



CITY OF BELL

CONDITIONAL USE PERMIT APPLICATION

(Note: Obtain instructions as to the preparation of maps and other information required for this application from the Planning Department before filing this petition.)

PLANNING COMMISSION,
CITY OF BELL, CALIFORNIA

The applicant (s) _____
is/are _____

(State whether owner, lessee, purchaser, or agent for any of the foregoing. If applicant is the agent for any of the foregoing, written authorization must be attached, together with a copy of the contract to purchase where appropriate.)

of the property situated at _____
(street address)

between _____ and _____
(street) (street)

exact legal description of the said property _____

(take legal description from deed or policy of title insurance)

A. Above described property was acquired by applicant on _____
(month, day, year)

B. What original deed restrictions concerning type of improvements permitted, if any, were placed on the property involved? Give date said restrictions expire.

(You may attach copy of original printed restrictions in answer to this question after properly underscoring those features governing the type and class of uses permitted thereby.)

C. REQUEST: The applicant requests that a Conditional Use Permit be granted to use the above described property for the following purposes:

1. PROPOSED USE: _____

2. PRESENT ZONING: _____

3. NATURE OF BUSINESS: _____

(Use this space ONLY to state exactly what is intended to be done on or with the property which does not conform with existing zoning regulations. If a building is involved, a sketch or plan to scale with photographic or other suitable description should accompany this application.)

ENVIRONMENTAL INFORMATION FORM

(To be completed by applicant)

Date filed _____

Project Permit Number _____

Subject Site Zone _____

GENERAL INFORMATION

1. Name, address, and telephone number of developer or project sponsor:

2. Name, address, and telephone number of person to be contacted concerning this project if different from above:

3. Address of project: _____
Assessor's Block and Lot Number: _____

4. Proposed project description:

5. List and describe any other related permits and/or other public approvals required for this project, including those required by city, regional, state and federal agencies:

PROJECT DESCRIPTION

6. Site Size: _____

7. Square footage: _____

8. Number of floors of construction: _____

9. Amount of off-street parking provided: _____

10. Are Project Plans attached: _____

11. Proposed scheduling: _____

12. Associated projects: _____

13. Anticipated incremental development:

14. If residential, include the number of units, schedule of unit sizes, range of sale prices or rents, and type of household size expected:

15. If commercial, indicate the type, whether neighborhood, city, or regionally oriented, square footage of sales area, and loading facilities:

16. If industrial, indicate type, estimated employment per shift, and loading facilities:

17. If institutional, indicate the major function, estimated employment per shift, estimated occupancy, loading facilities, and community benefits to be derived from the project:

18. If the project involves a variance, conditional use or rezoning application, state this and indicate clearly why the application is required:

Are the following items applicable to the project or its effects? Discuss below all the items checked YES (attach additional sheets as necessary)

YES NO

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 19. Change in existing features of any bays, tidelands, beaches, lakes or hills, or substantial alteration of ground contours. |
| <input type="checkbox"/> | <input type="checkbox"/> | 20. Change in scenic views or vistas from existing residential areas or public lands or roads. |
| <input type="checkbox"/> | <input type="checkbox"/> | 21. Change in pattern, scale or character of general area of project. |
| <input type="checkbox"/> | <input type="checkbox"/> | 22. Significant amounts of solid waste or litter. |
| <input type="checkbox"/> | <input type="checkbox"/> | 23. Change in dust, ash, smoke, fumes or odors in vicinity. |
| <input type="checkbox"/> | <input type="checkbox"/> | 24. Change in ocean, bay, lake, stream or round water quality or quantity, or alteration of existing drainage patterns. |
| <input type="checkbox"/> | <input type="checkbox"/> | 25. Substantial change in existing noise or vibration levels in the vicinity. |
| <input type="checkbox"/> | <input type="checkbox"/> | 26. Site on filled land or on slope of 10 percent or more. |
| <input type="checkbox"/> | <input type="checkbox"/> | 27. Use of disposal of potentially hazardous materials such as, toxic substances, flammables, or explosives. |
| <input type="checkbox"/> | <input type="checkbox"/> | 28. Substantial change in demand for municipal services (police, fire, water, sewage, etc.) |

- _____ 29. Substantially increased fossil fuel consumption (electricity, oil, natural gas, etc.)
- _____ 30. Relationship to a larger project or series of projects.

