attach an additional page.

PROPERTY/PROJECT DESCRIPTION

Property location/Address: ___________________________
Assessor’s parcel Number(s): ___________________________ Acres: ___________________________
Property’s Approx. Elevation: ___________________________
Existing Land Use: ___________________________ Present Zoning: ___________________________ General Plan Designation: ___________________________

PLEASE DESCRIBE IN DETAIL WHAT IT IS YOU WANT TO DO (an additional sheet of paper is provided)

________________________________________________

INFORMATION REQUIRED FOR MOBILE HOME/RV PERMITS

Year of Manufacture: _________ Roof Load: _________ Living Area (Sq. Ft.): _________ Dimensions: _________

FOR OFFICE USE ONLY

Application Received by: ___________________________
Date: ___________________________
Application Fee: ___________________________
Receipt No.: ___________________________

I hereby certify that I am the owner of record of the property described above, or have authorization to act in behalf of the owner (form attached), and that this application and all other documents submitted are true and correct to the best of my knowledge.

Applicant’s Signature ___________________________ Date ___________________________
PROJECT DESCRIPTION

Please provide a detailed project description of the activities you are requesting in as much detail as possible.
Include an accurate scale or notate all key setbacks and distances between key items
### TRINITY COUNTY PLANNING DEPT. & CANNABIS DIV.
**APPLICANT PREPARED SITE PLAN**

<table>
<thead>
<tr>
<th>Drawn by:</th>
<th>APN:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date:</td>
<td>Zoning:</td>
</tr>
<tr>
<td>Scale:</td>
<td>Lot Area:</td>
</tr>
</tbody>
</table>
AUTHORIZATION TO ENTER PRIVATE PROPERTY

The Trinity County Planning Department as the lead agency performs the environmental evaluation for the California Environmental Quality Act (CEQA). Other State and local agencies also provide responsible and trustee roles under CEQA. The comments received from these agencies assist the Planning Department in preparing the environmental document for your project. In order for the Department to perform the evaluation on your proposed project we will need your permission to allow entry to your property for **Planning and any reviewing agency** that may need to actually view the property before providing comments.

By signing this authorization to enter your property you are granting the reviewing agencies access to your property for the purpose of evaluating your proposed project. The authorization is valid from the date the Department receives notice of your proposed project and any monitoring periods thereafter.

________________________________________
Applicant Name
*(print or type)*

________________________________________
Applicant Signature

________________________________________
Date
ACKNOWLEDGEMENT OF MAINTAINING EXISTING SITE CONDITIONS

Application Type/No.: ___________________________ APN: __________________________

As the property owner of the above stated parcel, I hereby acknowledge that until final approval of the above application by the County of Trinity, no work such as; grading, site development, infrastructure placement, tree removal, construction, trenching, operations or activities requested in the application will be allowed.

I understand that if the project site is altered prior to project approval, the review of the project by the County will be more difficult and potentially expensive and that additional mitigation measures and/or conditions of approval may be imposed. Further, unauthorized work may cause enforcement by other agencies and/or the denial of the application.

I have also instructed my agent and/or the project applicant of the importance of maintaining existing site conditions.

Exception to the above may be approved by the Planning Department upon a written request.

________________________________________
Applicant Name

________________________________________
Applicant Signature

________________________________________
Date
AGENT AUTHORIZATION FORM

(Required only if applicant is other than the property owner)

I, the undersigned, state that I am the owner(s) of the property for the proposed project ____________________________ (type of proposal) on A.P.N.# _____________________. I do hereby authorize and empower __________________________________________ to act on my behalf on all matters relating to said project in connection with its filing, processing, approval, conditional approval or disapproval by Trinity County, its boards and commissions, officers, employees, and agents. Should I revoke this authorization it is my responsibility to serve written notice of said revocation to the Trinity County Planning Department.

_________________________________________  __________________________________________
Owner Signature  Owner Signature

_________________________________________  __________________________________________
Owner Name Printed  Owner Name Printed

_________________________________________  __________________________________________
Project Parcel Address  Project Parcel Address

_________________________________________  __________________________________________
Best Contact (Phone or Email)  Best Contact (Phone or Email)

_________________________________________  __________________________________________
Date  Date

Agent Information:

Name (Print): ________________________________

Mailing Address: ________________________________

Phone: ________________________________

Email: ________________________________

Preferred Method of Contact: □ Email □ Phone □ U.S. Mail
REQUIREMENTS FOR SIGN PERMITS

An 8 ½ "x 11" page, a drawing of the sign design shall be submitted which shows the following:

1. Width & Height of Sign- width ______ height ______
2. Total Height of Sign incl. post- height ______
3. Type (material) and Size of Post(s)- material ______ W x H x D ________or Diameter ______
4. Foundation- width ______ depth ______
5. Illuminated or not illuminated. If using direct lighting, describe where/how the fixture will be placed

6. Double or Single Sided (circle type)
7. Site Plan-specify location ____________________________________________