ENVIRONMENTAL SETTING

31. Describe the project site as it exists before the project, including information on topography, soil stability, plants and animals, and any cultural, historical or scenic aspects. Describe any existing structures on the site, and the use of the structures. Attach photographs of the site. Snapshots or Polaroid photos will be required.

32. Describe the surrounding properties, including information on plants and animals, any cultural, historical or scenic aspects. Indicate the type of land use (residential, commercial, etc.), intensity of land use (one-family, apartment houses, shops, department stores, etc.), and scale of development (height, frontage, set-back, rear yard, etc.). Attach photographs of the vicinity. Snapshots or Polaroid photos will be required.

CERTIFICATION: I hereby certify that the statements furnished above and in the attached exhibits present the date and information required for this initial evaluation to the best of my ability and that the facts, statements, and information presented are true and correct to the best of my knowledge and belief.

Date: _____ Signature: _____

Title: _____

CITY OF BELL
PLANNING COMMISSION

NOTE: The Code requires that the conditions set forth in the following three Sections 1, 2, 3, below MUST be established before a Conditional Use Permit can be granted. (Explain in detail wherein your case conforms to the following requirements.)

I. THAT THE SITE FOR THIS PROPOSED USE IS ADEQUATE IN SIZE AND SHAPE AND TOPOGRAPHY: (EXPLAIN)

II. THAT THE SITE HAS SUFFICIENT ACCESS TO STREET AND HIGHWAYS, ADEQUATE IN WIDTH AND PAVEMENT TYPE TO CARRY THE QUANTITY AND QUALITY OF TRAFFIC GENERATED BY THE PROPOSED USE: (EXPLAIN)

III. THAT THE PROPOSED USE WILL NOT HAVE AN ADVERSE EFFECT UPON ADJACENT PROPERTIES: (EXPLAIN)

DISCRETIONARY ACTION PROCESS

ITEMS REQUIRED AT TIME OF FILING

- _____ Provide a completed application signed and notarized by the property owner or his designee.

- _____ Completed Environmental Information form signed and notarized by the owner of the property or his authorized designee.

- _____ 12 sets of plans which include, but are not limited to site plan, elevations, parking, and landscaping, colored renderings, etc. The plans shall be full sized, neat and legible. One full set of plans shall be reduced to 8 1/2" x 11" acetate format.

- _____ Provide a radius map that shows the names and addresses of the property owners within 300 feet of the subject property. Those names and addresses must be typed onto two sets of self-adhesive address (Avery) labels. The names and addresses may be obtained from the Los Angeles County Tax Assessor Office located in downtown Los Angeles. See attached sample Radius Map and Affidavit. (500 feet for Alcohol Applications).

- _____ The required documents shall be filed thirty at least (30) days before the Planning Commission meeting.

- _____ Filing fee
 - * Application \$450.00 Made payable to the City of Bell
 - * Environmental \$150.00

 - * Co. of Los Angeles \$50.00 Made payable to L.A. County Clerk

- _____ Title Report (if necessary)

Date received: _____

**CERTIFIED PROPERTY OWNERS
AFFIDAVIT**

STATE OF CALIFORNIA
CITY OF BELL
COUNTY OF LOS ANGELES

I, _____, hereby certify that the attached list contains the names and addresses of all persons to whom all property is assessed as they appear on the latest available assessment roll of the County within the area described on the attached application and for a distance of (500) feet from the exterior boundaries of the property described on the attached application.

I, certify under penalty of perjury that the foregoing is true and correct.

Signed

Date

SAMPLE